SCOTTISH HOSPITALS INQUIRY

Bundle of documents for Oral hearings commencing from 13 May 2025 in relation to the Queen Elizabeth University Hospital and the Royal Hospital for Children, Glasgow

Bundle 43 – Volume 4
Procurement, Contract, Design and Construction Miscellaneous

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NHS Greater Glasgow and Clyde

NHS GREATER GLASGOW AND CLYDE

1. JOB IDENTIFICATION	
Job Title:	**Senior Nurse Adviser - Acute Services Hospital's (1WTE) 2 years secondment**
Responsible to: **Department(s):** **Directorate:** **Job Holders:**	**Project Director**
Job Reference number (coded):	

2. JOB PURPOSE

The Nurse Adviser provides expert professional advice in relation to all service redesign, planning and implementation aspects associated with the New South Glasgow Hospital and New Children's Hospital Project.

As a key member of the Project Team, they will:

- build key internal and external stakeholder networks to achieve key project objectives
- be responsible for ensuring there is user involvement in the Project
- challenge and lead the drive for modernisation of clinical services by encouraging innovation, identifying new ideas and practices and use of new technology
- Work with the Acute Nurse Director in providing expert Nursing advice and significantly contributing to the identification of a nursing workforce for the new hospitals
- identify changes in roles and skill mix and identify training requirements in taking forward the new ways of working

3. DIMENSIONS

NHS Greater Glasgow and Clyde Health Board has 44,000 staff serving a total population of 1.2 million people with a total budget of £2.6 billion.

Glasgow currently provides a range of acute inpatient care and specialist services, including regional and national services. The new South Glasgow Hospital will continue to have a national role in teaching, education and research. There are partnership arrangements with 4 Universities.

There is a major capital building programme of £1b over the next 8 years to modernise Glasgow's Acute Hospitals. This programme comprises four phases of developments. These are:

- Phase 1 - includes the new West of Scotland Cancer Centre at Gartnavel, and Ambulatory Care Hospitals at Stobhill and the Victoria Infirmary sites
- Phase 2 - the New South Glasgow Acute Hospital on the SGH site alongside the New Children's Hospital and New Labs build, on the Southern Campus
- Phase 3 - the redevelopment of Glasgow Royal Infirmary
- Phase 4 - the Redevelopment of the Gartnavel General Hospital

New South Glasgow Hospital (Adult)

The New South Glasgow Hospital will be one of the largest new hospital projects within the UK and will include 1,100 new inpatient beds, 20 theatres, clinical support facilities for medical and surgical specialties and a new Emergency Medical Complex with an Emergency Department capable of attending 110,000 patients per annum. The New South Glasgow Hospital will house inpatient services which are currently located at the Victoria Infirmary. This will allow the Victoria Infirmary to close, as the outpatient and day case activity will have already transferred to the New Victoria Hospital, opening in 2009. There will be a transfer of some smaller specialty services (Renal, ENT and Vascular Surgery) from the Glasgow Royal to the Southern site to allow centralisation. There will also be a number of services associated with the reduction in A&E departments transferring from the Western Infirmary to the Southern campus.

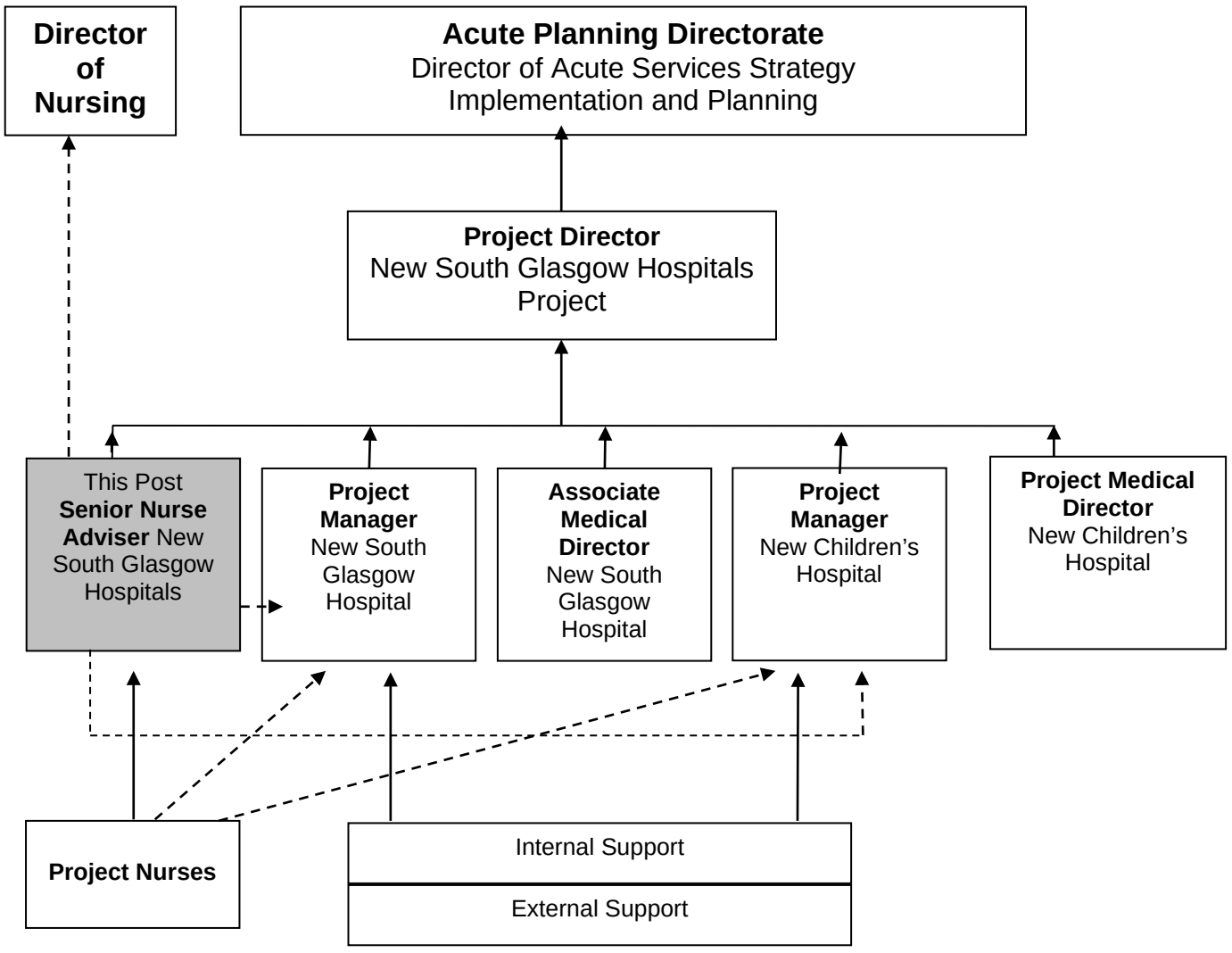
New Children's Hospital

In addition to the New South Glasgow hospital there will be a new 240 bedded Children's Hospital development located on the Southern General site. The proximity to the New South Glasgow Hospital will provide the triple co-location of paediatric, maternity and adult services. The Children's Hospital will provide a large number of specialist services to the West of Scotland and the wider population of Scotland in addition to the full range of secondary care services to people of Greater Glasgow and Clyde. Specialist services include: cardiology and cardiac surgery, renal and bone marrow transplantation. For a number of these specialised services, the Children's Hospital is recognised as the sole provider in Scotland.

New Laboratory Facility

There are plans for a new laboratory build on the Southern Campus which will physically link into the new adult and children's hospitals. The new facility will house haematology, biochemistry and mortuary services.

4. ORGANISATIONAL POSITION



5. ROLE OF DEPARTMENT

To lead the development and implementation of the Board's Acute Services Strategies and Capital Plan, ensuring all business cases and capital developments are delivered on time, and ensure the associated project management arrangements deliver to the agreed timetable. To underpin this work ensure a focus on health inequalities and patient and public engagement in planning.

The Project Director reports directly to the Director of Acute Services Strategy, Implementation & Planning. The Project Director has responsibility to deliver the major capital building programme of modernising Glasgow's Acute and Paediatric Hospitals the main components of which are:

- The New South Glasgow Hospital
- The New Children's Hospital
- The New Laboratories Development at South Glasgow Campus
- The Redevelopment of GRI

6. MAIN DUTIES/RESPONSIBILITIES

The post holder will:

- Provide expert clinical nursing input into the design and development of the New South Glasgow Hospital and New Children's Hospital drawing on their previous experience of redesigning clinical services and systems, and their specialist knowledge of new effective clinical service models, best practice and standards.

- Establish and oversee structures and processes that:-
  - ensure wide nursing engagement and support
  - ensure relevant technical nursing expertise and staff input into key planning decisions
  - Drive and support all necessary service redesign activities
  - maintain effective links with all clinical disciplines (Nursing, Medical, AHP)
  - ensure clinical advisory processes are aligned with the planning timelines

- Working with the Director of Nursing, responsible for planning the nursing provision for the new hospitals' Nursing Service, taking into account changes that may impact on this and amending the plan accordingly

- Work with Directorates, Planning Managers and Project Managers to drive forward the modernisation of clinical services for the New Adult and Children's Hospitals. This will involve working with numerous (over 60) clinical multi-disciplinary and other stakeholders encouraging new innovative clinical models of care across a wide range of specialties challenging the status quo and providing problem solving skills in driving forward change. It will also involve the post holder in organising and facilitating workshops, group sessions and seminars with users to develop the plans for the new Hospitals.
- In influencing and negotiating with clinical users in developing new innovative service models the post holder must be able to promote and advise on up-to-date best practice regarding clinical service delivery. It will therefore be important that the post holder continuously updates their knowledge into new, effective clinical practices around the UK and internationally.

- The post holder will devise and direct research projects to ensure the adoption of the most modern techniques and best practice in the future Acute Services, based on sound empirical evidence of successful clinical outcomes. Research activities are a significant feature of the role as a number of research projects will be running concurrently throughout the project lifespan.

- With other members of the Project Team and in liaison with Clinical User Groups, Directors and Planning Managers input into the production of Clinical Output Specifications for each part of the clinical service for the New Hospitals. This will entail negotiating and agreeing with users issues in respect of how services will be provided, space utilisation, the impact of new treatment techniques and technologies, issue of access, circulation and adjacencies to other areas, services and departments.

- To develop policies and procedures required as part of the project or related service developments and implement these for the Nursing service

- Use negotiation, influencing and challenging skills to ensure that the agreed clinical requirements of the Units and Departments are reflected in the tender documentation and ultimate design of the New Hospitals while ensuring that the project remains within set affordability parameters. This will involve a significantly input into the design of the New Hospitals in terms of patient facilities and pathways and particularly where there is potential for an impact on nursing e.g. ward design and layout and use of technology. It will also involve reviewing the detailed designs of contractors identifying where there may be discrepancies between the layout and the clinical functionality/specification/requirements.

- The post holder will be responsible for the line management of nursing staff seconded to the project, including recruitment selection, discipline and grievance matters, attendance management, allocation of work and determining the workloads of the relevant project work streams.

- Responsible and accountable for authorising expenditure within an allocated budget.

- Act as a liaison point between the Project team /Technical Advisers (TA) and the users over queries and assist in helping the project team in understanding the needs of the users.

- Work with Project Manager to help the users to work with the bidders and interpret their (bidders) requirements.

- Provide clinical advice and support to other members of the project team and TA regarding how design, equipment and other issues may impact upon clinical practice and manpower.

- Work with staff to understand the implications of the new service models and give support and input for users to express these as operational policies.

- Work with users to drive through change, implement as much of the new service models as possible in the current physical environment in preparation for the transfer into the new hospitals.

- Work with the Director of Nursing in significantly contributing to the identification of a nursing workforce for the New Adult and Children's Hospitals that is agreed by the Acute Directors, reflects the models of care and is clinically acceptable whilst ensuring that the affordability parameters are managed within the defined corporate budget. The workforce planning for the New South Glasgow Hospital will include new services/departments such as Emergency Medical Complex and the Medical High Dependency Unit.

- Identify issues of changing clinical roles and skill-mix and training and development needs of the nursing staff to facilitate the implementation of the agreed models of care and liaise with training department / college / University to put into place training required

- Provide expert clinical nursing advice and input to the project planning team and all relevant planning processes/committees including the Health Board and Scottish Government and the various groups which form the Governance Structure for stage 2 of the project.

- Provide nursing support for community, public and voluntary sector engagement activities where

necessary. This will include delivering presentations and participating in meetings which may be politically sensitive and contentious in nature.

- The post holder will be responsible for keeping a comprehensive audit trail of their work and participating in external and internal audits e.g. Gateway Review.

- The post will involve working closely with a range of people in delivering the New Hospitals, these include other members of the Project Team and the Associate Medical Director for the Project (Adult Hospital, new post), Project Medical Director (Children's Hospital), the Planning Team, Directorates and Users.

- The post holder, while accountable to the Project Director, will report to the respective Project Managers regarding all aspects of the New South Glasgow Hospital and New Children's Hospital respectively.

- The post holder will attend the regular Heads of Nursing meetings chaired by the Director of Nursing in order to formally update Heads of Nursing/Head of Midwifery

7. DECISIONS AND JUDGEMENTS

The post holder will:

- Have a high level of autonomy in a self directed way, but within agreed objectives set by the Project Director.

- Be responsible for driving forward the development of new systems and ways of working for all of the clinical services which will transfer to the New Hospitals, as stated this will involve leading, encouraging and motivating numerous separate user groups. In more detail the post holder will have the ability to stimulate change by energising and supporting users in developing new relationships and ways of working, sensitively handle resistance to change and new ideas, be able to challenge in an informed non-threatening way the traditional boundaries and ways of doing things. Find creative solutions to complex problems and initiate new ideas. It should be noted that one of the key skills of the post holder will be the ability to draw upon specialist technical clinical knowledge in assessing user needs and requirements and offering challenge.

- In driving forward the redesign the post holder will be required to utilise a range of analytical skills and draw on previous clinical management experience in analysing performance, and undertaking evidence based benchmarking. In some situations, there will be incomplete information sets as the project plan develops. In these circumstances, the Nurse Adviser must make decisions based on their assessment of the situation, taking all available factors into account, particularly on those occasions when information is not readily available or where conflicting views exist.

- The post holder must have a good knowledge of the project budget and timescale and be able to analyse the impact on cost and time of any change requested by the users. It should be noted that the impact of a change will vary depending upon the stage of the project.

- The post holder must be able to interpret the impact of national policies and standards e.g. must ensure current standards are incorporated into the developing service models and must also be able to advise upon the impact of any new national policies in terms of cost and delay to the project.

- Responsible for providing regular reports for a range of audiences is a significant feature of this role. The Nurse Adviser will be required to present complex information from these reports to a multi-disciplinary audience and be able to deal with any questions, issues and differing points of view within this context.

8. COMMUNICATIONS AND RELATIONSHIPS

The post holder will develop working relationships and communicate regularly with a wide range of individuals, clinical and non-clinical, internal and external to NHS Greater Glasgow and Clyde. These will include:

Internal
Director of Nursing and all levels of nurse management levels and service users. Members of Acute Directorates, Directors, Senior Managers and other relevant staff within Acute Operating Division and CHPs.
Staff Partners
Community Engagement Team
Head of Practice Development

External
External Advisers, technical, legal, financial
Other Health Boards
Other Organisations such as National Services Scotland, Quality Improvement Scotland, NES, NHS 24
Local Authority Partners
Universities and other higher education institutions
Voluntary Organisations
Scottish Government
Member of the Public
National Representatives of Trade Unions/Professional Organisations

- The post holder will facilitate effective interactions between planning team members and nursing community and will work with the rest of the project team to promote and publicise the New Hospitals project briefing and educating users on the New Hospitals process and timescales to enable a smooth seamless flow in the programme.

- The post holder will be expected to present information about the project to varying audiences at seminars, meetings and conferences involving, in some cases politically sensitive or contentious information with the need to respond to assertive styles of questioning from, for example, local active community groups. In other cases presentations may involve large groups of people e.g. international conferences with responses required to questions of a clinical nature requiring the post holder to draw upon their technical knowledge and experience.

9. PHYSICAL, MENTAL AND EMOTIONAL DEMANDS OF THE JOB

The post holder must be able to:

- concentrate for sustained periods to find creative solutions to complex problems and write detailed reports while dealing with frequent interruptions necessitating immediate response to questions or

issues.

- prioritise competing tasks in an unpredictable workload.
- negotiate with clinical teams where necessary challenging assumptions and the norms to ensure that the procured solution meets clinical requirements within the project affordability.
- Managing user expectations and imparting unwelcome news where users' requests cannot be matched by actual need, value for money, project budget or where there are competing/conflicting requests between specialties. This will require exercising judgment and advising on actual need (verses request), priorities of need in the case of competing requests and negotiating with users to re-align expectations with achievable deliverables.
- The role requires frequent travel between various sites to attend meetings, presentations, project group activities

10. MOST CHALLENGING/DIFFICULT PARTS OF THE JOB

- Working effectively with a wide range of key stakeholders ensuring robust Stakeholder and User input into the New Hospitals Project and to achieve a consensus view from all parties.
- Openness to new ideas and being prepared to challenge and encourage users to be innovative in developing their plans for the new hospital.
- Maintaining a high level of knowledge of effective models of delivery in acute care. Build and maintain highly effective work relationships across NHSGG and Partner organisations.
- Capacity to interact effectively and productively with the wide clinical community.
- Objectivity and resilience in respect of competing and aspirational expectations.
- Working with deadlines and under pressure and to extend working day to accommodate users. The critical deadlines in this project are time and cost.
- Ability to co-operate effectively with a range of processes and colleagues involved in the managerial, planning and design elements of the project to develop outputs for design and operation of the New South Hospitals.
- Ensuring that the planning and management of the project reflects and is sensitive to, the high degree of political and public interest in this development this includes informing/responding to MSP's and Ministers, presenting to local interested groups/public and managing press and media enquiries.

11. KNOWLEDGE, TRAINING AND EXPERIENCE REQUIRED TO DO THE JOB

- First level registered nurse with post-registration qualification, and either degree/MBA or equivalent in-depth experience.
- Substantial professional nursing experience with a minimum of 7 years at senior management level (i.e. Head of Nursing / Assistant Director of Nursing level, or equivalent).
- Track record of achievement and high level of professional accountability.
- Evidence of developing new systems, policies and ways of working and change management.
- Ability to influence and liaise across a wide range of staff and specialties.
- Excellent interpersonal and problem solving skills.
- Evidence of experience in undertaking analysis and interpretation of complex problems, developing options and undertaking option appraisal identifying the optimum solution.
- Experience in risk management and quality planning (setting standards) working in a politically sensitive environment with multi-agency stakeholders.
- Experience in leading or involvement in continuous improvement programme and an understanding of the functioning of Quality Improvement Scotland.
- Well developed IT and key board skills is essential.
- Up–to-date knowledge of innovative practices and service models around the UK and beyond and sound understanding of local and national healthcare policies, standards and priorities and an understanding of how technology can assist in quality improvement.
- An effective communicator with experience in negotiating and influencing at a senior level with ability to work flexibly within a large multi-disciplinary team.

12. JOB DESCRIPTION AGREEMENT

A separate job description will need to be signed off by each jobholder to whom the job description applies.

Job Holder's Signature:	**Date:**
Head of Department Signature:	**Date:**

JOB DESCRIPTION APPENDIX –
ADDITIONAL ROLES AND RESPONSIBILITIES

Please use this form to describe any additional roles or responsibilities currently fulfilled by a jobholder that are not an integral part of the person's substantive job (e.g. Radiation Protection Supervisor, "Link Practitioner" etc)

1. TITLE OF JOBHOLDER'S SUBSTANTIVE POST:	
2. DEPARTMENT:	
3. DESCRIPTION OF ADDITIONAL ROLE/RESPONSIBILITY:	
4. AGREEMENT OF ABOVE DESCRIPTION **Job Holder's Signature:** **Head of Department Signature:**	 **Date:** **Date:**

1:200 & 1:50 DESIGN PROCESS

Introduction

The attached chart (appendix A) sets out the process for achieving the sign-off of the 1:200 department layout drawings for both the adult and children's hospitals. The same format will be used for the 1:50 room layouts.

This process is reliant upon there being close communication between the User Group Leads and the Acute Service Director at all times.

There is a schedule of all User Group meetings and the membership of each group has been approved by the Acute Service Director and Chief Operating Officer.

Design Process

Seven days before the first meeting of each User Group a drawing(s) will be issued by the Project Team to each Group Lead. At the User Group meeting the Design Team (Architect supported by the Health Planner and Project Team members) will provide a detailed update on the User Group department(s) design progress.

During the User Group sessions discussion will lead to:

[1] Accepting the Design Team proposals;
[2] Making some changes with no impact on cost or other departments;
[3] Making changes with an impact on other departments and/or cost.

If the User Group decision is that [1] or [2] above are the agreed status then the design process can move on to the next planned meeting or the group decide that the design is concluded and can be signed off. The Design Acceptance Procedure Form will be signed to acknowledge the status.

If the group agree the status is [3] then the following procedures will be implemented:

- Immediately issue an Early Warning Notice of the proposed change

- Immediately, or up to 7 days if sketch design and costs are required, the Group Lead will discuss the issues with their Director providing them with the reasoning behind the proposed changes(s). This can be supported by members(s) of the Project Team or Design Team if required.

- The Directors must be presented with all appropriate information including an initial sketch and high level budget cost of the proposed change to enable them to decide whether or not to initially accept or reject the changes.

- If Director decides the change(s) is not required or not worth further work then this will be relayed to the Brookfield via the Adult or Children's Project Manager. This must be relayed to Brookfield within 7 days of the User Meeting.

- If the Director agrees that the change(s) submitted should be considered for implementation then he/she must make a case to the New South Glasgow Hospital & Laboratories Executive Board Sub-Group. Details of the proposal including design and financial implications will be provided by the Project Director. (This group will meet weekly and consider only exceptional

circumstances which cause a change to the project and incur additional capital or revenue costs).

The Director must provide the Executive Sub-Group with detailed reasoning and information for requesting change(s) which have an impact on the cost of the project. At the same time the Project Team will initiate the formal Change Control Procedure (CCP) to record all necessary information for the New South Glasgow Hospitals and Laboratories Executive Board. The CCP must be signed by the appropriate Senior Manager (i.e. Chief Executive or Chief Operating Officer) before it can be implemented.

The Executive Sub-Group will have the final say on the decision. The Project Director will communicate the decision to the Brookfield within 21 days of the User Group meeting to enable the Design Team to conclude their work for the next set of meetings.

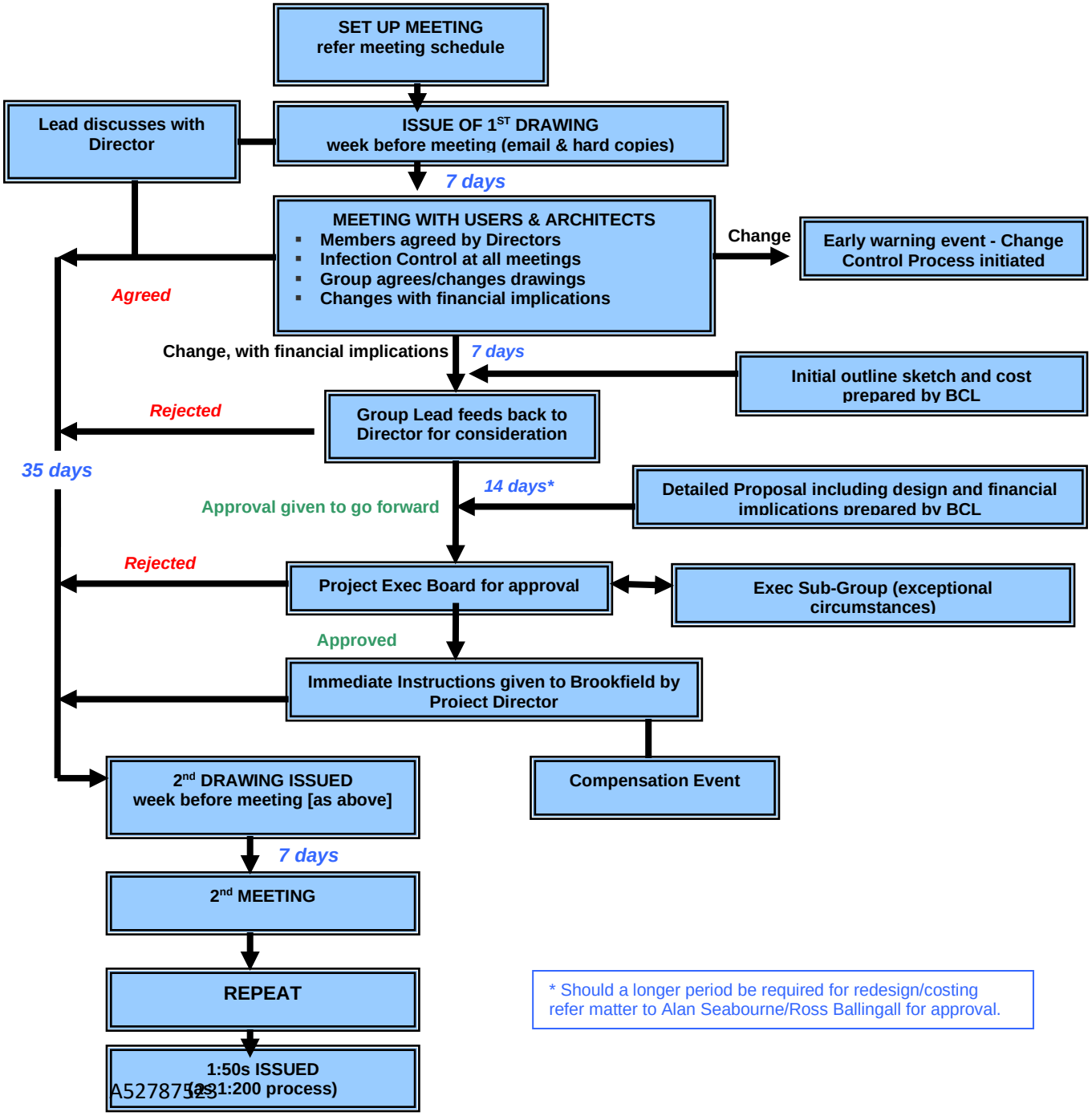
If the changes being considered are complex and/or of a large scale then the Project Director will open discussion with Brookfield to agree how much time can be allowed or is required, beyond the 21 days, to complete any necessary work or achieve a higher level of approval within the Board, without affecting the programme. As the timescales are contractual and changes could cause changes in the Master Programme, which would have a cost impact, it is important that any changes that impact upon programme, either by delaying or instigating additional work, are avoided. It must be made clear to all groups that this contract is a fixed price and it is not anticipated that any changes will increase the existing footprint of the building and hence the cost.

All changes with a financial impact will be recorded and reported to the next meeting of the New South Glasgow Hospitals and Laboratories Executive Board.

Progress update on the design process will be provided at the monthly Acute Services Redesign Group where members will have the opportunity to raise issues etc with the Project Team.

The level of sign-off of drawings will follow the following procedure and will be recorded on the “Design Acceptance Procedure” Form as shown in Appendix B.

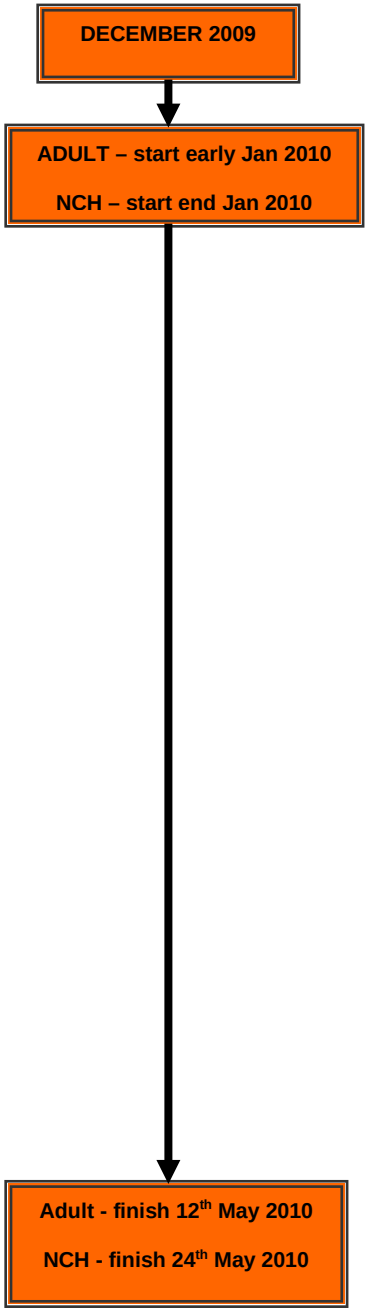
1:200 & 1:50 Process



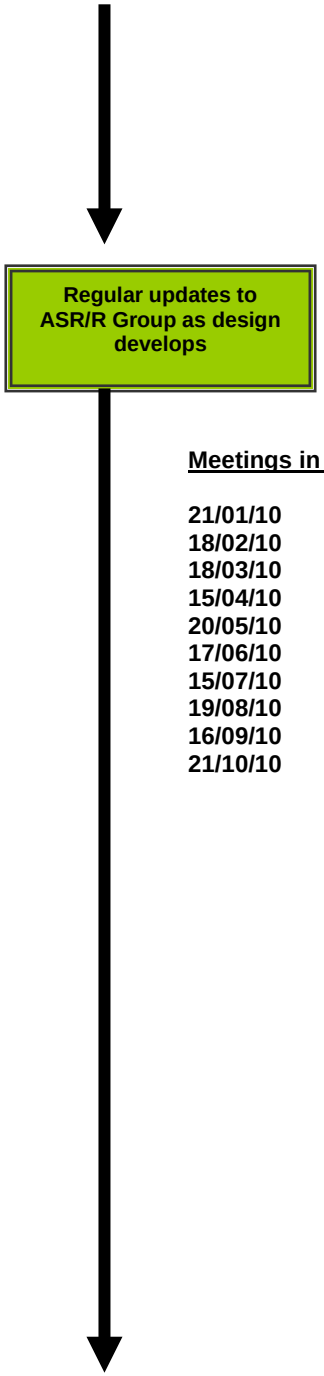
A5278723

* Should a longer period be required for redesign/costing refer matter to Alan Seabourne/Ross Ballingall for approval.

Timeline



Design



Meetings in 2010

21/01/10
18/02/10
18/03/10
15/04/10
20/05/10
17/06/10
15/07/10
19/08/10
16/09/10
21/10/10

APPENDIX B

NEW SOUTH GLASGOW HOSPITALS & LABORATORY PROJECT

DESIGN ACCEPTANCE PROCEDURE

The design approval procedure will be used to review and approve a range of deliverables such as clinical functionality at departmental and room level, finishes, colour schemes, materials and components.

The attached form will be used to record the design development process to review and sign off the clinical functionality both at department level and also for the room layout process. These two operations will follow a three stage process.

The review of items such as colour schemes, components and finishes will also follow a three stage process although it is envisaged that these could be completed in fewer stages.

The form is set out to record the history of the design acceptance process and it is envisaged that each drawing, specification or schedule will have its own sheet to record and sign off the history and acceptance of the contractors design.

At each review the Board will consider the design information provided by the contractor and respond within the timescale, confirming the level of approval and providing supporting narrative or marked up drawings.

The Board will ensure that all responses are signed off by the appropriate staff to record user, managerial acceptance of the design element under review.

NEW SOUTH GLASGOW HOSPITALS & LABORATORY PROJECT
DESIGN ACCEPTANCE PROCEDURE

Building:	**Issued by:**
Subject:	**Date issued:**
Aspect for Review:	**Date return:**

DESIGN REVIEW HISTORY

	Level of Approval	Approval Date	Remarks
Design Review 1			
Design Review 2			
Design Review 3			

BOARD RESPONSE

Level of Approval [ ]

Information referred to:

Detailed comment:

Approval Levels: **A**= No comment. **B**= Proceed subject to comments. **C**= Resubmit with amendments. **D**=Rejected.

BOARD ACCEPTANCE SIGN OFF

User Group Lead: Date:

Design Manager: Date:

Project Manager: Date:

NEW SOUTH GLASGOW HOSPITAL

Clinical Output Specification

AREA	RENAL DEPARTMENT

1. INTRODUCTION

The present distribution of renal services across Greater Glasgow will be brought together into a new major renal centre at the new South Glasgow Hospital (SGH). This facility will be the inpatient hub for the renal clinical network of Forth Valley, Greater Glasgow and Clyde. It will also support tertiary renal referrals from throughout Western Scotland and beyond – principally related to acute transplantation. In addition to acute renal and nephrology services, it will also provide renal dialysis services for patients with chronic renal failure.

The Greater Glasgow population will receive the full range of services from the SGH renal centre. The tertiary service provided will accept referrals, including transplant surgery, from the western half of Scotland.

This Clinical Output Specification (COS) deals with the major renal service component that supports:

The renal transplant service
Inpatient medical and surgical care for renal patients
Level 2 renal care
Acute medical assessment of renal conditions/problems
Day case services
Assessment and triage
In-patient dialysis support

This accommodation is as specified in the project's Schedule of Accommodation (SofA) in the section entitled "renal wards".

The Services provided include:

The renal department is an integrated service providing inpatient care to elective and emergency patients suffering from renal disease and its complications, including acute onset renal failure, chronic renal failure and end stage renal disease. Many patients cared for are acutely ill (requiring level 2 care) with associated co-morbidities and social needs.

The service will also support the needs of inpatients under the care of other specialties who have established renal disease and who may require treatment and renal support during their episode of inpatient care.

Patients on established haemodialysis will be treated in the dialysis satellite unit. (See separate COS)

The inpatient service provides kidney support (including haemodialysis) and transplantation services (including workup, surgery and post-surgical care). It also supports the management and treatment of the physical manifestations of kidney disease, e.g. hypertension.

As well as meeting the needs of the local adult population of Greater Glasgow, the renal facility will also provide a tertiary service to the population of the West of Scotland related to the support/early management of emergencies resulting from renal replacement therapy, the management of chronic renal disease, acute renal failure and routine nephrology.

The service also supports outreach clinics at a number of District General Hospitals (DGH's) throughout Western Scotland, with the facility at the Southern General also acting as the main hub or 'mother' centre for renal satellite units (spokes) in Forth Valley, Greater Glasgow and Clyde.

In addition, renal clinicians also provide structured support to other specialties at SGH, such as vascular, diabetes, haematology, neurosciences and critical care. They also frequently provide support to patients/clinicians in other areas such as plastic surgery and infectious diseases, sometimes in other centres and without the patients necessarily coming to the SGH.

Overall the department focuses on the prevention, early intervention in and education related to renal disease across the population.

The Services provided exclude:

Specific exclusions from this service include:

Children under the age of 16 who will be cared for through the paediatric service provided in the Children's Hospital.

Adult patients requiring level 3 care, who will be cared for in the Critical Care Facility (CCF). (See Critical Care COS for details)

Adult renal patients in other critical care units outwith the scope of this document/programme, e.g. Cardiac surgery.

Scheduled Outpatient Services.

2. LOCATION AND LINKS

2.1 CLINICAL FACILITY REQUIREMENTS

Major components of the accommodation include 80 inpatient beds, day area and 4 bay dialysis area. These are described in the schedules as below however they will be combined within a continuous space to achieve optimum nurse staffing.

- 2 x 22 bedded wards
- 1 x 16 bed ward and day unit
- 1 x 20 bed higher acuity (Level 2) ward

This accommodation should be located together, recognising the need to support integrated care models whilst minimising unnecessary staff and patient movement.

It should be noted that all bedrooms in all wards should be plumbed for haemodialysis.

2.1.1 Two 22 Bed Wards

Although listed as 2 x 22 bed wards for historical reasons the configuration of these bedded areas may be able to flex to support the overall design.

These wards are all in single, en-suite rooms as described in the Generic Ward COS with the following key differences:

- The provision of dialysis support infrastructure in rooms
- The number of rooms per "ward"

Two single rooms per ward will have associated gowning lobbies, for infection control purposes (source and protection)

The inclusion of a treatment room at 16.5 m2 in each ward

In addition it is noted that the SofA identifies the requirement for additional "general storage space" and 6 clinical workstations to support both 22 bed wards.

It is further noted that the IT network infrastructure should include telemetry facilities, to allow remote monitoring, for all patients in all renal wards / beds with the central monitoring station located at the main ward base. (This is noted in the Generic Ward COS but underlined here for reference)

Equipment maintenance and associated storage and testing areas will be provided for the entire renal department from a location identified within the outpatient dialysis area only.

2.1.2 16 Bed Ward & Day Unit & Treatment/Triage Area

Key components of this area include:

- 16 beds in single rooms with en-suites as described above.
- A day assessment and treatment area
- An in-patient dialysis centre
- A range of back-up, admin, utility and shared accommodation, as described within the generic ward COS, to create a single functional clinical unit

Bed Area Facilities

The 16 bed ward supplements the 2 x 22 bed wards already identified and consists of:

- 16 beds in en-suite accommodation as described above with associated en-suites as described in the Generic Ward COS

Day Assessment & Treatment Area

The Day Assessment & Treatment Area has a self-explanatory function but will also be used to support the triage of patients arriving in the renal department, e.g. from outpatient clinics. It will consist of:

A small waiting area

A minor procedures & treatment room (including prep area)

- 3 x consult / exam rooms

A 4 bed day trolley bay (Although reclining chairs may be specified as an alternative)

Disabled WC

Dedicated staff base

NB It is identified that the preferred configuration for the day trolley spaces would be to see them provided in a shared “bay” area, although this is still the subject of discussion with infection control. Consequently this area is assumed to be 3 sided cubicles with floor to ceiling glass walls separating patients with each cubicle having an open front.

A 2.5m unobstructed corridor space is required beyond the working area and even if, following conclusion of discussions with infection control, the area is configured as a space, rather than a room, and it should be capable of being converted into a room (with fixed walls) at some time in the future without disruption to any services.

Inpatient Dialysis Centre

Additionally, this ward accommodates an inpatient dialysis centre. This is accommodated in a 4 station supervised bay and includes nurse workstation and storage cupboards which are shared with the day assessment/ treatment area The inpatient dialysis centre will support the dialysis requirements of patients who may have to travel there from other areas within the hospital. It will consist of:

- 4 x dialysis stations

As noted above, these dialysis stations would preferably be configured as a single open bay although the same infection control issues arise. Consequently this area is assumed to be 3 sided cubicles with floor to ceiling glass walls separating patients with an open front.

A 2.5m unobstructed corridor space is required beyond the working area and even if, following conclusion of discussions with infection control, the area is configured as a space, rather than a room, and it should be capable of being converted into a room (with fixed walls) at some time in the future without disruption to any services.

Back-up/Admin/Utility/Shared Accommodation

A range of support accommodation is identified in the SofA to ensure that the 16 bed ward and day unit can function as an independent clinical unit. This accommodation is all primarily as described either within this document or the generic ward COS. Notable differences include:

2.1.3 20 Bed Higher Acuity / Level 2 Ward

This ward will accommodate patients requiring Level 2 care, but may include some Level 1 patients. As with all other bedded accommodation within the unit, all beds will be in single rooms. It has a number of differences to the other renal wards however. For example:

- The bedrooms are larger, to take equipment
- Only 12 of the 20 rooms will have en-suites

Four rooms will have associated gowning lobbies, for infection control purposes (source and protection) all of which will have en-suite.

Two assisted shower / WCs are available throughout the ward to support patients able to leave the bed under supervision who are not in rooms with en-suites.

An overhead pendant for multi-parameter monitoring, medical gases (oxygen and air), medical vacuum, and electrical outlets is required rather than a bed head unit. (This should be as specified for level 2 beds in HDU, please refer to the Critical Care COS for details)

Medical gases and vacuum will also be required in treatment rooms.

A visitor sitting and waiting room, with beverages, is also required

A status laboratory and an additional dirty utility, compared to the other renal wards, are required

2.2 INTERNAL RELATIONSHIPS

2.2.1 Cluster Model

A cluster model should be adopted for the configuration of the renal wards, i.e. the four wards should be clustered on one floor around a centrally positioned support core containing FM, administration and other support services. These should be configured to include a regeneration kitchen, central wash-up, disposal hold, cleaner's room, staff locker rooms, seminar / education facilities, medicines management, bulk fluids storage (surgical ward floors) and administration workstation area.

This is as described in the Generic Ward COS which should be referred to for further information.

2.3 ACCESS & KEY DEPARTMENTAL RELATIONSHIPS

In reflecting key adjacencies for the renal wards and department it is noted that co-location of the facilities identified within this COS and the associated SofA is essential.

Close to	Reason	*Category
Critical Care Area	Patient transfers from & to	2 (Particularly access to renal level 2 area)
General Wards	Patient transfer	2
Imaging	Patient journey	1 ie within short travel time
Interventional Radiology	Procedures	1 ie within short travel time
Operating Theatres	Access to theatre	1 ie within short travel time
Acute Assessment Unit	Expedite transfer route	2
Emergency Department	Expedite transfer route	2
Main Entrance (incl	Patient journey	2

Admission & Discharge Lounge)		
Dialysis Unit	Staff & Patient transfer	2

*1 = Essential
*2 = Important
*3 = Desirable

3. ACTIVITY

The beds are derived from the Pan Glasgow Bed Modelling Exercise.

4. TRENDS

The renal centre will follow the established national model of care[1] such that all inpatient renal services are provided within a discrete area, providing level 2 care and supported by a level 3 facility within easy access. This allows a patient presenting with renal disease to follow a pathway of care from presentation (that may include transplantation) in which they are cared for by a clinical group who, supported by other specialties, are able to manage the disease process and its manifestations in one clinical area. This minimises patient risk and improves outcomes.

This method of providing services will continue to be refined and developed but will not undergo essential change.

Training requirements for clinicians, nurses and AHPs are under review nationally. Access to training facilities at ward level is essential. Additional on site facilities for training will also be required.

Infection control and its requirements are likely to increase as the focus on controlling HAIs is unlikely to shift in the future, this is particularly likely to impact on the unit, particularly given its role in supporting transplant activity.

Organ donation and transplantation is currently under review nationally. It is possible that more cadaver organs will become available in future. Additionally, live donor transplant may increase.

[1] The Renal Association's publication of August 2002: The Treatment of Adults & Children with Renal Failure (3rd Edition)

5. HOURS OF SERVICE

Current Hours of Service:

All wards will continue to operate 24 hours per day 365 days per year.

The day trolley spaces will operate a 2 shift system between circa 8.30 am and 8.00pm Mon-Fri (although triage areas may be used 24 hours per day 365 days a year)

The in-patient dialysis area will primarily operate a 2 shift system between circa 8.30 am and 8.00pm 6 days/week

No scheduled outpatient activity will be delivered from the renal unit within the Southern General Hospital

These hours of service should be a key consideration in the physical and engineering design of the new facility, which should reflect the ability to "close down" non-operating services when they are not required without any impact on wider service delivery.

6. WORKLOAD INDICATION (weekly)

Care Model

The care model is 'unusual' in the current healthcare climate of specialty management, in that patients undergo medical and surgical care within an integrated facility. This model is considered to improve patient safety and outcomes as the same team manage the patient from the time of presentation, drawing on other specialty support as and when required. Thus, all co-morbidities and complications are anticipated, known and understood.

Patient / Process Flow & Service Delivery

Most patients will access the SGH service from a satellite unit, however it can also be accessed:

Through the outpatient pathway following GP referral

Via the Emergency Medical Complex (ED & AAA) (See separate COS for details)

From level 3 (Critical Care Facility) when requiring further renal support after an initial acute episode

From other inpatient specialty wards having developed renal problems as a result of their episode of care

From satellite dialysis units when requiring assessment and or admission

It is noted that some patients, dependent upon how, when and where they present from will be assessed initially within the Triage Area to determine the intervention required and where/how this can best be provided. In general:

Patients at acuity level 0 -1 will be cared for in one of the general renal wards single rooms. From here they may undergo a number of investigations, interventional vascular and other procedures, imaging, observation, diagnosis and treatment. Once

stabilised, they may then be discharged for further management in primary care or undergo dialysis (peritoneal or haemodialysis) prior to discharge.

Acutely sick patients with a high level of acuity will be admitted to a level 2 bed and managed accordingly. If they deteriorate to the point of requiring level 3 care they will be transferred to the Critical Care Area.

Many patients will access interventional radiology, cardiac testing, imaging and other diagnostic and treatment services within the hospital. Discrete routes to and from these areas, plus routes to and from operating theatres and critical care will be required.

Any patient requiring protective isolation or with a highly infectious problem (e.g. Herpes) will be nursed in a room with an associated gowning lobby.

A significant proportion of patients in established renal failure will be eligible for renal transplantation. They will follow an established work-up pathway and following transplant surgery will be nursed in a protective isolation level 2 bed (with gowning lobby). Once well enough, they will be transferred to a general bed with or without protective isolation (depending upon their immunity status). Once fully recovered and with an acceptable immune status, transplant patients will be discharged home. Follow-up will be shared between the acute and primary care providers

Inpatients on other wards who are in established renal failure and require haemodialysis during their episode of care will be dialysed in the ‘day unit’ associated with the 16 bed ward.

It is of note that acute renal disease frequently becomes a chronic disease process meaning that many patients will remain within the service for life, requiring recurrent inpatient episodes in support of the management of their condition.

This should have an impact on facility design and particularly finishes as the renal patient cohort will find themselves in hospital far more than any other major patient group.

7. KEY OPERATIONAL PROCESSES / ISSUES

Design Requirements & Guidance

Please refer to the project documentation for overarching design requirements and guidance.

Environmental and Services Requirements

The need for each bedroom, and dialysis bays, to be plumbed for haemodialysis should be noted, as should the provision in the dialysis unit and critical care area. (See Critical Care COS for details)

Additionally, the new Children’s Hospital and existing maternity and neurosciences buildings also require access to appropriate treated water supplies. The anticipated engineering strategy is for all of these areas to be addressed by an integrated approach.
Water treatment should reach a minimum of the following standards:

the higher European Pharmacolela (EP) XV1 standard :'Water for diluting concentrated haemodialysis solutions'

ISO 13959: 'Water for haemodialysis and related therapies' or

AAMI (Association for the Advancement of Medical Instrumentation) standards

European Renal Association Best Practice Guidance – 4th Edition 2007 – new guidelines due in 2009 and should be considered at that time.

It is advisable that in preparing water specifications for water treatment plant the advice of the local water board should be sought, a renal technician, specialist water treatment companies and equipment manufacturers. It should also be noted that it is envisaged that water treatment plant will meet the needs of inpatient areas as well as the dialysis unit and Children's Hospital.

Generally, environmental and services requirements should correspond to the standards described in the relevant HBN 53 Volumes 1, 2 & 3, HTM's and other technical guidance and the technical output specification for this project.

Consideration must be given to:

The privacy and dignity of patients

The needs of disabled and the requirements of the DDA

Infection control measures

The management and disposal of contaminated waste (consider in conjunction with inpatient services)

Security and safety of staff and patients

The development of near patient testing

The comfort of patients and staff is important and keeping room temperatures low during dialysis is important for patient well-being and stability. The extent of ventilation required is dependant upon local heat gain and the provision of air conditioning is a consideration, for example in dialysis areas and Level 2 higher acuity beds.

Areas used for dialysis should have plenty of natural light and an outside view. Artificial lighting can make an important contribution to the interior design and should mimic natural lighting as far as possible.

The Whole Hospital Policy sets out common standards, such as power and data point requirements, that are to be applied throughout this project. In addition, consideration must be given to protecting the privacy and dignity of patients. Sound attenuation measures to ensure speech privacy in consult / exam, treatment, scanning and other rooms where patients and clinicians have private discussions should be provided.

The design also needs to take account of the need to create a pleasant environment for the patients and staff by means of good design, locally controllable lighting and access to natural light and views.

Rooms & Spaces Required

All rooms are listed in the SofA. This section refers to rooms that have a unique function within the renal environment.

RENAL TECHNOLOGY LABORATORY (WORKSHOP)

A Renal Technology Laboratory for the maintenance and repair of dialysis machines, incorporating *Equipment Service*, *Live Test* and *Component Storage* areas which should be amalgamated into a single area to form the general laboratory. There is also a *Ready Use / Equipment Out Lobby*, which should be external to the general laboratory, and configured as an open area for direct access by clinical staff.

Equipment Servicing Area

This space should be sufficient to manoeuvre into and park within 8 test stations, dialysis machines undergoing repair/testing. Laboratory grade benching should be a feature of surrounding walls with appropriate quantities of under-bench cupboards and drawers and above-bench single/double shelving as practical.

7 x test stations must each incorporate :-

- Easily accessible under-bench fluid supplies and drains to operate equipment as per ward.
- 6 x 13A power outlets with 30mA residual current device protection.
- Computer network comm. port.
- “Angle-poise” inspection lamp.

Variable airflow ventilation is <u>essential</u> with high level extraction/cooling to deal with up to 14KW heat output from disinfecting equipment and for fume extraction of chemical disinfectants.

Under-bench bay required with 6 x pure water supply, 6 x drain, 6 x 13A power outlet to accommodate auto disinfection of single-patient portable reverse osmosis (R.O.) units. Also one “raw” water supply for R.O. efficiency testing.

A hand washbasin with wrist operated taps plus one deep plastic laboratory sink.

Live Test Area

Benched area of approx. 6 M2 designed as a *“Live Test”* area with requirements as per HSE Health and Safety Executive “Safety in Electrical Testing at Work – General Guidance” including for instance :-

- Live test area to be earth free with minimum exposure of conductive parts.
- All electrical supplies within area via isolation transformer.
- Floor area fitted with insulated rubber mat.
- Stop switches mounted : one in immediate test area and one inside lab.entrance
- Illuminated warning sign mounted outside lab entrance

This area should accommodate 1 x test station incorporating :-

- Adjacent fluid supplies and drains to operate equipment as per ward.
- 6 x 13A power outlets supplied from the isolating transformer.
- “Angle-poise” inspection lamp supplied from the isolating transformer.

Component Store

Storage area of 16 M2 configured approx. 8M x 2M for component storage drawer system

Ready Use equipment / Out Lobby

Ready use / run-up area of 9 M2 accessible to clinical staff for storage / disinfection / preparation of dialysis machines.

- This should be configured as an open area, for direct access by clinical staff, 1.5 M x 6 M , partitioned from the Laboratory and situated on its outside perimeter.
- This area will have 5 bays, each with 2 x 13A power outlets and fluid supplies and drains to operate equipment as per ward .

Treatment Area: dialysis, Day Case Bay (x 4) and Inpatient Centre (x 4)

The dialysis area may consist of dialysis stations arranged in modules taking into consideration the needs of staff communication with groups as well as plumbing and electrical needs. In choosing chairs, a consideration is that chairs could be modified so that they may be used as cycle machines for exercise for patients whilst on dialysis. Sufficient space must be allowed for the chair to be fully reclined and for nurses to carry out all procedures. Treatment stations need to be arranged so that patients can be attached to the machine by either arm or by cannulae in their neck or groin (dependent upon access). One emergency call button (with audible and visual alarm) should be provided.

Storage space is required at each station for frequently used medical items and for patients to carry out activities e.g. watching television whilst undergoing dialysis. Easily reached storage shelves are required for staff use. Dialysis chairs with integrated tables are required for patients. The need for a computer outlet, telephone point and network connection point at each station is a consideration as well as computer data points for staff. One CHWB is required between two stations, with:

Alcohol hand rub

Wall mounted soap and scrub dispenser, aprons and gloves

A towel dispenser

Clinical and non clinical waste bin

A sharps container

Minor Procedures & Treatment Room (incl prep)

Activities undertaken in this area will include renal biopsies, line insertion, stent removal etc and consequently it should be spec’d as a minor procedures room capable of supporting minor surgical interventions in a sterile environment.

Higher Acuity / Level 2 Bed: single room @ 20m^2
A space allowance of 20m2 is required. A medical supply unit for multi-parameter monitoring, medical gases (oxygen and air), medical vacuum, and electrical outlets must be provided; this may take the form of overhead articulated arm(s) or gantry – wall mounted supply is discouraged. Natural daylight is desirable and, if present, controllable blackout blinds will be required. Artificial light, apart from examination light, should be indirect with wall dimmer controls. The colour of the walls must not distort the colour rendering of the examination lights so that changes in the patient's colour can be readily identified.

There must be enough space around the bed for use of resuscitation and haemodialysis equipment. Each bed area must also be large enough to accommodate mobile imaging equipment and have appropriate radiological protection.

Natural daylight and preferably a view must be provided.

Bulk supplies store (12m^2)
This bulk supplies area is a holding store for medical and surgical supplies and intravenous fluids from which to stock the clean utility and other areas. The amount of storage is determined by local supplies policy and 'just in time' system Clean disposable bedpans and urinals can be stored in this area.

Clinical Equipment Store (16m^2)
Floor space is needed for a variety of equipment including drip stands, monitoring equipment, etc, but haemodialysis equipment will be kept in the bedroom or in another storage area. Shelf space is needed for smaller items of equipment such as infusion pumps, monitoring equipment and suction apparatus. Power is required for the charging of this equipment. This store should be located within easy access of bed areas and near to the equipment service room.

RISK MANAGEMENT

The overall design and layout of the ward should aim to reduce the risk of harm to patients and staff. It should also take into consideration the latest technical and planning guidance/consideration related to the full range of issues that may constitute a "risk" including patient safety, infection control, staff safety, etc.

DISABILITY ACCESS

The accommodation must conform to the requirements of the Disability Discrimination Act 2005. This includes wheelchair access into rooms, provision for those who have hearing or visual impairments and for obese patients, e.g. rooms will require turning circles for wheelchairs, induction loops, tactile surfaces for the visually impaired, and fittings suitable for heavy patients e.g. floor mounted sanitary ware.

NEW CHILDREN'S HOSPITAL

Clinical Output Specification

AREA	INPATIENT WARDS

1. INTRODUCTION

The inpatient wards of the New Children's Hospital will, as far as possible, comprise a generic design of wards in order that they may flex optimally between specialties and patient groups in order to respond to clinical and demographic changes without the need for major re-configuration. The plan is that each ward will be grouped in 8 bed clusters. There may also be a requirement to change the number of beds between the ward areas therefore the wards should be configured in such a way that will allow flexibility.

Support accommodation for the wards should be co-located in a central area to allow maximum efficiencies

Services not included:

Renal day care
Haemato - oncology
PICU
Psychiatric Inpatients
The above specialties have patients with a mixture of needs and issues that differ from those using a generic ward.

The Acute Receiving Ward and Cardiology wards whilst having different configured bed numbers will be expected to have a similar design layout to the inpatient bed wards. It is noted however that the plan for in-patient accommodation within these areas can and should be the same as for the generic ward component wherever possible to further support future flexibility.

2. LOCATION AND LINKS

Cluster model should be adopted for the configuration of the wards, i.e. the wards should be clustered around a centrally positioned support core containing FM, administration and other support services.

From the passenger lift area; there should be a clear public entrance to each ward that is separate from the clinical access entry point. This relationship gives separation of Facilities Management (FM), visitor and patient routes. The FM support core should have separate clean and dirty service lifts connecting to FM routes and to delivery and collection bays.

External

Close to	Reason	Category*
Theatres	Access to theatre	2
PICU	Patient transfer	2
Imaging	Patient journey	2
Renal services – *beside renal inpatient ward*	Patient journey	1

*Category: 1 Essential 2 Important 3 Desirable

3. ACTIVITY

see activity tables

4. TRENDS

Due to the movement of the care models towards more ambulatory and day care the inpatients will have higher levels of dependency/acuity, both at the emergency and elective level of care.

Patients with neuro-disability and complex needs leads to issues concerning manual handling, equipment and bed sizes for patients. In this context, this project incorporates six overhead hoists per ward and recognises the requirement for all en-suites to be the equivalent of “double assist”.

Infection control and its requirements are only likely to increase as the current focus on controlling Heathcare Associated Infections (HAI) is unlikely to shift in the future - underlining the importance of pursuing all developments in line with HAI - SCRIBE.

5. HOURS OF SERVICE

24/7

6. WORKLOAD INDICATION

n/a

7. KEY OPERATIONAL PROCESSES/ISSUES

Care Model

Patients may be admitted to generic wards from a number of areas including:

The Emergency Department
GP referral
Booked / elective admission lists (following referral to a specialty)
Other specialties / hospitals by transfer
The Theatre Department
PICU
NICU (Neonatal Intensive Care Unit)
Radiology (interventional and other procedures)
Institute of Neurosciences
Outpatients

These admissions may be either elective or unscheduled.

Care provided on the ward includes assessment, treatment and acute rehabilitation sufficient to enable the patient to return home, be transferred to their local DGH or rehabilitation in the community

Discharge Lounge

To alleviate the pressure on wards whilst awaiting discharge a Discharge Lounge has been allocated in the ward block. Patients and their carers can wait here for discharge drugs, transport etc giving space within the ward at busy times

Within the discharge Lounge there will be a play area and an area for teenagers This will be under nursing supervision with play specialists in attendance.

Socialisation Space

The children's hospital will not have 100% single rooms. This has been agreed following consultation with children, young people and their carers which indicated that there was a strongly expressed preference from both patients and their carers for the retention of a mixture of single and small bed-bays (1-4). This mixture was seen to offer flexibility in addressing a number of factors including the level of illness, the need for isolation, the need for company to aid recovery, and the preference of teenagers, in particular, for either privacy or companionship.

Play areas and teenage space is seen as an important part of the recovery process for children and young people. A model which gives a "clustering" of adolescent patients is still under consideration.

General Points

- Where blinds require to be fitted these should be encased.
- 2 rooms per ward will be used for isolation purposes and will have an associated gowning lobby.
- All rooms to optimise patient/staff observation and the volume of natural light entering the entire ward whilst minimising travel distances for staff and ensuring the maintenance of privacy and dignity.
- Touch-down spaces required for staff at reasonable intervals within ward area
- All rooms will feature power & data outlets
- Ceiling mounted tracking hoists should be installed in 6 rooms within each generic ward as standard. All tracking should be kept as straight as possible to minimise travel distances and maintenance requirements.
- IT is seen as fundamental to the efficient functioning of the new facility and should be considered at every stage of the design process. In particular the use of IT to reduce workload, repetition and errors is key. A separate IT strategy is available that outlines key issues, requirements and specifications in this regard.
- Specifically, the IT network should include an infrastructure for telemetry facilities for each ward, with the receiver at the main staff base and the capacity for telemetry to be used on any patient within the ward. Ideally telemetry information should also be capable of being relayed to staff throughout the ward in recognition of the desire to move away from a centralised nursing station.
- Telemetry facilities should also enhance the case-specific monitoring of infants and other patients who may try to leave the bed or room unassisted.
- The move away from a single nursing station should also be supported by the provision of informal desk space, possibly at standing height, throughout the clinical area, e.g. “Touch down stations”. These areas may, at different times, be used by all members of the multi-disciplinary team and should support the requirements of immediate documentation review/completion (ideally electronically) as well as direct two-way observation.
- Public access to the wards should be controllable at all times with e.g. proximity card access/video-entry phone although it should also be recognised that out of hours access may require direct communication with staff in the clinical area as the administrative hub is unlikely to be manned out with “office hours”. The control entry phone should therefore be accessible from several points in the ward near nurse bases.
- Consideration should be given to staff working requirements – as offices will not be within the hospital build staff will require access to workstations near or in the ward areas but away from the “traffic” of the busy ward environment
- Sleep rooms should be located at the “quiet end” of a ward

Design Requirements

The technological nature of hospital services may be an unpleasant, and indeed threatening experience for children, young people and their families. It is important, therefore, that when designing these facilities the specific needs of children and young people are taken into account together with that of their relatives and carers. The emphasis should be on providing a comfortable, pleasant but safe environment for patients and staff wherever possible, with particular emphasis on the wider therapeutic elements of the design and finishes.

It is also essential to consider the needs of staff and the impact that the working environment has on job satisfaction, recruitment and retention.

Addressing gender, cultural and religious diversity, as they relate to the care of children and young people, is also a consideration as are the needs of relatives, carers and visitors whose opinions must be sought throughout the design process and taken into consideration.

Additionally, consideration should be given to alleviating fear and anxiety, maximizing security and safety, reducing boredom and creating a healing environment with the need for artwork, designed furniture, fittings, cabinetry, etc also a consideration.

Imaginative use of floor and wall finishes, colour and lighting will help to produce a warm, friendly environment. However, all must conform to infection control and other guidance, be seamless, easy to clean resistant to damage.

8. EQUIPMENT

N/A

NEW SOUTH GLASGOW HOSPITAL

Clinical Output Specification

AREA	GENERIC ADULT WARDS

1. INTRODUCTION

The inpatient wards of the South Glasgow Hospital will, as far as possible, comprise a generic design of wards in order that they may flex optimally over time between specialties and patient groups in order to respond to clinical and demographic changes without the need for major re-configuration. At the moment the plan is that each ward will have 28 beds but, at some stage in the future, there may be a requirement to change the number of beds between the wards therefore the wards should be configured in such a way that will allow flexibility. In other words the clinical spaces and rooms of each of the 4 wards should ideally join on to each other to allow individual ward boundaries to change in the future if required.

In total, the adult hospital will include 9 floors of generic wards, each ward with 28 beds in single rooms with en-suite facilities.

It should be noted that different fittings will be required in some generic wards and that some rooms may be re-classified within the standard layout in recognition of individual specialty needs. As far as possible however, generic ward designs will be unaltered, with specialty specific areas accommodated within the “cluster accommodation” that is common to each ward floor.

Generic ward accommodation is presented within the Schedule of Accommodation (SofA) under the section entitled “Generic wards”, whilst cluster accommodation is listed in the SofA under the heading “Support cluster”. Whilst some specific differences in generic ward areas are identified in this document it is important to read it in conjunction with all of those COS’s that refer to clinical services/specialties that will be delivered within ward accommodation.

The Assessment beds in the Emergency Complex (EC) will share many of the principles of the generic ward accommodation; however, these are described separately in the COS for the EC.

1.1 Services Provided

Generic ward accommodation is required to provide patient-centred Level 0 to Level1 care for adults in standardised (28 bed) wards that may be flexed between medical and surgical patient care across a wide range of clinical sub-specialties in response to changing patient numbers and need. The service provides for adult medical and surgical emergency (unscheduled) and planned (scheduled) admissions.

Specialties appropriate for generic accommodation include:

- Cardiology
- Care of the Elderly
- General Medicine
- General Surgery
- Haemato-Oncology
- ENT
- Stroke
- Trauma and Orthopaedics
- Urology
- Vascular

This accommodation will be used for adult patients (those aged 16 and above), with patients below this age being admitted to the Children's Hospital.

All accommodation within the adult facility must recognise the needs of an ageing population in reflection of well documented demographic trends and should be designed to be as safe as possible at all levels.

1.2 Services Excluded

A number of specialties are not suitable for generic ward accommodation due to their required footprint/layout being different to the generic layout. These specialties are:

- Renal (including level 2 care)
- Haemato - oncology
- Dermatology
- Critical Care (level 2, level 3 and coronary care)

The above specialties have patients with a mixture of needs and issues that differ from those using a generic ward. For example they may require level 2 and/or level 3 care, or a different configuration of support accommodation, e.g. To support the delivery of specific treatment/care.

It is noted however that the plan-form for in-patient accommodation within these areas can and should be the same as for the generic ward component wherever possible to further support future flexibility.

In addition it is noted that:

- Children's services are excluded.

- Maternity, gynaecology, neurosciences (including maxillo-facial) and some elderly care and rehabilitation beds will be provided within retained buildings that are to be linked to the facility through new covered connections. These connections should facilitate direct access to the maternity and neurosciences buildings for both staff and patients.

2 Location & Links

2.1 *Clinical Facility Requirements*

The main clinical components of the generic ward model are:

- 28 single rooms per ward - all with en-suite accommodation
- All single rooms at 16.5m^2 (including associated family/clinical support space)
- All rooms with en-suite chamfered showers, WC's and WHB's as per HBN 00-02 at 4.5m2.
- All rooms to be capable of using the global footprint available to support patient care as required both within the bedded and en-suite areas, i.e. Rooms should be designed in a manner that allows the en-suite and bedded component to at different times "borrow" space from the other.
- All rooms to optimise patient/staff observation and the volume of natural light entering the entire ward whilst minimising travel distances for staff and ensuring the maintenance of privacy and dignity.
- Where blinds require to be fitted these should be encased.
- 1 room per ward will be used for isolation purposes and will have an associated gowning lobby.
- All rooms will feature a range of bedhead services that should include medical gases (oxygen, vacuum & medical air), nurse call and emergency call – ideally linked to portable receivers carried by nurses, power & data outlets, patient entertainment system (entertainment system specification to be determined) and lighting.
- Ceiling mounted tracking hoists should be installed in 6 rooms within each generic ward as standard. The rooms with tracking hoists should be located as close to key observation areas as possible and should be considered to be those rooms that will accommodate the patients who require the most care intervention and the closest observation. All tracking should be kept as straight as possible to minimise travel distances and maintenance requirements.
- Some wards will require a greater number of tracking hoists due to the specific requirements of the patient groups that they care for. These wards are Trauma and Orthopaedic, Stroke and Vascular and Care of the Elderly.
- IT is seen as fundamental to the efficient functioning of the new facility and should be considered at every stage of the design process. In particular the use of IT to reduce workload, repetition and errors is key. A separate document outlines IT requirements and specifications.
- Specifically, the IT network should include an infrastructure for telemetry facilities for each ward, with the receiver at the main staff base and the capacity for telemetry to be used on any patient within the ward. Ideally telemetry information should also be capable of being relayed to staff throughout the ward in recognition of the desire to move away from a centralised nursing station.
- Telemetry facilities should also enhance the case-specific monitoring of individual patients/groups who are confused or may try to leave the bed or room unassisted.
- The move away from a single nursing station should also be supported by the provision of informal desk space, possibly at standing height, throughout the clinical area, e.g. "Touch down stations". These areas may, at different times,

be used by all members of the multi-disciplinary team and should support the requirements of immediate documentation review/completion (ideally electronically) as well as direct two-way observation.

- Many staff within the new hospital will be moving from Nightingale style wards and technology is also seen as crucial to supporting their clinical observation of patients within single rooms.
- Secure medicines lockers should be provided at each bedside for the storage of patients' own drugs and to facilitate patient self-administration of medications as appropriate.
- A secure pneumatic tube station should be provided at an appropriate location within each ward, for example the clean utility. This should be linked to the wider vacuum tube network that will link all areas within the new hospital.
- An interview room is required, as is the essential office accommodation to support direct clinical activity and management of the ward. This should include flexible (private) desk space for the multi-disciplinary team and a dedicated central administrative/reception area which can be thought of as the administrative "hub" of the ward.
- The majority of offices, e.g. for consultant staff will not be within the new facility but will instead be located within other parts of the retained estate.
- Public access to the wards should be controllable at all times with e.g. proximity card access/video-entry phone although it should also be recognised that out of hours access may require direct communication with staff in the clinical area as the administrative hub is unlikely to be manned out with "office hours". The control entry phone should therefore be accessible from several points in the ward near nurse bases.
- Clean and dirty FM routes and patient / staff routes should be clearly identified and should be kept separate as far as possible.

2.2 *Internal Relationships*

2.2.1 Cluster Model

A cluster model should be adopted for the configuration of the wards, i.e. the wards on each floor should be clustered around a centrally positioned support core containing FM, administration and other support services.

These support clusters / cores can in turn be thought to be composed of two components; a component that is generic to all ward clusters and a variable component which reflects the requirements of the wards it supports.

Essential components within every support core will include:

- A regeneration kitchen
- A central wash-up area
- A disposal hold (will also hold soiled linen)
- Cleaner's room
- Staff locker/changing rooms
- Medicines management space
- Flexible administrative (workstation) space

In addition, areas that may feature within some support cores – dependent upon the ward cluster that they are accommodated within – include:

- Seminar/education/teaching space (*seminar space has been allocated within the ward tower stack*)
- Bulk fluids storage (particularly on surgical floors)
- Therapies space (Including ADL assessment space)

For more details please see Section 7 'Accommodation Requirements'.

The maximum number of wards that should be served from a support core is four, but could be less.

From the passenger lift area; there should be a public entrance to each ward that is separate from the clinical access entry point. This relationship gives separation of Facilities Management (FM), visitor and patient routes. The FM support core should have separate clean and dirty service lifts connecting to FM routes and to delivery and collection bays. This model can operate with a varying number of wards in each cluster and the core can be extended to include other rooms that can be shared between wards.

This approach has a number of benefits:

- It restricts the crossing of patient, visitor, staff and FM flows and the associated risks
- It improves security by restricting the public to parts of the building and routes that are less sensitive.
- It improves privacy and dignity for patients who are being transferred to another department, e.g. for surgery or a diagnostic procedure.
- It helps with fire evacuation planning by providing alternative horizontal evacuation routes from the ward
- It restricts the movement of goods and services to a staff controlled area which can be well protected against physical damage

2.2.2 Support Core Accommodation Relationships

The route from each ward served by the support core to the disposal hold / recycling, regeneration and wash-up kitchen should be short and direct. The workstations, seminar, therapy and staff changing areas should, as far as possible be apart from the FM rooms.

2.2.3 Ward Relationships

The Board recognises that the move from Nightingale wards to 100% single rooms with en-suites will represent a significant change in practice for both staff and patients, with a key element of the successful design being the ability to optimise the two-way visibility of staff and patients whilst also providing opportunities for socialisation.

Nursing establishments/models in all wards will be based upon the patient dependency, ward occupancy and skill mix. It will be crucial that ward design and layout compliments visibility from a patient perspective and staff perspective, consequently designs should be flexible enough to support varied staffing levels and

the effects on the number of rooms being supervised by any given individual/team of nurses, i.e. Where patients dependency increases and a requirement for closer observation a nursing team will supervise fewer patients/rooms than in those areas where the opposite is true.

Whilst, as noted previously, the use of technological ways of achieving this should be explored, a number of design priorities should also be observed, as should the general principles of "Releasing Time To Care (RTTC) The Productive Ward" this programme has 11 modules i.e. 8 clinical and 3 environmental modules. (NHS Innovations 2008)

2.2.3.1 Staff Bases

As noted previously, multiple staff bases are likely to be required, with a key element of the design the requirement to observe as many patients as possible from each base. It is anticipated that the optimal configuration may feature a main "clinical hub" (nurses station) supported by multiple supplementary "touch down" stations. These will also allow staff to update their documentation close to the patients rooms (will also undertake some documentation update in patients own rooms).

2.2.3.2 En-suites

The position of the en-suite should not compromise the observation of bedrooms. Consideration, therefore, should be given to how good observation levels can be achieved from corridors and staff bases. In this context, the positioning of en-suites relative to beds is extremely important.

The preference of the group reviewing ward design, based upon a wide number of visits to different facilities, is for predominately "out-board" ensuites with possibly some "inter-locking" en-suites as it is believed that this delivers the optimal combination of two-way observation, light ingress, travel distances and economy of the footprint. The most important issue is to get the right balance between clear observation and access to natural light.

2.2.3.3 Single Rooms

All clinical care will be delivered in single rooms as far as possible including all minor procedures that would traditionally have been performed in a treatment room. Treatment rooms are consequently not an identified component of the generic ward. Consequently room design should support these interventions including providing enough work surface and useable floor space.
(NB The exception to the above is ENT which does have a treatment room – see ENT COS)

The location of the clean utility and dirty utility spaces will also be essential to support efficiency within this model.

2.2.3.4 Entry, Reception & Waiting

Separate entry points are required to each ward; one for visitors and another for patients and staff. The route from the lifts and stairs should be short and clearly signed. Toilets for visitors should be positioned near the lifts rather than on the ward. Just inside the entrance to each ward an open fronted office for a ward clerk with window to the corridor and space for a few chairs is required. The ward office should be adjacent to this as together these elements will form the administrative centre of the ward.

2.2.3.5 Workstation / Admin Space

The care model will seek to keep more members of the staff on the wards and thus a 2 position workstation area is required. It will be beneficial for this to be adjacent to the ward office.

2.2.3.6 Moving Beds in and out of Bedrooms

It is essential that beds can be manoeuvred in and out of bedrooms, along corridors and out of the ward to bed lifts to, for example, operating theatres and critical care. The main ward corridor doors should be automated to allow the passage of beds through.

The maximum dimensions of beds (including attachments where necessary, e.g. Drip stands, pumps, monitoring equipment, orthopaedic traction frames etc) should be taken into consideration in this regard. Similarly, bed lifts must be able to take a bed and attachments along with up to 4 attendant personnel.

2.2.3.7 Utility Rooms

The position of the dirty utility room(s) must ensure that distances from bedrooms are not excessive. Similarly, the clean utility room should be centrally positioned in relation to bedrooms. Depending upon the ward design employed and the travel distances to/from the dirty utility area a second dirty utility room may be required.

2.2.3.8 Socialisation Space

Although it is anticipated that all patients accessing wards within the facility will be acutely unwell and will only remain there during the very acute phase of their illness/treatment, the need to support patient socialisation has been identified as a design consideration. It is noted that socialisation needs should be considered within the overall design of the ward but that this should, as far as possible be addressed through informal space within the clinical area – possibly within circulation areas – rather than the traditional day room/dining area which is not regarded as appropriate for this type of acute hospital environment. The ability to observe/monitor patients accessing this space is also a key consideration.

2.2.3.9 Equipment Store – There should be access to electrical sockets within the equipment store.

2.3 *Access & Key Departmental Relationships*

Close to	Reason	Category*
Acute Assessment Unit	Expedite transfer route	Essential
Theatres (surgical wards only)	Access to theatre	Essential
Critical Care	Patient transfer	Important
Imaging	Patient journey	Important
Renal services	Patient journey	Important
Endoscopy	Patient journey	Important
Emergency Department	Expedite transfer route	Important
Main Entrance (incl Admission & Discharge Lounge)	Patient journey	Important
Imaging	Patient journey	Desirable
Nuclear Medicine	Patient journey	Desirable
Medical Photography	Patient journey	Desirable

*Category: Essential/Important/Desirable (Essential in this case meaning rapid access required, could be via lift)

2.3.1.1 Route from Emergency Complex (ED & AAU)

A staff and patient only route from ED & EC to the patient bed lift core, which connects with the ward tower, is required.

2.3.1.2 Route from Main Entrance

Patients and escorts will book in at the admissions desk in the main entrance and from there proceed to the lift core / stairs to the level their ward is on.

2.3.1.3 Route to Langlands Building

There is a need to have designated route for vehicles to transfer patients to Langlands from the wards (high level of transfer activity).

3 Activity Indicators

3.1 *Service Trends & Strategy*

Increasingly, acute care hospitals will have patients at a high level of dependency/acuity, both at the emergency and elective level of care. Surgical patients will either be high risk with associated co-morbidities undergoing relatively simple surgery or will be undergoing complex major interventions (these patients may, of course, also be high risk with associated co-morbidities). Medical patients are also likely to have a significant number of co-morbidities and complex needs. All patient groups will have an increasingly elderly component

The current obesity problem is likely to continue in the future, leading to issues concerning manual handling, equipment and bed sizes for patients. In this context, this project incorporates six overhead hoists per ward and recognises the requirement for all en-suites to be the equivalent of “double assist”.

As demographic and other issues impact on the workforce, particularly nursing, the trend is likely to be that expertise is concentrated within areas of high acuity, such as critical care. This will create a staffing challenge at ward level in terms of quality of care risk management. New ways of working will continue to develop, with many members of the care team sharing the full range of required duties. Hoists should be capable of coping with bariatric patients.

Training requirements for clinicians, nurses/midwives and AHPs are under review nationally with access to training facilities at ward level regarded as essential. To this end schedules of accommodation identify the provision of seminar rooms that will be shared between each cluster of 4 wards, although it is further recognised that additional facilities for training will also be required, although these will be delivered through a separate facility on, or nearby, the Southern General site.

Infection control and its requirements are only likely to increase as the current focus on controlling Heathcare Associated Infections (HAI) is unlikely to shift in the future - underlining the importance of pursuing all developments in line with HAI - SCRIBE.

4 Hours of Service & Work Patterns

4.1 *Operating Hours*

All inpatient wards provide a 24-hour service 365 days a year. Administrative areas are unlikely to be staffed out with office hours; particularly when the facility is first opened and the implications of this should also be considered within the design. Specifically this should allow for these areas to be locked when unstaffed with a separate provision for out of hours visitors to make contact with ward staff before being allowed access to clinical areas.

5 Care Model, Pathway & Patient Flows

5.1 *Care Model*

5.1.1 General

Patients may be admitted to generic wards from a number of areas including:

- The Emergency Department (part of the Emergency Complex)
- Acute Assessment areas (within the Emergency Complex, including GP referrals)
- Booked / elective admission lists (following referral to a specialty)
- Other specialties / hospitals by transfer (The majority of unscheduled transfers will be seen in the EC initially)
- The Operating Department
- Critical care (ITU/CCU/Surgical and Medical HDU)
- Radiology (interventional and other procedures)

These admissions may be either scheduled or unscheduled.

Separating scheduled care from unscheduled care is an important element in planning for the optimal utilisation of all resources and will be key to the overall model employed in the new hospital.

Scheduled patients will all (where it is deemed to be beneficial) visit a pre-admission assessment clinic as part of their care pathway, with a successful outcome from this clinic essential before they are admitted. As a component of the successful conclusion to pre-admission assessment, patients will be given a date, time, location and method of admission that will see them:

- Go directly to the admissions office in order to be admitted to a ward or other bed/trolley/chair e.g. Medical Day Bed Unit
- Go directly to the admissions office in order to be admitted to a ward bed on the morning of surgery or on the day prior to surgery
- Go directly to an “Admission on day of surgery area” within the operating theatre dept, before transferring to a booked bed on a generic ward for their recovery

Unscheduled care is unplanned at the point at which the patient presents in hospital, with the Emergency Complex providing the main point of access for most unscheduled care in order to ensure effective and prompt patient management. This facility will enable clinicians to identify both the presenting problem and any related social or medical issues/co-morbidities at the point of presentation or as soon as

possible thereafter and thus initiate appropriate and timely treatment and management of the patient. The EC will provide a multi-disciplinary approach to initial assessment/treatment further supporting the early commencement of multi-disciplinary care pathways.

Following assessment, which will include the review of a range of test results, those patients deemed to require inpatient care will be admitted to a ward of the appropriate speciality/acuity, whilst others will be discharged from this facility or transferred to more appropriate care as appropriate. It is anticipated that patients may be cared for within the EC for up to 24 hours in total from time of admission. (Please refer to the AAU COS for specific details)

This form of unscheduled care management results in the patient being put on a care pathway at an early point in their care; thus their recovery time and consequently length of stay is reduced.

Care provided on the ward includes assessment, treatment and acute rehabilitation sufficient to enable the patient to return home, be transferred to intermediate care or rehabilitation in the community within 8 hours of being declared medically fit for discharge. The discharge process is aided by the use of a central discharge lounge to accommodate patients waiting for transport. This also ensures that beds are released for booked admissions in a timely fashion.

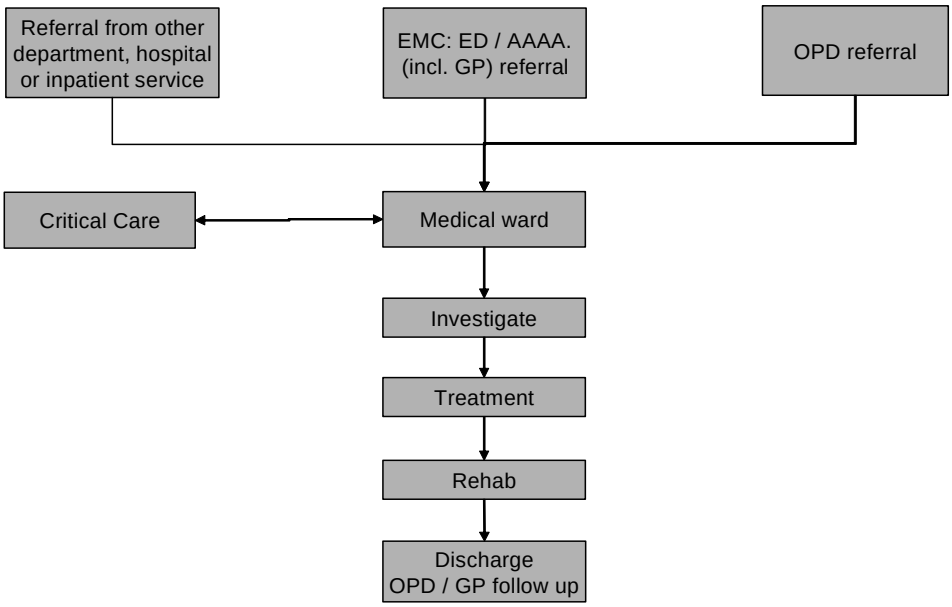
A multidisciplinary team of specialist healthcare professionals provides holistic care and this includes medical staff, nurses, allied health professionals (AHPs) pharmacists, healthcare assistants and clerical staff. Therapy staff will see patients on the ward at their bed space or in the interview room. Alternatively, they may use centrally located therapy facilities in the ward cluster support space.

The clinical service delivery model includes medicines management that allows professional pharmaceutical support to be provided directly to patients and members of the multidisciplinary team thereby improving this component of the overall care package from admission through to timely discharge with appropriate drugs.

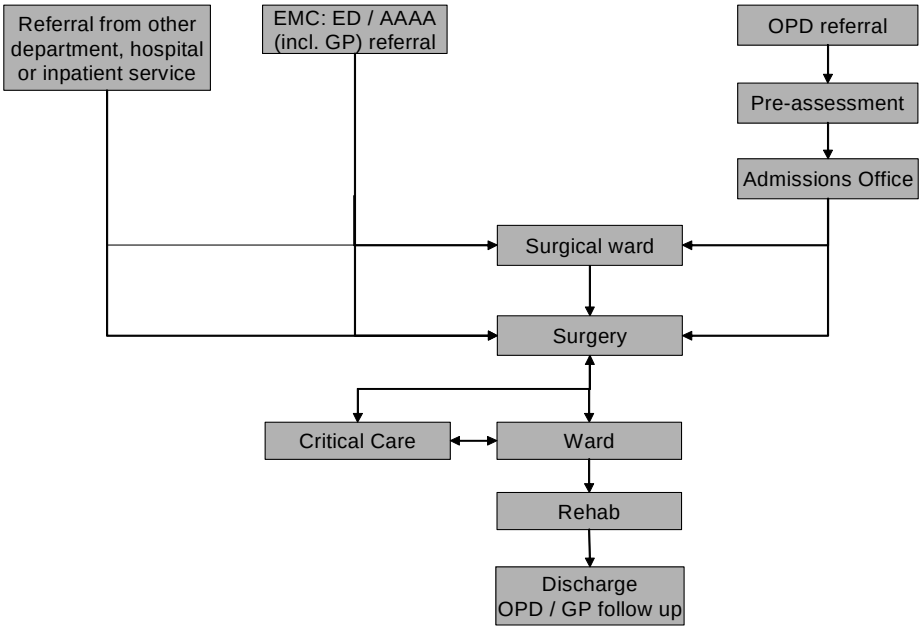
This generic service delivery model represents a standardised approach to the provision of inpatient facilities and care that is as flexible as possible. The overall aim is to provide patient-centred services whilst future proofing the structure and functionality of the hospital.

5.2 *High-level Patient / Process Flow & Service Delivery*

Medical / Elderly Generic Wards



Surgical Generic Wards



5.3 *Elective Admissions & Discharge Lounge*

The Discharge lounge will be situated on the ground floor accessible to both the ward tower and to the Emergency Complex and will support patients identified as appropriate to wait under nursing supervision for their transport to arrive.
The elective admissions reception will be in the main entrance Hall. Patients arriving for elective procedures will be booked in at the admissions desk and directed to their ward/admission area as appropriate.

As previously noted admission may be to a ward, operating theatre 'Admission on day of Surgery' area (AODOS area) or other facility.

The details of the discharge lounge are in the Discharge Lounge Clinical Output Specification.

6 Design Guidance

Please also see separate guidance document. As noted elsewhere, the generic ward component of the facility will comprise of 100% single rooms. This decision is based upon the best information available at this time and is designed to optimise current and future flexibility whilst addressing HAI issues, mixed-sex ward issues and core concerns around privacy, dignity and infection control.

6.1 *Design Requirements & Guidance*

Please also see separate guidance documentation. Some of the key issues that should be considered are that the design :

- Supports innovative models of healthcare delivery
- Creates an optimal healing environment and promotes the well being of those who are ill and their caregivers
- Is Customer/ patient friendly
- Enables efficient patient flows
- Enables efficient- staff flows
- Enables Clear Clinical pathways
- Allows for state of the art technology

The technological nature of hospital services may be an unpleasant experience for patients and their relatives. It is important, therefore, that when designing these facilities the patient experience is taken into account together with that of their relatives and carers. The emphasis should be on providing a comfortable, pleasant but safe environment for patients and staff, with particular emphasis on the wider therapeutic elements of the design and finishes.

It is also essential to consider the needs of staff and the impact that the working environment has on job satisfaction, recruitment and retention.

Addressing gender, cultural and religious diversity is also a consideration as are the needs of relatives, carers and visitors whose opinions must be sought throughout the design process and taken into consideration.

Additionally, consideration should be given to alleviating fear and anxiety, maximizing security and safety, reducing boredom and creating a healing environment with the need for artwork, designed furniture, fittings, cabinetry, etc also a consideration.

Imaginative use of floor and wall finishes, colour and lighting will help to produce a warm, friendly environment. However, all must conform to infection control and other guidance, be seamless, easy to clean resistant to damage.

6.2 *Environmental and Services Requirements*

These should correspond to the standards described in the relevant SHPNs, HTMs and other technical guidance and the technical output specification for this project. In addition, consideration must be given to protecting the privacy and dignity of patients. Sound attenuation measures to ensure speech privacy in consult / exam, treatment, scanning and other rooms where patients and clinicians have private discussions should be provided.

The design also needs to take account of the need to create a pleasant environment for the patients and staff by means of good design, locally controllable lighting and access to natural light and views.

Coved and welded seamless washable plastic flooring is preferred. This must be able to withstand 10,000ppm available chlorine. Walls must be washable, with plasticised panelling preferable and consideration should be given to the use of flooring that minimises the traumatic effects of falls. Walls should have as few protrusions as possible and there should be no carpets in any clinical area.

7 Accommodation Requirements

7.1 *Rooms & Spaces Required*

All of the required rooms/spaces are identified within the SofA with room details/specifications to be in line with the identified guidance.

7.2 *Variations*

There will be small variations between wards and shared ward support facilities that should be accommodated in the layout and design without significant alterations being made. For example, generic wards used for orthopaedics will have more overhead hoists than those used for cardiology and the requirements for the AHP/therapy area will vary depending on the adjacent wards. This is described in more detail below.

Shared Ward Support Cluster

The Shared wards support cluster (ie cores) have two components; a component that is generic to all ward clusters and a variable component which reflects the requirements of the wards it supports. For example the requirements for the AHP/therapy area will vary depending on the adjacent wards. Also, bulk fluid storage will be provided near surgical wards only.

Specifically, ward support facilities will be varied as follows (based on the PSC Exemplar ward tower of 8 floors x 4 wards and 1 floor of 2 wards):

Shared Ward Support Core
For Floor with 4 wards

	Qty	Unit Area m²	Total Area m²
Shared Ward Support Facilities			
Regen Kitchen	1	30.0	30.0

Allowance for Wash Up	1	12.0	12.0
Disposal Hold & Recycling Point	1	24.0	24.0
Workstations x 6	1	24.0	24.0
Medicines Management	1	12.0	12.0
Staff WC/wash	3	2.0	6.0
Staff locker room - F	1	24.0	24.0
Staff locker room - M	1	8.0	8.0
Staff shower	2	4.0	8.0
Accessible shower / WC	1	4.5	4.5
Cleaners Room	1	7.0	7.0
WC - Wheelchair Visitor	2	4.5	9.0
WC/WHB - Visitor	4	2.0	8.0
Multi Functional Cluster	1	80.0	80.0
Sub Total			**256.5**
Net subtotal for Shared Ward Support Facilities			**256.5**
Planning Allowance	5%	12.8	
Engineering Allowance	3%	8.1	
Circulation Allowance	25%	67.3	
Gross subtotal for Shared Ward Support Facilities		**344.7**	

Multi Functional Cluster A (1 in number)			
Seminar / Education Room	1	40.0	40.0
Therapy Room (ADL beverage assessment)	1	*12.0*	12.0
Bulk Fluids & Clean Dressings etc Store	1	*28.0*	28.0
			80.0
Multi Functional Cluster B (3 in number) (co-located with ortho, Elderly and Medical wards)			
Therapy Area and store	1	*80.0*	80.0
			80.0
Multi Functional Cluster C (2 in number)			
Seminar / Education Room	1	80.0	80.0
			80.0
Multi Functional Cluster D (2 in number)			
Seminar / Education Room	1	40.0	40.0
Bulk Fluids & Clean Dressings etc Store	1	*40.0*	40.0
			80.0

For Floor with 2 wards (1 in number)

	Qty	Unit Area m²	Total Area m²
Shared Ward Support Facilities			

Regen Kitchen	1	24.0	24.0
Allowance for Wash Up	1	10.0	10.0
Supplies Storage & Distribution Area			0.0
Disposal Hold & Recycling Point	1	16.0	16.0
Seminar / Education Room	1	40.0	40.0
Workstations x 6	1	24.0	24.0
Therapy / AHP / Multi Purpose Assess / Treat	1	40.0	40.0
Medicines Management	1	12.0	12.0
Staff WC/wash	3	2.0	6.0
Staff locker room - F	1	16.0	16.0
Staff locker room - M	1	6.0	6.0
Staff shower	2	4.0	8.0
Accessible shower / WC	1	4.5	4.5
Cleaners Room	1	7.0	7.0
WC - Wheelchair Visitor	1	4.5	4.5
WC/WHB - Visitor	2	2.0	4.0
Sub Total			**222.0**
Net subtotal for Shared Ward Support Facilities			**222.0**
Planning	5%		11.1
Sub-Total			233.1
Engineering	3%		7.0
Circulation	25%		58.3
Total			**298.4**

In other words each of the 4 ward floors will have the following (ie the component that is generic to all ward clusters): a regeneration kitchen, a central wash-up area, a disposal hold, Cleaner's room, Staff locker/changing rooms, toilet facilities, a Medicines management room and flexible administrative (workstation) space.

In addition each of the '4 - ward floors' will have a variable component consisting of a 80m2 multi-functional cluster. For ease of description these multi-functional clusters have been labelled A,B,C and D.

Cluster A

On one floor the 80m2 multi-functional cluster is composed of seminar space, a therapy area (beverage assessment 12m2) and bulk fluid storage.

Cluster B

On three floors, (next to orthopaedic wards, Care of Elderly and Medical Wards) this 80m2 multi-functional cluster will be composed of AHP Therapy space. (See further description below in Section 7.2)

Cluster C

On two floors the 80m2 will be composed of seminar room space – the design of the 80m2 on each floor should be flexible allowing this space to be to used as two 40m2 seminar rooms or, when required, to be opened up into a single 80m2 seminar room. (All seminar rooms throughout the building should be capable of supporting PC's, projector and telemedicine).

Cluster D

On Two floors the 80m2 multi-functional cluster will be composed of a 40m2 seminar space and a 40m2 bulk fluid store room.

The composition of the ward support cluster on the final floor, which has two wards, is given in the schedule above.

Description of the Therapy Areas

7.2.1 Orthopaedic Rehabilitation

Requires 80m^2 (net) therapy area to serve the whole of the orthopaedic floor (including orthopaedic rehabilitation ward):

Therapy area with 3 plinths that can be screened, steps/stairs, ceiling tracking, standing frame, adjustable table, 1-2 parallel bars, workstation and gait assessment area.

Therapy store for equipment e.g. hyrolators, gym balls and samples of helping aids.

7.2.2 Elderly Rehabilitation Inpatient Care Model

Requires 80m^2 (net) therapy area to serve whole of elderly care floor:

Therapy area with 3 plinths that can be screened, steps/stairs, ceiling tracking, standing frame, adjustable table, 1-2 parallel bars, workstation and gait assessment area.

Therapy store for equipment e.g. hyrolators, gym balls and samples of helping aids

7.2.3 Other Wards

A need was also identified to include a further 80m^2 (net) therapy area to serve medical wards. Therapy area with 3 plinths that can be screened, steps/stairs, ceiling tracking, standing frame, adjustable table, 1-2 parallel bars, workstation and gait assessment area. Therapy store for equipment e.g. hyrolators, gym balls and samples of helping aids

The inclusion of a beverage assessment area is required on one of the remaining floors of the ward tower i.e. one that has no other rehabilitation provision.

Note - one of the therapy areas in the ward stack should have an ADL kitchen – with gas and electric cookers in a quasi domestic setting. This will most often be used by patients from orthopaedic and medical wards and should be located in whichever of the therapy clusters on those floors gives best access to the largest number of patients.

8.3.4 ADL facilities for the New South Hospital

Activities of Daily Living assessments are an essential part of rehabilitation and discharge planning.

There are two ADL areas, one co-located with the stroke ward and one located within the Acute Assessment Area. Both areas will also be used by patients from medicine for the elderly wards, medical wards, surgical wards and orthopaedic wards and should therefore be located so that they can be accessed without disrupting the main department and so that inpatients' privacy is maintained whilst they are being transferred.

Both of these are briefed for bathrooms and WCs. Showers are not required as each bedroom will have a shower. Baths and WCs must be approachable from both sides to replicate patient's own homes and should be domestic style and accessible for hoists. An ADL kitchen is also required in each- described in the section above.

7.3 *Risk Management*

The overall design and layout of the ward should aim to reduce the risk of harm to patients and staff. Key elements of this risk reduction strategy should include, but not be restricted to:

- Ligature points being avoided wherever possible through the selection of fittings and materials that reduce risk
- Door handles must not have thumbscrews
- The clinician should be positioned closest to the exit door of the room when consulting with or treating a patient
- Wall mounted 'up and down' lighters should be used rather than angle-poise lamps for bed positions
- Sharp edges should be avoided
- Wall mounted items of equipment such as fire extinguishers should be recessed to prevent damage
- Wall / door protectors should be used where there is risk of damage from e.g. bed / trolley movement
- It should be possible for staff to lock-off the en-suite

7.4 *Disability Access*

The accommodation must conform to the requirements of the Disability Discrimination Act 2005. This includes wheelchair access into rooms, provision for those who have hearing or visual impairments and for obese patients, e.g. rooms will require turning circles for wheelchairs, induction loops, tactile surfaces for the visually impaired, and fittings suitable for heavy patients e.g. floor mounted sanitary ware

South Glasgow New Hospital – RDS Development Process - DRAFT

12th March 2010

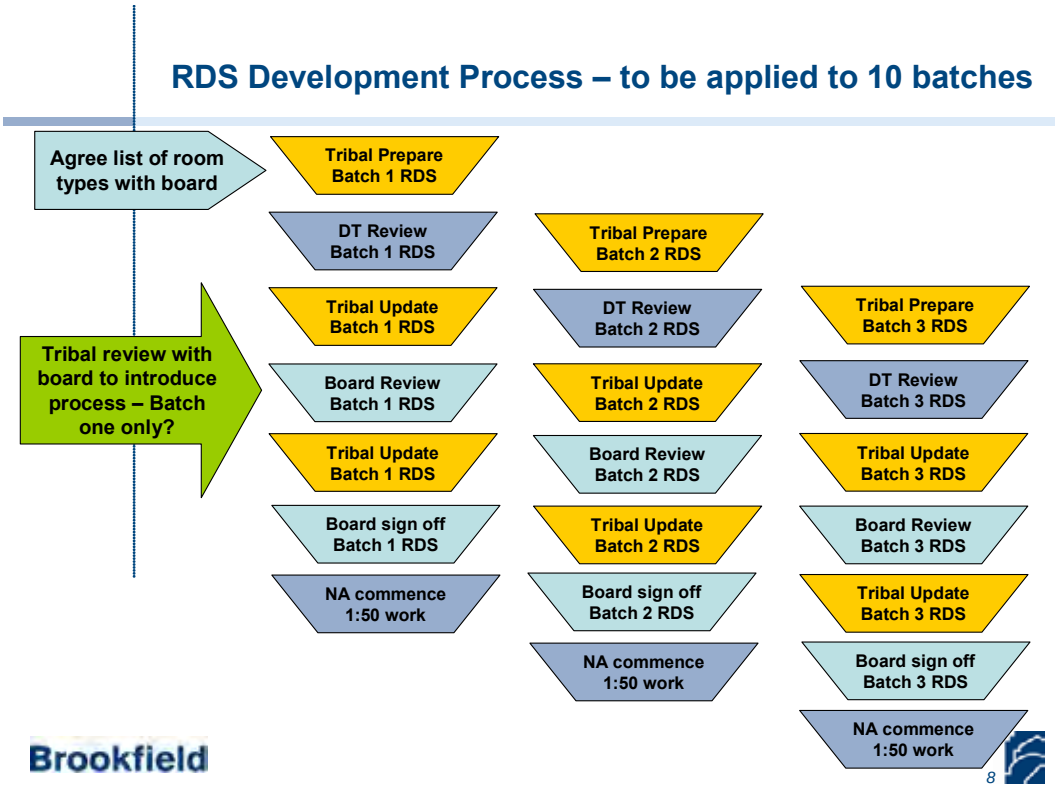
Base Information

- Contract Schedule of Accommodation (SoA) with Board mark up
- Submitted bid SoA with room identifiers
- ADB Room Data Sheet (RDS) database from Board used for equipment list development
- Nightingale Associates (NA) Room Standardisation and Equipment Assemblies proposals

RDS Development Actions to date

- Tribal have reviewed contract SoA and ADB database and identified in excess of 1300 room types linked to over 700 room codes. This review identified:
    - Inconsistent use of ADB codes discovered
    - Codes used for seemingly very different room types
    - Different codes used for apparently similar room types
    - Previous version of ADB used – several codes no longer exist in updated latest version which means necessary technical compliance may be compromised
- Tribal have reviewed standardisation approach with NA and created assemblies in ADB to support development of RDS that fit with design development at 1:50 scale
- Tribal have used information from Clinical Output Specifications and SoA and Nightingales draft standardisation proposals to allocate ADB codes from current most up to date version of ADB
- This has resulted in approximately 490 room types / ADB codes being identified that appear to cover all rooms needed across both hospitals
- Tribal have created room data sheets for an initial batch of rooms (ward areas and support) and these have been reviewed with the Board and confirmed as an acceptable start point for RDS development.
- Tribal have identified and reviewed with NA batching of rooms for RDS development. Proposed batches provided as appendix one.
- Proposed process and timescale drafted by Tribal for RDS development to feed into 1:50 design development

Proposed PRD Development Process



- We have currently identified all 10 batches – review of these batches may allow for further standardisation and allow batches to be reduced in number.
- Batches:
  - 1 – Adult's Inpatient and support
  - 2 - Children's Inpatient and support
  - 3 - Common Rooms
  - 4 - Common Rooms
  - 5 - Adult Rooms Types per Department
  - 6 - Adult Rooms Types per Department
  - 7 - Adult Rooms Types per Department
  - 8 - Children's Rooms Types per Department
  - 9 - Children's Rooms Types per Department
  - 10 - Children's Rooms Types per Department

Proposed RDS Development Timescale – completion dates (D/M) all 2010

Batch	1	2	3	4	5	6	7	8	9	10
Tribal Issue	15/2	15/2	15/3	15/3	29/3	6/4	12/4	27/4	4/5	10/5
DT Review	22/2	22/2	23/3	23/3	6/4	12/4	19/4	4/5	10/5	17/5
Issue to Board	11/3	11/3	29/3	29/3	12/4	19/4	27/4	10/5	17/5	24/5
Board Review	15-19/3	15-19/3	12/4-13/4	12/4-13/4	12/4-19/4	19/4-27/4	27/04-4/5	10/5-17/5	17/5-24/5	24/5-31/5
Tribal re issue to NA	26/3	26/3	19/4	19/4	27/4	4/5	10/5	24/5	28/5	4/6
NA Issue 1:50 RT drawings and updated RDS to Board	6/4 (1A) 13/4	23/4	7/5	7/5	14/5	21/5	28/5	04/06	11/06	18/06
Board Review/UGM 1	20/4 (1A) & May	25/05 (1C) & May	May	May	June	June	June	June or Aug	June or Aug	June or Aug
NA Issue (7xdays before UGM 2)	tbc	tbc	tbc	tbc	tbc	tbc	tbc	tbc	tbc	tbc
UGM 2	June	June	June	June	Aug	Aug	Aug	Sep	Sep	Sep
FBC sign off	July	July	July	July	Sept	Sept	Sept	Oct	Oct	Oct

Key dates:

1. 12/13-04-10, GI and FW to review the list of common rooms.
2. 20-04-10, 9:00 – 12:30, Round 3 of 1:200 meeting to be used as UGM 1 for review of Batch 1A rooms as well.
3. 25-05-10, 9:00 – 12:30, Round 3 of 1:200 meetings to be used for review of Batch 1C rooms as well.

Equipment Lists

- A full draft equipment list will not be available until all RDS are completed and loaded onto codebook in late June / early July, from which point NA will be managing 1:50 / RDS development process.
- However, sample equipment lists can be created for completed batches or by specified room lists as the project develops.
- This paper to be issued to members of medical planning group and to be updated to reflect discussions on 10th of March following that meeting.

Appendix One – Draft RDS Batches

ADB	List of Rooms	12/3/2010

Project:	SG01GI	South Glasgow v01 gi
Department:	001	BATCH 1

Code	Description	Area (m²)
B0305A	Single-bed room: HBN 04-01	19.00
B0308A	Single-bed room: isolation: HBN 04-01	19.00
B1602B	Single bedroom, isolation: Critical care	26.00
B2417B	Recovery bay: post anaesthetic, 1 place	13.50
	Bed space	
C0235B	Consulting/examination room: single-sided couch access - HBN 00-03	12.00
C0237B	Consulting/examination room: double-sided couch access - HBN 00-03	16.00
C0302B	Assessment room: A&E	16.00
D1401A	Sitting room with play area: relatives	12.00
G0103B	Parking bay: resuscitation trolley	1.00
G0118B	Linen bay: exchange trolley	4.00
G0129A	Parking bay: wheelchair	1.50
G0180B	Parking bay - HBN 00-03	2.00
G0405B	Exit/parking bay: theatre, 1 bed/trolley	12.00
G0406A	Exit/parking bay: shared between 2 theatres, 2 beds	21.50
G0507A	Lobby: ventilated (isolation suite)	4.00
	Entrance lobby for barrier nursing	
G0510A	Lobby to isolation room - HBN 04-01	5.00
H0515B	Seminar, training room: 15 person	27.50
J0205B	Reception: 1staff	4.00
J0232B	Reception: 2 person - HBN 00-03	11.00
J1135B	Waiting area: 10 person including 3 wheelchair user	19.50
	Rehabilitation	
K0101CA	Switchgear cupboard	1.00
M0202B	Office nursing: 1 staff	9.00
	Location board, safe	
M0218A	Office: 1 staff	16.00
M0225A	Office: 6 staff	27.50
M0251B	Office: 1 person - HBN 00-03	8.00
M0252B	Office: 2 person - HBN 00-03	12.00
M0704A	Interview, counselling room: 5 person	9.00
	With desk	
M0724A	Interview room: 4 places (including 1 wheelchair place) - HBN 00-03	8.00
N0108A	Operating theatre: laminar flow	55.00
	No room layout	
N0216B	Scrub-up and gowning room: 3 places	11.00
N0305A	Anaesthetic room	19.00
	With patient trolley and ceiling hoist	
P0627B	Ward pantry - HBN 04-01	12.00
T0151B	Touchdown base - HBN 00-03	2.00
T0211B	Staff communication base: 2 places - HBN 00-03	11.00
T0535B	Clean utility room - HBN 00-03	16.00
T0538A	Clean utility room: without controlled drugs cupboard - HBN 00-03	8.00
V0534B	Staff changing room: 15 places	10.00
	Slimline lockers, coat rail, shoe rack	
V0725A	Changing room: semi-ambulant - HBN 00-02	2.00
V0922B	WC: independent wheelchair - HBN 00-02	4.50
V1010B	WC: ambulant - HBN 00-02	2.00
V1121B	WC: semi-ambulant - HBN 00-02	2.50
V1321B	Shower room: ambulant - HBN 00-02	2.50
V1323A	Shower room: semi-ambulant: standing use - HBN 00-02	5.00
V1635B	Shower room: assisted - HBN 00-02	8.00
V1645B	Shower room: en-suite: chamfered - HBN 00-02	4.50
W0205A	Store: emergency drugs	5.50
	Primary services	

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ADB	List of Rooms	12/3/2010

Project:	SG01GI	South Glasgow v01 gi
Department:	001	BATCH 1

Code	Description	Area (m²)
W1531A	Store: equipment	12.00
W1555B	Store: general and stationery	6.00
W1585B	Store: general	12.00
W1602A	Store: linen	3.50
X0145A	Treatment room: double-sided couch access - HBN 00-03	16.00
X0251A	Treatment cubicle: dialysis, 1 patient	10.50
	With bed	
X0252A	Isolation treatment room: dialysis, 1 patient	13.50
Y0412A	Dirty utility: urine test	8.00
	With pass-through hatch	
Y0420A	Dirty utility: serving 1 theatre or cath. lab.	12.00
Y0431B	Dirty utility room - HBN 00-03	8.00
Y0642B	Disposal hold: 1700 litres - HBN 00-03	8.00
Y1510B	Cleaners room - HBN 00-03	8.00

ADB	List of Rooms	12/3/2010

Project:	SG01GI	South Glasgow v01 gi
Department:	002	BATCH 2

Code	Description	Area (m²)
B1802C	Single bedroom: Children/young people, with relatives overnight stay	15.00
B1805C	Single bedroom, isolation: Children/young people, with relatives overnight stay	15.00
B2011C	Multi-bed room: Children/young peoples day care, 4 beds	66.00
C0225C	Consulting, examination, treatment room: all-round couch access. Door and half	16.00
C0304C	Assessment room: Paediatric, A&E	16.00
C1010B	Consulting, examination room: Ophthalmology	13.00
C1112B	Consulting, examination, fitting room: Orthotics	14.00
C1401B	Physical measurement bay	3.50
E0125B	Imaging room: conventional, general x-ray	30.00
	With mobile examination lamp	
	No room layout	
G0142B	Parking bay: mobile x-ray, ultrasound unit	5.00
G0510B	Lobby to isolation room - HBN 04-01	5.00
H0530C	Seminar, training, library room: 5 person	14.00
J0103C	Entrance draught lobby	6.00
J0130B	Entrance lobby: controlled access	0.00
J1201B	Waiting area: 10 person including 1 wheelchair user	16.50
J1251B	Waiting area: 5 places (including 1 wheelchair place)	9.00
J1306B	Waiting area: 10 person including 1 wheelchair user	16.50
M0254B	Office: 4 person - HBN 00-03	24.00
M0529B	Office: supervisor	12.50
M0712B	Interview, counselling, quiet room: 5 person	9.00
M0727B	Interview room: 7 places (including 1 wheelchair place) - HBN 00-03	12.00
M1011C	Office: 6 staff	36.00
M1012B	Office: 3 staff	18.00
N0106B	Operating theatre: general	55.00
	No room layout	
N0316C	Anaesthetic room: bed space	19.00
P0808B	Vending machine - HBN 00-03	3.00
Q0304C	Assessment, interview and treatment room	10.00
S0012B	Infant feeding room - HBN 00-03	6.00
T0526B	Preparation room	12.00
V0703B	Patient changing cubicle: ambulant person	2.00
V0704B	Patient changing cubicle: independent wheelchair accessible	4.00
V0717B	Patient changing cubicle: wheelchair accessible,	4.50
	2 door access	
V1221C	WC: assisted - HBN 00-02	7.50
V1406B	WC and handrinse: specimen; wheelchair accessible	4.50
	With pass-through hatch	
V1643C	Shower room: en-suite - HBN 00-02	5.00
V1736B	Bathroom: assisted - HBN 00-02	15.00
W1584C	Store: clinical equipment	16.00
W1594C	Store: linen	6.00
X0147B	Treatment room: all-round couch access - HBN 00-03	16.00
X0242C	Treatment room: A&E, multi-functional	16.00
Y0315C	Dirty utility: bedpan disposal	9.00
	Radiology	
Y0331C	Dirty utility room: bedpan processing - HBN 00-03	12.00
Y0510B	Utility: footwear washing	4.00
Y0646B	Disposal hold: 3000 litres - HBN 00-03	12.00

ADB	List of Rooms	12/3/2010

Project:	SG01GI	South Glasgow v01 gi
Department:	003	BATCH 3, 4

Code	Description	Area (m²)
C0514B	Examination room: audiometric test Sound field testing, multi-occupancy booth and control area	51.00
C0522B	Examination/physical therapy room - HBN 00-03	12.00
C0706B	Investigation room: resting electrocardiography (ECG) bed access All-round couch access	16.00
C0710B	Investigation room: stress echocardiography All-round couch access	16.50
C1013B	Consulting, examination room: Orthoptic	18.50
C1408B	Venepuncture room: 1 place	8.00
D0403B	Rest, dining room: 20 staff With emergency call lamp	25.00
D0421B	Rest, dining room: 40 staff No room layout	50.00
E0113B	Imaging room: Ultrasound, general With reporting workstation	16.00
E0601B	Scanner room: Computed Tomography (CT) Modified, Room layout in preparation	36.00
E0604B	Control room: serving CT room No room layout	16.00
E0815B	Scanner room: open Magnetic Resonance Imaging (MRI) No room layout	50.00
E0819B	Technical equipment room: serving open MRI No room layout	16.00
G0119B	Parking bay: 6 wheelchairs	4.00
G0128B	Parking bay: 3 accident trolleys, 3 wheelchairs	12.00
G0712B	Telephone booth: wheelchair accessible	2.00
G0805B	Shop space with store	23.00
H0104B	Conference/meeting room: 10 person	20.00
H0336B	Library, study room: 10 person	30.00
H0339B	Library, study room: 5 person	20.00
H0517B	Seminar, training room: 30 person	55.00
H1127B	Information centre: 5 person	15.00
H1313B	Group room: meeting: 16 places (including 1 wheelchair place) - HBN 00-03	32.00
H1335B	Group room: meeting: 7 places (including 1 wheelchair place) - HBN 00-03	16.00
J0212B	Reception: 3 staff	13.00
J0415B	Reception and records office: 4 staff	18.00
J0420B	Reception and office: 4 staff	27.00
J0609B	Reception, administration office and communication base: 2 staff No room layout	13.00
J0611B	Reception and office: 4 staff	20.00
J1126B	Waiting area: 50 person including 4 wheelchair user	81.00
J1152B	Waiting area: 20 places (including 2 wheelchair places) - HBN 00-03	33.00
J1311B	Waiting area: 3 person	4.50
J1410B	Waiting play area: 10 children	18.00
K0107B	UPS room/data computer hub room	9.00
K0109B	Battery, UPS room	9.00
K0901B	Machine room: technician equipment room No room layout	16.00
K1002B	Security room: CCTV control No room layout	16.00
L0508B	Blood bank: out-of-hours bay No room layout	5.00
L1305B	Near patient testing/status laboratory	8.50
L1612B	Body viewing/bier room	10.00
M0114B	Office records: 2 staff	14.00

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ADB	List of Rooms	12/3/2010

Project:	SG01GI	South Glasgow v01 gi
Department:	003	BATCH 3, 4

Code	Description	Area (m²)
M0228B	Office: 10 staff	43.50
M0326B	Office technical and data review	12.00
M0330B	Office/meeting room: 10 places (including 2 workstations) - HBN 00-03	16.00
M0530B	Office: station officer	11.00
	Ambulance stations	
M0604B	Office and rest: 1 staff, 5 person rest area	15.00
M0606B	Office and rest: 1 staff, 6 person rest area (voluntary workers)	14.00
M0724B	Interview room: 4 places (including 1 wheelchair place) - HBN 00-03	8.00
M1015B	Office: 5 staff	30.00
M1026B	Office: 2 staff	15.00
	Safe, cash point hatch	
M1707B	Duty room: 2 porters	5.00
P0625B	Pantry/refreshment area - HBN 00-03	8.00
P0627B	Ward pantry - HBN 04-01	12.00
P0802B	Refreshment area: snack bar, servery and preparation	23.00
P0811B	Drinking water dispenser - HBN 00-03	0.50
T0211B	Staff communication base: 2 places - HBN 00-03	11.00
V0546B	Staff changing room: 60 places	30.00
	Slimline lockers, coat rail, shoe rack	
V0626B	Locker bay: 4 small lockers	0.50
V0628B	Locker bay: staff/patients	2.00
V0653B	Locker bay: 12 small lockers - HBN 00-03	1.50
V1131B	Nappy changing room - HBN 00-02	5.00
V1631B	Shower room: independent wheelchair - HBN 00-02	7.00
W0254B	Store: satellite pharmacy	6.00
	Surgical procedure	
W0532B	Store: sterile supplies	9.00
W1210B	Store: exercise equipment, activity area	6.00
W1215B	Store: exercise equipment, therapy treatment cubicles	6.00
W1303B	Store: major incident equipment	6.00
W1313B	Store: ready to use medical gas cylinders	9.00
X0222B	Treatment cubicles: Physiotherapy, 10 patients	100.00
X0240B	Major treatment/minor surgery room	17.50
	With resuscitation trolley	
X0312B	Activity area: Physiotherapy, 5 patients	50.00
X0318B	Activity area/gymnasium: Physiotherapy, 15 patients	100.00
Z0809B	Preparation and store: Radiopharmaceuticals	20.00
	No room layout	

ADB	List of Rooms	12/3/2010

Project:	SG01GI	South Glasgow v01 gi
Department:	004	BATCH 5, 6, 7

Code	Description	Area (m²)
B0607A	Multi-bed room: Day care, 4 beds	40.00
B0616A	Multi-bed room: Cardiac day care, 4 beds	66.00
C0505A	Examination room: hearing assessment, visual testing, Neonatal	9.50
C0510A	Assessment room with visual acuity facility, child	12.50
C0701A	Investigation room: stress electrocardiography (ECG)	12.00
C0706A	Investigation room: resting electrocardiography (ECG) bed access	16.00
	All-round couch access	
C0709A	Investigation room: tilt electrocardiography (ECG)	16.00
C1011A	Consulting, examination bay: Ophthalmology	13.00
C1104A	Training room, office: Peritoneal Dialysis (PD)	16.50
C1402A	Physical measurement area: Renal	8.00
D0114A	Recreation room: 20 staff	44.50
D0455A	Rest, dining room with beverage, snack preparation bay: 30 staff	43.00
	With emergency call lamp	
D0815A	Playroom: 10 children	30.00
D1135A	Discharge lounge: patients, visitors	54.00
D1504A	On-call overnight stay room	13.00
E0141A	Imaging room: Mammography	15.00
	No room layout	
E0305A	Imaging room: remote fluoroscopy, barium	39.00
	No room layout	
E0311A	Imaging room: fluoroscopy, vascular, angiography	45.00
	No room layout	
E0527A	Processing, viewing room: serving 2 imaging rooms	21.00
	Computed Radiography unit (CR)	
	No room layout	
E0531A	Reporting room: 1 workstation	10.00
	PACS	
	No room layout	
E0536A	Imaging review room: 2 workstations	12.00
	No room layout	
E0538A	Imaging review room: 4 workstations	16.00
	No room layout	
E0608A	Control room: serving 2 CT rooms	24.00
	No room layout	
E0713A	Imaging room: Gamma Camera multi detector with stress facility	36.00
	Radionuclide	
E0714A	Imaging room: Gamma Camera multi detector SPECT	36.00
	Radionuclide	
E0802A	Technical equipment room: serving MRI close bore	20.00
F0308A	Servery serving central dining room	10.00
F0310A	Servery serving cafe	14.00
F0410A	Cafe area: 20 places	35.00
F0612A	Restaurant: 60 places	89.50
	With emergency call. Central dining room	
G0101A	Parking bay: mobile 2 x-ray units	5.00
G0114A	Parking bay: 2 patient trolleys, 8 wheelchairs	10.50
G0130A	Parking bay: 3 wheelchairs	2.00
G0132A	Parking bay: 1 patient trolley, 4 wheelchairs	5.00
G0143A	Parking bay: mobile x-ray, image intensifier, ultrasound unit	8.00
G0149A	Parking bay: equipment, general	5.00
G0180A	Parking bay - HBN 00-03	2.00
G0512A	Equipment service room lobby	6.00
	Maternity	

ADB	List of Rooms	12/3/2010

Project:	SG01GI	South Glasgow v01 gi
Department:	004	BATCH 5, 6, 7

Code	Description	Area (m²)
G0514A	Renal dialysis workshop lobby: equipment ready for use	6.00
	Satellite dialysis	
G0705A	Public telephone: single booth, accessible	2.00
G0710A	Telephone booth	1.50
G0712A	Telephone booth: wheelchair accessible	2.00
H0513A	Seminar, training room: 20 person	37.50
H0520A	Seminar room: 15 person	27.50
H1102A	Group support room: 20 person	40.00
	Multi-purpose use	
H1127A	Information centre: 5 person	15.00
J0102A	Entrance lobby	4.00
	Neonatal unit	
J0107A	Main entrance draught lobby	11.00
J0108A	Main entrance draught lobby	20.00
J0115A	Concourse/Foyer	40.00
J0206A	Reception: 2 staff	10.00
J0207A	Reception: 3 staff	14.50
	Including 2 case-notes trolleys	
J0232A	Reception: 2 person - HBN 00-03	11.00
J0413A	Reception and records office: 2 staff	11.00
J0420A	Reception and office: 4 staff	27.00
J0421A	Reception and office: 5 staff	33.00
J0422A	Reception and office: 6 staff	39.00
J1106A	Waiting area: 70 person including 5 wheelchair user	111.50
J1110A	Waiting area: 15 person including 2 wheelchair user	25.50
J1111A	Waiting area: 30 person including 3 wheelchair user	49.50
J1112A	Waiting area: 40 person including 4 wheelchair user	66.00
J1123A	Waiting area: 45 person including 4 wheelchair user	73.50
J1231A	Waiting bay: 1 patient trolley/bed place	4.50
J1232A	Waiting bay: 2 patients trolley/bed place	8.50
K0116A	UPS room	4.00
	Uninterrupted Power Supply	
K0608A	Plant room: water treatment serving 18 dialysis stations	15.00
L0320A	Media preparation laboratory	10.50
	No room layout	
L0605A	Specialised laboratory: cell culture	31.50
	No room layout	
L0701A	Laboratory: TEM sample preparation	10.50
	No room layout	
L0810A	Biopsy assessment area: Histopathology	10.00
	No room layout	
L1803A	Service room: equipment	21.00
M0115A	Office: 3 staff	18.00
	2 additional chairs	
M0221A	Office: 1 staff, open plan	6.00
M0222A	Office: 1 staff, open plan	5.50
M0409A	Printer/photocopier room	8.00
M0606A	Office and rest: 1 staff, 6 person rest area (voluntary workers)	14.00
M0713A	Interview/meeting room: 6 person	14.00
	Emergency call lamp	
M1033A	Office records and store: 1 staff	12.00
M1034A	Office records and store: 3 staff	34.50
M1713A	Duty room: 6 porters	10.00
P0606A	Pantry: cook-chill/hot trolleys, serving up to 24 person	12.00
	Emergency call lamp	

ADB	List of Rooms	12/3/2010

Project:	SG01GI	South Glasgow v01 gi
Department:	004	BATCH 5, 6, 7

Code	Description	Area (m²)
P0810A	Refreshment: drinking water dispenser	0.50
Q0122A	Activities of daily living: bedroom with living assessment Ceiling hoist	18.00
Q0123A	Activities of daily living: bath, shower, WC With hoists	13.00
Q0124A	Activities of daily living: bathroom With hoists	13.00
Q0507A	Light activity area: Occupational therapy, 10 patients LHRC	41.00
R1041A	Inspection, assembly, packing (IAP) room: 2 workstations Served 2 single washer/disinfectors No room layout	54.00
R1047A	Inspection, assembly, packing (IAP) room: 30 workstations with automated handling system Served 7 multi chamber washer/disinfectors, automated handling system No room layout	254.00
S0062A	Special room: distressed/disturbed patient	11.00
T0126A	Staff base and clean utility bay: 2 staff With controlled drugs cupboard. Recovery pre-discharge No room layout	11.00
T0211A	Staff communication base: 2 places - HBN 00-03	11.00
T0316A	Supplies base	10.00
T0516A	Clean utility: barium preparation	5.50
T0528A	Preparation room	20.00
V0218A	Staff changing room including boot change: 40 places Lockers, coat rail, racks No room layout	30.00
V0409A	Staff changing room with cubicle and handwash, 10 places Slimline lockers, shoe lockers, coat rail	14.00
V0410A	Staff changing room with cubicle and handwash, 20 places Slimline lockers, shoe lockers, coat rail	18.00
V0411A	Staff changing room with cubicle and handwash, 30 places Slimline lockers, shoe lockers, coat rail	20.00
V0417A	Staff changing room with handwash, 10 places Lockers	11.50
V0510A	Staff changing room: 5 places	5.00
V0527A	Staff changing room: 10 places Slimline lockers, coat rail	8.00
V0532A	Staff changing room: 10 places Slimline lockers, coat rail, shoe rack	8.00
V0536A	Staff changing room: 20 places Slimline lockers, coat rail, shoe rack	11.50
V0546A	Staff changing room: 60 places Slimline lockers, coat rail, shoe rack	30.00
V0554A	Staff communal changing room: 20 lockers - HBN 00-02	20.00
V0702A	Patient changing room: wheelchair accessible, 1 person 2 door access	6.00
V0723A	Patient changing room: 15 places Slimline lockers, coat rail	15.00
V0922A	WC: independent wheelchair - HBN 00-02	4.50
V0923A	WC: independent wheelchair/semi-ambulant - HBN 00-02	5.50
V1010A	WC: ambulant - HBN 00-02	2.00
V1321A	Shower room: ambulant - HBN 00-02	2.50
V1638A	Shower room: trolley access - HBN 00-02	13.00
V1727A	Bathroom with bidet: semi-ambulant - HBN 00-02	7.50

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ADB	List of Rooms	12/3/2010

Project:	SG01GI	South Glasgow v01 gi
Department:	004	BATCH 5, 6, 7

Code	Description	Area (m²)
W0108A	Store: equipment, local to theatre	1.00
W0113A	Store: clinical equipment	39.00
W0115A	Store: bulk supplies	80.00
W0116A	Store: bulk supplies	100.00
W0118A	Store: Clean flexible endoscopes	6.00
W0120A	Store: catheters and sterile packs	12.00
W0121A	Store: cathetersand sterile packs	6.00
W0127A	Store: perfusion equipment, supplies	24.00
W0214A	Goods reception and unpacking area	18.00
	Pharmacy support services, Purchase & distribution	
W0220A	Store: general	100.50
	Pharmacy support services, Purchase and distribution	
W0235A	Store: finished products, sterile	88.50
	Pharmacy support services	
W0247A	Store: unlicensed drugs	9.00
W0534A	Store: sterile supplies	15.00
W0650A	Blood bank refrigerator bay	3.00
W0704A	Store: general and linen	3.00
W1123A	Store: bulk supplies, medical and surgical	18.00
W1127A	Store: equipment and renal consumables	15.00
W1132A	Store: furniture, equipment and disposables	36.00
W1212A	Store: materials and equipment	9.00
	Occupational therapy	
W1236A	Store: orthotics supply and fitting	25.00
W1310A	Store: splint, crutch	2.00
W1321A	Store: equipment and supplies	36.00
W1424A	Store: equipment	18.00
W1428A	Store: linen and clothing back-up	9.00
W1453A	Store: clinical equipment	48.00
W1510A	Store: stationery and document	11.00
W1514A	Store: plaster equipment	6.00
W1519A	Store: ambulance equipment	6.00
W1587A	Store: general	6.00
W1591A	Store: linen	3.00
X0102A	Treatment room: Physiotherapy UVL, 1 patient	12.00
X0113A	Treatment room: Physiotherapy, 1 patient	12.00
X0210A	Treatment room: chiropody/podiatry, 1 patient	15.00
X0215A	Treatment room: Ophthalmology, laser	15.50
X0219A	Treatment room: Urodynamic	22.50
X0221A	Treatment room: Endoscopy	22.00
X0224A	Preparation and splint fitting room: 1 patient	19.00
X0238A	Resuscitation room: 5 places	143.00
X0244A	Treatment room: A&E, head and neck	16.00
X0245A	Treatment room: A&E, gynaecology/genitourinary colposcopy	16.00
X0250A	Treatment cubicle: dialysis, 1 patient	10.00
	With reclining chair	
X0251A	Treatment cubicle: dialysis, 1 patient	10.50
	With bed	
X0255A	Treatment room: Continuous ambulatory peritoneal dialysis, 1 patient	16.50
X0313A	Activity area: Physiotherapy, 10 patients	80.00
X0319A	Activity area/gymnasium: Physiotherapy, 20 patients	120.00
X1012A	Control area: serving catheter laboratory	16.00
	No room layout	

ADB	List of Rooms	12/3/2010

Project:	SG01GI	South Glasgow v01 gi
Department:	004	BATCH 5, 6, 7

Code	Description	Area (m²)
X1020A	Minor cardiac procedures room With resuscitation trolley Room layout in preparation	28.00
X1026A	Control room: serving neuroangiography No room layout	16.00
X1805A	Ante-room preparation and simulator Radiotherapy No room layout	16.50
X1807A	Control room serving CT simulator room No room layout	20.00
Y0302A	Dirty utility: bedpan disposal, urine test With 1 sani chair	12.00
Y0311A	Dirty utility: bedpan disposal, urine test With pass-through hatch. With suction bottle washer/disinfector, A&E	12.00
Y0405A	Dirty utility	6.00
Y0411A	Dirty utility: urine test With pass-through hatch	12.00
Y0418A	Cleansing, disinfection and store: endoscope, suction bottle, autoclave	19.00

ADB	List of Rooms	12/3/2010

Project: SG01GI South Glasgow v01 gi
Department: 005 BATCH 8, 9, 10

Code	Description	Area (m²)
B1811C	Single bedroom: Children/young people day care	14.50
B2406C	Recovery room: ECT, 6 trolleys	33.50
B2409C	Recovery room: post-anaesthetic, 4 places	38.50
C0107C	Consulting, interview room: Mental Illness	10.50
C0222C	Consulting, examination: with echocardiograph	16.50
	All-round couch access	
C0230C	Consulting/examination room: multidisciplinary	20.00
C0513C	Examination room: vestibular test	17.00
C0704C	Investigation room: resting electrocardiography (ECG)	10.00
C0711C	Investigation room: echocardiography	16.50
	All-round couch access	
C0904C	Consulting, treatment room: Dental	18.00
	With dental tube X-ray Dental surgery	
C1025C	Photography room: fluorescine angiography	23.50
	Ophthalmic	
C1401C	Physical measurement bay	3.50
D0201C	Rest room with beverage, snack preparation bay: 10 staff	18.00
	With 10 small lockers	
D0205C	Rest room with beverage, snack preparation bay: 5 staff	11.00
D0206C	Rest room with beverage, snack preparation bay: 10 staff	18.00
D0407C	Rest, dining room: 35 staff	46.00
	With emergency call lamp	
D0607C	Dining room: 15 patients	20.00
D0612C	Dining room: 20 patients	27.00
	Older people	
D0815C	Playroom: 10 children	30.00
D1116C	Lounge with beverage area: 10 patients	20.00
	Vending machines	
D1133C	Discharge lounge: 8 places	20.00
	No room layout	
D1310C	Relatives overnight stay - HBN 00-03	12.00
D1402C	Sitting room: 15 visitors	20.00
D1405C	Sitting room: 5 relatives	10.00
E0120C	Imaging room: Ultrasound, interventional	27.00
E0136C	Image control/reporting room	7.00
E0151C	Imaging room: Bone Mineral Densitometry (BMD)	18.00
E0206C	Darkroom: processing, viewing area, 2 processors	12.00
	Bench top	
	No room layout	
E0312C	Control room: serving fluoroscopy	16.00
	No room layout	
E0501C	Imaging reporting room: 2 workstations	16.00
	No room layout	
E0523C	Daylight processing, viewing area	5.00
	Small format film	
E0529C	Processing, viewing room: serving 3/4 imaging rooms	40.00
	Computed Radiography unit (CR)	
	No room layout	
E0534C	Reporting room: 4 workstations	16.00
	PACS	
	No room layout	
E0702C	Waiting 'hot' room: post-injection, 7 patients	25.00
	Radionuclide	
E0811C	Control room: serving 2 MRI rooms	24.00
	No room layout	

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ADB	List of Rooms	12/3/2010

Project:	SG01GI	South Glasgow v01 gi
Department:	005	BATCH 8, 9, 10

Code	Description	Area (m²)
E0817C	Control room: serving open MRI	16.00
	Room layout in preparation	
G0104C	Parking bay: resuscitation trolley and cylinder trolley	2.00
G0108C	Parking bay: shopping, prams, pushchairs	6.00
G0125C	Lead aprons bay	0.50
G0133C	Parking bay: 2 patient trolleys, 4 wheelchairs	5.00
G0139C	Parking bay: ultrasound unit	1.00
G0826C	Dispenser bay: car park ticket	10.00
G0905C	Ambulance parking bay	0.00
H0514C	Seminar, training room: 10 person	20.00
H0516C	Seminar, training room: 25 person	45.50
H1130C	Information centre with beverage bay: 5 person	18.00
J0130C	Entrance lobby: controlled access	0.00
J0135C	Foyer: visitors	0.00
J0152C	Main entrance foyer	0.00
J0221C	Enquiry/information desk: 1 staff	4.00
J0419C	Reception/staff base: 4 staff including case-notes trolleys	17.50
	Maternity	
J0610C	Reception, administration office and communication base: 4 staff	24.00
J1106C	Waiting area: 70 person including 5 wheelchair user	111.50
J1206C	Waiting area: 3 person including 1 wheelchair user	6.00
J1224C	Waiting, transfer, parking area: MRI trolley, 2 MRI wheelchairs	5.00
J1233C	Waiting bay: 3 patients trolley/bed place	13.00
J1304C	Waiting room: relatives, visitors, 5 person	11.00
J1403C	Waiting play area: 5 children	13.00
J1410C	Waiting play area: 10 children	18.00
J1415C	Creche facilities	24.00
J1422C	Waiting play area: 5 young people	13.00
K0101AC	Switchgear cupboard	2.00
K0101C	Switchgear room	4.00
K0303C	Maintenance: workshop	11.00
	Radiology	
K0336C	Workshop: prosthetics repairs, adjustment	24.00
	Orthotics	
K0378C	Workshop: renal dialysis equipment	12.00
	Wet, dry area	
	Modified room layout in preparation	
K0906C	Service room: generator and image computer equipment	16.00
	Angiography	
	No room layout	
L0315C	Laboratory: primary analysis: 3 workstations - HBN 12-01A	16.00
L1205C	Specialised laboratory: Dental processing	13.00
	With daylight processor	
L1308C	Near patient testing room - HBN 00-03	8.00
L1602C	Medical observation area, 6 - 8 person	8.00
	Mortuary	
L1806C	Workshop: hearing aid repair	8.00
M0306C	Office: medical reporting, 1 staff	10.50
	Surgeon	
M0307C	Office: medical reporting, 2 staff	13.50
M0410C	Photocoping/printing room	6.00
M0709C	Interview/counselling/advisory room: 4 person	9.00
	2 door access	
M1017C	Office and reception: 2 staff	16.50
	With observation panel	

ADB	List of Rooms	12/3/2010

Project:	SG01GI	South Glasgow v01 gi
Department:	005	BATCH 8, 9, 10

Code	Description	Area (m²)
N0111C	Operating theatre with ultra clean ventilation canopy (UCV)	63.00
	Cardiac/Cardiothoracic	
	Room layout in preparation	
P0703C	Beverage, snack preparation bay	6.00
P1005C	Store: human milk bank and feeds preparation	9.00
Q0114C	Activities of daily living: kitchen	20.00
	With staff emergency call. Mental Illness	
Q0120C	Activities of daily living: kitchen	22.00
Q0504C	Light activity area: Occupational therapy, 10 patients	70.00
	Rehabilitation	
Q0508C	General activities area: Occupational therapy/recreational	15.00
	With staff emergency call	
Q0519C	Hydrotherapy pool hall	92.50
Q0521C	Hydrotherapy: laundry, utility room	10.00
S0029C	Sittingand body viewing room with beverage bay: 8 person	16.00
T0202C	Staff communication base, enclosed: 2 staff	11.00
T0203C	Staff communication base, enclosed: 3 staff	15.00
T0513C	Clean utility with blood bank	17.00
T0540C	Medicine store/preparation room - HBN 00-03	8.00
V0218C	Staff changing room including boot change: 40 places	30.00
	Lockers, coat rail, racks	
	No room layout	
V0416C	Staff changing room with handwash, 5 places	8.50
	2 door access. Lockers	
V0419C	Staff changing room with handwash, 20 places	18.00
	Lockers, coat rail	
V0515C	Staff changing room: 50 places	25.00
V0517C	Staff changing room: 30 places	16.00
V0530C	Staff changing room: 5 places	5.50
	Slimline lockers, coat rail, shoe rack	
V0706C	Patient changing cubicles: 6 places	11.00
	1 cubicle ambulant, 1 cubicle wheelchair accessible, 6 lockers	
V0716C	Patient changing cubicle: ambulant person	2.50
	2 door access	
V0726C	Changing room: independent wheelchair - HBN 00-02	4.50
V0922C	WC: independent wheelchair - HBN 00-02	4.50
V1115C	Nappy change room with WC, hand rinse and wash, single-sided table access	9.00
	Child/adult wheelchair accessible	
V1715C	Bath, WC and wash: en-suite, wheelchair accessible	7.00
	Domestic type, with unbreakable mirror	
V1726C	Bathroom: semi-ambulant - HBN 00-02	6.00
V1917C	Shower, WC andwash: en-suite, wheelchair accessible, radiation protective	8.00
	No room layout	
W0118C	Store: Clean flexible endoscopes	6.00
W0122C	Store: catheters and sterile packs	9.00
W0128C	Store: bulk supplies	20.00
	No room layout	
W0129C	Store: bulk supplies	30.00
	No room layout	
W0608C	Store: sealed radioactive source	6.00
	Medical Physics	
	No room layout	
W0613C	Store: study casts/records - HBN 12-01B	22.00
W0655C	External store: gas cylinders	0.00
W1150C	Store: bulk fluid	0.00

ADB	List of Rooms	12/3/2010

Project:	SG01GI	South Glasgow v01 gi
Department:	005	BATCH 8, 9, 10

Code	Description	Area (m²)
W1227C	Store: equipment, hydrotherapy pool and cleaning	7.00
	Modified room layout in preparation	
W1408C	Store: clothing back-up	6.00
W1429C	Store: furniture	20.00
W1461C	Store: patients clothing	4.00
W1507C	Store: stationery	3.00
W1516C	Store: clinical supplies	6.00
W1556C	Store: general and stationery	9.00
X0237C	Resuscitation room: 4 places	116.00
X0266C	Plaster room - HBN 00-03	16.00
X0705C	Observation and recording room: child assessment and therapy	11.00
	Assessment room	
X1011C	Laboratory: catheter; biplane	50.00
	Room layout in preparation	
X1501C	Chemotherapy treatment room: 1 patient	12.00
X2051C	Radiotherapy treatment room: unsealed radioactive source	28.00
	(Iodine bedroom and lobby).	
	No room layout	
Y0410C	Dirty utility: serving maternity theatre	10.00
Y0421C	Dirty utility: serving 2 theatres	14.00
Y0507C	Utility/laundry room	8.00
Z0605C	Laboratory workshop: Quality control	10.00
	Support services	

EMMA WHITE NIGHTINGALE ASSOCIATES	ADB Room Data Sheets GENERAL CORRESPONDEN…	01/06/2010 NA-GC-000179
EMMA WHITE NIGHTINGALE ASSOCIATES	Fwd: ADB Room Data Sheets GENERAL CORRESPONDEN…	01/06/2010 NA-GC-000180

NHS Greater Glasgow and Clyde

NIGHTINGALE associates

MAIL TYPE	MAIL NUMBER	REFERENCE NUMBER
General Correspondence	NA-GC-000179	NA-GC-000179

ADB Room Data Sheets

From Ms EMMA WHITE - NIGHTINGALE ASSOCIATES

To (18)

Mr Manny Ajuwon - Brookfield Construction (UK) Ltd

Mr David Bower - Brookfield Construction (UK) Ltd

Glasgow DocControl - Brookfield Construction (UK) Ltd

Mr Darren Smith - Brookfield Construction (UK) Ltd

Ms Gill Kirkness - Doig+Smith LLP

Mr Bill McGaugie - Doig+Smith LLP

Ms Emma Corry - Gillespies Landscape Architect

Mr Alastair Leighton - Gillespies Landscape Architect

Mr James Miller - Ironside Farrar

Ms Rebecca Jones - Mercury Engineering (Ireland)

Mr Ed McIntyre - Mercury Engineering (Ireland)

Mr Paul Britton - Tribal

Mr Craig Dixon - Tribal

Mr Scott McCallum - Tribal

Mr Billy Adams - WSP Buildings

Mr Pete Dunbar - WSP Buildings

Mr John Young - WSP Buildings

Mr Zisman NSGH - Zisman Bowyer and Partners

Cc (7)

Mr Matthew Palavidis - Acoustic Logic

Mr Grant Wallace - Brookfield Construction (UK) Ltd

Mr Tom Allan - Doig+Smith LLP

Mr David McLeish - Doig+Smith LLP

Ms Nyree Bennett - Mercury Engineering (Ireland)

Mr Neil Murphy - NIGHTINGALE ASSOCIATES [redacted]

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Mr George Iliopoulos - Tribal

Sent Tuesday, 1 June 2010 6:39:58 PM BST (GMT +01:00)

Status N/A

FILE ATTACHMENTS (1)

File Name
01-06-10 NSGH Tribal ADB RDS_all rooms.pdf

ATTRIBUTES

Attribute 1 Stage 2 - Adult New Hospitals Full Business Case (FBC), Stage 2 - Children's New Hospital Full Business case (FBC)

Attribute 2 031. Healthcare Planning, 095. 1:50 Design NSGH User Group Review, 500. Room Data Sheets (RDS)

MESSAGE

All,

Please find attached a copy of the full set of ADB Room Data Sheets produced by Tribal - this represents a 'merged' set of the RDS produced and issued by Tribal in their previously advised batch production. These have been reviewed by ourselves and ZBP prior to issue to the Board for agreement on 'technical readiness'. As previously reported in the DTM's, the Board were not willing to sign-off any RDS prior to the 1:50 Room Type Loading. What they have done is to review the ADB Briefing Codes, in combination with our Project Standardisation and Equipment Union Schedules, and agreed that they represent the equipment briefing they expect, i.e. that they are 'technically ready' and therefore have released the RDS in order to allow us to produce the 1:50 drawings in the agreed programme. During the 1:50 UGM we may discover that some of these Room Types are not required, that the users require a variant of our proposed Room Types or that our proposed Room Type is incorrect. The aim is to achieve a sign-off of all Room Type RDS and 1:50 Drawings, along with agreement of our attribution of Room Types throughout the Project Database at FBC. This will then provide us with a manageable benchmark for equipment when we move to the next stage of the project.

All other aspects of the RDS, in particular the M&E and Acoustic requirements, will be subject to separate Technical Review Meetings which have yet to be arranged with the Board. George has provided a sample excel spreadsheet from the ADB database which contains all the current M&E detailed information. It is proposed that this spreadsheet will be reviewed and agreed with the Board during the time period we are involved in the 1:50 UGMs, so that the approved environmental data can be re-imported back into the database and included for formal RDS sign-off at FBC. Templates will then be created in Codebook and the data will be copied to the assumed locations for each Room Type in the building to allow us to fully load the equipment and to produce RDS for each room, including all corridors, lobbies and the like not currently included.

Please note that the Aseptic Suite RDS still require further detail to be added by the DT (these are the rooms which appear at the front of the document and contain a number of blank pages).

regards,

Emma

ADB	List of Rooms	1/6/2010

Project: SG01 South Glasgow v01 (draft)

Filter:

Code	Description	Area (m²)	Date
008	Final check	19.47	01-Jun-2010
010	Office	19.58	01-Jun-2010
011	CIVAS; Clean room	20.44	01-Jun-2010
012	TPN Store	39.83	01-Jun-2010
013	Corridor	20.09	01-Jun-2010
013A	Corridor	28.64	01-Jun-2010
014	TPN Clean room	19.97	01-Jun-2010
015	Micro lab	9.96	01-Jun-2010
032	Store	2.77	01-Jun-2010
032A	Store	5.51	01-Jun-2010
10271	Chemo Dispatch	29.93	01-Jun-2010
10279	Preparation; aseptic	13.55	01-Jun-2010
10281	Assembly	17.59	01-Jun-2010
10282	Chemo clean room	33.88	01-Jun-2010
10283	Chemo Store	24.39	01-Jun-2010
10371	TPN Dispatch	33.26	01-Jun-2010
10372	PTS (Pneumatic Tube Point)	0.37	01-Jun-2010
10380	Preparation; aseptic	13.54	01-Jun-2010
B0305A	Single-bed room: HBN 04-01	19.00	01-Jun-2010
B0308A	Single-bed room: isolation: HBN 04-01	19.00	01-Jun-2010
B0607A	Multi-bed room: Day care, 4 beds	40.00	01-Jun-2010
B0607A1	Clinical Skills Lab	15.00	01-Jun-2010
B0616A	Multi-bed room: Cardiac day care, 4 beds	66.00	01-Jun-2010
B1602B	Single bedroom, isolation: Critical care	26.00	01-Jun-2010
B1802C	Single bedroom: Children/young people, with relatives overnight stay	15.00	01-Jun-2010
B1805C	Single bedroom, isolation: Children/young people, with relatives overnight stay	15.00	01-Jun-2010
B1811C	Single bedroom: Children/young people day care	14.50	01-Jun-2010
B2011C	Multi-bed room: Children/young peoples day care, 4 beds	66.00	01-Jun-2010
B2406C	Recovery room: ECT, 6 trolleys	33.50	01-Jun-2010
B2409C	Recovery room: post-anaesthetic, 4 places	38.50	01-Jun-2010
B2417B	Recovery bay: post anaesthetic, 1 place Bed space	13.50	01-Jun-2010
C0107C	Consulting, interview room: Mental Illness	10.50	01-Jun-2010
C0201A1	Lung Function Lab	40.00	01-Jun-2010
C0222C	Consulting, examination: with echocardiograph All-round couch access	16.50	01-Jun-2010
C0230C	Consulting/examination room: multidisciplinary	20.00	01-Jun-2010
C0235B	Consulting/examination room: single-sided couch access - HBN 00-03	12.00	01-Jun-2010
C0237B	Consulting/examination room: double-sided couch access - HBN 00-03	16.00	01-Jun-2010
C0302B	Assessment room: A&E	16.00	01-Jun-2010
C0304C	Assessment room: Paediatric, A&E	16.00	01-Jun-2010
C0505A	Examination room: hearing assessment, visual testing, Neonatal	9.50	01-Jun-2010
C0510A	Assessment room with visual acuity facility, child	12.50	01-Jun-2010
C0513C	Examination room: vestibular test	17.00	01-Jun-2010
C0514B	Examination room: audiometric test Sound field testing, multi-occupancy booth and control area	51.00	01-Jun-2010

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ADB	List of Rooms	1/6/2010

Project: SG01 South Glasgow v01 (draft)

Filter:

Code	Description	Area (m²)	Date
C0522B	Examination/physical therapy room - HBN 00-03	12.00	01-Jun-2010
C0701A	Investigation room: stress electrocardiography (ECG)	12.00	01-Jun-2010
C0704C	Investigation room: resting electrocardiography (ECG)	10.00	01-Jun-2010
C0706A	Investigation room: resting electrocardiography (ECG) bed access All-round couch access	16.00	01-Jun-2010
C0706B	Investigation room: resting electrocardiography (ECG) bed access All-round couch access	16.00	01-Jun-2010
C0709A	Investigation room: tilt electrocardiography (ECG)	16.00	01-Jun-2010
C0710B	Investigation room: stress echocardiography All-round couch access	16.50	01-Jun-2010
C0711C	Investigation room: echocardiography All-round couch access	16.50	01-Jun-2010
C0726A	Reporting room: echocardiography, 2 places	12.00	01-Jun-2010
C0904C	Consulting, treatment room: Dental With dental tube X-ray Dental surgery	18.00	01-Jun-2010
C1010B	Consulting, examination room: Ophthalmology	13.00	01-Jun-2010
C1011A	Consulting, examination bay: Ophthalmology	13.00	01-Jun-2010
C1013B	Consulting, examination room: Orthoptic	18.50	01-Jun-2010
C1025A	Photography Studio: Adult	25.20	01-Jun-2010
C1025C	Photography room: fluorescine angiography Ophthalmic	23.50	01-Jun-2010
C1025C1	Photography Studio: Paeds	25.20	01-Jun-2010
C1104A	Training room for Peritoneal Dialysis (PD)	16.50	01-Jun-2010
C1112B	Consulting, examination, fitting room: Orthotics	14.00	01-Jun-2010
C1401B	Physical measurement bay	3.50	01-Jun-2010
C1401C	Physical measurement bay	3.50	01-Jun-2010
C1402A	Physical measurement area: Renal	8.00	01-Jun-2010
C1408B	Venepuncture room: 1 place	8.00	01-Jun-2010
CH1	Change 1	5.85	01-Jun-2010
CH2	Change 2	6.20	01-Jun-2010
CH3	Change 3	6.53	01-Jun-2010
D0114A	FM & Staff Facilities	44.50	01-Jun-2010
D0201C	Rest room with beverage, snack preparation bay: 10 staff With 10 small lockers	18.00	01-Jun-2010
D0205C	Rest room with beverage, snack preparation bay: 5 staff	11.00	01-Jun-2010
D0206C	Rest room with beverage, snack preparation bay: 10 staff	18.00	01-Jun-2010
D0403B	Rest, dining room: 20 staff With emergency call lamp	25.00	01-Jun-2010
D0403B1	Socialisation Space	25.00	01-Jun-2010
D0407C	Rest, dining room: 35 staff With emergency call lamp	46.00	01-Jun-2010
D0421B	Rest, dining room: 40 staff No room layout	50.00	01-Jun-2010
D0455A	Rest & dining room with beverage & snack preparation bay: 40 staff	115.00	01-Jun-2010
D0607C	Dining room (15 patients)	20.00	01-Jun-2010
D0612C	Dining room & Playroom (10 - 15 patients)	27.00	01-Jun-2010
D0815A	Children Play area	30.00	01-Jun-2010
D0815C	Playroom: 10 children	30.00	01-Jun-2010
D1110C	Sitting room: 10 patients With settee/bed	20.00	01-Jun-2010

ADB	List of Rooms	1/6/2010

Project: SG01 South Glasgow v01 (draft)

Filter:

Code	Description	Area (m²)	Date
D1119C	Recreation room with beverage, snack preparation bay: 10 teenagers	30.00	01-Jun-2010
D1133C	Discharge lounge: 8 places	20.00	01-Jun-2010
D1135A	Discharge lounge: patients, visitors	54.00	01-Jun-2010
D1310C	Relatives overnight stay - HBN 00-03	12.00	01-Jun-2010
D1402C	Sitting room: 15 visitors	20.00	01-Jun-2010
D1405C	Sitting room: 5 relatives	10.00	01-Jun-2010
D1504A	On-call overnight stay room	13.00	01-Jun-2010
E0113B	Imaging room: Ultrasound, general With reporting workstation	16.00	01-Jun-2010
E0120C	Imaging room: Ultrasound, interventional	27.00	01-Jun-2010
E0125B	Imaging room: conventional, general x-ray With mobile examination lamp No room layout	30.00	01-Jun-2010
E0136C	Image control/reporting room	7.00	01-Jun-2010
E0141A	Imaging room: Mammography	15.00	01-Jun-2010
E0151C	Imaging room: Bone Mineral Densitometry (BMD)	18.00	01-Jun-2010
E0206C	Darkroom: processing, viewing area, 2 processors, Bench top	12.00	01-Jun-2010
E0305A	Imaging room: remote fluoroscopy, barium	39.00	01-Jun-2010
E0311A	Imaging room: fluoroscopy, vascular, angiography	45.00	01-Jun-2010
E0312C	Control room: serving fluoroscopy	16.00	01-Jun-2010
E0501C	Imaging reporting room: 2 workstations	16.00	01-Jun-2010
E0523C	Daylight processing, viewing area Small format film	5.00	01-Jun-2010
E0527A	Processing, viewing room: serving 2 imaging rooms Computed Radiography unit (CR)	21.00	01-Jun-2010
E0529C	Processing, viewing room: serving 3/4 imaging rooms Computed Radiography unit (CR) No room layout	40.00	01-Jun-2010
E0531A	Reporting room: 1 workstation PACS	10.00	01-Jun-2010
E0531C	Video/Digital Editing Room	9.00	01-Jun-2010
E0534C	Reporting room: 4 workstations, PACS	16.00	01-Jun-2010
E0536A	Imaging review room: 2 workstations	12.00	01-Jun-2010
E0538A	Imaging review room: 4 workstations	16.00	01-Jun-2010
E0601B	Scanner room: Computed Tomography (CT)	36.00	01-Jun-2010
E0604B	Control room: serving CT room	16.00	01-Jun-2010
E0608A	Control room: serving 2 CT rooms	24.00	01-Jun-2010
E0702C	Waiting 'hot' room: post-injection, 7 patients Radionuclide	25.00	01-Jun-2010
E0713A	Imaging room: Gamma Camera multi detector with stress facility Radionuclide	36.00	01-Jun-2010
E0714A	Imaging room: Gamma Camera multi detector SPECT Radionuclide	36.00	01-Jun-2010
E0802A	Technical equipment room: serving MRI close bore	20.00	01-Jun-2010
E0811A	Control room: serving 2 MRI rooms	24.00	01-Jun-2010
E0811B	Control room: serving 2 MRI rooms	24.00	01-Jun-2010
E0815B	Scanner room: open Magnetic Resonance Imaging (MRI) No room layout	50.00	01-Jun-2010
E0817C	Control room: serving open MRI	16.00	01-Jun-2010

ADB	List of Rooms	1/6/2010

Project: SG01 South Glasgow v01 (draft)

Filter:

Code	Description	Area (m²)	Date
E0819B	Technical equipment room: serving open MRI No room layout	16.00	01-Jun-2010
E0902A	Control room: serving Interventional Radiology	16.00	01-Jun-2010
F0308A	Servery serving central dining room	130.00	01-Jun-2010
F0310A	Servery serving cafe	14.00	01-Jun-2010
F0310AL	Servery serving cafe (large)	150.00	01-Jun-2010
F0310AS	Servery serving cafe (small)	30.00	01-Jun-2010
F0410A	Cafe area: 20 places	91.00	01-Jun-2010
F0612A1	Additional Overflow for Dining	250.00	01-Jun-2010
F0612A2	Staff Lounge (Including pantry area)	130.00	01-Jun-2010
G0101A	Parking bay: mobile 2 x-ray units	5.00	01-Jun-2010
G0103B	Parking bay: resuscitation trolley	1.00	01-Jun-2010
G0104C	Parking bay: resuscitation trolley and cylinder trolley	2.00	01-Jun-2010
G0108C	Parking bay: shopping, prams, pushchairs	6.00	01-Jun-2010
G0114A	Parking bay: 2 patient trolleys, 8 wheelchairs	10.50	01-Jun-2010
G0118B	Linen bay: exchange trolley	4.00	01-Jun-2010
G0119B	Parking bay: 6 wheelchairs	4.00	01-Jun-2010
G0125C	Lead aprons bay	0.50	01-Jun-2010
G0128B	Parking bay: 3 accident trolleys, 3 wheelchairs	12.00	01-Jun-2010
G0129A	Parking bay: wheelchair	1.50	01-Jun-2010
G0130A	Parking bay: 3 wheelchairs	2.00	01-Jun-2010
G0132A	Parking bay: 1 patient trolley, 4 wheelchairs	5.00	01-Jun-2010
G0133C	Parking bay: 2 patient trolleys, 4 wheelchairs	5.00	01-Jun-2010
G0133M1	Bed store, ready to use, 10 beds	31.00	01-Jun-2010
G0133M2	Chair store, transit, ready to use, 25 chairs	16.00	01-Jun-2010
G0133M3	Trolley store, transit, ready to use, 25 trolleys	33.00	01-Jun-2010
G0139C	Parking bay: ultrasound unit	1.00	01-Jun-2010
G0142B	Parking bay: mobile x-ray, ultrasound unit	5.00	01-Jun-2010
G0143A	Parking bay: mobile x-ray, image intensifier, ultrasound unit	8.00	01-Jun-2010
G0149A	Parking bay: equipment, general	5.00	01-Jun-2010
G0180A	Parking bay - HBN 00-03	2.00	01-Jun-2010
G0180B	Parking bay - HBN 00-03	2.00	01-Jun-2010
G0405B	Exit/parking bay: theatre, 1 bed/trolley	12.00	01-Jun-2010
G0405C	Exit/Goods in lobby	6.00	01-Jun-2010
G0406A	Exit/parking bay: shared between 2 theatres, 2 beds	21.50	01-Jun-2010
G0507A	Lobby: ventilated (isolation suite) Entrance lobby for barrier nursing	4.00	01-Jun-2010
G0510B	Lobby to isolation room	5.00	01-Jun-2010
G0512A	Ready Use Equipment / Out Lobby	9.00	01-Jun-2010
G0514A	Renal dialysis workshop lobby: equipment ready for use Satellite dialysis	6.00	01-Jun-2010
G0526D	Returns Trolley	14.00	01-Jun-2010
G0705A	Public telephone: single booth, accessible	2.00	01-Jun-2010
G0710A	Telephone booth	1.50	01-Jun-2010
G0712A	Telephone booth: wheelchair accessible	2.00	01-Jun-2010
G0712B	Telephone booth: wheelchair accessible	2.00	01-Jun-2010
G0805B	Shop space with store	23.00	01-Jun-2010

ADB	List of Rooms	1/6/2010

Project: SG01 South Glasgow v01 (draft)

Filter:

Code	Description	Area (m²)	Date
G0826C	Dispenser bay: car park ticket	10.00	01-Jun-2010
G0905C	Ambulance parking bay	0.00	01-Jun-2010
G0940A	Parts store	20.00	01-Jun-2010
G0940C	Goods In Area	18.00	01-Jun-2010
H0104A	Meetings	115.00	01-Jun-2010
H0104B	Conference/meeting room: 10 person	20.00	01-Jun-2010
H0336B	Library, study room: 10 person	30.00	01-Jun-2010
H0339B	Library, study room: 5 person	20.00	01-Jun-2010
H0339C	Document Library	15.00	01-Jun-2010
H0513A	Seminar, training room: 20 person	37.50	01-Jun-2010
H0513A1	Seminar, training room: 40 person	80.00	01-Jun-2010
H0514C	Seminar, training room: 10 person	20.00	01-Jun-2010
H0515B	Seminar, training room: 15 person	27.50	01-Jun-2010
H0516C	Seminar, training room: 25 person	45.50	01-Jun-2010
H0516C1	Medicinema	130.00	01-Jun-2010
H0517B	Seminar, training room: 30 person	55.00	01-Jun-2010
H0520A	Seminar room: 15 person	27.50	01-Jun-2010
H0530C	Seminar, training, library room: 5 person	14.00	01-Jun-2010
H1102A	Group support room: 20 person Multi-purpose use	40.00	01-Jun-2010
H1127A	Main Reception & Information	20.00	01-Jun-2010
H1127B	Information centre: 5 person	15.00	01-Jun-2010
H1130C	Information centre with beverage bay: 5 person	18.00	01-Jun-2010
H1313B	Group room: meeting: 16 places (including 1 wheelchair place) - HBN 00-03	32.00	01-Jun-2010
H1335B	Group room: meeting: 7 places (including 1 wheelchair place) - HBN 00-03	16.00	01-Jun-2010
J0102A	Entrance lobby Neonatal unit	4.00	01-Jun-2010
J0103C	Entrance draught lobby	6.00	01-Jun-2010
J0107A	Main entrance draught lobby	11.00	01-Jun-2010
J0108A	Main entrance draught lobby	20.00	01-Jun-2010
J0115A	Concourse/Foyer	40.00	01-Jun-2010
J0130B	Entrance lobby: controlled access	0.00	01-Jun-2010
J0130C	Entrance lobby: controlled access	0.00	01-Jun-2010
J0135C	Foyer: visitors	0.00	01-Jun-2010
J0152C	Main entrance foyer	0.00	01-Jun-2010
J0205B	Reception: 1staff	4.00	01-Jun-2010
J0206A	Reception: 2 staff	10.00	01-Jun-2010
J0207A	Reception: 3 staff Including 2 case-notes trolleys	14.50	01-Jun-2010
J0212B	Reception: 3 staff	13.00	01-Jun-2010
J0221C	Enquiry/information desk: 1 staff	4.00	01-Jun-2010
J0232A	Reception: 2 person - HBN 00-03	11.00	01-Jun-2010
J0232B	Reception: 2 person - HBN 00-03	11.00	01-Jun-2010
J0413A	Reception and records office: 2 staff	11.00	01-Jun-2010
J0415B	Reception and records office: 4 staff	18.00	01-Jun-2010

ADB	List of Rooms	1/6/2010

Project: SG01 South Glasgow v01 (draft)

Filter:

Code	Description	Area (m²)	Date
J0419C	Reception/staff base: 4 staff including case-notes trolleys Maternity	17.50	01-Jun-2010
J0420A	Reception and office: 4 staff	27.00	01-Jun-2010
J0420B	Reception and office: 4 staff	27.00	01-Jun-2010
J0421A	Reception and office: 5 staff	33.00	01-Jun-2010
J0422A	Reception and office: 6 staff	39.00	01-Jun-2010
J0609B	Reception, administration office and communication base: 2 staff No room layout	13.00	01-Jun-2010
J0610C	Reception, administration office and communication base: 4 staff	24.00	01-Jun-2010
J0611B	Reception and office: 4 staff	20.00	01-Jun-2010
J1106A	Waiting area: 70 person including 5 wheelchair user	111.50	01-Jun-2010
J1106C	Waiting area: 70 person including 5 wheelchair user	111.50	01-Jun-2010
J1110A	Waiting area: 15 person including 2 wheelchair user	25.50	01-Jun-2010
J1111A	Waiting area: 30 person including 3 wheelchair user	49.50	01-Jun-2010
J1112A	Waiting area: 40 person including 4 wheelchair user	66.00	01-Jun-2010
J1123A	Waiting area: 45 person including 4 wheelchair user	73.50	01-Jun-2010
J1126B	Waiting area: 50 person including 4 wheelchair user	81.00	01-Jun-2010
J1135B	Waiting area: 10 person including 3 wheelchair user Rehabilitation	19.50	01-Jun-2010
J1152B	Waiting area: 20 places (including 2 wheelchair places) - HBN 00-03	33.00	01-Jun-2010
J1201B	Waiting area: 10 person including 1 wheelchair user	16.50	01-Jun-2010
J1206C	Waiting area: 3 person including 1 wheelchair user	6.00	01-Jun-2010
J1224C	Waiting, transfer, parking area: MRI trolley, 2 MRI wheelchairs	5.00	01-Jun-2010
J1231A	Waiting bay: 1 patient trolley/bed place	4.50	01-Jun-2010
J1232A	Waiting bay: 2 patients trolley/bed place	8.50	01-Jun-2010
J1233C	Waiting bay: 3 patients trolley/bed place	13.00	01-Jun-2010
J1251B	Waiting area: 5 places (including 1 wheelchair place)	9.00	01-Jun-2010
J1304C	Waiting room: relatives, visitors, 5 person	11.00	01-Jun-2010
J1306B	Waiting area: 10 person including 1 wheelchair user	16.50	01-Jun-2010
J1311B	Waiting area: 3 person	4.50	01-Jun-2010
J1403C	Waiting play area: 5 children	13.00	01-Jun-2010
J1410B	Waiting play area: 10 children	18.00	01-Jun-2010
J1410C	Waiting play area: 10 children	18.00	01-Jun-2010
J1415C	Creche facilities	24.00	01-Jun-2010
J1422C	Waiting play area: 5 young people	13.00	01-Jun-2010
K0101AC	Switchgear cupboard	2.00	01-Jun-2010
K0101C	Switchgear room	4.00	01-Jun-2010
K0101CA	Switchgear cupboard	1.00	01-Jun-2010
K0107B	UPS room/data computer hub room	9.00	01-Jun-2010
K0109B	Battery, UPS room	9.00	01-Jun-2010
K0116A	UPS room Uninterrupted Power Supply	4.00	01-Jun-2010
K0303C	Maintenance: workshop Radiology	11.00	01-Jun-2010
K0303D	Engineer Workshop	15.00	01-Jun-2010
K0314C	Adult Workshop	211.00	01-Jun-2010
K0331A1	Maintenance for beds, trolleys, chairs	24.00	01-Jun-2010
K0331A2	Decontamination for beds, trolleys, chairs	16.00	01-Jun-2010

ADB	List of Rooms	1/6/2010

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Filter:

Code	Description	Area (m²)	Date
K0336A	Critical Care	24.00	01-Jun-2010
K0336A1	Critical Care	24.00	01-Jun-2010
K0336A2	Emergency Dept	21.00	01-Jun-2010
K0336C	Workshop: prosthetics repairs, adjustment Orthotics	24.00	01-Jun-2010
K0336C1	Paediatric Workshop	107.00	01-Jun-2010
K0336C2	Theatres (Paeds)	21.00	01-Jun-2010
K0336C3	Critical Care (PICU)	24.00	01-Jun-2010
K0378A	Dialysis/Renal	95.00	01-Jun-2010
K0378C	Workshop: renal dialysis equipment, Wet, dry area	12.00	01-Jun-2010
K0608A	Plant room: water treatment serving 18 dialysis stations	15.00	01-Jun-2010
K0702B	Plant Room	8.00	01-Jun-2010
K0901B	Machine room: technician equipment room No room layout	16.00	01-Jun-2010
K0906C	Service room: generator and image computer equipment, Angiography	16.00	01-Jun-2010
K1002B	Security room: CCTV control No room layout	16.00	01-Jun-2010
L0315A	Cystoscopy	16.00	01-Jun-2010
L0315C	Laboratory: primary analysis: 3 workstations - HBN 12-01A	16.00	01-Jun-2010
L0320A	Small Lab (endocrinology)	10.50	01-Jun-2010
L0508B	Blood bank: out-of-hours bay No room layout	5.00	01-Jun-2010
L0605A	Blood cell Labeling Room	10.00	01-Jun-2010
L0701A	Sample Countiers	8.00	01-Jun-2010
L0810A	Biopsy assessment area: Histopathology	16.00	01-Jun-2010
L1205C	Specialised laboratory: Dental processing With daylight processor	13.00	01-Jun-2010
L1305B	Near patient testing/status laboratory	8.50	01-Jun-2010
L1308C	Near patient testing room - HBN 00-03	8.00	01-Jun-2010
L1602C	Medical observation area, 6 - 8 person Mortuary	8.00	01-Jun-2010
L1612B	Body viewing/bier room	10.00	01-Jun-2010
L1803A	Service room: equipment	21.00	01-Jun-2010
L1806C	Workshop: hearing aid repair	8.00	01-Jun-2010
M0114B	Office records: 2 staff	14.00	01-Jun-2010
M0115A	Office: 3 staff	18.00	01-Jun-2010
M0202B	Office nursing: 1 staff Location board, safe	9.00	01-Jun-2010
M0218A	Office: 1 staff, meeting area	15.00	01-Jun-2010
M0221A	Office: 1 staff, open plan	6.00	01-Jun-2010
M0222A	Open Plan Office for 20 persons	45.00	01-Jun-2010
M0225A	Office: 6 staff	27.50	01-Jun-2010
M0228B	Office: 10 staff	43.50	01-Jun-2010
M0251B	Office: 1 person - HBN 00-03	8.00	01-Jun-2010
M0251POD	Office POD	11.00	01-Jun-2010
M0252B	Office: 2 person - HBN 00-03	12.00	01-Jun-2010
M0254B	Office: 4 person - HBN 00-03	24.00	01-Jun-2010
M0306C	Office: medical reporting, 1 staff Surgeon	10.50	01-Jun-2010

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Filter:

Code	Description	Area (m²)	Date
M0307C	Office: medical reporting, 2 staff	13.50	01-Jun-2010
M0326B	Office technical and data review	12.00	01-Jun-2010
M0330B	Office/meeting room: 10 places (including 2 workstations) - HBN 00-03	16.00	01-Jun-2010
M0409A	Printer Stations	5.00	01-Jun-2010
M0410A	Photocopier Bay	2.00	01-Jun-2010
M0410C	Photocoping/printing room	6.00	01-Jun-2010
M0529B	Office, manager	12.00	01-Jun-2010
M0530B	Office: station officer Ambulance stations	11.00	01-Jun-2010
M0604B	Office and rest: 1 staff, 5 person rest area	15.00	01-Jun-2010
M0606A	Office and rest: 1 staff, 6 person rest area (voluntary workers)	14.00	01-Jun-2010
M0606B	Office and rest: 1 staff, 6 person rest area (voluntary workers)	14.00	01-Jun-2010
M0704A	Interview, counselling room: 5 person With desk	9.00	01-Jun-2010
M0709C	Interview/counselling/advisory room: 4 person 2 door access	9.00	01-Jun-2010
M0712B	Interview, counselling, quiet room: 5 person	9.00	01-Jun-2010
M0713A	Interview/meeting room: 6 person Emergency call lamp	14.00	01-Jun-2010
M0724A	Interview room: 4 places (including 1 wheelchair place) - HBN 00-03	8.00	01-Jun-2010
M0724B	Interview room: 4 places (including 1 wheelchair place) - HBN 00-03	8.00	01-Jun-2010
M0727B	Interview room: 7 places (including 1 wheelchair place) - HBN 00-03	12.00	01-Jun-2010
M1011C	Office: 6 staff	36.00	01-Jun-2010
M1012B	Office: 3 staff	18.00	01-Jun-2010
M1015B	Office: 5 staff	30.00	01-Jun-2010
M1017C	Office and reception: 2 staff With observation panel	16.50	01-Jun-2010
M1026B	Office: 2 staff Safe, cash point hatch	15.00	01-Jun-2010
M1033A	Office records and store: 1 staff	12.00	01-Jun-2010
M1034A	Main Records staff area	180.00	01-Jun-2010
M1036C	Workstations - Clinical Photography	20.00	01-Jun-2010
M1099A	General Receipt/Sorting & Scanning	45.00	01-Jun-2010
M1707B	Duty room: 2 porters	5.00	01-Jun-2010
M1713A	Duty room: 6 porters	10.00	01-Jun-2010
N0106B	Operating theatre: general No room layout	55.00	01-Jun-2010
N0108A	Operating theatre: laminar flow No room layout	55.00	01-Jun-2010
N0108C	Operating theatre: laminar flow No room layout	55.00	01-Jun-2010
N0111C	Operating theatre with ultra clean ventilation canopy (UCV), Cardiac/Cardiothoracic	63.00	01-Jun-2010
N0216B	Scrub-up and gowning room: 3 places	11.00	01-Jun-2010
N0305A	Anaesthetic room With patient trolley and ceiling hoist	19.00	01-Jun-2010
N0316C	Anaesthetic room: bed space	19.00	01-Jun-2010
P0602C	Kitchen - Clean prep area and dirty area	20.00	01-Jun-2010
P0625B	Beverage Bay	8.00	01-Jun-2010
P0627B	Ward pantry - HBN 04-01	12.00	01-Jun-2010

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Filter:

Code	Description	Area (m²)	Date
P0703C	Beverage, snack preparation bay	6.00	01-Jun-2010
P0802B	Refreshment area: snack bar, servery and preparation	23.00	01-Jun-2010
P0808B	Vending machine - HBN 00-03	3.00	01-Jun-2010
P0810A	Refreshment: drinking water dispenser	0.50	01-Jun-2010
P0811B	Drinking water dispenser - HBN 00-03	0.50	01-Jun-2010
P1005C	Store: human milk bank and feeds preparation	9.00	01-Jun-2010
Q0120A	Activities of daily living: kitchen	30.00	01-Jun-2010
Q0120C	Activities of daily living: kitchen	22.00	01-Jun-2010
Q0122A	Activities of daily living: bedroom with living assessment Ceiling hoist	18.00	01-Jun-2010
Q0123A	Activities of daily living: bath, shower, WC With hoists	13.00	01-Jun-2010
Q0124A	Activities of daily living: bathroom With hoists	13.00	01-Jun-2010
Q0304C	Assessment, interview and treatment room	10.00	01-Jun-2010
Q0504C	Light activity area: Occupational therapy, 10 patients Rehabilitation	70.00	01-Jun-2010
Q0507A	Light activity area: Occupational therapy, 10 patients LHRC	41.00	01-Jun-2010
Q0508A	Therapy Room, ADL beverage, assessment	15.00	01-Jun-2010
Q0519C	Hydrotherapy pool hall	92.50	01-Jun-2010
Q0521C	Hydrotherapy: laundry, utility room	10.00	01-Jun-2010
R1073D	Despatch and store area	40.00	01-Jun-2010
R1080A	Theatres	21.00	01-Jun-2010
S0012B	Infant feeding room	6.00	01-Jun-2010
S0012C	Infant feeding room	6.00	01-Jun-2010
S0029C	Sittingand body viewing room with beverage bay: 8 person	16.00	01-Jun-2010
S0062A	Special room: distressed/disturbed patient	11.00	01-Jun-2010
T0126A	Staff base and clean utility bay: 2 staff With controlled drugs cupboard. Recovery pre-discharge No room layout	11.00	01-Jun-2010
T0151B	Touchdown base - HBN 00-03	2.00	01-Jun-2010
T0202C	Staff communication base, enclosed: 2 staff	11.00	01-Jun-2010
T0203C	Staff communication base, enclosed: 3 staff	15.00	01-Jun-2010
T0211A	Staff communication base: 2 places - HBN 00-03	11.00	01-Jun-2010
T0211B	Staff communication base: 2 places - HBN 00-03	11.00	01-Jun-2010
T0316A	Supplies base	10.00	01-Jun-2010
T0513C	Clean utility with blood bank	17.00	01-Jun-2010
T0516A	Clean utility: barium preparation	5.50	01-Jun-2010
T0526B	Preparation room	12.00	01-Jun-2010
T0528A	Preparation room, (2 bays)	22.00	01-Jun-2010
T0535B	Clean utility room, for ward areas	16.00	01-Jun-2010
T0538A	Clean utility room: with controlled drugs cupboard, small	8.00	01-Jun-2010
T0540C	Medicine store/preparation room - HBN 00-03	8.00	01-Jun-2010
V0218A	Staff changing room including boot change: 40 places Lockers, coat rail, racks No room layout	30.00	01-Jun-2010

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Filter:

Code	Description	Area (m²)	Date
V0218C	Staff changing room including boot change: 40 places Lockers, coat rail, racks No room layout	30.00	01-Jun-2010
V0409A	Staff changing room with cubicle and handwash, 10 places Slimline lockers, shoe lockers, coat rail	14.00	01-Jun-2010
V0410A	Staff changing room with cubicle and handwash, 20 places Slimline lockers, shoe lockers, coat rail	18.00	01-Jun-2010
V0411A	Staff changing room with cubicle and handwash, 30 places Slimline lockers, shoe lockers, coat rail	20.00	01-Jun-2010
V0416C	Staff changing room with handwash, 5 places 2 door access. Lockers	8.50	01-Jun-2010
V0417A	Staff changing room with handwash, 10 places, Lockers	11.50	01-Jun-2010
V0417A1	WC & wash; shower & lockers: female staff	15.00	01-Jun-2010
V0417A2	WC & wash; shower & lockers: male staff	9.00	01-Jun-2010
V0419C	Staff changing room with handwash, 20 places Lockers, coat rail	18.00	01-Jun-2010
V0510A	Staff changing room: 5 places	5.00	01-Jun-2010
V0515C	Staff changing room: 50 places	25.00	01-Jun-2010
V0517C	Staff changing room: 30 places	16.00	01-Jun-2010
V0527A	Staff changing room, male	8.00	01-Jun-2010
V0530C	Staff changing room: 5 places Slimline lockers, coat rail, shoe rack	5.50	01-Jun-2010
V0532A	Staff changing room: 10 places Slimline lockers, coat rail, shoe rack	8.00	01-Jun-2010
V0534B	Staff changing room: 15 places Slimline lockers, coat rail, shoe rack	10.00	01-Jun-2010
V0536A	Staff changing room: 20 places Slimline lockers, coat rail, shoe rack	11.50	01-Jun-2010
V0546A1	Staff changing room	55.00	01-Jun-2010
V0546B	Staff changing room: 60 places Slimline lockers, coat rail, shoe rack	30.00	01-Jun-2010
V0554A	Staff changing room, female	20.00	01-Jun-2010
V0626B	Locker bay: 4 small lockers	0.50	01-Jun-2010
V0628B	Locker bay: staff/patients	2.00	01-Jun-2010
V0653B	Locker bay: 12 small lockers - HBN 00-03	1.50	01-Jun-2010
V0702A	Patient changing room: wheelchair accessible, 1 person 2 door access	6.00	01-Jun-2010
V0703B	Patient changing cubicle: ambulant person	2.00	01-Jun-2010
V0704B	Patient changing cubicle: independent wheelchair accessible	4.00	01-Jun-2010
V0706C	Patient changing cubicles: 6 places 1 cubicle ambulant, 1 cubicle wheelchair accessible, 6 lockers	11.00	01-Jun-2010
V0716C	Patient changing cubicle: ambulant person 2 door access	2.50	01-Jun-2010
V0717B	Patient changing cubicle: wheelchair accessible, 2 door access	4.50	01-Jun-2010
V0723A	Patient changing room: 15 places Slimline lockers, coat rail	15.00	01-Jun-2010
V0725A	Changing room: semi-ambulant - HBN 00-02	2.00	01-Jun-2010
V0726C	Changing room: independent wheelchair - HBN 00-02	4.50	01-Jun-2010
V0922A1	Female WC: Handwash Area	17.00	01-Jun-2010
V0922A2	Male WC: Handwash Area	14.00	01-Jun-2010
V0922B	WC: independent wheelchair - HBN 00-02	4.50	01-Jun-2010

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Filter:

Code	Description	Area (m²)	Date
V0922C	WC: independent wheelchair - HBN 00-02	4.50	01-Jun-2010
V1010A1	Female WCs	14.00	01-Jun-2010
V1010A2	Male WCs	12.00	01-Jun-2010
V1010B	WC: ambulant - HBN 00-02	2.00	01-Jun-2010
V1115C	Nappy change room with WC, hand rinse and wash, single-sided table access Child/adult wheelchair accessible	9.00	01-Jun-2010
V1121B	WC: semi-ambulant - HBN 00-02	2.50	01-Jun-2010
V1131B	Nappy changing room - HBN 00-02	5.00	01-Jun-2010
V1221C	WC: assisted - HBN 00-02	7.50	01-Jun-2010
V1321A1	Rest; Office with Shower	50.00	01-Jun-2010
V1321A2	Patient changing room with cubicles; shower & wash: 10 places	16.00	01-Jun-2010
V1321B	Shower room: ambulant - HBN 00-02	2.50	01-Jun-2010
V1323A	Shower room: semi-ambulant: standing use - HBN 00-02	5.00	01-Jun-2010
V1406B	WC and handrinse: specimen; wheelchair accessible With pass-through hatch	4.50	01-Jun-2010
V1631B	Shower room: independent wheelchair - HBN 00-02	7.00	01-Jun-2010
V1635B	Shower room: assisted - HBN 00-02	8.00	01-Jun-2010
V1638A	Shower room: trolley access - HBN 00-02	12.50	01-Jun-2010
V1643C	Shower room: en-suite - HBN 00-02	5.00	01-Jun-2010
V1645B	Shower room: en-suite: chamfered - HBN 00-02	4.50	01-Jun-2010
V1715C	Bath, WC and wash: en-suite, wheelchair accessible Domestic type, with unbreakable mirror	7.00	01-Jun-2010
V1726C	Bathroom: semi-ambulant - HBN 00-02	6.00	01-Jun-2010
V1727A	Bathroom with bidet: semi-ambulant - HBN 00-02	7.50	01-Jun-2010
V1736B	Bathroom: assisted - HBN 00-02	15.00	01-Jun-2010
W0108A	Store: equipment, local to theatre	1.00	01-Jun-2010
W0113A	Store: clinical equipment	39.00	01-Jun-2010
W0115A	Store: bulk supplies	80.00	01-Jun-2010
W0116A	Store: bulk supplies	100.00	01-Jun-2010
W0118A	Store: Clean flexible endoscopes	6.00	01-Jun-2010
W0118C	Store: Clean flexible endoscopes	6.00	01-Jun-2010
W0120A	Store: catheters and sterile packs	12.00	01-Jun-2010
W0121A	Store: cathetersand sterile packs	6.00	01-Jun-2010
W0122C	Store: catheters and sterile packs	9.00	01-Jun-2010
W0127A	Store: perfusion equipment, supplies	24.00	01-Jun-2010
W0128C	Store: bulk supplies	20.00	01-Jun-2010
W0129C	Store: bulk supplies	30.00	01-Jun-2010
W0214A	Goods reception and unpacking area Pharmacy support services, Purchase & distribution	18.00	01-Jun-2010
W0218C	Goods Out Area	18.00	01-Jun-2010
W0220A	Store: general Pharmacy support services, Purchase and distribution	100.50	01-Jun-2010
W0235A	Store: finished products, sterile Pharmacy support services	88.50	01-Jun-2010
W0237D	Store, assembly and Packing	83.00	01-Jun-2010
W0247A	Controlled drugs store	10.00	01-Jun-2010
W0247A1	Unlicenced medicines	5.00	01-Jun-2010

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Filter:

Code	Description	Area (m²)	Date
W0254A1	Temperature controlled store - freezer	5.00	01-Jun-2010
W0254A2	Temperature controlled store - general	5.00	01-Jun-2010
W0254A3	Fridge/Freezer area	5.00	01-Jun-2010
W0254B	Store: satellite pharmacy	6.00	01-Jun-2010
	Surgical procedure		
W0317A	Store chemicals	8.00	01-Jun-2010
W0532B	Store: sterile supplies	9.00	01-Jun-2010
W0534A	Store: sterile supplies	15.00	01-Jun-2010
W0608C	Store: sealed radioactive source, Medical Physics	6.00	01-Jun-2010
W0613C	Store: study casts/records - HBN 12-01B	22.00	01-Jun-2010
W0650A	Blood bank refrigerator bay	3.00	01-Jun-2010
W0655C	External store: gas cylinders	0.00	01-Jun-2010
W0704A	Store: general and linen	3.00	01-Jun-2010
W1123A	Store: bulk supplies, medical and surgical	18.00	01-Jun-2010
W1127A	Store: equipment and renal consumables	15.00	01-Jun-2010
W1132A	Store: furniture, equipment and disposables	36.00	01-Jun-2010
W1150C	Store: bulk fluid	0.00	01-Jun-2010
W1210B	Store: exercise equipment, activity area	6.00	01-Jun-2010
W1212A	Store: materials and equipment	9.00	01-Jun-2010
	Occupational therapy		
W1215B	Store: exercise equipment, therapy treatment cubicles	6.00	01-Jun-2010
W1227C	Store: equipment, hydrotherapy pool and cleaning	7.00	01-Jun-2010
W1236A	Store: orthotics supply and fitting	25.00	01-Jun-2010
W1236A1	Adults Devices Library	90.00	01-Jun-2010
W1236C	Paeds Devices Library	90.00	01-Jun-2010
W1303B	Store: major incident equipment	6.00	01-Jun-2010
W1310A	Store: splint, crutch	2.00	01-Jun-2010
W1313B	Store: ready to use medical gas cylinders	9.00	01-Jun-2010
W1321A	Store: equipment and supplies	36.00	01-Jun-2010
W1408C	Store: clothing back-up	6.00	01-Jun-2010
W1424A	Store: equipment	18.00	01-Jun-2010
W1428A	Store: linen and clothing back-up	9.00	01-Jun-2010
W1429C	Store: furniture	20.00	01-Jun-2010
W1453A	Store: clinical equipment	48.00	01-Jun-2010
W1461C	Store: patients clothing	4.00	01-Jun-2010
W1507C	Store: stationery	3.00	01-Jun-2010
W1510A	Store: stationery and document	11.00	01-Jun-2010
W1514A	Store: plaster equipment	6.00	01-Jun-2010
W1516C	Store: clinical supplies	6.00	01-Jun-2010
W1519A	Store: ambulance equipment	6.00	01-Jun-2010
W1531A	Store: equipment	12.00	01-Jun-2010
W1555B	Store: general and stationery	6.00	01-Jun-2010
W1556C	Store: general and stationery	9.00	01-Jun-2010
W1584C	Store: clinical equipment	16.00	01-Jun-2010
W1585B	Store: general	12.00	01-Jun-2010
W1587A	Store: general	6.00	01-Jun-2010
W1591A	Store: linen	3.00	01-Jun-2010

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Filter:

Code	Description	Area (m²)	Date
W1594C	Store: linen	6.00	01-Jun-2010
W1602A	Store: linen	3.50	01-Jun-2010
X0102A	Treatment room: Physiotherapy UVL, 1 patient	12.00	01-Jun-2010
X0113A	Treatment room: Physiotherapy, 1 patient	12.00	01-Jun-2010
X0114C	Treatment room: Speech therapy, 1 patient	15.00	01-Jun-2010
X0145A	Treatment room: double-sided couch access, Dermatology	16.00	01-Jun-2010
X0145B	Treatment room: double-sided couch access	16.00	01-Jun-2010
X0147B	Treatment room: all-round couch access - HBN 00-03	16.00	01-Jun-2010
X0210A	Treatment room: chiropody/podiatry, 1 patient	15.00	01-Jun-2010
X0215A	Treatment room: Ophthalmology, laser	15.50	01-Jun-2010
X0219A	Treatment room: Urodynamic	22.50	01-Jun-2010
X0221A	Treatment room: Endoscopy	22.00	01-Jun-2010
X0222B	Treatment cubicles: Physiotherapy, 10 patients	100.00	01-Jun-2010
X0224A	Preparation and splint fitting room: 1 patient	19.00	01-Jun-2010
X0237C	Resuscitation room: 4 places	116.00	01-Jun-2010
X0238A	Resuscitation room: 6 places	180.00	01-Jun-2010
X0240B	Major treatment/minor surgery room With resuscitation trolley	17.50	01-Jun-2010
X0244A	Treatment room: A&E, head and neck	16.00	01-Jun-2010
X0245A	Treatment room: A&E, gynaecology/genitourinary colposcopy	16.00	01-Jun-2010
X0250A	Treatment cubicle: dialysis, 1 patient With reclining chair	10.00	01-Jun-2010
X0251A	Treatment cubicle: dialysis, 1 patient With bed	10.50	01-Jun-2010
X0251A1	4 Day Trolley spaces, Renal Treatment	55.00	01-Jun-2010
X0252A	Isolation treatment room: dialysis, 1 patient	13.50	01-Jun-2010
X0255A	Treatment room: Continuous ambulatory peritoneal dialysis, 1 patient	16.50	01-Jun-2010
X0266C	Plaster room - HBN 00-03	16.00	01-Jun-2010
X0312B	Activity area: Physiotherapy, 5 patients	50.00	01-Jun-2010
X0313A	Activity area: Physiotherapy, 10 patients	80.00	01-Jun-2010
X0318B	Activity area/gymnasium: Physiotherapy, 15 patients	100.00	01-Jun-2010
X0319A	Gym, exercise area	135.00	01-Jun-2010
X0705C	Observation and recording room: child assessment and therapy Assessment room	11.00	01-Jun-2010
X1011C	Laboratory: catheter; biplane	50.00	01-Jun-2010
X1012A	Control area: serving catheter laboratory No room layout	16.00	01-Jun-2010
X1020A	Cardiac Room	17.00	01-Jun-2010
X1026A	Control room: serving neuroangiography	16.00	01-Jun-2010
X1501C	Chemotherapy treatment room: 1 patient	12.00	01-Jun-2010
X1805A	Ante-room preparation and simulator Radiotherapy No room layout	16.50	01-Jun-2010
X1807A	Control room serving CT simulator room No room layout	20.00	01-Jun-2010
X2051C	Radiotherapy treatment room: unsealed radioactive source, (Iodine bedroom and lobby)	28.00	01-Jun-2010
Y0302A	Dirty utility: bedpan disposal, urine test	12.00	01-Jun-2010

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Filter:

Code	Description	Area (m²)	Date
Y0315C	Dirty utility: bedpan disposal Radiology	9.00	01-Jun-2010
Y0331C	Dirty utility room: bedpan processing - HBN 00-03	12.00	01-Jun-2010
Y0410C	Dirty utility: serving maternity theatre	10.00	01-Jun-2010
Y0412A	Dirty utility: urine test	8.00	01-Jun-2010
Y0418A	Cleansing, disinfection and store: endoscope, suction bottle, autoclave	19.00	01-Jun-2010
Y0420A	Dirty utility: serving 1 theatre or cath. lab.	12.00	01-Jun-2010
Y0421C	Dirty utility: serving 2 theatres	14.00	01-Jun-2010
Y0431B	Dirty utility room, for ward areas	12.00	01-Jun-2010
Y0431B1	Dirty utility room	8.00	01-Jun-2010
Y0507C	Utility/laundry room	8.00	01-Jun-2010
Y0510B	Utility: footwear washing	4.00	01-Jun-2010
Y0614B1	Hold: Trolley	11.00	01-Jun-2010
Y0614B2	Hold: Dirty	26.00	01-Jun-2010
Y0614B3	Hold: Clean	26.00	01-Jun-2010
Y0642B	Disposal hold: 1700 litres - HBN 00-03	8.00	01-Jun-2010
Y0646B	Disposal hold: 3000 litres - HBN 00-03	12.00	01-Jun-2010
Y1510B	Cleaners room - HBN 00-03	8.00	01-Jun-2010
Z0110A	Automated Dispensary area	15.00	01-Jun-2010
Z0403D	Disassembly Clean & Test	123.00	01-Jun-2010
Z0405D	Trolley Wash	15.00	01-Jun-2010
Z0406D	Materials Transfer	26.00	01-Jun-2010
Z0412D	Trolley Hold	14.00	01-Jun-2010
Z0605C	Laboratory workshop: Quality control Support services	10.00	01-Jun-2010
Z0809B	Preparation and store: Radiopharmaceuticals No room layout	20.00	01-Jun-2010

ADB	Room Data Sheet	B0305A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	B0305A	Single-bed room: HBN 04-01		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Clinical discussions and delivery of minimally invasive clinical procedures at the bedside. 2) Use of monitoring equipment. 3) Use of mobile diagnostic and therapeutic equipment. 4) Undressing and dressing in privacy. 5) Resting and sleeping in bed. 6) Patient to take meals in bed or by the bed. 7) Using entertainment services. 8) Patient to receive visitors. 9) Overnight stays by relatives. 10) Use of clinical wash-hand basin. 11) Reviewing and recording patient records. 12) Accessing and updating electronic patient records (EPRs). 13) Secure holding of medicines for use by patient. 14) Holding working supply of linen. 15) Holding working supply of consumables. 16) Holding patient's clothing and personal belongings. 17) Use of mobile hoist. 18) Patient may arrive on a bed or trolley.			
Personnel:	1 x patient 4 x others			
Planning Relationships:	En-suite sanitary facilities.			
Space Data:	**Area (m²):**	19.00	**Height (mm):**	2,700
Notes:	This room is based on the use of a trolley with a worktop. It is assumed that computers will be handheld or brought into the room on a trolley. The lamp repeat call is situated over the door outside the room. The following items may be provided: - a ceiling-mounted hoist; - a small fridge for patient use; - a combined wardrobe and bedside locker instead of the separate wardrobe and locker. DIS026 (Medical hand sanitizer dispenser) to be located outside of room next to door entrance for people to use before entering the room.			

ADB	Room Environmental Data	B0305A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	B0305A	Single-bed room: HBN 04-01		
Room Number:			**Revision Date:**	01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	21	26oC not to be exceeded for more than 50 hours per annum against CIBSE DSY weather data
Summer Temperature (DegC):	26	
Mechanical Ventilation (Supply ac/hr):		Supply air rate at 40 litres per second
Mechanical Ventilation (Extract ac/hr):		1. Bedroom balanced or negative with respect to the adjoining corridor. 2. Bedroom positive with respect to the en-suite sanitary room
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		

General Notes:

LIGHTING		
Service Illumination (Lux):		Daytime - general (lux): 100 1. Average at floor level of circulation space. 2. Maximum point illuminance 170 lux. Daytime - bed (lux): 300 1.Average over bed area at working plane level for general nursing purposes. 2. Maximum point illuminance 520 Lux.
Service Illumination Night (Lux):		Night - general (lux): 5 1. Average at floor level of circulation space. 2. Maximum point illuminance 10 lux. 3. Maximum at bed pillow 0.5 lux. Night - watch (lux): 20 1. Average at bed pillow. 2. Maximum point illuminance at pillow 40 lux. Night - observation (lux): Range 1-5 average.
Local Illumination (Lux):		Local task illumination (lux): 300 1. Average at bedhead for patient reading and general nursing purposes. 2. Maximum point illuminance 520 Lux. 3. Average of 1000 Lux at bedhead where examination or treatment is to be carried out.
Colour Rendering Required:	Y	Not applicable to night lighting. General lighting - Colour rendering characteristics (Ra): 80 Examination lighting - Colour rendering characteristics (Ra): 90 Minimum colour appearance of 4000K
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes:

Type of control: S/N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 19
Areas in which VDT present to comply with CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001

Emergency escape route lighting required? (Yes/No): N
Not normally required unless need to comply with BS 5266.
Y = Dedicated emergency lighting required in compliance with BS 5266.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0.85 metres above finished floor level.

NOISE

Privacy Factor Required (dB):		Noise intrusion from external sources: equivalent continuous sound pressure level, 1hr. Daytime: 40 Night: 35 Maximum f night: 45
Mechanical Services (NR):		1. Maximum value inside room space. 2. See Table 1 of HTM 08-01
Intrusive Noise (NR Leq):		Maximum internal noise from M&E services (NR): 30 1. See Table 2 of HTM 08-01. 2. All plant to be operating at maximum normal design duty. Sound insulation parameters: Privacy: Confidential Noise generation: Typical Noise sensitivity: Medium See Table 3 of HTM 08-01 Sound insulation rating: 47 1. Minimum value of noise sensitivity of receiving room. 2. See Table 4 of HTM 08-01. 3. Adjust for specific room adjacencies in accordance with table 5 of HTM 08-01.
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:

1. Acoustic design to be compliant with HTM 08-01.
2. Maximum weighted standardised impact sound pressure level (L'nT,w) to be 65 dB for floors over noise sensitive areas.
2. A minimum Speech Transmission Index (STI) of 0.5 to BS EN 60268-16 (or equivalent standard) to apply to assessing speech intelligibility of audio systems for public announcements.

SAFETY

Hot Surface Max. Temp (DegC):	43	Maximum surface temperature (degC): 43 To be achieved in compliance with SHTN 6 'The Safe Operation and Maintenance of Thermostatic Mixing Valves
Hot Water Max. Temp (DegC):	41	

General Notes:

FIRE

Enclosure:

Automatic Detection: Smoke Ceiling mounted.

General fire notes:

1. Fire detection and alarm systems to comply with HTM 05-03, Part B and BS 5839, where applicable.
2. Fire safety generally to comply with relevant parts of Firecode (HTM 05) together with Building Regulations 2000 and associated Approved Codes of Practice (ACOP).

ADB	Room Design Character	B0305A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	B0305A	Single-bed room: HBN 04-01		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. normal humidity. Hygiene and cleaning (HTM 56): Paragraphs 2.3 - 2.4
Floor:	Surface Finish (HTM 61): 3 i.e. hard, impervious, jointless, smooth Hygiene and cleaning (HTM 61): Paragraphs 2.7 - 2.9
Ceiling:	Surface Finish (HTM 60): 5 i.e. imperforate Moisture Resistance (HTM 60): N i.e. normal humidity Hygiene and cleaning (HTM 60): Paragraphs 2.9 - 2.10
Doorsets:	(HTM 58) Two sets of doors: 1 x 1500 mm, one and a half leaf, half glazed, obscurable; bed access. 1 x approx 2200 mm, double leaf sliding folding special door see HBN 00-02 See HBN 00-04 for effective clear width access requirements.
Windows:	(HTM 55) Clear, solar control, privacy control
Internal Glazing:	(HTM 57) NA or clear with privacy control
Hatch:	N/A

Notes:

ADB	Schedule of Components by Room	B0305A

Project: SG01 South Glasgow v01 (draft)
Department:
Room: B0305A Single-bed room: HBN 04-01
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	BED025	MEDICAL SUPPLY UNIT, may include socket and parking bracket/clip for patient handset and bedside light controls		1
1		1	BED7001	BED HEAD BUFFER/DOCKING device, bed & wall protection, to design		1
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
1		1	DATA1000	DATA POINTS incorporating two twin power sockets and two data/telecom points, assembly: 2 x OUT010, SOCKET outlet, switched, 13 amp, twin 2 x OUT131, SOCKET outlet double data/voice, wall/trunking mounted		1
1		1	LIG005	LUMINAIRE, bedhead, dimmable, patient reading and general nursing care/examination		1
1		1	MEST1000	MEDICAL SERVICE TRUNKING, acute bed/trolley space, to HTM 08-03 requirements, assembly: 1 x CAL008, PUSH BUTTON staff crash call, reset and integral/adjacent indicator lamp, wall/trunking mounted 1 x CAL012, RESET UNIT, with repeat lamp, patient/staff call 1 x CAL043, PUSH BUTTON patient/staff call with socket for extension pear push, trunking mounted 1 x CAL047, PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, trunking mounted 1 x ECS1000, ENTERTAINMENT SYSTEM, to client specification. 4 x OUT012, SOCKET outlet switched 13amp twin, trunking mounted 4 x OUT121, SOCKET outlet, computer data, single 1 x OUT151, SOCKET outlet patient monitoring, wall/trunking mounted 1 x OUT215, SOCKET outlet, telephone 1 x OUT453, OUTLET, 4 kPa compressed air, medical 1 x OUT470, OUTLET, oxygen, medical 1 x OUT475, OUTLET, vacuum, medical 1 x TRU1001, MEDICAL SERVICE TRUNKING, horizontal, length as drawn.		1
3		3	OUT010	SOCKET outlet switched 13amp twin		1
1		1	OUT052	CONNECTION UNIT, switched, 13 amp		1
1		1	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
2		2	RAI130	RAIL, clinical equipment, wall mounted, 600mm		1
1		1	SWC8018	SWITCH 10A retractable, integrated with lighting control system		1

ADB	Schedule of Components by Room	B0305A

Project: SG01 South Glasgow v01 (draft)
Department:
Room: B0305A Single-bed room: HBN 04-01
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	WHBN1000	WASH BASIN, clinical, with non touch panel mounted tap/s, assembly: 1 x BAS101, BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM 1 x TAP894, TAP bib, hospital pattern, integral thermostatic mixer, automatic action with sensor operation. HTM64TBH6 1 x WAS100, WASTE, unslotted flush-grated, metal, 1.1/4 in. HTM64WT1 1 x WAS1000, TRAP, concealed waste, for back outlet basins.		1
1		1	BRA003	BRACKET, holder, suction unit, wall mounted		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS438	DISPENSER, disposable gloves set of 3 and disposable apron, wall mounted		2
2		2	HOO019	HOOK, single, small, wall mounted		2
1		1	BED015	BED variable height, two-way tilt, adjustable backrest and knee-break, built-in bed extension with mattress retainer, electrically operated, on castors, 380-780H 2260/2430L 1010W		3
1		1	CHA307	CHAIR, easy, high back, with open arms, upholstered, wipeable		3
2		2	CHA317	CHAIR, upright, upholstered, stacking, wipeable		3
1		1	COMP1001	COMPUTER; complete with keyboard and screen, assembly: 1 x COM031, COMPUTER CPU 1 x COM033, COMPUTER KEYBOARD 1 x COM1000, COMPUTER MONITOR, TFT, digital flat panel display, desk top		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	LOC004	LOCKER, bedside, 4 compartment with lockable section /drawer, towel rail at rear, on castors, 902H 485W 485D		3
1		1	MAT008	MATTRESS, suitable for BED015		3
1		1	MST007	TROLLEY, lockable, closed, with worktop, approx 900H 660W 500D, 600mm facing		3
1		1	SPA055	Space for bed/reclining chair		3
1		1	TAB073	TABLE, overbed, cantilevered		3
1		1	WAR009	WARDROBE, 2100H 300W 700D		3

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ADB	Room Data Sheet	B0308A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	B0308A	Single-bed room: isolation: HBN 04-01		
Room Number:			**Revision Date:**	01/06/2010

Activities:

1) Clinical discussions and delivery of minimally invasive clinical procedures at the bedside.
2) Use of monitoring equipment.
3) Use of mobile diagnostic and therapeutic equipment.
4) Undressing and dressing in privacy.
5) Resting and sleeping in bed.
6) Patient to take meals in bed or by the bed.
7) Using entertainment services.
8) Patient to receive visitors.
9) Use of clinical wash-hand basin.
10) Reviewing and recording patient records.
11) Accessing and updating electronic patient records (EPRs).
12) Secure holding of medicines for use by patient.
13) Holding working supply of linen.
14) Holding working supply of consumables.
15) Holding patient's clothing and personal belongings.
16) Use of mobile hoist.
17) Patient may arrive on a bed or trolley.

Personnel:

1 x patient
4 x others

Planning Relationships:

Access via gowning lobby.
En-suite sanitary facilities.

Space Data:

Area (m²):	19.00	Height (mm):	3,000

Notes:

WARNING NOTICE: This room is based on a theoretical design model, which has not been validated (see paragraph 1.8 of HBN 4 Supplement 1). Specialist advice should be sought on its design.
It is assumed that computers will be handheld or brought into the room on a trolley. Alternatively, they may be held outside the room for infection control reasons.
The lamp repeat call is situated over the door outside the room.
The following items may be provided:
- CCTV for monitoring and observation, linked to a staff communication base or touchdown base;
- a ceiling-mounted hoist;
- a small fridge for patient use.

DIS026 (Medical hand sanitizer dispenser) to be located outside of room next to door entrance for people to use before entering the room.

ADB	Room Environmental Data	B0308A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	B0308A	Single-bed room: isolation: HBN 04-01		
Room Number:			**Revision Date:**	01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	21	26oC not to be exceeded for more than 50 hours per annum against CIBSE TSY weather data
Summer Temperature (DegC):	26	
Mechanical Ventilation (Supply ac/hr):		See Table 1 of HBN 04-01 Supplement 1 for guide to air volumes and pressure differentials.
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	1. See Table 1 of HBN 04-01 Supplement 1 for further details relating to pressure differentials. 2. Mechanically ventilated to allow positive pressure of Isolation Room relevant to en-suite and negative pressure relative to lobby space. 3. 10 pascals pressure differential from lobby to bedroom
Humidity (%RH):		4. Negative pressure differential between en-suite and Isolation Room. 5. All supply air to bedroom to be derived from the lobby.

General Notes:

LIGHTING		
Service Illumination (Lux):		Daytime - general (lux): 100 1. Average at floor level of circulation space. 2. Maximum point illuminance 170 lux. Daytime - bed (lux): 300 1.Average over bed area at working plane level for general nursing purposes. 2. Maximum point illuminance 520 Lux.
Service Illumination Night (Lux):		Night - general (lux): 5 1. Average at floor level of circulation space. 2. Maximum point illuminance 10 lux. 3. Maximum at bed pillow 0.5 lux. Night - watch (lux): 20 1. Average at bed pillow. 2. Maximum point illuminance at pillow 40 lux. Night - observation (lux): Range 1-5 average.
Local Illumination (Lux):		Local task illumination (lux): 300 1. Average at bedhead for patient reading and general nursing purposes. 2. Maximum point illuminance 520 Lux. 3. Average of 1000 Lux at bedhead where examination or treatment is to be carried out.
Colour Rendering Required:	Y	Not applicable to night lighting. General lighting - Colour rendering characteristics (Ra): 80 Examination lighting - Colour rendering characteristics (Ra): 90 Minimum colour appearance of 4000K
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes:

Type of control: S/N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 19
Areas in which VDT present to comply with CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001

Emergency escape route lighting required? (Yes/No): N
Not normally required unless need to comply with BS 5266.
Y = Dedicated emergency lighting required in compliance with BS 5266.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0.85 metres above finished floor level.

NOISE

Privacy Factor Required (dB):		Noise intrusion from external sources: equivalent continuous sound pressure level, 1hr. Daytime: 40 Night: 35 Maximum f night: 45
Mechanical Services (NR):		1. Maximum value inside room space. 2. See Table 1 of HTM 08-01
Intrusive Noise (NR Leq):		Maximum internal noise from M&E services (NR): 30 1. See Table 2 of HTM 08-01. 2. All plant to be operating at maximum normal design duty. Sound insulation parameters: Privacy: Confidential Noise generation: Typical Noise sensitivity: Medium See Table 3 of HTM 08-01 Sound insulation rating: 47 1. Minimum value of noise sensitivity of receiving room. 2. See Table 4 of HTM 08-01. 3. Adjust for specific room adjacencies in accordance with table 5 of HTM 08-01.
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:

1. Acoustic design to be compliant with HTM 08-01.
2. Maximum weighted standardised impact sound pressure level (L'nT,w) to be 65 dB for floors over noise sensitive areas.
2. A minimum Speech Transmission Index (STI) of 0.5 to BS EN 60268-16 (or equivalent standard) to apply to assessing speech intelligibility of audio systems for public announcements.

SAFETY

Hot Surface Max. Temp (DegC):	43	Maximum surface temperature (degC): 43 To be achieved in compliance with SHTN 6 'The Safe Operation and Maintenance of Thermostatic Mixing Valves
Hot Water Max. Temp (DegC):	41	

General Notes:

FIRE

Enclosure:

Automatic Detection: Smoke Ceiling mounted.

General fire notes:

1. Fire detection and alarm systems to comply with HTM 05-03, Part B and BS 5839, where applicable.
2. Fire safety generally to comply with relevant parts of Firecode (HTM 05) together with Building Regulations 2000 and associated Approved Codes of Practice (ACOP).

ADB	Room Design Character	B0308A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	B0308A	Single-bed room: isolation: HBN 04-01		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. normal humidity. Hygiene and cleaning (HTM 56): Paragraphs 2.3 - 2.4
Floor:	Surface Finish (HTM 61): 3 i.e. hard, impervious, jointless, smooth Hygiene and cleaning (HTM 61): Paragraphs 2.7 - 2.9
Ceiling:	Surface Finish (HTM 60): 3: Smooth, imperforate Moisture Resistance (HTM 60): N: normal humidity. Hygiene and cleaning (HTM 60): Paragraphs 2.9 - 2.10
Doorsets:	(HTM 58) Two sets of doors: 1 x 1900 mm, double leaf, double swing, half glazed, obscurable; bed access. 1 x approx 2200 mm, double leaf sliding folding special door see HBN 00-02 See HBN 00-04 for effective clear width access requirements.
Windows:	(HTM 55) Clear, solar control, privacy control.
Internal Glazing:	(HTM 57) NA or clear with privacy control
Hatch:	N/A
Notes:	

ADB	Schedule of Components by Room	B0308A

Project: SG01 South Glasgow v01 (draft)
Department:
Room: B0308A Single-bed room: isolation: HBN 04-01
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	BED025	MEDICAL SUPPLY UNIT, may include socket and parking bracket/clip for patient handset and bedside light controls		1
1		1	BED7001	BED HEAD BUFFER/DOCKING device, bed & wall protection, to design		1
1		1	LIG005	LUMINAIRE, bedhead, dimmable, patient reading and general nursing care/examination		1
1		1	MEST1000	MEDICAL SERVICE TRUNKING, acute bed/trolley space, to HTM 08-03 requirements, assembly: 1 x CAL008, PUSH BUTTON staff crash call, reset and integral/adjacent indicator lamp, wall/trunking mounted 1 x CAL012, RESET UNIT, with repeat lamp, patient/staff call 1 x CAL043, PUSH BUTTON patient/staff call with socket for extension pear push, trunking mounted 1 x CAL047, PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, trunking mounted 1 x ECS1000, ENTERTAINMENT SYSTEM, to client specification. 4 x OUT012, SOCKET outlet switched 13amp twin, trunking mounted 4 x OUT121, SOCKET outlet, computer data, single 1 x OUT151, SOCKET outlet patient monitoring, wall/trunking mounted 1 x OUT215, SOCKET outlet, telephone 1 x OUT453, OUTLET, 4 kPa compressed air, medical 1 x OUT470, OUTLET, oxygen, medical 1 x OUT475, OUTLET, vacuum, medical 1 x TRU1001, MEDICAL SERVICE TRUNKING, horizontal, length as drawn.		1
3		3	OUT010	SOCKET outlet switched 13amp twin		1
1		1	OUT052	CONNECTION UNIT, switched, 13 amp		1
1		1	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
1		1	OUT133	SOCKET outlet, computer data, double		1
2		2	RAI130	RAIL, clinical equipment, wall mounted, 600mm		1
1		1	SWC8018	SWITCH 10A retractable, integrated with lighting control system		1

ADB	Schedule of Components by Room	B0308A

Project: SG01 South Glasgow v01 (draft)
Department:
Room: B0308A Single-bed room: isolation: HBN 04-01
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	WHBN1000	WASH BASIN, clinical, with non touch panel mounted tap/s, assembly: 1 x BAS101, BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM 1 x TAP894, TAP bib, hospital pattern, integral thermostatic mixer, automatic action with sensor operation. HTM64TBH6 1 x WAS100, WASTE, unslotted flush-grated, metal, 1.1/4 in. HTM64WT1 1 x WAS1000, TRAP, concealed waste, for back outlet basins.		1
1		1	BRA003	BRACKET, holder, suction unit, wall mounted		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS438	DISPENSER, disposable gloves set of 3 and disposable apron, wall mounted		2
2		2	HOO019	HOOK, single, small, wall mounted		2
1		1	BED015	BED variable height, two-way tilt, adjustable backrest and knee-break, built-in bed extension with mattress retainer, electrically operated, on castors, 380-780H 2260/2430L 1010W		3
1		1	CHA307	CHAIR, easy, high back, with open arms, upholstered, wipeable		3
2		2	CHA317	CHAIR, upright, upholstered, stacking, wipeable		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	LOC004	LOCKER, bedside, 4 compartment with lockable section /drawer, towel rail at rear, on castors, 902H 485W 485D		3
1		1	MAT008	MATTRESS, suitable for BED015		3
1		1	MST007	TROLLEY, lockable, closed, with worktop, approx 900H 660W 500D, 600mm facing		3
1		1	SPA055	Space for bed/reclining chair		3
1		1	TAB073	TABLE, overbed, cantilevered		3
1		1	WAR009	WARDROBE, 2100H 300W 700D		3

ADB	Room Data Sheet	B0607A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	B0607A	Multi-bed room: Day care, 4 beds		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Patient to receive therapeutic and clinical attention from health team staff. 3) Patient to read, writes, listens to radio, views TV and use telephone. 4) Patient to receive visitors. 5) Holding clothing and personal effects. 6) Using monitoring/diagnostic equipment. 7) Clinical hand washing.			
Personnel:	4 x Patients 4 x Others			
Planning Relationships:	Close to staff base.			
Space Data:	**Area (m²):**	40.00	**Height (mm):**	2,700

Notes:

Bed area should be designed to allow interchangeable use of beds or reclining chairs.
Space may require to accommodate use of hoist.

4x fixed partitions or heavy duty screens required.

ADB	Room Environmental Data	B0607A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	B0607A	Multi-bed room: Day care, 4 beds		
Room Number:			**Revision Date:**	01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	21	26°C not to be exceeded for more than 50 hours per annum against CIBSE TSY weather data
Summer Temperature (DegC):	26	
Mechanical Ventilation (Supply ac/hr):	6.0	
Mechanical Ventilation (Extract ac/hr):	6.0	
Pressure Relative to Adjoining Space:	NEG to corri	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		

General Notes:

LIGHTING		
Service Illumination (Lux):		Daytime - general (lux): 100 1. Average at floor level of circulation space. 2. Maximum point illuminance 170 lux. Daytime - bed (lux): 300 1.Average over bed area at working plane level for general nursing purposes. 2. Maximum point illuminance 520 Lux.
Service Illumination Night (Lux):		Night - general (lux): 5 1. Average at floor level of circulation space. 2. Maximum point illuminance 10 lux. 3. Maximum at bed pillow 0.5 lux. Night - watch (lux): 20 1. Average at bed pillow. 2. Maximum point illuminance at pillow 40 lux. Night - observation (lux): Range 1-5 average.
Local Illumination (Lux):		Local task illumination (lux): 300 1. Average at bedhead for patient reading and general nursing purposes. 2. Maximum point illuminance 520 Lux. 3. Average of 1000 Lux at bedhead where examination or treatment is to be carried out.
Colour Rendering Required:	Y	Not applicable to night lighting. General lighting - Colour rendering characteristics (Ra): 80 Examination lighting - Colour rendering characteristics (Ra): 90 Minimum colour appearance of 4000K
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes:

Type of control: S/N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 19
Areas in which VDT present to comply with CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001

Emergency escape route lighting required? (Yes/No): N
Not normally required unless need to comply with BS 5266.
Y = Dedicated emergency lighting required in compliance with BS 5266.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0.85 metres above finished floor level.

NOISE

Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	40	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:

SAFETY

Hot Surface Max. Temp (DegC):	43	Maximum surface temperature (degC): 43
Hot Water Max. Temp (DegC):	41	To be achieved in compliance with SHTN 6 'The Safe Operation and Maintenance of Thermostatic Mixing Valves

General Notes:

FIRE

Enclosure:

Automatic Detection: Smoke

ADB	Room Design Character	B0607A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	B0607A	Multi-bed room: Day care, 4 beds		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3: Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5 i.e. Imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1900mm, double equal leaves, vision panel, obscurable; bed access
Windows:	(HTM 55) Clear, solar control, privacy control
Internal Glazing:	(HTM 57) Clear with privacy control
Hatch:	
Notes:	

ADB	Schedule of Components by Room	B0607A

Project: SG01 South Glasgow v01 (draft)
Department:
Room: B0607A Multi-bed room: Day care, 4 beds
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
4		4	BED7001	BED HEAD BUFFER/DOCKING device, bed & wall protection, to design		1
5		5	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
1		1	CLOC1000	CLOCK, synchronous, wall mounted, assembly: 1 x CLO002, CLOCK synchronous, wall mounted 1 x OUT002, OUTLET cable, 13 amp		1
1		1	DATA1000	DATA POINTS incorporating two twin power sockets and two data/telecom points, assembly: 2 x OUT010, SOCKET outlet, switched, 13 amp, twin 2 x OUT131, SOCKET outlet double data/voice, wall/trunking mounted		1
4		4	LIG003	LUMINAIRE, reading, adjustable arm, 100 watt		1
4		4	MEST1008	MEDICAL SERVICE TRUNKING, day patient bed/trolley space, to HTM 08-03 requirements, assembly: 1 x CAL012, RESET UNIT, with repeat lamp, patient/staff call 1 x CAL043, PUSH BUTTON patient/staff call with socket for extension pear push, trunking mounted 1 x CAL047, PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, trunking mounted 1 x ECS1000, ENTERTAINMENT SYSTEM, to client specification. 4 x OUT012, SOCKET outlet switched 13amp twin, trunking mounted 4 x OUT121, SOCKET outlet, computer data, single 1x OUT470, OUTLET, oxygen, medical 1 x OUT475, OUTLET, vacuum, medical 1 x TRU1001, MEDICAL SERVICE TRUNKING, horizontal, length as drawn.		1
1		1	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
1		1	SWC8018	SWITCH 10A retractable, integrated with lighting control system		1
4		4	TRA1003	TRACK, curtain, length and shape as drawn.		1
2		2	WHBN1000	WASH BASIN, clinical, with non touch panel mounted tap/s, assembly: 1 x BAS101, BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM 1 x TAP894, TAP bib, hospital pattern, integral thermostatic mixer, automatic action with sensor operation. HTM64TBH6 1 x WAS100, WASTE, unslotted flush-grated, metal, 1.1/4 in. HTM64WT1 1 x WAS1000, TRAP, concealed waste, for back outlet basins.		1
4		4	BRA003	BRACKET, holder, suction unit, wall mounted		2

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ADB	Schedule of Components by Room	B0607A

Project: SG01 South Glasgow v01 (draft)
Department:
Room: B0607A Multi-bed room: Day care, 4 beds
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
2		2	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
2		2	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
2		2	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS438	DISPENSER, disposable gloves set of 3 and disposable apron, wall mounted		2
4		4	HOO019	HOOK, single, small, wall mounted		2
4		4	BED013	BED Kings Fund, variable height, two-way tilt, adjustable backrest, bedstripper, on castors		3
4		4	CHA007	CHAIR, easy, with open arms, high back, upholstered		3
4		4	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	COMP1000	COMPUTER; complete with keyboard, screen and telephone, assembly: 1 x COM031, COMPUTER CPU 1 x COM033, COMPUTER KEYBOARD 1 x COM1000, COMPUTER MONITOR, TFT, digital flat panel display, desk top 1 x TEL1000, TELEPHONE, handset		3
1		1	DES1000	DESK; cantilever; cable management; modesty panel; 900W 700D		3
1		1	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
4		4	LOC002	LOCKER, bedside, 3 compartment, towel rail at rear, on castors, 902H 485W 485D		3
4		4	MAT004	MATTRESS, Kings Fund bed, standard backrest, 1955L 865W 125D		3
1		1	MST007	TROLLEY, lockable, closed, with worktop, approx 900H 660W 500D, 600mm facing		3
4		4	TAB073	TABLE, overbed, cantilevered		3

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ADB	Room Data Sheet	B0607A1

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	B0607A1	Clinical Skills Lab		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Using monitoring/diagnostic equipment. 2) Clinical hand washing. 3) Work assessment and training.			
Personnel:	up to 10 persons			
Planning Relationships:				
Space Data:	**Area (m²):**	15.00	**Height (mm):**	2,700

Notes: To be used as a training area.

ADB	Room Environmental Data	B0607A1

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	B0607A1	Clinical Skills Lab		
Room Number:			**Revision Date:**	01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	21	0
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		0
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:	0	
Filtration (%DSE and % Arrestance):	/	0
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	100	Floor. 200-400 Bed centre. 30-50 Bedhead.
Service Illumination Night (Lux):	5.0	Floor. 1-5 Bed centre. 1 Bedhead. Evening (lux): 50 Bed centre.
Local Illumination (Lux):	150.0	Bedhead
Colour Rendering Required:	Y	Not required night & local.
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	40	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	B0607A1

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	B0607A1	Clinical Skills Lab		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3: Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5 i.e. Imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) As per Architects door schedule.
Windows:	(HTM 55) Clear, solar control, privacy control.
Internal Glazing:	(HTM 57) Clear with privacy control
Hatch:	N/A

Notes:

ADB	Schedule of Components by Room	B0607A1

Project: SG01 South Glasgow v01 (draft)
Department:
Room: B0607A1 Clinical Skills Lab
Room Number: **Revision Date:** 01/06/2010

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	LOU003	LOUDSPEAKER, ceiling mounted		1
7		7	OUT004	OUTLET cable, fused, 13 amp, ceiling mounted		1
12		12	OUT012	SOCKET outlet switched 13amp twin, trunking mounted		1
1		1	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
12		12	OUT131	SOCKET outlet double data/voice, wall/trunking mounted		1
1		1	OUT8001	SOCKET, outlet data, ceiling mounted		1
1		1	PAN9268	PANEL, facilities, laptop, pc, video, DVD, or any other media		1
1		1	PAN9269	Control, projection		1
1		1	SWC8018	SWITCH 10A retractable, integrated with lighting control system		1
2		2	TAP892	TAP, bib, 2x8 mm thermostatic mixer, automatic action, sensor operated, non-touch, HTM 64 TBH6		1
1		1	TRO602	TROUGH scrub-up, hospital pattern, stainless steel, double, 100mm upstand, 950H 1600W450D, HTM64		1
1		1	WHB1000	WASH BASIN, clinical, with non touch panel mounted tap/s, assembly: 1 x BAS101, BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM 1 x TAP1000, TAP, hospital pattern, bib, integral thermostatic mixer, single lever with fixed horizontal nozzle. HTM64 TBH2a. 1 x WAS100, WASTE, unslotted flush-grated, metal, 1.1/4 in. HTM64WT1 1 x WAS1000, TRAP, concealed waste, for back outlet basins.		1
1		1	WKT1005H	WORKTOP, 920 H 700D 40mm thick with 50mm upstand, length as drawn		1
1		1	BOA9299	BOARD, SMART board		2
2		2	DIS008	DISPENSER, nailbrush, wall mounted		2
2		2	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
2		2	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS438	DISPENSER, disposable gloves set of 3 and disposable apron, wall mounted		2
10		10	HOO019	HOOK, single, small, wall mounted		2
1		1	PRO026	PROJECTOR, multi-media, ceiling mounted		2
1		1	AUD9007	SOUND SYSTEM/PA, lecture hall		3
1		1	CHA007	CHAIR, easy, with open arms, high back, upholstered		3
1		1	CHA302	CHAIR, swivel, height adjustable, medium back, wipeable, 5 star base, on castors		3
10		10	CHA317	CHAIR, upright, upholstered, stacking, wipeable		3
1		1	CHA9290	CHAIR, lecture theatre		3

ADB	Schedule of Components by Room	B0607A1

Project: SG01 South Glasgow v01 (draft)
Department:
Room: B0607A1 Clinical Skills Lab
Room Number: **Revision Date:** 01/06/2010

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
10		10	COM049	COMPUTER MONITOR, 17"; TFT, digital flat panel display, high-resolution screens, desk top		3
1		1	COM9200	COMPUTER with CPU, 17 inch LCD, Keyboard and mouse, PACS compatible when required.		3
5		5	COU007	COUCH, examination/treatment, (2 section), with paper roll holder, variable height, retractable wheels		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
5		5	MAN9003	MANIKIN, full size, resus training		3
1		1	MON7000	MONITOR; 32" LCD TV; Flat Screen; with DVD/CD player; for wall mounting		3

ADB	Room Data Sheet	B0616A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	B0616A	Multi-bed room: Cardiac day care, 4 beds		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Patient may arrive on a trolley or in a bed. 3) Transfer patient to/from bed, stretcher trolley, or wheelchair. 4) Patient to undress/dress in vicinity of bed, with/without assistance. 5) Patient to receive therapeutic and clinical attention from health team staff. 6) Patient to read and write. 7) Patient to take meals in bed or by the bed. 8) Patient to receive visitors. 9) Holding clothing and personal effects. 10) Using monitoring/diagnostic equipment. 11) Using computer workstation(s). 12) Clinical hand washing.			
Personnel:	4 x Patients 8 x Others			
Planning Relationships:	WC/shower or bath/personal washbasin via lobby /or conveniently located - project team option.			
Space Data:	**Area (m²):**	66.00	**Height (mm):**	2,700

Notes:

Space may require to accommodate use of hoist.
Second computer point per bed - project team option.

ADB	Room Environmental Data	B0616A

Project:	SG01	South Glasgow v01 (draft)
Department:		
Room:	B0616A	Multi-bed room: Cardiac day care, 4 beds
Room Number:		**Revision Date:** 01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	21	26°C not to be exceeded for more than 50 hours per annum against CIBSE TSY weather data
Summer Temperature (DegC):	26	
Mechanical Ventilation (Supply ac/hr):	6.0	
Mechanical Ventilation (Extract ac/hr):	6.0	
Pressure Relative to Adjoining Space:	NEG to corri	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		

General Notes:

LIGHTING		
Service Illumination (Lux):		Daytime - simple examination average over bed (lux): 300 Daytime - bedhead (lux): 30-50
Service Illumination Night (Lux):		observation/night watch 5-10 lux average at bed head
Local Illumination (Lux):	1,000.0	local
Colour Rendering Required:	Y	Ra 90 local light
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes:

Type of control: S/N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 19
Areas in which VDT present to comply with CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001

Emergency escape route lighting required? (Yes/No): N
Not normally required unless need to comply with BS 5266.
Y = Dedicated emergency lighting required in compliance with BS 5266.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0.85 metres above finished floor level.

NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	40	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:

SAFETY		
Hot Surface Max. Temp (DegC):	43	Maximum surface temperature (degC): 43
Hot Water Max. Temp (DegC):	41	To be achieved in compliance with SHTN 6 'The Safe Operation and Maintenance of Thermostatic Mixing Valves

General Notes:

FIRE

Enclosure:

Automatic Detection: Smoke

ADB	Room Design Character	B0616A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	B0616A	Multi-bed room: Cardiac day care, 4 beds		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5 i.e. Imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1900mm, double equal leaves, vision panel, obscurable; bed access
Windows:	(HTM 55) Clear, solar control, privacy control
Internal Glazing:	(HTM 57)
Hatch:	
Notes:	

ADB	Schedule of Components by Room	B0616A

Project: SG01 South Glasgow v01 (draft)
Department:
Room: B0616A Multi-bed room: Cardiac day care, 4 beds
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
4		4	BED7001	BED HEAD BUFFER/DOCKING device, bed & wall protection, to design		1
5		5	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
1		1	CLOC1000	CLOCK, synchronous, wall mounted, assembly: 1 x CLO002, CLOCK synchronous, wall mounted 1 x OUT002, OUTLET cable, 13 amp		1
1		1	DATA1000	DATA POINTS incorporating two twin power sockets and two data/telecom points, assembly: 2 x OUT010, SOCKET outlet, switched, 13 amp, twin 2 x OUT131, SOCKET outlet double data/voice, wall/trunking mounted		1
4		4	LIG003	LUMINAIRE, reading, adjustable arm, 100 watt		1
4		4	MEST1000	MEDICAL SERVICE TRUNKING, acute bed/trolley space, to HTM 08-03 requirements, assembly: 1 x CAL008, PUSH BUTTON staff crash call, reset and integral/adjacent indicator lamp, wall/trunking mounted 1 x CAL012, RESET UNIT, with repeat lamp, patient/staff call 1 x CAL043, PUSH BUTTON patient/staff call with socket for extension pear push, trunking mounted 1 x CAL047, PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, trunking mounted 1 x ECS1000, ENTERTAINMENT SYSTEM, to client specification. 4 x OUT012, SOCKET outlet switched 13amp twin, trunking mounted 4 x OUT121, SOCKET outlet, computer data, single 1 x OUT151, SOCKET outlet patient monitoring, wall/trunking mounted 1 x OUT215, SOCKET outlet, telephone 1 x OUT453, OUTLET, 4 kPa compressed air, medical 1 x OUT470, OUTLET, oxygen, medical 1 x OUT475, OUTLET, vacuum, medical 1 x TRU1001, MEDICAL SERVICE TRUNKING, horizontal, length as drawn.		1
1		1	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
4		4	SHE572	SHELF, 300W 400D		1
1		1	SWC8018	SWITCH 10A retractable, integrated with lighting control system		1
4		4	TRA1003	TRACK, curtain, length and shape as drawn.		1

ADB	Schedule of Components by Room	B0616A

Project: SG01 South Glasgow v01 (draft)
Department:
Room: B0616A Multi-bed room: Cardiac day care, 4 beds
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	WHB1000	WASH BASIN, clinical, with non touch panel mounted tap/s, assembly: 1 x BAS101, BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM 1 x TAP1000, TAP, hospital pattern, bib, integral thermostatic mixer, single lever with fixed horizontal nozzle. HTM64 TBH2a. 1 x WAS100, WASTE, unslotted flush-grated, metal, 1.1/4 in. HTM64WT1 1 x WAS1000, TRAP, concealed waste, for back outlet basins.		1
1		1	WKT140	WORKTOP, cantilevered from wall, 600W 650D		1
4		4	BRA003	BRACKET, holder, suction unit, wall mounted		2
4		4	BRA8013	BRACKET, monitor, height adjustable, wall mounted		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS438	DISPENSER, disposable gloves set of 3 and disposable apron, wall mounted		2
4		4	HOO019	HOOK, single, small, wall mounted		2
4		4	BED015	BED variable height, two-way tilt, adjustable backrest and knee-break, built-in bed extension with mattress retainer, electrically operated, on castors, 380-780H 2260/2430L 1010W		3
4		4	CHA007	CHAIR, easy, with open arms, high back, upholstered		3
4		4	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	COMP1000	COMPUTER; complete with keyboard, screen and telephone, assembly: 1 x COM031, COMPUTER CPU 1 x COM033, COMPUTER KEYBOARD 1 x COM1000, COMPUTER MONITOR, TFT, digital flat panel display, desk top 1 x TEL1000, TELEPHONE, handset		3
1		1	DES1000	DESK; cantilever; cable management; modesty panel; 900W 700D		3
1		1	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
4		4	LOC002	LOCKER, bedside, 3 compartment, towel rail at rear, on castors, 902H 485W 485D		3
4		4	MON013	MONITOR, vital signs, multi-parameter, with accessories, 280H 360W 215D		3
1		1	MST007	TROLLEY, lockable, closed, with worktop, approx 900H 660W 500D, 600mm facing		3
4		4	TAB073	TABLE, overbed, cantilevered		3

ADB	Room Data Sheet	B1602B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	B1602B	Single bedroom, isolation: Critical care		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Accommodating a patient needing continuous medical and nursing care using piped medical gases, vacuum and life-support system. 2) Medical and nursing procedures requiring all sides access to patient whilst 1-6 staff use specialised equipment. 3) Self dispensing medication or drugs. 4) Monitoring vital physiological signs. 5) Air control to provide source or protective isolation for patients at risk or liable to infect others. 6) Clinical hand washing.			
Personnel:	1 x Patient Up to 8 Staff			
Planning Relationships:	Access via gowning lobby.			
Space Data:	**Area (m²):**	26.00	**Height (mm):**	3,000

Notes:

Push button 'crash' call is connected to hospital main switch board.
Engineering services are integral to ceiling mounted supply system & include power supply & medical gases.
Space required for equipment used intermittently at the bed space includes:
EEG machine;
mobile imaging;
ultrasound/echocardiography;
endoscopy (fibre-optic light source);
defibrillators;
invasive/non-invasive cardiac output monitoring devices
haemodialysis;
haeomfiltration.

Water supply & drainage to haemodialysis machine see HBN Critical care;
Joint union connection - (MSP008). Potable water - 15dia. stainless steel self-sealing instantaneous adaptor with finishing plate.
Drain - 35 dia. stainless steel self-sealing instantaneous adaptor & pipe fixed to wall.
Discharges over stainless steel Tundish - (DSP212).
Tundish trap by gulley (maintained by WHB).
Gulley - (DSP208) back inlet with sealed top.

DIS026 (Medical hand sanitizer dispenser) to be located outside of room next to door entrance for people to use before entering the room.

ADB	Room Environmental Data	B1602B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	B1602B	Single bedroom, isolation: Critical care		
Room Number:			**Revision Date:**	01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	27	Summer and winter (local control) temperature control: 16 to 27 deg.C
Summer Temperature (DegC):	16	
Mechanical Ventilation (Supply ac/hr):	6.0	Mechanical ventilation (supply): To provide source or protective isolation.
Mechanical Ventilation (Extract ac/hr):	6.0	Mechanical ventilation (extract): To provide source or protective isolation.
Pressure Relative to Adjoining Space:	BAL	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):	60	

General Notes:

LIGHTING		
Service Illumination (Lux):		Daytime - general (lux): 100 1. Average at floor level of circulation space. 2. Maximum point illuminance 170 lux. Bedhead - day (lux): Range 30 to 50 average
Service Illumination Night (Lux):		Night - general (lux) 5 maximum Night - watch (lux): 20 1. Average at pillow 2. Maximum point illuminance 40 lux. Night - bedhead (lux): range 5-10 average
Local Illumination (Lux):		Simple observation / exam, clinical: 400 lux 1. Average over bed Local examination lamp (lux): 1000. 1. Average over bed
Colour Rendering Required:	Y	Not applicable to night lighting. General lighting - Colour rendering characteristics (Ra): 80 Examination lighting - Colour rendering characteristics (Ra): 90 Minimum colour appearance of 4000K
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes: Type of control N/Sp/S

NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:

SAFETY		
Hot Surface Max. Temp (DegC):	43	Maximum surface temperature (degC): 43 To be achieved in compliance with SHTN 6 'The Safe Operation and Maintenance of Thermostatic Mixing Valves
Hot Water Max. Temp (DegC):	41	

General Notes:

FIRE

Enclosure:

Automatic Detection: Smoke

ADB	Room Design Character	B1602B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	B1602B	Single bedroom, isolation: Critical care		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 3 i.e. Impervious, jointless, smooth Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3: Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 1 i.e. Smooth, imperforate, jointless Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Two sets of doors: 1x 1500mm, one & a half leaf, vision panel, obscurable; bed access. 1x 900mm, single leaf, vision panel, obscurable; person access
Windows:	(HTM 55) Clear, solar control, privacy control
Internal Glazing:	(HTM 57) Clear with privacy control
Hatch:	
Notes:	

ADB	Schedule of Components by Room	B1602B

Project: SG01 South Glasgow v01 (draft)
Department:
Room: B1602B Single bedroom, isolation: Critical care
Room Number: **Revision Date:** 01/06/2010

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
1		1	DATA1000	DATA POINTS incorporating two twin power sockets and two data/telecom points, assembly: 2 x OUT010, SOCKET outlet, switched, 13 amp, twin 2 x OUT131, SOCKET outlet double data/voice, wall/trunking mounted		1
1		1	HOI006	HOIST PATIENT, electric, 24V, track ceiling mounted. (Length of the track to suit the individual needs.)		1
1		1	OUT010	SOCKET outlet switched 13amp twin		1
1		1	OUT054	CONNECTION UNIT, unswitched, 13 amp, neon indicator		1
1		1	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
1		1	PEN017	PENDANT DATA services, lateral and vertical movement, ceiling mounted		1

ADB	Schedule of Components by Room	B1602B

Project: SG01 South Glasgow v01 (draft)
Department:
Room: B1602B Single bedroom, isolation: Critical care
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	PEN7510	PENDANT INTENSIVE/CRITICAL CARE medical and power supply unit, 2 articulated arms, with docking system, ceiling mounted, medical gases and power outlets comprising:, to HTM 08-03 requirements, assembly: 1 x CAL008, PUSH BUTTON staff crash call, reset and integral/adjacent indicator lamp, wall/trunking mounted 1 x CAL012, RESET UNIT, with repeat lamp, patient/staff call 1 x CAL043, PUSH BUTTON patient/staff call with socket for extension pear push, trunking mounted 1 x CAL047, PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, trunking mounted 14 x OUT012, SOCKET outlet switched 13amp twin, trunking mounted 2 x OUT1000, OUTLET, oxygen/helium mixture, medical. 8 x OUT121, SOCKET outlet, computer data, single 1 x OUT151, SOCKET outlet patient monitoring, wall/trunking mounted 1 x OUT215, SOCKET outlet, telephone 4 x OUT453, OUTLET, 4 kPa compressed air, medical 2 x OUT461, OUTLET, nitrous oxide, medical 2 x OUT462, OUTLET nitrous oxide/oxygen mixture medical, trunking mounted 4 x OUT470, OUTLET, oxygen, medical 4 x OUT475, OUTLET, vacuum, medical 2 x OUT480, OUTLET, gas scavenging (AGS), medical 1 x TRU1005, MEDICAL SERVICE TRUNKING, vertical, 600mm		1
1		1	SWC8018	SWITCH 10A retractable, integrated with lighting control system		1
1		1	WHBN1000	WASH BASIN, clinical, with non touch panel mounted tap/s, assembly: 1 x BAS101, BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM 1 x TAP894, TAP bib, hospital pattern, integral thermostatic mixer, automatic action with sensor operation. HTM64TBH6 1 x WAS100, WASTE, unslotted flush-grated, metal, 1.1/4 in. HTM64WT1 1 x WAS1000, TRAP, concealed waste, for back outlet basins.		1
1		1	BOA034	BOARD, marker, whiteboard, dry-wipe, with pen holder, wall mounted, 600H 900W		2

ADB	Schedule of Components by Room	B1602B

Project: SG01 South Glasgow v01 (draft)
Department:
Room: B1602B Single bedroom, isolation: Critical care
Room Number: **Revision Date:** 01/06/2010

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	CAB065	CABINET, drugs, self dispensing medication, lockable, wall mounted, 315H 210W 155D		2
1		1	CLO004	CLOCK battery with second sweep hand, wall mounted		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS438	DISPENSER, disposable gloves set of 3 and disposable apron, wall mounted		2
1		1	BED016	BED, CCU/ITU, radio translucent rising backrest, two-way tilt, height adjustable (685-860), on castors		3
2		2	CHA317	CHAIR, upright, upholstered, stacking, wipeable		3
1		1	COMP1001	COMPUTER; complete with keyboard and screen, assembly: 1 x COM031, COMPUTER CPU 1 x COM033, COMPUTER KEYBOARD 1 x COM1000, COMPUTER MONITOR, TFT, digital flat panel display, desk top		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
6		6	INF002	INFUSION volumetric pump, 188H 110W 60D		3
1		1	MAT006	MATTRESS, ITU/CCU bed, extra care		3
1		1	MON013	MONITOR, vital signs, multi-parameter, with accessories, 280H 360W 215D		3
1		1	MST005	TROLLEY, half size open frame, up to 5 sets of runners, 400mm facing, approx 850H 450W 350D		3
1		1	MST007	TROLLEY, lockable, closed, with worktop, approx 900H 660W 500D, 600mm facing		3
8		8	SYR003	SYRINGE pump, battery operated, 170H 35W 75D		3
1		1	TRN007	TRANSPORTER ventilator, 540H 600W 580D, (compatible with medical supply unit - PEN025)		3
1		1	TRO130	TROLLEY, dressing/instrument, stainless steel, antistatic castors, 870H 450W450D		3
1		1	VEN025	VENTILATOR, portable, adjustable minute volume, 460H 470W 310D		3
1		1	WAR053	WARMER, blood/fluid, maintains temperature between 36 and 43 deg.C at flow rates up to 500 ml/min, 35H 235W 273D		3

ADB	Room Data Sheet	B1802C

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	B1802C	Single bedroom: Children/young people, with relatives overnight stay		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Patient may arrive on a trolley or in a bed. 3) Transfer patient to/from bed, stretcher trolley, or wheelchair. 4) Patient to undress/dress in vicinity of bed, with/without assistance. 5) Patient to receive therapeutic and clinical attention from health team staff. 6) Self dispensing medication or drugs. 7) Patient to read, writes, listens to radio, views TV and use telephone. 8) Patient to take meals in bed or by the bed. 9) Patient to receive visitors. 10) Holding clothing and personal effects. 11) Displaying cards and pictures. 12) Day and overnight stays by parents, relatives and carers. 13) Children to view, through glazed panels, children and staff in adjacent spaces. 14) Using monitoring/diagnostic equipment. 15) Clinical hand washing.			
Personnel:	1 x Patient 3 x Others			
Planning Relationships:	Close to staff base. Close to supporting ancillary rooms. En-suite shower/wc/wash.			
Space Data:	**Area (m²):**	15.00	**Height (mm):**	2,700

Notes:

Child bed can be replaced by variable height cot - project team option.
Dispenser gloves and aprons situated on outside entrance of the room.
Magnetic board can be replaced by Velcro board - project team option.
Maintaining safety and security, all the equipment and furniture must be safe for children.
Safe for valuables - project team option.

ADB	Room Environmental Data	B1802C

Project:	SG01	South Glasgow v01 (draft)
Department:		
Room:	B1802C	Single bedroom: Children/young people, with relatives overnight stay
Room Number:		**Revision Date:** 01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	21	26oC not to be exceeded for more than 50 hours per annum against CIBSE DSY weather data
Summer Temperature (DegC):	26	Winter temperature (degC): up to 24, independent control
Mechanical Ventilation (Supply ac/hr):		Supply air rate at 40 litres per second
Mechanical Ventilation (Extract ac/hr):		1. Bedroom balanced or negative with respect to the adjoining corridor. 2. Bedroom positive with respect to the en-suite sanitary room
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		

General Notes: Pressure relative: WC NEG to bedroom.

LIGHTING		
Service Illumination (Lux):		Daytime - general (lux): 100 1. Average at floor level of circulation space. 2. Maximum point illuminance 170 lux. Daytime - bed (lux): 300 1.Average over bed area at working plane level for general nursing purposes. 2. Maximum point illuminance 520 Lux. Daytime - bedhead (lux): 30-50 average
Service Illumination Night (Lux):		Night - general (lux): 5 1. Average at floor level of circulation space. 2. Maximum point illuminance 10 lux. 3. Maximum at bed pillow 0.5 lux. Night - bedhead (lux): 5 1. Average at bed pillow. Night - watch (lux): 20 1. Average at bed pillow. 2. Maximum point illuminance at pillow 40 lux.
Local Illumination (Lux):		Local task illumination (lux): 300 1. Average at bedhead for patient reading and general nursing purposes. 2. Maximum point illuminance 520 Lux. 3. Average of 1000 Lux at bedhead where examination or treatment is to be carried out. Bedhead. Control ON/OFF/ DIM switch & bedhead.
Colour Rendering Required:	Y	Not applicable to night lighting. General lighting - Colour rendering characteristics (Ra): 80 Examination lighting - Colour rendering characteristics (Ra): 90 Minimum colour appearance of 4000K
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes:

Type of control: S/N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 19

Areas in which VDT present to comply with CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001

Emergency escape route lighting required? (Yes/No): N
Not normally required unless need to comply with BS 5266.
Y = Dedicated emergency lighting required in compliance with BS 5266.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0.85 metres above finished floor level.

NOISE

Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:

SAFETY

Hot Surface Max. Temp (DegC):	43	Maximum surface temperature (degC): 43
Hot Water Max. Temp (DegC):	41	To be achieved in compliance with SHTN 6 'The Safe Operation and Maintenance of Thermostatic Mixing Valves -

General Notes:

FIRE

Enclosure:

Automatic Detection: Smoke

ADB	Room Design Character	B1802C

Project:	SG01	South Glasgow v01 (draft)
Department:		
Room:	B1802C	Single bedroom: Children/young people, with relatives overnight stay
Room Number:		**Revision Date:** 01/06/2010

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5 i.e. Imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Two sets of doors: 1x 1500mm, one & a half leaf, vision panel, obscurable, lockable; bed access. 1x 1000mm, single leaf, plain flush, occupancy indicator, lockable, outside emergency release; wheelchair access. Door hinge protectors
Windows:	(HTM 55) Clear, solar control, privacy control. Window opening restrictors max 100mm at bottom
Internal Glazing:	(HTM 57) Blinds for glazed screens
Hatch:	
Notes:	

ADB	Schedule of Components by Room	B1802C

Project: SG01 South Glasgow v01 (draft)
Department:
Room: B1802C Single bedroom: Children/young people, with relatives overnight stay
Room Number: **Revision Date:** 01/06/2010

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BED7001	BED HEAD BUFFER/DOCKING device, bed & wall protection, to design		1
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
1		1	DATA1000	DATA POINTS incorporating two twin power sockets and two data/telecom points, assembly: 2 x OUT010, SOCKET outlet, switched, 13 amp, twin 2 x OUT131, SOCKET outlet double data/voice, wall/trunking mounted		1
1		1	LIG003	LUMINAIRE, reading, adjustable arm, 100 watt		1
1		1	MEST1000	MEDICAL SERVICE TRUNKING, acute bed/trolley space, to HTM 08-03 requirements, assembly: 1 x CAL008, PUSH BUTTON staff crash call, reset and integral/adjacent indicator lamp, wall/trunking mounted 1 x CAL012, RESET UNIT, with repeat lamp, patient/staff call 1 x CAL043, PUSH BUTTON patient/staff call with socket for extension pear push, trunking mounted 1 x CAL047, PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, trunking mounted 1 x ECS1000, ENTERTAINMENT SYSTEM, to client specification. 4 x OUT012, SOCKET outlet switched 13amp twin, trunking mounted 4 x OUT121, SOCKET outlet, computer data, single 1 x OUT151, SOCKET outlet patient monitoring, wall/trunking mounted 1 x OUT215, SOCKET outlet, telephone 1 x OUT453, OUTLET, 4 kPa compressed air, medical 1 x OUT470, OUTLET, oxygen, medical 1 x OUT475, OUTLET, vacuum, medical 1 x TRU1001, MEDICAL SERVICE TRUNKING, horizontal, length as drawn.		1
2		2	OUT010	SOCKET outlet switched 13amp twin		1
1		1	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
1		1	RAI134	RAIL, clinical equipment, wall mounted, 1600mm		1
1		1	SAF005	SAFE, wall, recessed, 150H 200W 150D		1
1		1	SWC8018	SWITCH 10A retractable, integrated with lighting control system		1

ADB	Schedule of Components by Room	B1802C

Project: SG01 South Glasgow v01 (draft)
Department:
Room: B1802C Single bedroom: Children/young people, with relatives overnight stay
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	WHBN1000	WASH BASIN, clinical, with non touch panel mounted tap/s, assembly: 1 x BAS101, BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM 1 x TAP894, TAP bib, hospital pattern, integral thermostatic mixer, automatic action with sensor operation. HTM64TBH6 1 x WAS100, WASTE, unslotted flush-grated, metal, 1.1/4 in. HTM64WT1 1 x WAS1000, TRAP, concealed waste, for back outlet basins.		1
1		1	BED020	BED, fold down		2
1		1	BOA022	BOARD, display/notice, magnetic, wall mounted, 900H 600W		2
1		1	BRA003	BRACKET, holder, suction unit, wall mounted		2
1		1	CAB065	CABINET, drugs, self dispensing medication, lockable, wall mounted, 315H 210W 155D		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS438	DISPENSER, disposable gloves set of 3 and disposable apron, wall mounted		2
1		1	RAC362	RACK, catheter, vertical, 2 compartments, 420H 160W 65D		2
1		1	BED008	BED, Kings Fund, child, variable height, two-way tilt, adjustable backrest, on castors		3
1		1	CHA007	CHAIR, easy, with open arms, high back, upholstered		3
1		1	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	COMP1000	COMPUTER; complete with keyboard, screen and telephone, assembly: 1 x COM031, COMPUTER CPU 1 x COM033, COMPUTER KEYBOARD 1 x COM1000, COMPUTER MONITOR, TFT, digital flat panel display, desk top 1 x TEL1000, TELEPHONE, handset		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	LOC002	LOCKER, bedside, 3 compartment, towel rail at rear, on castors, 902H 485W 485D		3
1		1	MAT003	MATTRESS, Kings Fund bed, child, standard backrest, 1655L 865W 125D		3
1		1	MST007	TROLLEY, lockable, closed, with worktop, approx 900H 660W 500D, 600mm facing		3
1		1	TAB073	TABLE, overbed, cantilevered		3
1		1	WAR007	WARDROBE, 1800H 400W 400D		3

ADB	Room Data Sheet	B1805C

Project:	SG01	South Glasgow v01 (draft)
Department:		
Room:	B1805C	Single bedroom, isolation: Children/young people, with relatives overnight stay
Room Number:		**Revision Date:** 01/06/2010

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Patient may arrive on a trolley or in a bed. 3) Transfer patient to/from bed, stretcher trolley, or wheelchair. 4) Patient to undress/dress in vicinity of bed, with/without assistance. 5) Patient to receive therapeutic and clinical attention from health team staff. 6) Self dispensing medication or drugs. 7) Patient to read, writes, listens to radio, views TV and use telephone. 8) Patient to take meals in bed or by the bed. 9) Patient to receive visitors. 10) Holding clothing and personal effects. 11) Displaying cards and pictures. 12) Day and overnight stays by parents, relatives and carers. 13) Children to view, through glazed panels, children and staff in adjacent spaces. 14) Using monitoring/diagnostic equipment. 15) Holding toys, books and games. 16) Clinical hand washing.
Personnel:	1 x Patient 3 x Others
Planning Relationships:	Access via gowning lobby. Close to staff base. Close to supporting ancillary rooms. En-suite shower/wc/wash.

Space Data:	**Area (m²):**	15.00	**Height (mm):**	3,000

Notes:

Child bed can be replaced by variable height cot - project team option.
Magnetic board can be replaced by Velcro board - project team option.
Maintaining safety and security, all the equipment and furniture must be safe for children.
Safe for valuables - project team option.

ADB	Room Environmental Data	B1805C

Project:	SG01	South Glasgow v01 (draft)
Department:		
Room:	B1805C	Single bedroom, isolation: Children/young people, with relatives overnight stay
Room Number:		**Revision Date:** 01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	21	26oC not to be exceeded for more than 50 hours per annum against CIBSE DSY weather data
Summer Temperature (DegC):	26	Winter temperature (degC): up to 24, independent control
Mechanical Ventilation (Supply ac/hr):		See Table 1 of HBN 04-01 Supplement 1 for guide to air volumes and pressure differentials.
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:	0	
Filtration (%DSE and % Arrestance):	85/	1. See Table 1 of HBN 04-01 Supplement 1 for further details relating to pressure differentials. 2. Mechanically ventilated to allow positive pressure of Isolation Room relevant to en-suite and negative pressure relative to lobby space. 3. 10 pascals pressure differential from lobby to bedroom 4. Negative pressure differential between en-suite and Isolation Room. 5. All supply air to bedroom to be derived from the lobby.
Humidity (%RH):		

General Notes: Pressure relative: WC NEG to bedroom.

LIGHTING		
Service Illumination (Lux):		Daytime - general (lux): 100 1. Average at floor level of circulation space. 2. Maximum point illuminance 170 lux. Daytime - bed (lux): 300 1.Average over bed area at working plane level for general nursing purposes. 2. Maximum point illuminance 520 Lux. Daytime - bedhead (lux): 30-50 average
Service Illumination Night (Lux):		Night - general (lux): 5 1. Average at floor level of circulation space. 2. Maximum point illuminance 10 lux. 3. Maximum at bed pillow 0.5 lux. Night - bedhead (lux): 5 1. Average at bed pillow. Night - watch (lux): 20 1. Average at bed pillow. 2. Maximum point illuminance at pillow 40 lux.
Local Illumination (Lux):		Local task illumination (lux): 300 1. Average at bedhead for patient reading and general nursing purposes. 2. Maximum point illuminance 520 Lux. 3. Average of 1000 Lux at bedhead where examination or treatment is to be carried out. Bedhead. Control ON/OFF/ DIM switch & bedhead.
Colour Rendering Required:	Y	Not applicable to night lighting. General lighting - Colour rendering characteristics (Ra): 80 Examination lighting - Colour rendering characteristics (Ra): 90 Minimum colour appearance of 4000K
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes:

Type of control: S/N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 19

Areas in which VDT present to comply with CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001

Emergency escape route lighting required? (Yes/No): N
Not normally required unless need to comply with BS 5266.
Y = Dedicated emergency lighting required in compliance with BS 5266.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0.85 metres above finished floor level.

NOISE

Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:

SAFETY

Hot Surface Max. Temp (DegC):	43	Maximum surface temperature (degC): 43
Hot Water Max. Temp (DegC):	41	To be achieved in compliance with SHTN 6 'The Safe Operation and Maintenance of Thermostatic Mixing Valves -

General Notes:

FIRE

Enclosure:

Automatic Detection: Smoke

ADB	Room Design Character	B1805C

Project:	SG01	South Glasgow v01 (draft)
Department:		
Room:	B1805C	Single bedroom, isolation: Children/young people, with relatives overnight stay
Room Number:		**Revision Date:** 01/06/2010

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5 i.e. Imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Two sets of doors: 1x 1500mm, one & a half leaf, vision panel, obscurable, lockable; bed access. 1x 1000mm, single leaf, plain flush, occupancy indicator, lockable, outside emergency release; wheelchair access. Door hinge protectors
Windows:	(HTM 55) Clear, solar control, privacy control. Window opening restrictors max 100mm at bottom, lockable, low sill
Internal Glazing:	(HTM 57) Observation window. Blinds, controlled by both sides
Hatch:	

Notes:

ADB	Schedule of Components by Room	B1805C

Project: SG01 South Glasgow v01 (draft)
Department:
Room: B1805C Single bedroom, isolation: Children/young people, with relatives overnight stay
Room Number: **Revision Date:** 01/06/2010

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BED7001	BED HEAD BUFFER/DOCKING device, bed & wall protection, to design		1
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
1		1	DATA1000	DATA POINTS incorporating two twin power sockets and two data/telecom points, assembly: 2 x OUT010, SOCKET outlet, switched, 13 amp, twin 2 x OUT131, SOCKET outlet double data/voice, wall/trunking mounted		1
1		1	LIG003	LUMINAIRE, reading, adjustable arm, 100 watt		1
1		1	MEST1000	MEDICAL SERVICE TRUNKING, acute bed/trolley space, to HTM 08-03 requirements, assembly: 1 x CAL008, PUSH BUTTON staff crash call, reset and integral/adjacent indicator lamp, wall/trunking mounted 1 x CAL012, RESET UNIT, with repeat lamp, patient/staff call 1 x CAL043, PUSH BUTTON patient/staff call with socket for extension pear push, trunking mounted 1 x CAL047, PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, trunking mounted 1 x ECS1000, ENTERTAINMENT SYSTEM, to client specification. 4 x OUT012, SOCKET outlet switched 13amp twin, trunking mounted 4 x OUT121, SOCKET outlet, computer data, single 1 x OUT151, SOCKET outlet patient monitoring, wall/trunking mounted 1 x OUT215, SOCKET outlet, telephone 1 x OUT453, OUTLET, 4 kPa compressed air, medical 1 x OUT470, OUTLET, oxygen, medical 1 x OUT475, OUTLET, vacuum, medical 1 x TRU1001, MEDICAL SERVICE TRUNKING, horizontal, length as drawn.		1
2		2	OUT010	SOCKET outlet switched 13amp twin		1
1		1	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
1		1	RAI134	RAIL, clinical equipment, wall mounted, 1600mm		1
1		1	SAF005	SAFE, wall, recessed, 150H 200W 150D		1
1		1	SWC8018	SWITCH 10A retractable, integrated with lighting control system		1

ADB	Schedule of Components by Room	B1805C

Project: SG01 South Glasgow v01 (draft)
Department:
Room: B1805C Single bedroom, isolation: Children/young people, with relatives overnight stay
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	WHBN1000	WASH BASIN, clinical, with non touch panel mounted tap/s, assembly: 1 x BAS101, BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM 1 x TAP894, TAP bib, hospital pattern, integral thermostatic mixer, automatic action with sensor operation. HTM64TBH6 1 x WAS100, WASTE, unslotted flush-grated, metal, 1.1/4 in. HTM64WT1 1 x WAS1000, TRAP, concealed waste, for back outlet basins.		1
1		1	BED020	BED, fold down		2
1		1	BOA022	BOARD, display/notice, magnetic, wall mounted, 900H 600W		2
1		1	BRA003	BRACKET, holder, suction unit, wall mounted		2
1		1	CAB065	CABINET, drugs, self dispensing medication, lockable, wall mounted, 315H 210W 155D		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS438	DISPENSER, disposable gloves set of 3 and disposable apron, wall mounted		2
1		1	RAC362	RACK, catheter, vertical, 2 compartments, 420H 160W 65D		2
1		1	BED008	BED, Kings Fund, child, variable height, two-way tilt, adjustable backrest, on castors		3
1		1	BIN007	BIN, storage, complete with drop on lid, mobile, 550H 610W 510D		3
1		1	CHA007	CHAIR, easy, with open arms, high back, upholstered		3
2		2	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	COMP1000	COMPUTER; complete with keyboard, screen and telephone, assembly: 1 x COM031, COMPUTER CPU 1 x COM033, COMPUTER KEYBOARD 1 x COM1000, COMPUTER MONITOR, TFT, digital flat panel display, desk top 1 x TEL1000, TELEPHONE, handset		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	LOC002	LOCKER, bedside, 3 compartment, towel rail at rear, on castors, 902H 485W 485D		3
1		1	MAT003	MATTRESS, Kings Fund bed, child, standard backrest, 1655L 865W 125D		3
1		1	MST007	TROLLEY, lockable, closed, with worktop, approx 900H 660W 500D, 600mm facing		3
1		1	TAB073	TABLE, overbed, cantilevered		3
1		1	WAR007	WARDROBE, 1800H 400W 400D		3

ADB	Room Data Sheet	B1811C

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	B1811C	Single bedroom: Children/young people day care		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Patient may arrive on a trolley or in a bed. 3) Transfer patient to/from bed, stretcher trolley, or wheelchair. 4) Patient to undress/dress in vicinity of bed, with/without assistance. 5) Patient to receive therapeutic and clinical attention from health team staff. 6) Self dispensing medication or drugs. 7) Patient to read, writes, listens to radio, views TV and use telephone. 8) Patient to take meals in bed or by the bed. 9) Holding clothing and personal effects. 10) Displaying cards and pictures. 11) Children to view, through glazed panels, children and staff in adjacent spaces. 12) Using monitoring/diagnostic equipment. 13) Clinical hand washing.			
Personnel:	1 x Patient 3 x Others			
Planning Relationships:	Close to staff base. Close to supporting ancillary rooms. WC/shower/personal washbasin en-suite.			
Space Data:	**Area (m²):**	14.50	**Height (mm):**	2,700

Notes:

Child bed can be replaced by variable height cot - project team option.
Dispenser gloves and aprons situated on outside entrance of the room.
Magnetic board can be replaced by Velcro board - project team option.
Maintaining safety and security, all the equipment and furniture must be safe for children.

ADB	Room Environmental Data	B1811C

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	B1811C	Single bedroom: Children/young people day care		
Room Number:			**Revision Date:**	01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	21	Winter Temperature (degC): up to 24, independent control
Summer Temperature (DegC):	23	
Mechanical Ventilation (Supply ac/hr):		Supply air rate at 40 litres per second 1. Bedroom balanced or negative with respect to the adjoining corridor. 2. Bedroom positive with respect to the en-suite sanitary room
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		

General Notes:

LIGHTING		
Service Illumination (Lux):		Daytime - general (lux): 100 1. Average at floor level of circulation space. 2. Maximum point illuminance 170 lux. Daytime - bed (lux): 300 1.Average over bed area at working plane level for general nursing purposes. 2. Maximum point illuminance 520 Lux. Daytime - bedhead (lux): 30-50 average
Service Illumination Night (Lux):		Night - general (lux): 5 1. Average at floor level of circulation space. 2. Maximum point illuminance 10 lux. 3. Maximum at bed pillow 0.5 lux. Night - bedhead (lux): 5 1. Average at bed pillow. Night - watch (lux): 20 1. Average at bed pillow. 2. Maximum point illuminance at pillow 40 lux.
Local Illumination (Lux):		Local task illumination (lux): 300 1. Average at bedhead for patient reading and general nursing purposes. 2. Maximum point illuminance 520 Lux. 3. Average of 1000 Lux at bedhead where examination or treatment is to be carried out. Bedhead. Control ON/OFF/ DIM switch & bedhead.
Colour Rendering Required:	Y	Not applicable to night lighting. General lighting - Colour rendering characteristics (Ra): 80 Examination lighting - Colour rendering characteristics (Ra): 90 Minimum colour appearance of 4000K
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes:

Type of control: S/N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 19

Areas in which VDT present to comply with CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001

Emergency escape route lighting required? (Yes/No): N
Not normally required unless need to comply with BS 5266.
Y = Dedicated emergency lighting required in compliance with BS 5266.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0.85 metres above finished floor level.

NOISE

Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:

SAFETY

Hot Surface Max. Temp (DegC):	43	Maximum hot water temperature (degC): 41
Hot Water Max. Temp (DegC):	41	To be achieved in compliance with SHTN 6 'The Safe Operation and Maintenance of Thermostatic Mixing Valves

General Notes:

FIRE

Enclosure:

Automatic Detection: Smoke

ADB	Room Design Character	B1811C

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	B1811C	Single bedroom: Children/young people day care		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5 i.e. Imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Two sets of doors: 1x 1500mm, one & a half leaf, half glazed, obscurable, lockable; bed access. 1x 1000mm, single leaf, plain flush, occupancy indicator, lockable, outside emergency release; wheelchair access. Door hinge protectors.
Windows:	(HTM 55) Clear, solar control, privacy control. Window opening restrictors max 100mm, low level sill (a maximum of 600mm)
Internal Glazing:	(HTM 57) Blinds for glazed screens
Hatch:	
Notes:	

ADB	Schedule of Components by Room	B1811C

Project: SG01 South Glasgow v01 (draft)
Department:
Room: B1811C Single bedroom: Children/young people day care
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	BED7001	BED HEAD BUFFER/DOCKING device, bed & wall protection, to design		1
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
1		1	DATA1000	DATA POINTS incorporating two twin power sockets and two data/telecom points, assembly: 2 x OUT010, SOCKET outlet, switched, 13 amp, twin 2 x OUT131, SOCKET outlet double data/voice, wall/trunking mounted		1
1		1	LIG005	LUMINAIRE, bedhead, dimmable, patient reading and general nursing care/examination		1
1		1	MEST1008	MEDICAL SERVICE TRUNKING, day patient bed/trolley space, to HTM 08-03 requirements, assembly: 1 x CAL012, RESET UNIT, with repeat lamp, patient/staff call 1 x CAL043, PUSH BUTTON patient/staff call with socket for extension pear push, trunking mounted 1 x CAL047, PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, trunking mounted 1 x ECS1000, ENTERTAINMENT SYSTEM, to client specification. 4 x OUT012, SOCKET outlet switched 13amp twin, trunking mounted 4 x OUT121, SOCKET outlet, computer data, single 1x OUT470, OUTLET, oxygen, medical 1 x OUT475, OUTLET, vacuum, medical 1 x TRU1001, MEDICAL SERVICE TRUNKING, horizontal, length as drawn.		1
1		1	OUT010	SOCKET outlet switched 13amp twin		1
1		1	OUT052	CONNECTION UNIT, switched, 13 amp		1
1		1	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
2		2	RAI130	RAIL, clinical equipment, wall mounted, 600mm		1
1		1	SWC8018	SWITCH 10A retractable, integrated with lighting control system		1
1		1	WHBN1000	WASH BASIN, clinical, with non touch panel mounted tap/s, assembly: 1 x BAS101, BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM 1 x TAP894, TAP bib, hospital pattern, integral thermostatic mixer, automatic action with sensor operation. HTM64TBH6 1 x WAS100, WASTE, unslotted flush-grated, metal, 1.1/4 in. HTM64WT1 1 x WAS1000, TRAP, concealed waste, for back outlet basins.		1

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ADB	Schedule of Components by Room	B1811C

Project: SG01 South Glasgow v01 (draft)
Department:
Room: B1811C Single bedroom: Children/young people day care
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	BOA022	BOARD, display/notice, magnetic, wall mounted, 900H 600W		2
1		1	BRA004	BRACKET, holder, suction unit, trunking mounted		2
1		1	CAB065	CABINET, drugs, self dispensing medication, lockable, wall mounted, 315H 210W 155D		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS438	DISPENSER, disposable gloves set of 3 and disposable apron, wall mounted		2
2		2	HOO019	HOOK, single, small, wall mounted		2
1		1	BED008	BED, Kings Fund, child, variable height, two-way tilt, adjustable backrest, on castors		3
1		1	CHA307	CHAIR, easy, high back, with open arms, upholstered, wipeable		3
1		1	CHA317	CHAIR, upright, upholstered, stacking, wipeable		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	LOC004	LOCKER, bedside, 4 compartment with lockable section /drawer, towel rail at rear, on castors, 902H 485W 485D		3
1		1	MAT003	MATTRESS, Kings Fund bed, child, standard backrest, 1655L 865W 125D		3
1		1	MST007	TROLLEY, lockable, closed, with worktop, approx 900H 660W 500D, 600mm facing		3
1		1	TAB073	TABLE, overbed, cantilevered		3

ADB	Room Data Sheet	B2011C

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	B2011C	Multi-bed room: Children/young peoples day care, 4 beds		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Patient may arrive on a trolley or in a bed. 3) Transfer patient to/from bed, stretcher trolley, or wheelchair. 4) Patient to undress/dress in vicinity of bed, with/without assistance. 5) Patient to receive therapeutic and clinical attention from health team staff. 6) Self dispensing medication or drugs. 7) Patient to read, writes, listens to radio, views TV and use telephone. 8) Patient to take meals in bed or by the bed. 9) Holding clothing and personal effects. 10) Displaying cards and pictures. 11) Children to view, through glazed panels, children and staff in adjacent spaces. 12) Using monitoring/diagnostic equipment. 13) Clinical hand washing.			
Personnel:	4 x Patients 6 x Others			
Planning Relationships:	Close to staff base. Close to supporting ancillary rooms. En-suite WC, shower, personal washbasin.			
Space Data:	**Area (m²):**	66.00	**Height (mm):**	2,700

Notes:

Child bed can be replaced by variable height cot - project team option.
Dispenser gloves and aprons situated on outside entrance of the room.
Magnetic board can be replaced by Velcro board - project team option.
In Day care unit for a curtain system see HBN Hosp. accom for children and young people Para 3.118.
Maintaining safety and security, all the equipment and furniture must be safe for children.

ADB	Room Environmental Data	B2011C

Project:	SG01	South Glasgow v01 (draft)
Department:		
Room:	B2011C	Multi-bed room: Children/young peoples day care, 4 beds
Room Number:		**Revision Date:** 01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	21	26oC not to be exceeded for more than 50 hours per annum against CIBSE DSY weather data
Summer Temperature (DegC):	26	Winter temperature (degC): up to 24, independent control
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		

General Notes:

LIGHTING		
Service Illumination (Lux):		Daytime - general (lux): 100 1. Average at floor level of circulation space. 2. Maximum point illuminance 170 lux. Daytime - bed (lux): 300 1.Average over bed area at working plane level for general nursing purposes. 2. Maximum point illuminance 520 Lux. Daytime - bedhead (lux): 30-50 average
Service Illumination Night (Lux):		Night - general (lux): 5 1. Average at floor level of circulation space. 2. Maximum point illuminance 10 lux. 3. Maximum at bed pillow 0.5 lux. Night - bedhead (lux): 5 1. Average at bed pillow. Night - watch (lux): 20 1. Average at bed pillow. 2. Maximum point illuminance at pillow 40 lux.
Local Illumination (Lux):		Local task illumination (lux): 300 1. Average at bedhead for patient reading and general nursing purposes. 2. Maximum point illuminance 520 Lux. 3. Average of 1000 Lux at bedhead where examination or treatment is to be carried out. Bedhead. Control ON/OFF/ DIM switch & bedhead.
Colour Rendering Required:	Y	Not applicable to night lighting. General lighting - Colour rendering characteristics (Ra): 80 Examination lighting - Colour rendering characteristics (Ra): 90 Minimum colour appearance of 4000K
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes:

Type of control: S/N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 19

Areas in which VDT present to comply with CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001

Emergency escape route lighting required? (Yes/No): N
Not normally required unless need to comply with BS 5266.
Y = Dedicated emergency lighting required in compliance with BS 5266.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0.85 metres above finished floor level.

NOISE

Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	40	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:

SAFETY

Hot Surface Max. Temp (DegC):	43	Maximum surface temperature (degC): 43
Hot Water Max. Temp (DegC):	41	To be achieved in compliance with SHTN 6 'The Safe Operation and Maintenance of Thermostatic Mixing Valves -

General Notes:

FIRE

Enclosure:

Automatic Detection: Smoke

ADB	Room Design Character	B2011C

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	B2011C	Multi-bed room: Children/young peoples day care, 4 beds		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5 i.e. Imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Two sets of doors: 1x 1900mm, double equal leaves, vision panel, obscurable, self closing (with detentes); bed access. 1x 1000mm, single leaf, plain flush, occupancy indictor, lockable, outside emergency release; wheelchair access. Door hinge protectors.
Windows:	(HTM 55) Clear, solar control, privacy control. Window opening restrictors max 100mm at bottom.
Internal Glazing:	(HTM 57) Blinds for glazed screens.
Hatch:	
Notes:	

ADB	Schedule of Components by Room	B2011C

Project: SG01 South Glasgow v01 (draft)
Department:
Room: B2011C Multi-bed room: Children/young peoples day care, 4 beds
Room Number: **Revision Date:** 01/06/2010

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
4		4	BED7001	BED HEAD BUFFER/DOCKING device, bed & wall protection, to design		1
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
1		1	DATA1000	DATA POINTS incorporating two twin power sockets and two data/telecom points, assembly: 2 x OUT010, SOCKET outlet, switched, 13 amp, twin 2 x OUT131, SOCKET outlet double data/voice, wall/trunking mounted		1
4		4	LIG058	LUMINAIRE, examination, wall, adjustable, 1000 lux		1
4		4	MEST1022	MEDICAL SERVICE TRUNKING, day ward treatment bed/trolley space, to HTM 08-03 requirements, assembly: 1 x CAL012, RESET UNIT, with repeat lamp, patient/staff call 1 x CAL043, PUSH BUTTON patient/staff call with socket for extension pear push, trunking mounted 1 x CAL047, PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, trunking mounted 8 x OUT012, SOCKET outlet switched 13amp twin, trunking mounted 4 x OUT121, SOCKET outlet, computer data, single 1 x OUT453, OUTLET, 4 kPa compressed air, medical 1 x OUT470, OUTLET, oxygen, medical 1 x OUT475, OUTLET, vacuum, medical 1 x TRU1001, MEDICAL SERVICE TRUNKING, horizontal, length as drawn.		1
8		8	OUT010	SOCKET outlet switched 13amp twin		1
4		4	OUT052	CONNECTION UNIT, switched, 13 amp		1
1		1	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
4		4	RAI134	RAIL, clinical equipment, wall mounted, 1600mm		1
1		1	SWC8018	SWITCH 10A retractable, integrated with lighting control system		1
4		4	TRA1003	TRACK, curtain, length and shape as drawn.		1
1		1	WHBN1000	WASH BASIN, clinical, with non touch panel mounted tap/s, assembly: 1 x BAS101, BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM 1 x TAP894, TAP bib, hospital pattern, integral thermostatic mixer, automatic action with sensor operation. HTM64TBH6 1 x WAS100, WASTE, unslotted flush-grated, metal, 1.1/4 in. HTM64WT1 1 x WAS1000, TRAP, concealed waste, for back outlet basins.		1

ADB	Schedule of Components by Room	B2011C

Project: SG01 South Glasgow v01 (draft)
Department:
Room: B2011C Multi-bed room: Children/young peoples day care, 4 beds
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
4		4	BOA022	BOARD, display/notice, magnetic, wall mounted, 900H 600W		2
4		4	BRA003	BRACKET, holder, suction unit, wall mounted		2
4		4	CAB065	CABINET, drugs, self dispensing medication, lockable, wall mounted, 315H 210W 155D		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
4		4	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS438	DISPENSER, disposable gloves set of 3 and disposable apron, wall mounted		2
4		4	HOO019	HOOK, single, small, wall mounted		2
4		4	BED008	BED, Kings Fund, child, variable height, two-way tilt, adjustable backrest, on castors		3
4		4	CHA007	CHAIR, easy, with open arms, high back, upholstered		3
4		4	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	COMP1000	COMPUTER; complete with keyboard, screen and telephone, assembly: 1 x COM031, COMPUTER CPU 1 x COM033, COMPUTER KEYBOARD 1 x COM1000, COMPUTER MONITOR, TFT, digital flat panel display, desk top 1 x TEL1000, TELEPHONE, handset		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
4		4	LOC002	LOCKER, bedside, 3 compartment, towel rail at rear, on castors, 902H 485W 485D		3
4		4	MAT003	MATTRESS, Kings Fund bed, child, standard backrest, 1655L 865W 125D		3
1		1	MST007	TROLLEY, lockable, closed, with worktop, approx 900H 660W 500D, 600mm facing		3
4		4	TAB073	TABLE, overbed, cantilevered		3

ADB	Room Data Sheet	G0507A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	G0507A	Lobby: ventilated (isolation suite) Entrance lobby for barrier nursing		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Clinical hand washing. 2) Dispensing disposable aprons. 3) Dispensing disposable gloves. 4) Disposal of clinical waste. 5) Disposal of non-clinical items.			
Personnel:	2 x Persons			
Planning Relationships:	Direct access to single-bed room.			
Space Data:	**Area (m²):**	4.00	**Height (mm):**	2,700

Notes:

Source and protective isolation.
For ventilated lobby details see HBN Isolation facilities in acute settings.
The use of personal protective equipment (PPE) will be determined by local infection control policy.

DIS026 (Medical hand sanitizer dispenser) to be located outside of room next to door entrance for people to use before entering the room.

ADB	Room Environmental Data	G0507A

Project:	SG01	South Glasgow v01 (draft)
Department:		
Room:	G0507A	Lobby: ventilated (isolation suite) Entrance lobby for barrier nursing
Room Number:		**Revision Date:** 01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	21	26oC not to be exceeded for more than 50 hours per annum against CIBSE DSY weather data
Summer Temperature (DegC):	26	
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:	+ve	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		

General Notes:

LIGHTING		
Service Illumination (Lux):	200	Average at floor 1. Max point illuminance 350 lux
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	N	
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes:

Type of control: N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 22
Areas in which VDT present to comply with CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001

Emergency escape route lighting required? (Yes/No): N
Not normally required unless need to comply with BS 5266.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0.85 metres above finished floor level.

NOISE		
Privacy Factor Required (dB):	70	Ref: HTM2045
Mechanical Services (NR):	45	
Intrusive Noise (NR Leq):	50	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:

SAFETY		
Hot Surface Max. Temp (DegC):	43	Maximum surface temperature (degC): 43 To be achieved in compliance with SHTN 6 'The Safe Operation and Maintenance of Thermostatic Mixing Valves
Hot Water Max. Temp (DegC):	41	

General Notes:

FIRE

Enclosure:	Fire hazard room, enclose in 30 minutes fire-resisting construction (integrity and insulation).
Automatic Detection:	Smoke

ADB	Room Design Character	G0507A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	G0507A	Lobby: ventilated (isolation suite) Entrance lobby for barrier nursing		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 3 i.e. Impervious, jointless, smooth Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3: Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3:Smooth, imperforate Moisture Resistance (HTM 60): N:Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations Ceiling to be sealed and solid.
Doorsets:	(HTM 58) Two sets of doors: each- 1500mm, one and half leaf, plain flush
Windows:	(HTM 55) N/A
Internal Glazing:	(HTM 57) Clear with privacy control
Hatch:	
Notes:	

ADB	Schedule of Components by Room	G0507A

Project: SG01 South Glasgow v01 (draft)
Department:
Room: G0507A Lobby: ventilated (isolation suite)
Entrance lobby for barrier nursing
Room Number: **Revision Date:** 01/06/2010

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
1		1	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
1		1	SWC8018	SWITCH 10A retractable, integrated with lighting control system		1
1		1	WHBN1000	WASH BASIN, clinical, with non touch panel mounted tap/s, assembly: 1 x BAS101, BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM 1 x TAP894, TAP bib, hospital pattern, integral thermostatic mixer, automatic action with sensor operation. HTM64TBH6 1 x WAS100, WASTE, unslotted flush-grated, metal, 1.1/4 in. HTM64WT1 1 x WAS1000, TRAP, concealed waste, for back outlet basins.		1
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS438	DISPENSER, disposable gloves set of 3 and disposable apron, wall mounted		2
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3

ADB	Room Data Sheet	G0510B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	G0510B	Lobby to isolation room		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Use of clinical wash-hand basin. 2) Dispensing disposable aprons. 3) Dispensing disposable gloves. 4) Disposal of clinical waste. 5) Disposal of non-clinical waste.			
Personnel:	2 x persons			
Planning Relationships:	Direct access to single-bed room.			
Space Data:	**Area (m²):**	5.00	**Height (mm):**	2,700

Notes:

WARNING NOTICE: This room is based on a theoretical design model, which has not been validated (see paragraph 1.8 of HBN 4 Supplement 1). Specialist advice should be sought on its design.
The lamp repeat call from the bedroom is situated over the door outside the room.

ADB	Room Environmental Data	G0510B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	G0510B	Lobby to isolation room		
Room Number:			**Revision Date:**	01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		Minimum air changes per hour (AC/hr): 69 1. 100% primary fresh air. 2. AC/hr rate is approximate and subject to meeting specific design requirements identified in HBN 04-01 3. See HBN 04-01 Supplement 1 for further details of specific requirements.
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:	+ve	
Filtration (%DSE and % Arrestance):	/	1. See Table 1 of HBN 04-01 Supplement 1 for further details relating to pressure differentials. 2. Mechanically ventilated to allow positive pressure of Isolation Room relevant to en-suite and negative pressure relative to lobby space. 3. Negative pressure differential between en-suite and Isolation Room. 4. All supply air to bedroom to be derived from the lobby. 5. Local control.
Humidity (%RH):		

General Notes:

LIGHTING		
Service Illumination (Lux):	200	Average at floor 1. Max point illuminance 350 lux
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	Y	Colour rendering characteristics (Ra): 80 Minimum colour appearance of 4000K
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes:

Type of control: N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 22
Areas in which VDT present to comply with CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001

Emergency escape route lighting required? (Yes/No): N
Not normally required unless need to comply with BS 5266.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0.85 metres above finished floor level.

NOISE

Privacy Factor Required (dB):		Noise intrusion from external sources: equivalent continuous sound pressure level, 1hr. Daytime: 40 Night: 35 Maximum f night: 45
Mechanical Services (NR):		1. Maximum value inside room space. 2. See Table 1 of HTM 08-01
Intrusive Noise (NR Leq):		Maximum internal noise from M&E services (NR): 30 1. See Table 2 of HTM 08-01. 2. All plant to be operating at maximum normal design duty. Sound insulation parameters: Privacy: Confidential Noise generation: Typical Noise sensitivity: Medium See Table 3 of HTM 08-01 Sound insulation rating: 47 1. Minimum value of noise sensitivity of receiving room. 2. See Table 4 of HTM 08-01. 3. Adjust for specific room adjacencies in accordance with table 5 of HTM 08-01.
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:
1. Acoustic design to be compliant with HTM 08-01.
2. Maximum weighted standardised impact sound pressure level (L'nT,w) to be 65 dB for floors over noise sensitive areas.
2. A minimum Speech Transmission Index (STI) of 0.5 to BS EN 60268-16 (or equivalent standard) to apply to assessing speech intelligibility of audio systems for public announcements.

SAFETY

Hot Surface Max. Temp (DegC):	43	Maximum surface temperature (degC): 43 To be achieved in compliance with SHTN 6 'The Safe Operation and Maintenance of Thermostatic Mixing Valves
Hot Water Max. Temp (DegC):	41	

General Notes:

FIRE

Enclosure:

Automatic Detection: Smoke

General fire notes:

1. Fire detection and alarm systems to comply with HTM 05-03, Part B and BS 5839, where applicable.
2. Fire safety generally to comply with relevant parts of Firecode (HTM 05) together with Building Regulations 2000 and associated Approved Codes of Practice (ACOP).

ADB	Room Design Character	G0510B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	G0510B	Lobby to isolation room		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 3: Impervious, jointless, smooth Moisture Resistance (HTM 56): N: normal humidity. Hygiene and cleaning (HTM 56): Paragraphs 2.3 - 2.4
Floor:	Surface Finish (HTM 61): 3: hard, impervious, jointless, smooth Hygiene and cleaning (HTM 61): Paragraphs 2.7 - 2.9
Ceiling:	Surface Finish (HTM 60): 3: Smooth, imperforate Moisture Resistance (HTM 60): N: normal humidity. Hygiene and cleaning (HTM 60): Paragraphs 2.9 - 2.10
Doorsets:	(HTM 58) Two sets of doors: 2x 1900 mm, double leaf, double swing, half glazed, obscurable; bed access. See HBN 00-04 for effective clear width access requirements.
Windows:	(HTM 55) N/A
Internal Glazing:	(HTM 57) NA or clear with privacy control
Hatch:	N/A
Notes:	

ADB	Schedule of Components by Room	G0510B

Project: SG01 South Glasgow v01 (draft)
Department:
Room: G0510B Lobby to isolation room
Room Number: **Revision Date:** 01/06/2010

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
1		1	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
1		1	SWC8018	SWITCH 10A retractable, integrated with lighting control system		1
1		1	WHBN1000	WASH BASIN, clinical, with non touch panel mounted tap/s, assembly: 1 x BAS101, BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM 1 x TAP894, TAP bib, hospital pattern, integral thermostatic mixer, automatic action with sensor operation. HTM64TBH6 1 x WAS100, WASTE, unslotted flush-grated, metal, 1.1/4 in. HTM64WT1 1 x WAS1000, TRAP, concealed waste, for back outlet basins.		1
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS437	DISPENSER, disposable mask, wall mounted		2
1		1	DIS438	DISPENSER, disposable gloves set of 3 and disposable apron, wall mounted		2
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3

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ADB	Room Data Sheet	K0336A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	K0336A	Critical Care		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Repairing and adjusting various types of boots, shoes, callipers or other body worn devices. 2) Holding of body worn devices (e.g. shoes, callipers) awaiting repair. 3) Storing materials. 4) Hand washing.			
Personnel:	1 x Person			
Planning Relationships:				
Space Data:	**Area (m²):**	24.00	**Height (mm):**	2,700

Notes: Equipment - project specific.

ADB	Room Environmental Data	K0336A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	K0336A	Critical Care		
Room Number:			**Revision Date:**	01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	18	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Bench
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	N	
Standby Lighting Grade:		
General Notes:		
NOISE		
Privacy Factor Required (dB):		
Mechanical Services (NR):		
Intrusive Noise (NR Leq):		
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):		
Hot Water Max. Temp (DegC):		
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		

ADB	Room Design Character	K0336A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	K0336A	Critical Care		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3 i.e. Smooth, imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1500mm, one & half leaf, vision panel; equipment access
Windows:	(HTM 55) N/A. If provided should be clear
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	K0336A

Project: SG01 South Glasgow v01 (draft)
Department:
Room: K0336A Critical Care
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
1		1	SWC8018	SWITCH 10A retractable, integrated with lighting control system		1

ADB	Room Data Sheet	K0336A1

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	K0336A1	Critical Care		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Repairing and adjusting various types of boots, shoes, callipers or other body worn devices. 2) Holding of body worn devices (e.g. shoes, callipers) awaiting repair. 3) Storing materials. 4) Hand washing.			
Personnel:	1 x Person			
Planning Relationships:				
Space Data:	**Area (m²):**	24.00	**Height (mm):**	2,700

Notes: Equipment - project specific.

ADB	Room Environmental Data	K0336A1

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	K0336A1	Critical Care		
Room Number:			**Revision Date:**	01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	18	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Bench
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	N	
Standby Lighting Grade:		
General Notes:		
NOISE		
Privacy Factor Required (dB):		
Mechanical Services (NR):		
Intrusive Noise (NR Leq):		
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):		
Hot Water Max. Temp (DegC):		
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		

ADB	Room Design Character	K0336A1

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	K0336A1	Critical Care		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3 i.e. Smooth, imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1500mm, one & half leaf, vision panel; equipment access
Windows:	(HTM 55) N/A. If provided should be clear
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	K0336A1

Project: SG01 South Glasgow v01 (draft)
Department:
Room: K0336A1 Critical Care
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
1		1	SWC8018	SWITCH 10A retractable, integrated with lighting control system		1

ADB	Room Data Sheet	K0336A2

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	K0336A2	Emergency Dept		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Repairing and adjusting various types of boots, shoes, callipers or other body worn devices. 2) Holding of body worn devices (e.g. shoes, callipers) awaiting repair. 3) Storing materials. 4) Hand washing.			
Personnel:	1 x Person			
Planning Relationships:				
Space Data:	**Area (m²):**	21.00	**Height (mm):**	2,700
Notes:	Equipment - project specific.			

ADB	Room Environmental Data	K0336A2

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	K0336A2	Emergency Dept		
Room Number:			**Revision Date:**	01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	18	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Bench
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	N	
Standby Lighting Grade:		
General Notes:		
NOISE		
Privacy Factor Required (dB):		
Mechanical Services (NR):		
Intrusive Noise (NR Leq):		
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):		
Hot Water Max. Temp (DegC):		
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		

ADB	Room Design Character	K0336A2

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	K0336A2	Emergency Dept		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3 i.e. Smooth, imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1500mm, one & half leaf, vision panel; equipment access
Windows:	(HTM 55) N/A. If provided should be clear
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	K0336A2

Project: SG01 South Glasgow v01 (draft)
Department:
Room: K0336A2 Emergency Dept
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
1		1	SWC8018	SWITCH 10A retractable, integrated with lighting control system		1

ADB	Room Data Sheet	K0336C3

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	K0336C3	Critical Care (PICU)		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Repairing and adjusting various types of boots, shoes, callipers or other body worn devices. 2) Holding of body worn devices (e.g. shoes, callipers) awaiting repair. 3) Storing materials. 4) Hand washing.			
Personnel:	1 x Person			
Planning Relationships:				
Space Data:	**Area (m²):**	24.00	**Height (mm):**	2,700

Notes: Equipment - project specific.

ADB	Room Environmental Data	K0336C3

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	K0336C3	Critical Care (PICU)		
Room Number:			**Revision Date:**	01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	18	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Bench
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	N	
Standby Lighting Grade:		
General Notes:		
NOISE		
Privacy Factor Required (dB):		
Mechanical Services (NR):		
Intrusive Noise (NR Leq):		
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):		
Hot Water Max. Temp (DegC):		
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		

ADB	Room Design Character	K0336C3

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	K0336C3	Critical Care (PICU)		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3 i.e. Smooth, imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1500mm, one & half leaf, vision panel; equipment access
Windows:	(HTM 55) N/A. If provided should be clear
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	K0336C3

Project: SG01 South Glasgow v01 (draft)
Department:
Room: K0336C3 Critical Care (PICU)
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
1		1	SWC8018	SWITCH 10A retractable, integrated with lighting control system		1

ADB	Room Data Sheet	K0378A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	K0378A	Dialysis/Renal		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Maintenance and servicing of equipment. 2) Displaying statutory notices. 3) Testing equipment. 4) Use of visual display terminal(s). 5) Hand washing.			
Personnel:	1 -2 x Persons Intermittent use			
Planning Relationships:				
Space Data:	**Area (m²):**	95.00	**Height (mm):**	2,700

Notes:

Space reuired to accommodate Renal dialysis machines.
Outlet for filtered water with dialysis machine connectors.
Outlets drain with 450mm high upstand waste, capped with dialysis machine connectors.
A water supply and drainage facilities are required.

RCD must be set for 15mA trip

Emergency stop button should isolate power supplies to all socket outlets connected via RCD protected circuit at this and any other medical equipment workstation in the same room.
Socket outlets, RCD and emergency stop button are mounted on plastic trunking along top rear of workbench.

ADB	Room Environmental Data	K0378A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	K0378A	Dialysis/Renal		
Room Number:			**Revision Date:**	01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	20	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Bench, Areas for VDT's: See CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001.
Service Illumination Night (Lux):		
Local Illumination (Lux):	500.0	Workstations/sink
Colour Rendering Required:	Y	
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):		
Mechanical Services (NR):		
Intrusive Noise (NR Leq):		
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	Sign required: 'Caution Very Hot Water' above the sink. Water Max.Temp: Washbasin 41.
Hot Water Max. Temp (DegC):	60	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	K0378A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	K0378A	Dialysis/Renal		
Room Number:			**Revision Date:**	01/06/2010

Walls:	
Floor:	Surface Finish (HTM 61): 4 i.e. Hard, impervious, jointless, extra slip resistance Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 1 i.e. Smooth, imperforate, jointless Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) N/A
Windows:	(HTM 55) Clear glass, high level
Internal Glazing:	(HTM 57) Clear glass as necessary to allow supervision from office
Hatch:	
Notes:	

ADB	Schedule of Components by Room	K0378A

Project: SG01 South Glasgow v01 (draft)
Department:
Room: K0378A Dialysis/Renal
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	DATA1000	DATA POINTS incorporating two twin power sockets and two data/telecom points, assembly: 2 x OUT010, SOCKET outlet, switched, 13 amp, twin 2 x OUT131, SOCKET outlet double data/voice, wall/trunking mounted		1
1		1	DIA011	RENAL HAEMODIALYSIS MACHINE		1
1		1	DRA010	DRAINER, stainless steel, 770H 1550W 800D		1
8		8	OUT010	SOCKET outlet switched 13amp twin		1
1		1	OUT096	OUTLET earthing point, shrouded, wall mounted		1
2		2	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
2		2	OUT126	SOCKET outlet switched 13amp double, with data protection mains RF filter/suppressor		1
1		1	OUT454	OUTLET 7 kPa compressed air surgical, wall mounted		1
1		1	OUT7510	OUTLET, renal water,supply to haemodialysis machine.		1
1		1	OUT7511	OUTLET, drainage,renal dialysis.		1
2		2	RES030	RESIDUAL CURRENT DEVICE (RDS), 30amp, S.P.& N, wall mounted		1
1		1	SHEL1000	SHELF, 2no, laminate, 300mm deep, length as drawn, assembly: 2 x SHE1002, SHELF, laminate, 300mm deep, length as drawn.		1
1		1	SIN115	KIEL SINK, stainless steel 425mm deep, undershelf 1250x550mm, 750H 1350W 800D		1
2		2	SWC062	EMERGENCY STOP switch button, wall mounted		1
1		1	SWC8018	SWITCH 10A retractable, integrated with lighting control system		1
1		1	TAP359	TAP, pillar, high neck, long lever, pair hot and cold, 1/2 in., HTM 64 TP3		1
1		1	TAP360	*TAP pillar, 0.5in high neck, long lever, cold water connection. HTM64TP3. Replaced by: TAP359, 15/05/06		1
1		1	WHBN1003	WASH BASIN, en-suite/bathroom, with basin mounted tap/s, assembly: 1 x BAS106, BASIN, medium, general pattern, vitreous china, 1 tap right hand hole, no overflow, bottom outlet, 500W 400D. HTM64LBGM 1 x TAP289, TAP, monobloc, pillar mixer, integral thermostatic, short lever, HTM 64 TP6 1 x WAS101, WASTE, unslotted recessed grated, metal, 1.1/4 in, with plug and chain. HTM64WT3 1 x WAS107, TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	WST001	WASTE, recessed grated metal, 38mm with standpipe, overflow		1
2		2	BOA012	BOARD, display/notice, wall mounted, 900H 600W		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS024	DISPENSER, soap, wall mounted		2

ADB	Schedule of Components by Room	K0378A

Project: SG01 South Glasgow v01 (draft)
Department:
Room: K0378A Dialysis/Renal
Room Number: **Revision Date:** 01/06/2010

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
2		2	LAB033	BENCH MAGNIFIER, with fluorescent lamp, wall mounted		2
1		1	MNT040	BREAK-TANK, pre-sterilizing, integral filter, wall mounted, 385H 395W 180D		2
1		1	SCR020	SCREEN, dividing, glazed, 1200H 800W		2
1		1	VIC001	VICE, bench mounted type, 250H 200W 400D		2
1		1	COMP1000	COMPUTER; complete with keyboard, screen and telephone, assembly: 1 x COM031, COMPUTER CPU 1 x COM033, COMPUTER KEYBOARD 1 x COM1000, COMPUTER MONITOR, TFT, digital flat panel display, desk top 1 x TEL1000, TELEPHONE, handset		3
2		2	CUP356	CUPBOARD, 1 adjustable shelf, lockable, on castors, 615H 610W 610D		3
1		1	HOL004	HOLDER, sack, with lid foot operated, small, freestanding		3
2		2	STO013	STOOL, swivel, with back, 710 height		3
2		2	WOR052	WORKBENCH, steel construction, antistatic vinyl worktop with rolled front edge and rear upstand, 900x1800x900		3

ADB	Room Data Sheet	M0218A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	M0218A	Office: 1 staff, meeting area		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Deskwork for 1 person. 2) Using computer workstation(s). 3) Using printer. 4) Using telephone(s). 5) Discussions and meetings with visitors. 6) Storing files and records. 7) Security for personal items.			
Personnel:	Up to 7 persons			
Planning Relationships:	In HBN44 - Ambulance station; Adjacent to general office. Adjacent to operations area. Visual oversight of operating area - local policy decision.			
Space Data:	**Area (m²):**	15.00	**Height (mm):**	2,400
Notes:	Suitable for senior management, (as Control Manager Office). In addition to office activities, small formal meeting may take place.			

ADB	Room Environmental Data	M0218A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	M0218A	Office: 1 staff, meeting area		
Room Number:			**Revision Date:**	01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	20	26oC not to be exceeded for more than 50 hours per annum against CIBSE DSY weather data
Summer Temperature (DegC):	26	
Mechanical Ventilation (Supply ac/hr):		Air volume to suit occupancy at 12 litres per second per person or cooling requirement, whichever the greater
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:	Bal	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		

General Notes:

LIGHTING		
Service Illumination (Lux):		Average on desk 300 lux 1. Max point illuminance 520 lux Areas for VDT's: See CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001.
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	N	
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes:

Type of control: N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 22
Areas in which VDT present to comply with CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001

Emergency escape route lighting required? (Yes/No): N
Not normally required unless need to comply with BS 5266.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0.85 metres above finished floor level.

NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:

SAFETY		
Hot Surface Max. Temp (DegC):		Hot Surface: 82 deg.C, unless patients have access.
Hot Water Max. Temp (DegC):		

General Notes:

FIRE

Enclosure:

Automatic Detection: Smoke

ADB	Room Design Character	M0218A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	M0218A	Office: 1 staff, meeting area		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 5: Moisture Resistance (HTM 56): N:Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 6 i.e. Soft, impervious, jointless Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5: Imperforate Moisture Resistance (HTM 60): N: Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1000mm, single leaf, plain flush, lockable
Windows:	(HTM 55) Clear, solar control, privacy control
Internal Glazing:	(HTM 57) Clear glass - where appropriate
Hatch:	

Notes:

ADB	Schedule of Components by Room	M0218A

Project: SG01 South Glasgow v01 (draft)
Department:
Room: M0218A Office: 1 staff, meeting area
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	DATA1000	DATA POINTS incorporating two twin power sockets and two data/telecom points, assembly: 2 x OUT010, SOCKET outlet, switched, 13 amp, twin 2 x OUT131, SOCKET outlet double data/voice, wall/trunking mounted		1
1		1	OUT010	SOCKET outlet switched 13amp twin		1
1		1	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
1		1	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	SWC8018	SWITCH 10A retractable, integrated with lighting control system		1
1		1	TRU8000	TRUNKING: Power and Data trunking; length as drawn		1
1		1	BOA013	BOARD, display/notice, wall mounted, 900H 1200W		2
1		1	CLO001	CLOCK battery, wall mounted		2
3		3	HOO024	HOOK, hat and coat, 1		2
1		1	CAB049	CABINET, lateral filing, 6 rails, 2 door, 1970H 1000W 470D		3
1		1	CAB059	CABINET, closed top 2 shelves, 2 suspension filing rails, front panels, 1650H 1000W 470D		3
1		1	CHA302	CHAIR, swivel, height adjustable, medium back, wipeable, 5 star base, on castors		3
6		6	CHA318	CHAIR, upright, with arms, upholstered, stacking, wipeable		3
1		1	COM038	COMPUTER PRINTER, laser, A4, 250H 380W 385D		3
1		1	COMP1000	COMPUTER; complete with keyboard, screen and telephone, assembly: 1 x COM031, COMPUTER CPU 1 x COM033, COMPUTER KEYBOARD 1 x COM1000, COMPUTER MONITOR, TFT, digital flat panel display, desk top 1 x TEL1000, TELEPHONE, handset		3
1		1	DRA056	DRAWER UNIT, 2 drawer, lockable, on castors, 600H 410W 600D		3
3		3	TAB048	TABLE, committee, quadrant, unit type, 720H 800W 800D		3
1		1	WOR9001L	WORKSTATION; computer desk; Left hand; 1800x1200mm max		3

ADB	Room Data Sheet	M0251B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	M0251B	Office: 1 person - HBN 00-03		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Clinical administration. 2) Using computer workstation(s). 3) Using telephone(s). 4) Discussions and interviews. 5) Storing files and records. 6) Hanging coats. 7) Secure holding of personal belongings.			
Personnel:	Up to 3 persons			
Planning Relationships:				
Space Data:	**Area (m²):**	8.00	**Height (mm):**	2,400

Notes:

The following equipment is shown on the room layout but is optional:
- lamp repeat calls for controlled drugs cupboards (but required if the office is used for clinical control).

The following items may be provided if the office is used for clinical control:
- a small safe;
- a key cupboard;
- an alarm panel, see HTM 08-03.

A dimming switch is recommended if the room is used for viewing digital images.

ADB	Room Environmental Data	M0251B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	M0251B	Office: 1 person - HBN 00-03		
Room Number:			**Revision Date:**	01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	20	26oC not to be exceeded for more than 50 hours per annum against CIBSE DSY weather data
Summer Temperature (DegC):	26	
Mechanical Ventilation (Supply ac/hr):		Air volume to suit occupancy at 12 litres per second per person or cooling requirement, whichever the greater
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:	Bal	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		

General Notes:

LIGHTING		
Service Illumination (Lux):		Average on desk 300 lux 1. Max point illuminance 520 lux Areas for VDT's: See CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001.
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	N	
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes:

Type of control: N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 22
Areas in which VDT present to comply with CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001

Emergency escape route lighting required? (Yes/No): N
Not normally required unless need to comply with BS 5266.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0.85 metres above finished floor level.

NOISE

Privacy Factor Required (dB):		Noise intrusion from external sources: equivalent continuous sound pressure level, 1hr. Daytime: 40 Night: Maximum f night:
Mechanical Services (NR):		1. Maximum value inside room space. 2. See Table 1 of HTM 08-01
Intrusive Noise (NR Leq):		Maximum internal noise from M&E services (NR): 35 1. See Table 2 of HTM 08-01. 2. All plant to be operating at maximum normal design duty. Sound insulation parameters: Privacy: Private Noise generation: Typical Noise sensitivity: Medium See Table 3 of HTM 08-01 Sound insulation rating: 42 1. Minimum value of noise sensitivity of receiving room. 2. See Table 4 of HTM 08-01. 3. Adjust for specific room adjacencies in accordance with table 5 of HTM 08-01.
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:
1. Acoustic design to be compliant with HTM 08-01.
2. Maximum weighted standardised impact sound pressure level (L'nT,w) to be 65 dB for floors over noise sensitive areas.
2. A minimum Speech Transmission Index (STI) of 0.5 to BS EN 60268-16 (or equivalent standard) to apply to assessing speech intelligibility of audio systems for public announcements.

SAFETY

Hot Surface Max. Temp (DegC):		Maximum surface temperature (degC): 82 1. To be achieved in compliance with HGN 'Safe' hot water and surface temperatures: 1998. 2. Hot Surface to be a maximum of 43 deg.C, if patients and visitors have access.
Hot Water Max. Temp (DegC):		

General Notes:
Domestic hot water maximum discharge temp (degC):

Maximum cold water discharge temperature (degC):

Safe temperature systems to comply, as applicable, with HTM 04-01, Parts A & B and HSC ACOP 'Legionnaires' disease L8: the control of legionnella bacteria in water systems.

Clinical risk: 1
Maximum patient clinical risk category for which the room should be used.
Business risk: 1
Maximum non-clinical business continuity risk category applicable to the room.
See HTM 06-01, Part A for definition and application of risk categories.

FIRE

Enclosure:

Automatic Detection: Smoke Ceiling mounted.

General fire notes:

1. Fire detection and alarm systems to comply with HTM 05-03, Part B and BS 5839, where applicable.
2. Fire safety generally to comply with relevant parts of Firecode (HTM 05) together with Building Regulations 2000 and associated Approved Codes of Practice (ACOP).

ADB	Room Design Character	M0251B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	M0251B	Office: 1 person - HBN 00-03		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 5: Moisture Resistance (HTM 56): N: Normal humidity. Hygiene and cleaning (HTM 56): Paragraphs 2.3 - 2.4
Floor:	Surface Finish (HTM 61): 5: Hard, impervious, smooth or 6 Soft, impervious, jointless Hygiene and cleaning (HTM 61): Paragraphs 2.7 - 2.9
Ceiling:	Surface Finish (HTM 60): 6 Moisture Resistance (HTM 60): N: Normal humidity. Hygiene and cleaning (HTM 60): Paragraphs 2.9 - 2.10
Doorsets:	(HTM 58) 1 x 1000 mm, single leaf, plain flush, lockable See HBN 00-04 for effective clear width access requirements.
Windows:	(HTM 55) Clear, solar control, privacy control
Internal Glazing:	(HTM 57) Clear glass - where appropriate
Hatch:	N/A

Notes:

ADB	Schedule of Components by Room	M0251B

Project: SG01 South Glasgow v01 (draft)
Department:
Room: M0251B Office: 1 person - HBN 00-03
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	DATA1000	DATA POINTS incorporating two twin power sockets and two data/telecom points, assembly: 2 x OUT010, SOCKET outlet, switched, 13 amp, twin 2 x OUT131, SOCKET outlet double data/voice, wall/trunking mounted		1
1		1	LIG138	LUMINAIRE, indicating controlled drugs cupboard repeat		1
1		1	OUT010	SOCKET outlet switched 13amp twin		1
1		1	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
1		1	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	SWC8018	SWITCH 10A retractable, integrated with lighting control system		1
1		1	TRU8000	TRUNKING: Power and Data trunking; length as drawn		1
1		1	BOA013	BOARD, display/notice, wall mounted, 900H 1200W		2
1		1	CLO001	CLOCK battery, wall mounted		2
3		3	HOO019	HOOK, single, small, wall mounted		2
1		1	CAB049	CABINET, lateral filing, 6 rails, 2 door, 1970H 1000W 470D		3
1		1	CHA301	CHAIR, swivel, height adjustable, high back, with arms, wipeable, 5 star base, on castors		3
2		2	CHA317	CHAIR, upright, upholstered, stacking, wipeable		3
1		1	COM038	COMPUTER PRINTER, laser, A4, 250H 380W 385D		3
1		1	COMP1000	COMPUTER; complete with keyboard, screen and telephone, assembly: 1 x COM031, COMPUTER CPU 1 x COM033, COMPUTER KEYBOARD 1 x COM1000, COMPUTER MONITOR, TFT, digital flat panel display, desk top 1 x TEL1000, TELEPHONE, handset		3
1		1	DES026	DESK UNIT, cantilever, cable management, adjustable legs, modesty panel, 1400W 700D		3
1		1	DRA056	DRAWER UNIT, 2 drawer, lockable, on castors, 600H 410W 600D		3
1		1	DRA057	DRAWER UNIT, 3 drawer, lockable, on castors, desk height 715H 430W 600D		3

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ADB	Room Data Sheet	M0252B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	M0252B	Office: 2 person - HBN 00-03		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Clinical administration. 2) Using computer workstation(s). 3) Using telephone(s). 4) Discussions and interviews. 5) Storing files and records. 6) Hanging coats. 7) Secure holding of personal belongings.			
Personnel:	2 x persons			
Planning Relationships:				
Space Data:	**Area (m²):**	12.00	**Height (mm):**	2,400

Notes: A dimming switch is recommended if the room is used for viewing digital images.

ADB	Room Environmental Data	M0252B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	M0252B	Office: 2 person - HBN 00-03		
Room Number:			**Revision Date:**	01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	20	26oC not to be exceeded for more than 50 hours per annum against CIBSE DSY weather data
Summer Temperature (DegC):	26	
Mechanical Ventilation (Supply ac/hr):		Air volume to suit occupancy at 12 litres per second per person or cooling requirement, whichever the greater
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:	Bal	
Filtration (%DSE and % Arrestance):	/	Bal = Balanced -ve = Negative +ve = Positive
Humidity (%RH):		Permissible relative humidity range (%): 35-70 RH control not normally required but subject to local risk assessment.

General Notes:

LIGHTING		
Service Illumination (Lux):		Average on desk 300 lux 1. Max point illuminance 520 lux Areas for VDT's: See CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001.
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	N	
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes:

Type of control: N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 22
Areas in which VDT present to comply with CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001

Emergency escape route lighting required? (Yes/No): N
Not normally required unless need to comply with BS 5266.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0.85 metres above finished floor level.

NOISE

Privacy Factor Required (dB):		Noise intrusion from external sources: equivalent continuous sound pressure level, 1hr. Daytime: 40 Night: Maximum f night:
Mechanical Services (NR):		1. Maximum value inside room space. 2. See Table 1 of HTM 08-01
Intrusive Noise (NR Leq):		Maximum internal noise from M&E services (NR): 35 1. See Table 2 of HTM 08-01. 2. All plant to be operating at maximum normal design duty. Sound insulation parameters: Privacy: Private Noise generation: Typical Noise sensitivity: Medium See Table 3 of HTM 08-01 Sound insulation rating: 42 1. Minimum value of noise sensitivity of receiving room. 2. See Table 4 of HTM 08-01. 3. Adjust for specific room adjacencies in accordance with table 5 of HTM 08-01.
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:
1. Acoustic design to be compliant with HTM 08-01.
2. Maximum weighted standardised impact sound pressure level (L'nT,w) to be 65 dB for floors over noise sensitive areas.
2. A minimum Speech Transmission Index (STI) of 0.5 to BS EN 60268-16 (or equivalent standard) to apply to assessing speech intelligibility of audio systems for public announcements.

SAFETY

Hot Surface Max. Temp (DegC):		Maximum surface temperature (degC): 82
Hot Water Max. Temp (DegC):		

General Notes:

FIRE

Enclosure:

Automatic Detection: Smoke Ceiling mounted.

General fire notes:

1. Fire detection and alarm systems to comply with HTM 05-03, Part B and BS 5839, where applicable.
2. Fire safety generally to comply with relevant parts of Firecode (HTM 05) together with Building Regulations 2000 and associated Approved Codes of Practice (ACOP).

ADB	Room Design Character	M0252B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	M0252B	Office: 2 person - HBN 00-03		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 5: Moisture Resistance (HTM 56): N: Normal humidity. Hygiene and cleaning (HTM 56): Paragraphs 2.3 - 2.4
Floor:	Surface Finish (HTM 61): 5: Hard, impervious, smooth or 6 Soft, impervious, jointless Hygiene and cleaning (HTM 61): Paragraphs 2.7 - 2.9
Ceiling:	Surface Finish (HTM 60): 6 Moisture Resistance (HTM 60): N: Normal humidity. Hygiene and cleaning (HTM 60): Paragraphs 2.9 - 2.10
Doorsets:	(HTM 58) 1 x 1000 mm, single leaf, plain flush, lockable See HBN 00-04 for effective clear width access requirements.
Windows:	(HTM 55) Clear, solar control, privacy control
Internal Glazing:	(HTM 57) Clear glass - where appropriate
Hatch:	N/A

Notes:

ADB	Schedule of Components by Room	M0252B

Project: SG01 South Glasgow v01 (draft)
Department:
Room: M0252B Office: 2 person - HBN 00-03
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
2		2	DATA1000	DATA POINTS incorporating two twin power sockets and two data/telecom points, assembly: 2 x OUT010, SOCKET outlet, switched, 13 amp, twin 2 x OUT131, SOCKET outlet double data/voice, wall/trunking mounted		1
1		1	LIG138	LUMINAIRE, indicating controlled drugs cupboard repeat		1
1		1	OUT010	SOCKET outlet switched 13amp twin		1
1		1	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
1		1	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	SWC8018	SWITCH 10A retractable, integrated with lighting control system		1
1		1	TRU8000	TRUNKING: Power and Data trunking; length as drawn		1
2		2	BOA013	BOARD, display/notice, wall mounted, 900H 1200W		2
1		1	CLO001	CLOCK battery, wall mounted		2
4		4	HOO019	HOOK, single, small, wall mounted		2
1		1	CAB049	CABINET, lateral filing, 6 rails, 2 door, 1970H 1000W 470D		3
2		2	CHA301	CHAIR, swivel, height adjustable, high back, with arms, wipeable, 5 star base, on castors		3
2		2	CHA317	CHAIR, upright, upholstered, stacking, wipeable		3
1		1	COM038	COMPUTER PRINTER, laser, A4, 250H 380W 385D		3
2		2	COMP1000	COMPUTER; complete with keyboard, screen and telephone, assembly: 1 x COM031, COMPUTER CPU 1 x COM033, COMPUTER KEYBOARD 1 x COM1000, COMPUTER MONITOR, TFT, digital flat panel display, desk top 1 x TEL1000, TELEPHONE, handset		3
2		2	DES026	DESK UNIT, cantilever, cable management, adjustable legs, modesty panel, 1400W 700D		3
2		2	DRA056	DRAWER UNIT, 2 drawer, lockable, on castors, 600H 410W 600D		3
2		2	DRA057	DRAWER UNIT, 3 drawer, lockable, on castors, desk height 715H 430W 600D		3

ADB	Room Data Sheet	M0529B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	M0529B	Office, manager		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Supervising departmental activities. 2) Allocating staff resources. 3) Administration, clerical duties. 4) Using computer workstation(s). 5) Using telephone(s). 6) Holding files, books and documents. 7) Communicating with patient and arranging transport facility. 8) Recording attendance. 9) Alerting staff. 10) Control of entrance security.			
Personnel:	1 x Staff 3 x Others			
Planning Relationships:	Adjacent to duty room. Close to garage. Overlooking vehicle fuel pumps. Adjacent to station officer - where appropriate.			
Space Data:	**Area (m²):**	12.00	**Height (mm):**	2,400
Notes:	CUP011 - Cupboard; can be replaced by built-in cupboard.			

ADB	Room Environmental Data	M0529B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	M0529B	Office, manager		
Room Number:			**Revision Date:**	01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	20	26oC not to be exceeded for more than 50 hours per annum against CIBSE DSY weather data
Summer Temperature (DegC):	26	
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		

General Notes:

LIGHTING		
Service Illumination (Lux):	300	Desk. Areas for VDT's: See CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001.
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	N	Colour rendering characteristics (Ra): 80 Minimum colour appearance of 4000K
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes:

Type of control: N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 19
Areas in which VDT present to comply with CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001

Emergency escape route lighting required? (Yes/No): N
Not normally required unless need to comply with BS 5266.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0.85 metres above finished floor level.

NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:

SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):		

General Notes:

FIRE

Enclosure:

Automatic Detection: Smoke

ADB	Room Design Character	M0529B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	M0529B	Office, manager		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 5: Moisture Resistance (HTM 56): N:Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 6 i.e. Soft, impervious, jointless Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5:Imperforate Moisture Resistance (HTM 60): N:Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1000mm, single leaf, plain flush, lockable
Windows:	(HTM 55) Clear glass with solar control, privacy control
Internal Glazing:	(HTM 57) N/A
Hatch:	Sliding, to duty room

Notes:

ADB	Schedule of Components by Room	M0529B

Project: SG01 South Glasgow v01 (draft)
Department:
Room: M0529B Office, manager
Room Number: **Revision Date:** 01/06/2010

Quantity New	Quantity Trans	Quantity Total	Code	Description	Alt. Code	Grp
1		1	CLOC1000	CLOCK, synchronous, wall mounted, assembly: 1 x CLO002, CLOCK synchronous, wall mounted 1 x OUT002, OUTLET cable, 13 amp		1
1		1	DATA1000	DATA POINTS incorporating two twin power sockets and two data/telecom points, assembly: 2 x OUT010, SOCKET outlet, switched, 13 amp, twin 2 x OUT131, SOCKET outlet double data/voice, wall/trunking mounted		1
3		3	OUT010	SOCKET outlet switched 13amp twin		1
1		1	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
1		1	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
2		2	SHE201	SHELF, 600W 300D		1
1		1	SWC8019	DIMMABLE SWITCH 10A retractable, integrated with lighting control system		1
1		1	BOA006	BOARD, marker, whiteboard, dry-wipe, with pen holder, wall mounted, 1200H1800W		2
1		1	BOA013	BOARD, display/notice, wall mounted, 900H 1200W		2
1		1	CUP332	CUPBOARD, key, 30 hooks, lockable, wall mounted, 305H 230W 70D		2
4		4	HOO024	HOOK, hat and coat, 1		2
1		1	BIN002	BIN, disposal, general purpose, 710H 460 dia.		3
1		1	CAB025	CABINET, filing, 4 drawer, 1320H 465W 620D		3
4		4	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	CHA301	CHAIR, swivel, height adjustable, high back, with arms, wipeable, 5 star base, on castors		3
1		1	COM038	COMPUTER PRINTER, laser, A4, 250H 380W 385D		3
1		1	COMP1000	COMPUTER; complete with keyboard, screen and telephone, assembly: 1 x COM031, COMPUTER CPU 1 x COM033, COMPUTER KEYBOARD 1 x COM1000, COMPUTER MONITOR, TFT, digital flat panel display, desk top 1 x TEL1000, TELEPHONE, handset		3
1		1	CUP011	CUPBOARD, metal, with 4 pull out galvanised shelves, lockable, 1800H 1000W 500D		3
1		1	DES026	DESK UNIT, cantilever, cable management, adjustable legs, modesty panel, 1400W 700D		3
1		1	DRA056	DRAWER UNIT, 2 drawer, lockable, on castors, 600H 410W 600D		3

ADB	Room Data Sheet	M0530B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	M0530B	Office: station officer Ambulance stations		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Managerial tasks associated with department control. 2) Use of visual display terminal(s). 3) Using telephone(s). 4) Discussions and interviews. 5) Holding and controlling petty cash. 6) Payment of wages.			
Personnel:	1 x Staff 5 x Others			
Planning Relationships:	Adjacent to garage. Adjacent to Supervisors office - where appropriate			
Space Data:	**Area (m²):**	11.00	**Height (mm):**	2,400

Notes: Board map is required.

ADB	Room Environmental Data	M0530B

Project:	SG01	South Glasgow v01 (draft)
Department:		
Room:	M0530B	Office: station officer Ambulance stations
Room Number:		**Revision Date:** 01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	21	26°C not to be exceeded for more than 50 hours per annum against CIBSE TSY weather data
Summer Temperature (DegC):	26	
Mechanical Ventilation (Supply ac/hr):		Air volume to suit occupancy at 10 litres per second per person or cooling requirement, whichever the greater
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:	Bal or -ve	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		

General Notes:

LIGHTING		
Service Illumination (Lux):	300	average at desk
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	Y	Colour rendering characteristics (Ra): 80 Minimum colour appearance of 4000K
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes:

Type of control: N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 22
Areas in which VDT present to comply with CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001

Emergency escape route lighting required? (Yes/No): N
Not normally required unless need to comply with BS 5266.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0.85 metres above finished floor level.

NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:

1. Acoustic design to be compliant with HTM 08-01.
2. Maximum weighted standardised impact sound pressure level (L'nT,w) to be 65 dB for floors over noise sensitive areas.
2. A minimum Speech Transmission Index (STI) of 0.5 to BS EN 60268-16 (or equivalent standard) to apply to assessing speech intelligibility of audio systems for public announcements.

SAFETY		
Hot Surface Max. Temp (DegC):	43	Hot Surface: 82 deg.C, unless patients have access.
Hot Water Max. Temp (DegC):		

General Notes:

FIRE

Enclosure:

Automatic Detection: Smoke

ADB	Room Design Character	M0530B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	M0530B	Office: station officer Ambulance stations		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 5: Moisture Resistance (HTM 56): N:Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 6 i.e. Soft, impervious, jointless Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5:Imperforate Moisture Resistance (HTM 60): N:Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1000mm, single leaf, plain flush, lockable
Windows:	(HTM 55) Clear glass with solar control, privacy control
Internal Glazing:	(HTM 57)
Hatch:	
Notes:	

ADB	Schedule of Components by Room	M0530B

Project: SG01 South Glasgow v01 (draft)
Department:
Room: M0530B Office: station officer
Ambulance stations
Room Number: **Revision Date:** 01/06/2010

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	DATA1000	DATA POINTS incorporating two twin power sockets and two data/telecom points, assembly: 2 x OUT010, SOCKET outlet, switched, 13 amp, twin 2 x OUT131, SOCKET outlet double data/voice, wall/trunking mounted		1
2		2	OUT010	SOCKET outlet switched 13amp twin		1
1		1	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
1		1	SAF005	SAFE, wall, recessed, 150H 200W 150D		1
1		1	SWC8018	SWITCH 10A retractable, integrated with lighting control system		1
5		5	BOA013	BOARD, display/notice, wall mounted, 900H 1200W		2
6		6	HOO024	HOOK, hat and coat, 1		2
1		1	BIN002	BIN, disposal, general purpose, 710H 460 dia.		3
1		1	CAB025	CABINET, filing, 4 drawer, 1320H 465W 620D		3
5		5	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	CHA301	CHAIR, swivel, height adjustable, high back, with arms, wipeable, 5 star base, on castors		3
1		1	COMP1000	COMPUTER; complete with keyboard, screen and telephone, assembly: 1 x COM031, COMPUTER CPU 1 x COM033, COMPUTER KEYBOARD 1 x COM1000, COMPUTER MONITOR, TFT, digital flat panel display, desk top 1 x TEL1000, TELEPHONE, handset		3
1		1	CUP011	CUPBOARD, metal, with 4 pull out galvanised shelves, lockable, 1800H 1000W 500D		3
1		1	DES026	DESK UNIT, cantilever, cable management, adjustable legs, modesty panel, 1400W 700D		3
1		1	DRA056	DRAWER UNIT, 2 drawer, lockable, on castors, 600H 410W 600D		3

ADB	Room Data Sheet	V1321B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	V1321B	Shower room: ambulant - HBN 00-02		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Use of shower by ambulant person. 2) Undressing and dressing in privacy. 3) Hanging clothes. 4) Hanging towels.			
Personnel:	1 x person (staff or visitor) Intermittent use			
Planning Relationships:	Close to WC. Note: This room does not include a toilet.			
Space Data:	**Area (m²):**	2.50	**Height (mm):**	2,400

Notes: This room is not recommended for patient use.

ADB	Room Environmental Data	V1321B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	V1321B	Shower room: ambulant - HBN 00-02		
Room Number:			**Revision Date:**	01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	22	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):	10.0	
Pressure Relative to Adjoining Space:	-ve	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		

General Notes:

LIGHTING		
Service Illumination (Lux):		Daytime - general (lux): 100 to 150 1. Average at floor level.
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	Y	Colour rendering characteristics (Ra): 80 Minimum colour appearance of 4000K
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes:

Type of control: N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 19
Areas in which VDT present to comply with CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001

Emergency escape route lighting required? (Yes/No): N
Not normally required unless need to comply with BS 5266.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0.85 metres above finished floor level.

NOISE

Privacy Factor Required (dB):		Noise intrusion from external sources: equivalent continuous sound pressure level, 1hr. Daytime: 55 Night: Maximum f night:
Mechanical Services (NR):		1. Maximum value inside room space. 2. See Table 1 of HTM 08-01
Intrusive Noise (NR Leq):		Maximum internal noise from M&E services (NR): 45 1. See Table 2 of HTM 08-01. 2. All plant to be operating at maximum normal design duty. Sound insulation parameters: Privacy: Moderate Noise generation: Typical Noise sensitivity: Not Sensitive See Table 3 of HTM 08-01 Sound insulation rating: 37 1. Minimum value of noise sensitivity of receiving room. 2. See Table 4 of HTM 08-01. 3. Adjust for specific room adjacencies in accordance with table 5 of HTM 08-01.
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:
1. Acoustic design to be compliant with HTM 08-01.
2. Maximum weighted standardised impact sound pressure level (L'nT,w) to be 65 dB for floors over noise sensitive areas.
2. A minimum Speech Transmission Index (STI) of 0.5 to BS EN 60268-16 (or equivalent standard) to apply to assessing speech intelligibility of audio systems for public announcements.

SAFETY

Hot Surface Max. Temp (DegC):		Maximum surface temperature (degC): 43 To be achieved in compliance with SHTN 6 'The Safe Operation and Maintenance of Thermostatic Mixing Valves
Hot Water Max. Temp (DegC):		

General Notes:
Domestic hot water maximum discharge temp (degC): 41
1. Temperature equilibrium to be achieved within 1 minute of draw-off period.
2. Type 3 Thermostatic Mixing Valve.

Maximum cold water discharge temperature (degC): 20
Temperature equilibrium to be achieved within 2 minutes of draw-off period.

Safe temperature systems to comply, as applicable, with HTM 04-01, Parts A & B and HSC ACOP 'Legionnaires' disease L8: the control of legionnella bacteria in water systems.

Clinical risk: 2
Maximum patient clinical risk category for which the room should be used.
Business risk: 2
Maximum non-clinical business continuity risk category applicable to the room.
See HTM 06-01, Part A for definition and application of risk categories.

FIRE

Enclosure:

Automatic Detection:

General fire notes:

1. Fire detection and alarm systems to comply with HTM 05-03, Part B and BS 5839, where applicable.
2. Fire safety generally to comply with relevant parts of Firecode (HTM 05) together with Building Regulations 2000 and associated Approved Codes of Practice (ACOP).

ADB	Room Design Character	V1321B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	V1321B	Shower room: ambulant - HBN 00-02		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 4 i.e. Impervious, smooth Moisture Resistance (HTM 56): H i.e. high humidity. Hygiene and cleaning (HTM 56): Paragraphs 2.3 - 2.4
Floor:	Surface Finish (HTM 61): 4: hard, impervious, jointless, slip resistance Hygiene and cleaning (HTM 61): Paragraphs 2.7 - 2.9
Ceiling:	Surface Finish (HTM 60): 2 i.e. smooth, imperforate Moisture Resistance (HTM 60): H i.e. high humidity Hygiene and cleaning (HTM 60): Paragraphs 2.9 - 2.10
Doorsets:	(HTM 58) 1 x 900 mm, single leaf, plain flush, occupancy indicator, lockable, outside emergency release See HBN 00-04 for minimum effective clear opening widths.
Windows:	(HTM 55) N/A
Internal Glazing:	(HTM 57) N/A
Hatch:	N/A

Notes:

ADB	Schedule of Components by Room	V1321B

Project: SG01 South Glasgow v01 (draft)
Department:
Room: V1321B Shower room: ambulant - HBN 00-02
Room Number: **Revision Date:** 01/06/2010

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	DIS200	DISH, soap, wall mounted		1
1		1	LIG063	LUMINAIRE, single fluorescent lamp, wall, 8 watt, 300 mm		1
1		1	MIR8000	MIRROR, for ambulant &disabled people, unbreakable, wall mounted, 1000x300mm		1
1		1	OUT025	SOCKET outlet, shaver		1
1		1	PIR8000	PIR Sensor for lights, passive infrared motion sensor		1
1		1	RAI260	RAIL for shower curtain, 1000mm		1
1		1	SEA024	SEAT, tip-up, wall mounted, 400 W 400D		1
1		1	SHOW1003	SHOWER, IPS/wall mounted, with tray and cubicle, assembly: 1 x SHO003, SHOWER TRAY, slip resistant base, with drainage outlet, 1000W 1000D 1 x SHO018, SHOWER, valve, thermostatic mixer (associated with SHO020), HTM 64 TM1 1 x SHO020, SHOWER, adjustable shower head hand spray (associated with SHO018), HTM 64 TM1 1 x SHO1002, SHOWER, cubicle, to fit 'SHO003'.		1
3		3	HOO019	HOOK, single, small, wall mounted		2
1		1	SHE101	SHELF, raised edge, non-breakable, 300W 150D		2

ADB	Room Data Sheet	V1323A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	V1323A	Shower room: semi-ambulant: standing use - HBN 00-02		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Use of shower by semi-ambulant person (whilst standing). 2) Use of toilet by semi-ambulant person. 3) Use of wash-hand basin. 4) Undressing and dressing in privacy. 5) Hanging clothes. 6) Hanging towels.			
Personnel:	1 x patient Intermittent use			
Planning Relationships:				
Space Data:	**Area (m²):**	5.00	**Height (mm):**	2,400

Notes:

The lamp repeat call is situated over the door outside the room.
Where there is significant risk of assault or self-harm, fixtures, fittings and furniture need to be reviewed.
Luminaires should be sufficiently robust and inherently safe for user groups. Diffusers should be tamper-proof and secure.
The bin for the disposal of sanitary towels will not be required in male only facilities.

ADB	Room Environmental Data	V1323A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	V1323A	Shower room: semi-ambulant: standing use - HBN 00-02		
Room Number:			**Revision Date:**	01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	22	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):	10.0	
Pressure Relative to Adjoining Space:	-ve	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		

General Notes:

LIGHTING		
Service Illumination (Lux):		Daytime - general (lux): 100 to 150 1. Average at floor level.
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	Y	Colour rendering characteristics (Ra): 80 Minimum colour appearance of 4000K
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes:

Type of control: N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 19
Areas in which VDT present to comply with CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001

Emergency escape route lighting required? (Yes/No): N
Not normally required unless need to comply with BS 5266.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0.85 metres above finished floor level.

NOISE

Privacy Factor Required (dB):		Noise intrusion from external sources: equivalent continuous sound pressure level, 1hr. Daytime: 55 Night: Maximum f night:
Mechanical Services (NR):		1. Maximum value inside room space. 2. See Table 1 of HTM 08-01
Intrusive Noise (NR Leq):		Maximum internal noise from M&E services (NR): 45 1. See Table 2 of HTM 08-01. 2. All plant to be operating at maximum normal design duty. Sound insulation parameters: Privacy: Moderate Noise generation: Typical Noise sensitivity: Not Sensitive See Table 3 of HTM 08-01 Sound insulation rating: 37 1. Minimum value of noise sensitivity of receiving room. 2. See Table 4 of HTM 08-01. 3. Adjust for specific room adjacencies in accordance with table 5 of HTM 08-01.
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:
1. Acoustic design to be compliant with HTM 08-01.
2. Maximum weighted standardised impact sound pressure level (L'nT,w) to be 65 dB for floors over noise sensitive areas.
2. A minimum Speech Transmission Index (STI) of 0.5 to BS EN 60268-16 (or equivalent standard) to apply to assessing speech intelligibility of audio systems for public announcements.

SAFETY

Hot Surface Max. Temp (DegC):	43	Maximum surface temperature (degC): 43 To be achieved in compliance with SHTN 6 'The Safe Operation and Maintenance of Thermostatic Mixing Valves
Hot Water Max. Temp (DegC):	41	

General Notes:
Domestic hot water maximum discharge temp (degC): 41
1. Temperature equilibrium to be achieved within 1 minute of draw-off period.
2. Type 3 Thermostatic Mixing Valve.

Maximum cold water discharge temperature (degC): 20
Temperature equilibrium to be achieved within 2 minutes of draw-off period.

Safe temperature systems to comply, as applicable, with HTM 04-01, Parts A & B and HSC ACOP 'Legionnaires' disease L8: the control of legionnella bacteria in water systems.

Clinical risk: 2
Maximum patient clinical risk category for which the room should be used.
Business risk: 2
Maximum non-clinical business continuity risk category applicable to the room.
See HTM 06-01, Part A for definition and application of risk categories.

FIRE

Enclosure:

Automatic Detection:

General fire notes:

1. Fire detection and alarm systems to comply with HTM 05-03, Part B and BS 5839, where applicable.
2. Fire safety generally to comply with relevant parts of Firecode (HTM 05) together with Building Regulations 2000 and associated Approved Codes of Practice (ACOP).

ADB	Room Design Character	V1323A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	V1323A	Shower room: semi-ambulant: standing use - HBN 00-02		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 4 i.e. Impervious, smooth Moisture Resistance (HTM 56): H i.e. high humidity. Hygiene and cleaning (HTM 56): Paragraphs 2.3 - 2.4
Floor:	Surface Finish (HTM 61): 4: hard, impervious, jointless, slip resistance Hygiene and cleaning (HTM 61): Paragraphs 2.7 - 2.9
Ceiling:	Surface Finish (HTM 60): 2 i.e. smooth, imperforate Moisture Resistance (HTM 60): H i.e. high humidity Hygiene and cleaning (HTM 60): Paragraphs 2.9 - 2.10
Doorsets:	(HTM 58) 1 x 1000 mm, single leaf, plain flush, occupancy indicator, lockable, outside emergency release See HBN 00-04 for minimum effective clear opening widths.
Windows:	(HTM 55) N/A or obscured
Internal Glazing:	(HTM 57) N/A
Hatch:	N/A

Notes:

ADB	Schedule of Components by Room	V1323A

Project: SG01 South Glasgow v01 (draft)
Department:
Room: V1323A Shower room: semi-ambulant: standing use - HBN 00-02
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	CAL005	CEILING PULL CORD patient/staff call		1
1		1	CAL009	PULL CORD, staff emergency call with indicator lamp		1
1		1	CAL012	RESET UNIT, with repeat lamp, patient/staff call		1
1		1	CAL030	LAMP patient reassurance, ceiling mounted		1
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
1		1	DIS200	DISH, soap, wall mounted		1
1		1	LIG063	LUMINAIRE, single fluorescent lamp, wall, 8 watt, 300 mm		1
1		1	MIR026	MIRROR, unbreakable, wall mounted, 1300H 500W		1
1		1	MIR8000	MIRROR, for ambulant &disabled people, unbreakable, wall mounted, 1000x300mm		1
1		1	OUT025	SOCKET outlet, shaver		1
1		1	OUT345	OUTLET, floor drainage and grating, 150 mm dia. hospital pattern, HTM 64 FOH		1
1		1	PIR8000	PIR Sensor for lights, passive infrared motion sensor		1
4		4	RAI048	RAIL, grab, vertical, wall mounted, 600mm		1
1		1	RAI078	RAIL, grab, horizontal, cranked, U-shape, wall mounted, 1200W 900D		1
1		1	RAI158	RAIL, grab, horizontal, wall / door mounted, 500mm		1
2		2	RAI161	RAIL, grab, horizontal, wall mounted, 600mm		1
1		1	RAI172	RAIL, grab, hinged, wall mounted, 650mm		1
1		1	RAI262	RAIL for shower curtain, 1200mm		1
1		1	SEA024	SEAT, tip-up, wall mounted, 400 W 400D		1
1		1	SHO005	SHOWER, slip resistant floor, with drainage outlet, 1200W 1200D		1
1		1	SHO018	SHOWER, valve, thermostatic mixer (associated with SHO020), HTM 64 TM1		1
1		1	SHO020	SHOWER, adjustable shower head hand spray (associated with SHO018), HTM 64 TM1		1
1		1	WCAD1000	WC, adult, floor mounted, assembly: 1 x CIS005, CISTERN WC/toilet, concealed, reversible. To suit WC HTM64 1 x WCH001, WC/toilet pan with seat, 520-550 projection, hospital pattern, rimless pan, vitreous china, HTM64WCH		1
1		1	WHBN1003	WASH BASIN, en-suite/bathroom, with basin mounted tap/s, assembly: 1 x BAS106, BASIN, medium, general pattern, vitreous china, 1 tap right hand hole, no overflow, bottom outlet, 500W 400D. HTM64LBGM 1 x TAP289, TAP, monobloc, pillar mixer, integral thermostatic, short lever, HTM 64 TP6 1 x WAS101, WASTE, unslotted recessed grated, metal, 1.1/4 in, with plug and chain. HTM64WT3 1 x WAS107, TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	DIS015	DISPENSER, toilet paper, dispense individual sheets, wall mounted		2

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ADB	Schedule of Components by Room	V1323A

Project: SG01 South Glasgow v01 (draft)
Department:
Room: V1323A Shower room: semi-ambulant: standing use - HBN 00-02
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	DIS024	DISPENSER, soap, wall mounted		2
2		2	HOO019	HOOK, single, small, wall mounted		2
1		1	SHE101	SHELF, raised edge, non-breakable, 300W 150D		2
1		1	BIN9000	BIN, sanitary towel disposal		3

ADB	Room Data Sheet	V1635B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	V1635B	Shower room: assisted - HBN 00-02		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Use of assisted shower. 2) Use of assisted toilet. 3) Use of wheelchair accessible hand-wash basin. 4) Undressing and dressing in privacy. 5) Hanging clothes. 6) Hanging towels. 7) Use of sanitary chair. 8) Use of shower chair. 9) Use of mobile hoist.			
Personnel:	1 x patient 2 x staff Intermittent use			
Planning Relationships:	Easy access to/from patient areas.			
Space Data:	**Area (m²):**	8.00	**Height (mm):**	2,400
	If used within a multi-bed bay area, the size of this room may be reduced to 6.5 sqm if fully assisted shower or bathrooms available nearby.			

Notes:

The lamp repeat call is situated over the door outside the room.
Where there is significant risk of assault or self-harm, fixtures, fittings and furniture need to be reviewed.
Luminaires should be sufficiently robust and inherently safe for user groups. Diffusers should be tamper-proof and secure.
The bin for the disposal of sanitary towels will not be required in male only facilities.

ADB	Room Environmental Data	V1635B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	V1635B	Shower room: assisted - HBN 00-02		
Room Number:			**Revision Date:**	01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):		Permissible space temperature range (dry bulb) (degC): 18-28 Range over which the temperature may float.
Summer Temperature (DegC):		Heating design temperature (degC): 22 1. Minimum internal room temperature that the heating system will sustain at an outside temperature of minus 5 oC. 2. External temperature values may be modified in accordance with CIBSE Guide A subject to Healthcare Organisation approval.
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):	10.0	
Pressure Relative to Adjoining Space:	-ve	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		

General Notes:
Heating and ventilation system installations to comply with the following documents, as applicable:-
1. HTM 03-01; Part A.
2. Building Regulations Approved Document F.
3. CIBSE Guides A and B2

LIGHTING		
Service Illumination (Lux):		Daytime - general (lux): 100 to 150 1. Average at floor level.
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	Y	Colour rendering characteristics (Ra): 80 Minimum colour appearance of 4000K
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes:
Type of control: N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 19
Areas in which VDT present to comply with CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001

Emergency escape route lighting required? (Yes/No): N
Not normally required unless need to comply with BS 5266.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0.85 metres above finished floor level.

NOISE		
Privacy Factor Required (dB):		Noise intrusion from external sources: equivalent continuous sound pressure level, 1hr. Daytime: 55 Night: Maximum f night:
Mechanical Services (NR):		1. Maximum value inside room space. 2. See Table 1 of HTM 08-01
Intrusive Noise (NR Leq):		Maximum internal noise from M&E services (NR): 45 1. See Table 2 of HTM 08-01. 2. All plant to be operating at maximum normal design duty. Sound insulation parameters: Privacy: Moderate Noise generation: Typical Noise sensitivity: Not Sensitive See Table 3 of HTM 08-01 Sound insulation rating: 37 1. Minimum value of noise sensitivity of receiving room. 2. See Table 4 of HTM 08-01. 3. Adjust for specific room adjacencies in accordance with table 5 of HTM 08-01.
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:
1. Acoustic design to be compliant with HTM 08-01.
2. Maximum weighted standardised impact sound pressure level (L'nT,w) to be 65 dB for floors over noise sensitive areas.
2. A minimum Speech Transmission Index (STI) of 0.5 to BS EN 60268-16 (or equivalent standard) to apply to assessing speech intelligibility of audio systems for public announcements.

SAFETY		
Hot Surface Max. Temp (DegC):	43	Maximum surface temperature (degC): 43 To be achieved in compliance with SHTN 6 'The Safe Operation and Maintenance of Thermostatic Mixing Valves
Hot Water Max. Temp (DegC):	41	

General Notes:
Domestic hot water maximum discharge temp (degC): 41
1. Temperature equilibrium to be achieved within 1 minute of draw-off period.
2. Type 3 Thermostatic Mixing Valve.

Maximum cold water discharge temperature (degC): 20
Temperature equilibrium to be achieved within 2 minutes of draw-off period.

Safe temperature systems to comply, as applicable, with HTM 04-01, Parts A & B and HSC ACOP 'Legionnaires' disease L8: the control of legionnella bacteria in water systems.

Clinical risk: 2
Maximum patient clinical risk category for which the room should be used.
Business risk: 2
Maximum non-clinical business continuity risk category applicable to the room.
See HTM 06-01, Part A for definition and application of risk categories.

FIRE

Enclosure:

Automatic Detection:

General fire notes:

1. Fire detection and alarm systems to comply with HTM 05-03, Part B and BS 5839, where applicable.
2. Fire safety generally to comply with relevant parts of Firecode (HTM 05) together with Building Regulations 2000 and associated Approved Codes of Practice (ACOP).

ADB	Room Design Character	V1635B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	V1635B	Shower room: assisted - HBN 00-02		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 4 i.e. Impervious, smooth Moisture Resistance (HTM 56): H i.e. high humidity. Hygiene and cleaning (HTM 56): Paragraphs 2.3 - 2.4
Floor:	Surface Finish (HTM 61): 4: hard, impervious, jointless, slip resistance Hygiene and cleaning (HTM 61): Paragraphs 2.7 - 2.9
Ceiling:	Surface Finish (HTM 60): 2 i.e. smooth, imperforate Moisture Resistance (HTM 60): H i.e. high humidity Hygiene and cleaning (HTM 60): Paragraphs 2.9 - 2.10
Doorsets:	(HTM 58) 1 x 1500 mm, one and a half leaf, plain flush, retention 90deg, occupancy indicator, lockable, outside emergency release; mobile hoist access. See HBN 00-04 for minimum effective clear opening widths.
Windows:	(HTM 55) Obscured
Internal Glazing:	(HTM 57) N/A
Hatch:	N/A

Notes:

ADB	Schedule of Components by Room	V1635B

Project: SG01 South Glasgow v01 (draft)
Department:
Room: V1635B Shower room: assisted - HBN 00-02
Room Number: **Revision Date:** 01/06/2010

Quantity New	Quantity Trans	Quantity Total	Code	Description	Alt. Code	Grp
2		2	CAL005	CEILING PULL CORD patient/staff call		1
1		1	CAL007	PULL/PUSH BUTTON, staff emergency call, reset and integral/adjacent indicator lamp		1
1		1	CAL012	RESET UNIT, with repeat lamp, patient/staff call		1
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
1		1	LIG063	LUMINAIRE, single fluorescent lamp, wall, 8 watt, 300 mm		1
1		1	MIR002	MIRROR, wall mounted, 900H 300W		1
1		1	MIR8000	MIRROR, for ambulant &disabled people, unbreakable, wall mounted, 1000x300mm		1
1		1	OUT025	SOCKET outlet, shaver		1
1		1	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
1		1	OUT345	OUTLET, floor drainage and grating, 150 mm dia. hospital pattern, HTM 64 FOH		1
1		1	PIR8000	PIR Sensor for lights, passive infrared motion sensor		1
4		4	RAI048	RAIL, grab, vertical, wall mounted, 600mm		1
2		2	RAI161	RAIL, grab, horizontal, wall mounted, 600mm		1
3		3	RAI172	RAIL, grab, hinged, wall mounted, 650mm		1
1		1	RAI174	RAIL, grab, hinged, wall mounted, 650mm with toilet roll holder		1
1		1	RAI272	RAIL for shower curtain, L-shape, 920W 1200D		1
1		1	SEA022	SEAT, tip-up, fixed height		1
1		1	SPA8028	1500 SQ. WHEELCHAIR TURNING SPACE		1
1		1	WCAD1001	WC, adult, disabled, floor mounted, assembly: 1 x BAC002, BACKREST, WC/toilet, padded, wall mounted 1 x CIS005, CISTERN WC/toilet, concealed, reversible. To suit WC HTM64 1 x WCH005, WC/toilet pan with seat, 700 mm projection, hospital pattern, rimless pan, vitreous china, HTM64WCHD		1
1		1	WHBN1003	WASH BASIN, en-suite/bathroom, with basin mounted tap/s, assembly: 1 x BAS106, BASIN, medium, general pattern, vitreous china, 1 tap right hand hole, no overflow, bottom outlet, 500W 400D. HTM64LBGM 1 x TAP289, TAP, monobloc, pillar mixer, integral thermostatic, short lever, HTM 64 TP6 1 x WAS101, WASTE, unslotted recessed grated, metal, 1.1/4 in, with plug and chain. HTM64WT3 1 x WAS107, TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	DIS024	DISPENSER, soap, wall mounted		2
2		2	HOO019	HOOK, single, small, wall mounted		2
1		1	SHE104	SHELF, modular unit		2
1		1	BIN9000	BIN, sanitary towel disposal		3
1		1	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3

ADB	Room Data Sheet	V1638A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	V1638A	Shower room: trolley access - HBN 00-02		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Using by assisted wheelchair or sanitary chair patient. 2) Using by assisted shower trolley patient. 3) Using mobile hoist. 4) Patient transfer from wheelchair onto toilet and back (supervised). 5) Use of the toilet. 6) Personal washing for a seated person. 7) Using shower (whilst the patient is lying on the shower trolley).			
Personnel:	1 x patient 1 - 2 assistants Intermittent use			
Planning Relationships:				
Space Data:	**Area (m²):**	12.50	**Height (mm):**	2,400

Notes:

Lamp indicator call situated over door outside room

Peninsular (island) toilet provides space on either side of toilet pan for assistance

Mobile hoist access required if patient collapses on floor even if not used for transferring patients to toilet

ADB	Room Environmental Data	V1638A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	V1638A	Shower room: trolley access - HBN 00-02		
Room Number:			**Revision Date:**	01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	22	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):	10.0	
Pressure Relative to Adjoining Space:	NEG	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		

General Notes:

LIGHTING		
Service Illumination (Lux):		Average at floor
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	N	
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes:

Type of control: N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 19
Areas in which VDT present to comply with CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001

Emergency escape route lighting required? (Yes/No): N
Escape route lighting provisions may be required subject to BS 5266-1.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0.85 metres above finished floor level.

NOISE		
Privacy Factor Required (dB):		Noise intrusion from external sources: equivalent continuous sound pressure level, 1hr. Daytime: 45dB (en-suite) 55dB (public/staff) Noise from M&E services: 40 NR. All plant operating at maximum normal design duty. Sound-insulation parameters: Privacy: moderate Noise generation: typical Noise sensitivity: not sensitive Sound-insulation rating: 37 dB weighted standardised level difference. Refer to HTM 08-01, including tables 1-5
Mechanical Services (NR):		
Intrusive Noise (NR Leq):		
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes: Maximum weighted standardised impact sound pressure level to be 65 dB for floors over noise sensitive areas.
A minimum speech transmission index (STI) of 0.5 to BS EN 60268-16 (or equivalent standard) to apply to assessing speech intelligibility of audio systems for public announcements.

SAFETY

Hot Surface Max. Temp (DegC):	43
Hot Water Max. Temp (DegC):	41

General Notes:

FIRE

Enclosure:

Automatic Detection:

ADB	Room Design Character	V1638A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	V1638A	Shower room: trolley access - HBN 00-02		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 4 i.e. Impervious, smooth Moisture Resistance (HTM 56): H i.e. high humidity. Hygiene and cleaning (HTM 56): Paragraphs 2.3 - 2.4
Floor:	urface Finish (HTM 61): 4: hard, impervious, jointless, slip resistance Hygiene and cleaning (HTM 61): Paragraphs 2.7 - 2.9
Ceiling:	Surface Finish (HTM 60): 2 i.e. smooth, imperforate Moisture Resistance (HTM 60): H i.e. high humidity Hygiene and cleaning (HTM 60): Paragraphs 2.9 - 2.10
Doorsets:	(HTM 58) 1x 1500mm, one and a half leaf, plain flush, retention 90deg, occupancy indicator, lockable, outside emergency release; mobile hoist/trolley access See HBN 00-04 for minimum effective clear opening widths
Windows:	(HTM 55) N/A
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	V1638A

Project: SG01 South Glasgow v01 (draft)
Department:
Room: V1638A Shower room: trolley access - HBN 00-02
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	CAL005	CEILING PULL CORD patient/staff call		1
1		1	CAL009	PULL CORD, staff emergency call with indicator lamp		1
1		1	CAL012	RESET UNIT, with repeat lamp, patient/staff call		1
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
1		1	LIG063	LUMINAIRE, single fluorescent lamp, wall, 8 watt, 300 mm		1
1		1	MIR026	MIRROR, unbreakable, wall mounted, 1300H 500W		1
1		1	MIR8000	MIRROR, for ambulant &disabled people, unbreakable, wall mounted, 1000x300mm		1
1		1	OUT025	SOCKET outlet, shaver		1
1		1	OUT345	OUTLET, floor drainage and grating, 150 mm dia. hospital pattern, HTM 64 FOH		1
1		1	PIR8000	PIR Sensor for lights, passive infrared motion sensor		1
4		4	RAI048	RAIL, grab, vertical, wall mounted, 600mm		1
1		1	RAI161	RAIL, grab, horizontal, wall mounted, 600mm		1
1		1	RAI172	RAIL, grab, hinged, wall mounted, 650mm		1
1		1	RAI174	RAIL, grab, hinged, wall mounted, 650mm with toilet roll holder		1
1		1	SHO026	SHOWER, head hand spray including hose and valve thermostatic mixer		1
1		1	TRA1002	TRACK, curtain, shower, length and shape as drawn.		1
1		1	WCAD1001	WC, adult, disabled, floor mounted, assembly: 1 x BAC002, BACKREST, WC/toilet, padded, wall mounted 1 x CIS005, CISTERN WC/toilet, concealed, reversible. To suit WC HTM64 1 x WCH005, WC/toilet pan with seat, 700 mm projection, hospital pattern, rimless pan, vitreous china, HTM64WCHD		1
1		1	WHBN1000	WASH BASIN, clinical, with non touch panel mounted tap/s, assembly: 1 x BAS101, BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM 1 x TAP894, TAP bib, hospital pattern, integral thermostatic mixer, automatic action with sensor operation. HTM64TBH6 1 x WAS100, WASTE, unslotted flush-grated, metal, 1.1/4 in. HTM64WT1 1 x WAS1000, TRAP, concealed waste, for back outlet basins.		1
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS024	DISPENSER, soap, wall mounted		2
2		2	HOO019	HOOK, single, small, wall mounted		2
1		1	SHE100	SHELF, raised edge, non-breakable, 600W 200D		2
1		1	SHE101	SHELF, raised edge, non-breakable, 300W 150D		2
1		1	BIN9000	BIN, sanitary towel disposal		3

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ADB	Schedule of Components by Room	V1638A

Project: SG01 South Glasgow v01 (draft)
Department:
Room: V1638A Shower room: trolley access - HBN 00-02
Room Number: **Revision Date:** 01/06/2010

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	HOL004	HOLDER, sack, with lid foot operated, small, freestanding		3
1		1	TRO279	TROLLEY PATIENT, shower, 1900W 760D		3

ADB	Room Data Sheet	V1643C

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	V1643C	Shower room: en-suite - HBN 00-02		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Use of assisted shower with adjustable tip-up shower seat. 2) Use of assisted toilet. 3) Use of adjustable height hand-wash basin. 4) Undressing and dressing in privacy. 5) Hanging clothes. 6) Hanging towels. 7) Use of sanitary chair. 8) Use of shower chair. 9) Use of mobile hoist.			
Personnel:	1 x patient 1-2 assistants Intermittent use			
Planning Relationships:	En-suite to single-bed room.			
Space Data:	**Area (m²):**	5.00	**Height (mm):**	2,400

Notes:

Assisted access to one side of the toilet requires the second door to the en-suite bedroom to be open. See HBN 00-02.
The lamp repeat call is situated over the door outside the en-suite bedroom.
Where there is significant risk of assault or self-harm, fixtures, fittings and furniture need to be reviewed.
Luminaires should be sufficiently robust and inherently safe for user groups. Diffusers should be tamper-proof and secure.
The bin for the disposal of sanitary towels will not be required in male only facilities.

ADB	Room Environmental Data	V1643C

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	V1643C	Shower room: en-suite - HBN 00-02		
Room Number:			**Revision Date:**	01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	22	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:	-ve	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		

General Notes:

LIGHTING		
Service Illumination (Lux):		Daytime - general (lux): 100 to 150 1. Average at floor level.
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	Y	Colour rendering characteristics (Ra): 80 Minimum colour appearance of 4000K
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes:

Type of control: N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 19
Areas in which VDT present to comply with CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001

Emergency escape route lighting required? (Yes/No): N
Not normally required unless need to comply with BS 5266.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0.85 metres above finished floor level.

NOISE

Privacy Factor Required (dB):		Noise intrusion from external sources: equivalent continuous sound pressure level, 1hr. Daytime: 55 Night: Maximum f night:
Mechanical Services (NR):		1. Maximum value inside room space. 2. See Table 1 of HTM 08-01
Intrusive Noise (NR Leq):		Maximum internal noise from M&E services (NR): 40 1. See Table 2 of HTM 08-01. 2. All plant to be operating at maximum normal design duty. Sound insulation parameters: Privacy: Moderate Noise generation: Typical Noise sensitivity: Not Sensitive See Table 3 of HTM 08-01 Sound insulation rating: 37 1. Minimum value of noise sensitivity of receiving room. 2. See Table 4 of HTM 08-01. 3. Adjust for specific room adjacencies in accordance with table 5 of HTM 08-01.
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:
1. Acoustic design to be compliant with HTM 08-01.
2. Maximum weighted standardised impact sound pressure level (L'nT,w) to be 65 dB for floors over noise sensitive areas.
2. A minimum Speech Transmission Index (STI) of 0.5 to BS EN 60268-16 (or equivalent standard) to apply to assessing speech intelligibility of audio systems for public announcements.

SAFETY

Hot Surface Max. Temp (DegC):	43	Maximum surface temperature (degC): 43 To be achieved in compliance with SHTN 6 'The Safe Operation and Maintenance of Thermostatic Mixing Valves -
Hot Water Max. Temp (DegC):	41	

General Notes:
Domestic hot water maximum discharge temp (degC): 41
1. Temperature equilibrium to be achieved within 1 minute of draw-off period.
2. Type 3 Thermostatic Mixing Valve.

Maximum cold water discharge temperature (degC): 20
Temperature equilibrium to be achieved within 2 minutes of draw-off period.

Safe temperature systems to comply, as applicable, with HTM 04-01, Parts A & B and HSC ACOP 'Legionnaires' disease L8: the control of legionnella bacteria in water systems.

Clinical risk: 2
Maximum patient clinical risk category for which the room should be used.
Business risk: 2
Maximum non-clinical business continuity risk category applicable to the room.
See HTM 06-01, Part A for definition and application of risk categories.

FIRE

Enclosure:

Automatic Detection:

General fire notes:

1. Fire detection and alarm systems to comply with HTM 05-03, Part B and BS 5839, where applicable.
2. Fire safety generally to comply with relevant parts of Firecode (HTM 05) together with Building Regulations 2000 and associated Approved Codes of Practice (ACOP).

ADB	Room Design Character	V1643C

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	V1643C	Shower room: en-suite - HBN 00-02		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 4 i.e. Impervious, smooth Moisture Resistance (HTM 56): H i.e. high humidity. Hygiene and cleaning (HTM 56): Paragraphs 2.3 - 2.4
Floor:	Surface Finish (HTM 61): 4: hard, impervious, jointless, slip resistance Hygiene and cleaning (HTM 61): Paragraphs 2.7 - 2.9
Ceiling:	Surface Finish (HTM 60): 2 i.e. smooth, imperforate Moisture Resistance (HTM 60): H i.e. high humidity Hygiene and cleaning (HTM 60): Paragraphs 2.9 - 2.10
Doorsets:	1 x approx 2200 mm, double leaf sliding/folding door. See HBN 00-02
Windows:	(HTM 55) Obscured
Internal Glazing:	(HTM 57) N/A
Hatch:	N/A

Notes:

ADB	Schedule of Components by Room	V1643C

Project: SG01 South Glasgow v01 (draft)
Department:
Room: V1643C Shower room: en-suite - HBN 00-02
Room Number: **Revision Date:** 01/06/2010

Quantity New	Quantity Trans	Quantity Total	Code	Description	Alt. Code	Grp
3		3	CAL006	PULL CORD, patient/staff call (help) with reassurance lamp		1
1		1	CAL012	RESET UNIT, with repeat lamp, patient/staff call		1
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
1		1	LIG063	LUMINAIRE, single fluorescent lamp, wall, 8 watt, 300 mm		1
1		1	MIR002	MIRROR, wall mounted, 900H 300W		1
1		1	MIR026	MIRROR, unbreakable, wall mounted, 1300H 500W		1
1		1	OUT025	SOCKET outlet, shaver		1
1		1	OUT345	OUTLET, floor drainage and grating, 150 mm dia. hospital pattern, HTM 64 FOH		1
1		1	PIR8000	PIR Sensor for lights, passive infrared motion sensor		1
3		3	RAI048	RAIL, grab, vertical, wall mounted, 600mm		1
3		3	RAI161	RAIL, grab, horizontal, wall mounted, 600mm		1
1		1	RAI172	RAIL, grab, hinged, wall mounted, 650mm		1
1		1	RAI174	RAIL, grab, hinged, wall mounted, 650mm with toilet roll holder		1
1		1	RAI272	RAIL for shower curtain, L-shape, 920W 1200D		1
1		1	SHOW1002	SHOWER, IPS/wall mounted, assembly: 1 x SHO002, SHOWER, slip resistant floor with drainage outlet, 900W 900D 1 x SHO018, SHOWER, valve, thermostatic mixer (associated with SHO020), HTM 64 TM1 1 x SHO020, SHOWER, adjustable shower head hand spray (associated with SHO018), HTM 64 TM1		1
1		1	WCAD1001	WC, adult, disabled, floor mounted, assembly: 1 x BAC002, BACKREST, WC/toilet, padded, wall mounted 1 x CIS005, CISTERN WC/toilet, concealed, reversible. To suit WC HTM64 1 x WCH005, WC/toilet pan with seat, 700 mm projection, hospital pattern, rimless pan, vitreous china, HTM64WCHD		1
1		1	WHBN1003	WASH BASIN, en-suite/bathroom, with basin mounted tap/s, assembly: 1 x BAS106, BASIN, medium, general pattern, vitreous china, 1 tap right hand hole, no overflow, bottom outlet, 500W 400D. HTM64LBGM 1 x TAP289, TAP, monobloc, pillar mixer, integral thermostatic, short lever, HTM 64 TP6 1 x WAS101, WASTE, unslotted recessed grated, metal, 1.1/4 in, with plug and chain. HTM64WT3 1 x WAS107, TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	BRA021	BRACKET, basin, adjustable height, wall mounted		2
1		1	DIS024	DISPENSER, soap, wall mounted		2
1		1	DIS061	DISPENSER, disposable gloves, single, door mounted		2

ADB	Schedule of Components by Room	V1643C

Project: SG01 South Glasgow v01 (draft)
Department:
Room: V1643C Shower room: en-suite - HBN 00-02
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	DIS062	DISPENSER, toilet paper, dispense individual sheets, door mounted		2
1		1	DIS064	DISPENSER, wipes, door mounted		2
1		1	DIS067	DISPENSER, sanitary bags, door mounted		2
2		2	HOO019	HOOK, single, small, wall mounted		2
1		1	SEA021	SEAT, tip-up, with fold-down grab rails, adjustable		2
1		1	SHE104	SHELF, modular unit		2
1		1	BIN028	BIN, disposal, sealed, operated with one hand, nominal 420H 155W 490D		3
1		1	BIN9000	BIN, sanitary towel disposal		3

ADB	Room Data Sheet	V1645B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	V1645B	Shower room: en-suite: chamfered - HBN 00-02		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Use of assisted shower with fixed tip-up shower seat. 2) Use of assisted toilet. 3) Use of adjustable height hand-wash basin. 4) Undressing and dressing in privacy. 5) Hanging clothes. 6) Hanging towels. 7) Use of sanitary chair. 8) Use of shower chair. 9) Use of mobile hoist.			
Personnel:	1 x patient 1-2 assistants Intermittent use			
Planning Relationships:	En-suite to single-bed room.			
Space Data:	**Area (m²):**	4.50	**Height (mm):**	2,400

Notes:

Assisted access to one side of the toilet requires the second door to the en-suite bedroom to be open. See HBN 00-02.
The lamp repeat call is situated over the door outside the en-suite bedroom.
Where there is significant risk of assault or self-harm, fixtures, fittings and furniture need to be reviewed.
Luminaires should be sufficiently robust and inherently safe for user groups. Diffusers should be tamper-proof and secure.
The bin for the disposal of sanitary towels will not be required in male only facilities.

ADB	Room Environmental Data	V1645B

Project:	SG01	South Glasgow v01 (draft)
Department:		
Room:	V1645B	Shower room: en-suite: chamfered - HBN 00-02
Room Number:		**Revision Date:** 01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	22	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):	10.0	
Pressure Relative to Adjoining Space:	-ve	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		

General Notes:

LIGHTING		
Service Illumination (Lux):		Daytime - general (lux): 100 to 150 1. Average at floor level.
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	Y	Colour rendering characteristics (Ra): 80 Minimum colour appearance of 4000K
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes:

Type of control: N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 19
Areas in which VDT present to comply with CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001

Emergency escape route lighting required? (Yes/No): N
Not normally required unless need to comply with BS 5266.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0.85 metres above finished floor level.

NOISE

Privacy Factor Required (dB):		Noise intrusion from external sources: equivalent continuous sound pressure level, 1hr. Daytime: 55 Night: Maximum f night:
Mechanical Services (NR):		1. Maximum value inside room space. 2. See Table 1 of HTM 08-01
Intrusive Noise (NR Leq):		Maximum internal noise from M&E services (NR): 40 1. See Table 2 of HTM 08-01. 2. All plant to be operating at maximum normal design duty. Sound insulation parameters: Privacy: Moderate Noise generation: Typical Noise sensitivity: Not Sensitive See Table 3 of HTM 08-01 Sound insulation rating: 37 1. Minimum value of noise sensitivity of receiving room. 2. See Table 4 of HTM 08-01. 3. Adjust for specific room adjacencies in accordance with table 5 of HTM 08-01.
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:

1. Acoustic design to be compliant with HTM 08-01.
2. Maximum weighted standardised impact sound pressure level (L'nT,w) to be 65 dB for floors over noise sensitive areas.
2. A minimum Speech Transmission Index (STI) of 0.5 to BS EN 60268-16 (or equivalent standard) to apply to assessing speech intelligibility of audio systems for public announcements.

SAFETY

Hot Surface Max. Temp (DegC):		Maximum surface temperature (degC): 43 To be achieved in compliance with SHTN 6 'The Safe Operation and Maintenance of Thermostatic Mixing Valves
Hot Water Max. Temp (DegC):		

General Notes:

Domestic hot water maximum discharge temp (degC): 41
1. Temperature equilibrium to be achieved within 1 minute of draw-off period.
2. Type 3 Thermostatic Mixing Valve.

Maximum cold water discharge temperature (degC): 20
Temperature equilibrium to be achieved within 2 minutes of draw-off period.

Safe temperature systems to comply, as applicable, with HTM 04-01, Parts A & B and HSC ACOP 'Legionnaires' disease L8: the control of legionnella bacteria in water systems.

Clinical risk: 2
Maximum patient clinical risk category for which the room should be used.
Business risk: 2
Maximum non-clinical business continuity risk category applicable to the room.
See HTM 06-01, Part A for definition and application of risk categories.

FIRE

Enclosure:

Automatic Detection:

General fire notes:

1. Fire detection and alarm systems to comply with HTM 05-03, Part B and BS 5839, where applicable.
2. Fire safety generally to comply with relevant parts of Firecode (HTM 05) together with Building Regulations 2000 and associated Approved Codes of Practice (ACOP).

ADB	Room Design Character	V1645B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	V1645B	Shower room: en-suite: chamfered - HBN 00-02		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 4 i.e. Impervious, smooth Moisture Resistance (HTM 56): H i.e. high humidity. Hygiene and cleaning (HTM 56): Paragraphs 2.3 - 2.4
Floor:	surface Finish (HTM 61): 4: hard, impervious, jointless, slip resistance Hygiene and cleaning (HTM 61): Paragraphs 2.7 - 2.9
Ceiling:	Surface Finish (HTM 60): 2 i.e. smooth, imperforate Moisture Resistance (HTM 60): H i.e. high humidity Hygiene and cleaning (HTM 60): Paragraphs 2.9 - 2.10
Doorsets:	1 x approx 2200 mm, double leaf sliding/folding door. See HBN 00-02
Windows:	(HTM 55) Obscured
Internal Glazing:	(HTM 57) N/A
Hatch:	N/A

Notes:

ADB	Schedule of Components by Room	V1645B

Project: SG01 South Glasgow v01 (draft)
Department:
Room: V1645B Shower room: en-suite: chamfered - HBN 00-02
Room Number: **Revision Date:** 01/06/2010

Quantity New	Quantity Trans	Quantity Total	Code	Description	Alt. Code	Grp
2		2	CAL005	CEILING PULL CORD patient/staff call		1
1		1	CAL012	RESET UNIT, with repeat lamp, patient/staff call		1
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
1		1	LIG063	LUMINAIRE, single fluorescent lamp, wall, 8 watt, 300 mm		1
1		1	MIR002	MIRROR, wall mounted, 900H 300W		1
1		1	MIR026	MIRROR, unbreakable, wall mounted, 1300H 500W		1
1		1	OUT025	SOCKET outlet, shaver		1
1		1	PIR8000	PIR Sensor for lights, passive infrared motion sensor		1
3		3	RAI048	RAIL, grab, vertical, wall mounted, 600mm		1
3		3	RAI161	RAIL, grab, horizontal, wall mounted, 600mm		1
3		3	RAI172	RAIL, grab, hinged, wall mounted, 650mm		1
1		1	RAI174	RAIL, grab, hinged, wall mounted, 650mm with toilet roll holder		1
1		1	SEA022	SEAT, tip-up, fixed height		1
1		1	SHOW1002	SHOWER, IPS/wall mounted, assembly: 1 x SHO002, SHOWER, slip resistant floor with drainage outlet, 900W 900D 1 x SHO018, SHOWER, valve, thermostatic mixer (associated with SHO020), HTM 64 TM1 1 x SHO020, SHOWER, adjustable shower head hand spray (associated with SHO018), HTM 64 TM1		1
1		1	SPA8028	1500 SQ. WHEELCHAIR TURNING SPACE		1
1		1	TRA1002	TRACK, curtain, shower, length and shape as drawn.		1
1		1	WCAD1001	WC, adult, disabled, floor mounted, assembly: 1 x BAC002, BACKREST, WC/toilet, padded, wall mounted 1 x CIS005, CISTERN WC/toilet, concealed, reversible. To suit WC HTM64 1 x WCH005, WC/toilet pan with seat, 700 mm projection, hospital pattern, rimless pan, vitreous china, HTM64WCHD		1
1		1	WHBN1003	WASH BASIN, en-suite/bathroom, with basin mounted tap/s, assembly: 1 x BAS106, BASIN, medium, general pattern, vitreous china, 1 tap right hand hole, no overflow, bottom outlet, 500W 400D. HTM64LBGM 1 x TAP289, TAP, monobloc, pillar mixer, integral thermostatic, short lever, HTM 64 TP6 1 x WAS101, WASTE, unslotted recessed grated, metal, 1.1/4 in, with plug and chain. HTM64WT3 1 x WAS107, TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	BRA021	BRACKET, basin, adjustable height, wall mounted		2
1		1	DIS024	DISPENSER, soap, wall mounted		2
1		1	DIS061	DISPENSER, disposable gloves, single, door mounted		2
1		1	DIS062	DISPENSER, toilet paper, dispense individual sheets, door mounted		2

ADB	Schedule of Components by Room	V1645B

Project: SG01 South Glasgow v01 (draft)
Department:
Room: V1645B Shower room: en-suite: chamfered - HBN 00-02
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	DIS064	DISPENSER, wipes, door mounted		2
1		1	DIS067	DISPENSER, sanitary bags, door mounted		2
2		2	HOO019	HOOK, single, small, wall mounted		2
1		1	SHE104	SHELF, modular unit		2
1		1	BIN9000	BIN, sanitary towel disposal		3

ADB	Room Data Sheet	V1715C

Project:	SG01	South Glasgow v01 (draft)
Department:		
Room:	V1715C	Bath, WC and wash: en-suite, wheelchair accessible Domestic type, with unbreakable mirror
Room Number:		**Revision Date:** 01/06/2010

Activities:	1) Patient may be ambulant or in a wheelchair. 2) Using bath. 3) Using WC. 4) Personal washing for a seated person. 5) Grooming for a seated person. 6) Hanging clothes and towels. 7) Using electric shaver. 8) Patient may require assistance during the activities.			
Personnel:	1 x Patient 1 x Other			
Planning Relationships:	Close to patient bed areas.			
Space Data:	**Area (m²):**	7.00	**Height (mm):**	2,400

Notes:

Lamp indicator call situated over door outside room.

If used in Mental Illness Dept.: Where there is a significant risk of assault or self-harm in any particular area(s) then the fixtures, fittings and furniture will need to be reviewed, but maintaining a therapeutic environment.
Luminaires require to be sufficiently robust and also inherently safe for the user groups. Diffusers should be secured in place and be tamper-proof.

If used en suite to mother and baby bedroom, nappy changing facilities can be provided.

ADB	Room Environmental Data	V1715C

Project:	SG01	South Glasgow v01 (draft)
Department:		
Room:	V1715C	Bath, WC and wash: en-suite, wheelchair accessible Domestic type, with unbreakable mirror
Room Number:		**Revision Date:** 01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	22	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):	10.0	
Pressure Relative to Adjoining Space:	NEG	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		

General Notes:

LIGHTING		
Service Illumination (Lux):	200	Floor
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	N	Ra 80
Standby Lighting Grade:	A	Lighting of the level and quality one third to one half that provided by normal lighting

General Notes:

Type of control: N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 22

Emergency escape route lighting required? (Yes/No): N
Not normally required unless need to comply with BS 5266.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0 metres above finished floor level.

NOISE		
Privacy Factor Required (dB):	70	Ref: HTM2045
Mechanical Services (NR):	45	
Intrusive Noise (NR Leq):	50	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:

SAFETY		
Hot Surface Max. Temp (DegC):	43	To be achieved in compliance with SHTN 6 'The Safe Operation and Maintenance of Thermostatic Mixing ValvesHot Water Max.Temp: Bath - 44. Washbasin - 41.
Hot Water Max. Temp (DegC):	44	

General Notes:

FIRE

Enclosure:

Automatic Detection:

ADB	Room Design Character	V1715C

Project:	SG01	South Glasgow v01 (draft)
Department:		
Room:	V1715C	Bath, WC and wash: en-suite, wheelchair accessible Domestic type, with unbreakable mirror
Room Number:		**Revision Date:** 01/06/2010

Walls:	Surface Finish (HTM 56): 2:Impervious, jointless, smooth Moisture Resistance (HTM 56): H:High humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 4 i.e. Hard, impervious, jointless, extra slip resistance Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 2 i.e. Smooth, imperforate Moisture Resistance (HTM 60): H i.e. High humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1000mm, single leaf, plain flush, retention 90deg., occupancy indicator, lockable, outside emergency release
Windows:	(HTM 55) Obscured
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	V1715C

Project: SG01 South Glasgow v01 (draft)
Department:
Room: V1715C Bath, WC and wash: en-suite, wheelchair accessible Domestic type, with unbreakable mirror
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	BATH1000	BATH; general pattern, with side/end panels and pillar taps, assembly: 1 x BAT1000, BATH, domestic style, 2 no tap holes, 480-500h, 1700w, 700d. 1 x TAP1001, TAP, domestic style thermostatic mixer, bath mounted. 1 x WAS103, WASTE, unslotted recessed grated, metal, 1.1/2 in, with plug and chain. HTM64WT4 1 x WAS108, TRAP, bottle, 1.1/2 in, plastic resealing. HTM64TRR2/P		1
3		3	CAL005	CEILING PULL CORD patient/staff call		1
2		2	CAL012	RESET UNIT, with repeat lamp, patient/staff call		1
1		1	CAL030	LAMP patient reassurance, ceiling mounted		1
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
1		1	DIS202	DISH, soap, recessed		1
2		2	MIR024	MIRROR, unbreakable, wall mounted, 800H 300W		1
1		1	MIR026	MIRROR, unbreakable, wall mounted, 1300H 500W		1
1		1	OUT025	SOCKET outlet, shaver		1
1		1	PIR8000	PIR Sensor for lights, passive infrared motion sensor		1
1		1	RAI085	RAIL, grab, horizontal, partially cranked (max 13 deg), wall mounted, 1750mm		1
3		3	RAI161	RAIL, grab, horizontal, wall mounted, 600mm		1
1		1	WCAD1007R	WC, Doc M pack, btw, right handed version, assembly: 1 x BAC002, BACKREST, WC/toilet, padded, wall mounted 1 x BAS105R, BASIN, small, general pattern, vitreous china, 1 tap right hand hole, no overflow, bottom outlet, 400W 300D, HTM64LBGS 1 x CIS005, CISTERN WC/toilet, concealed, reversible. To suit WC HTM64 3 x RAI048, RAIL, grab, vertical, wall mounted, 600mm 1 x RAI161, RAIL, grab, horizontal, wall mounted, 600mm 1 x RAI172, RAIL, grab, hinged, wall mounted, 650mm 1 x TAP289, TAP, monobloc, pillar mixer, integral thermostatic, short lever, HTM 64 TP6 1 x WAS100, WASTE, unslotted flush-grated, metal, 1.1/4 in. HTM64WT1 1 x WAS107, TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P 1 x WCH005, WC/toilet pan with seat, 700 mm projection, hospital pattern, rimless pan, vitreous china, HTM64WCHD		1

ADB	Schedule of Components by Room	V1715C

Project: SG01 South Glasgow v01 (draft)
Department:
Room: V1715C Bath, WC and wash: en-suite, wheelchair accessible Domestic type, with unbreakable mirror
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	WHBN1010	WASH BASIN, en-suite/bathroom, assisted wheelchair access, assembly: 1 x BAS108, BASIN, large, general pattern, vitreous china, 1 tap right hand hole, no overflow, bottom outlet, 600W 500D, HTM64LBGL 1 x TAP289, TAP, monobloc, pillar mixer, integral thermostatic, short lever, HTM 64 TP6 1 x WAS101, WASTE, unslotted recessed grated, metal, 1.1/4 in, with plug and chain. HTM64WT3 1 x WAS107, TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
2		2	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS015	DISPENSER, toilet paper, dispense individual sheets, wall mounted		2
2		2	DIS024	DISPENSER, soap, wall mounted		2
2		2	HOO019	HOOK, single, small, wall mounted		2
1		1	SHE101	SHELF, raised edge, non-breakable, 300W 150D		2
1		1	SHE102	SHELF, raised edge, non-breakable, 200W 150D		2
1		1	BIN028	BIN, disposal, sealed, operated with one hand, nominal 420H 155W 490D		3
1		1	BIN1000	BIN, sanitary towel disposal to meet HBN00-02 requirements		3
1		1	CHA083	CHAIR, stacking, polypropylene, with seat and back pads, 750H 534W 530D		3
1		1	CHA094	CHAIR, bathroom		3
1		1	HOL004	HOLDER, sack, with lid foot operated, small, freestanding		3

ADB	Room Data Sheet	V1726C

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	V1726C	Bathroom: semi-ambulant - HBN 00-02		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Use of bath by semi-ambulant person. 2) Use of toilet by semi-ambulant person. 3) Use of wash-hand basin. 4) Undressing and dressing in privacy. 5) Hanging clothes. 6) Hanging towels.			
Personnel:	1 x patient Intermittent use			
Planning Relationships:				
Space Data:	**Area (m²):**	6.00	**Height (mm):**	2,400

Notes:

The lamp repeat call is situated over the door outside the room.
Where there is significant risk of assault or self-harm, fixtures, fittings and furniture need to be reviewed.
Luminaires should be sufficiently robust and inherently safe for user groups. Diffusers should be tamper-proof and secure.
The bin for the disposal of sanitary towels will not be required in male only facilities.

ADB	Room Environmental Data	V1726C

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	V1726C	Bathroom: semi-ambulant - HBN 00-02		
Room Number:			**Revision Date:**	01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	22	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):	10.0	
Pressure Relative to Adjoining Space:	NEG	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		

General Notes:

LIGHTING		
Service Illumination (Lux):	200	Floor
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	Y	Colour rendering characteristics (Ra): 80 Minimum colour appearance of 4000K
Standby Lighting Grade:	A	Lighting of the level and quality one third to one half that provided by normal lighting

General Notes:

Type of control: N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 22

Emergency escape route lighting required? (Yes/No): N
Not normally required unless need to comply with BS 5266.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0 metres above finished floor level.

NOISE		
Privacy Factor Required (dB):		Noise intrusion from external sources: equivalent continuous sound pressure level, 1hr. Daytime: 55 Night: Maximum f night:
Mechanical Services (NR):		1. Maximum value inside room space. 2. See Table 1 of HTM 08-01
Intrusive Noise (NR Leq):		Maximum internal noise from M&E services (NR): 45 1. See Table 2 of HTM 08-01. 2. All plant to be operating at maximum normal design duty. Sound insulation parameters: Privacy: Moderate Noise generation: Typical Noise sensitivity: Not Sensitive See Table 3 of HTM 08-01 Sound insulation rating: 37 1. Minimum value of noise sensitivity of receiving room. 2. See Table 4 of HTM 08-01. 3. Adjust for specific room adjacencies in accordance with table 5 of HTM 08-01.
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:
1. Acoustic design to be compliant with HTM 08-01.
2. Maximum weighted standardised impact sound pressure level (L'nT,w) to be 65 dB for floors over noise sensitive areas.
2. A minimum Speech Transmission Index (STI) of 0.5 to BS EN 60268-16 (or equivalent standard) to apply to assessing speech intelligibility of audio systems for public announcements.

SAFETY		
Hot Surface Max. Temp (DegC):	43	To be achieved in compliance with SHTN 6 'The Safe Operation and Maintenance of Thermostatic Mixing ValvesHot Water Max.Temp: Bath - 44. Washbasin - 41.
Hot Water Max. Temp (DegC):	44	

General Notes:
Domestic hot water maximum discharge temp (degC): 43
1. Temperature equilibrium to be achieved within 1 minute of draw-off period.
2. Type 3 Thermostatic Mixing Valve.
3. Max hot water discharge temperature of Bath: 43 oC.
4. Max hot water discharge temperature of Washbasin: 41 oC
5. Temperature equilibrium to be achieved within 2 minute draw-off period.

Maximum cold water discharge temperature (degC): 20
Temperature equilibrium to be achieved within 2 minutes of draw-off period.

Safe temperature systems to comply, as applicable, with HTM 04-01, Parts A & B and HSC ACOP 'Legionnaires' disease L8: the control of legionnella bacteria in water systems.

Clinical risk: 2
Maximum patient clinical risk category for which the room should be used.
Business risk: 2
Maximum non-clinical business continuity risk category applicable to the room.
See HTM 06-01, Part A for definition and application of risk categories.

FIRE

Enclosure:

Automatic Detection:

General fire notes:

1. Fire detection and alarm systems to comply with HTM 05-03, Part B and BS 5839, where applicable.
2. Fire safety generally to comply with relevant parts of Firecode (HTM 05) together with Building Regulations 2000 and associated Approved Codes of Practice (ACOP).

ADB	Room Design Character	V1726C

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	V1726C	Bathroom: semi-ambulant - HBN 00-02		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 4 i.e. Impervious, smooth Moisture Resistance (HTM 56): H i.e. high humidity. Hygiene and cleaning (HTM 56): Paragraphs 2.3 - 2.4
Floor:	Surface Finish (HTM 61): 4: hard, impervious, jointless, slip resistance Hygiene and cleaning (HTM 61): Paragraphs 2.7 - 2.9
Ceiling:	Surface Finish (HTM 60): 2 i.e. smooth, imperforate Moisture Resistance (HTM 60): H i.e. high humidity Hygiene and cleaning (HTM 60): Paragraphs 2.9 - 2.10
Doorsets:	(HTM 58) 1 x 1000 mm, single leaf, plain flush, occupancy indicator, lockable, outside emergency release See HBN 00-04 for minimum effective clear opening widths.
Windows:	(HTM 55) N/A
Internal Glazing:	(HTM 57) N/A
Hatch:	N/A

Notes:

ADB	Schedule of Components by Room	V1726C

Project: SG01 South Glasgow v01 (draft)
Department:
Room: V1726C Bathroom: semi-ambulant - HBN 00-02
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	BATH1001	BATH; hospital pattern, with side/end panels and panel mounted taps, assembly: 1 x BAT007, BATH, general pattern, no tap holes, no overflow, no handgrips, 480-500H 1700W 700D. HTM64BAG 1 x TAP830, TAP, bib combination assembly 2x 3/4 in. inlets, single flow, fixed nozzle, short levers, HTM 64 TB6 1 x WAS103, WASTE, unslotted recessed grated, metal, 1.1/2 in, with plug and chain. HTM64WT4 1 x WAS108, TRAP, bottle, 1.1/2 in, plastic resealing. HTM64TRR2/P		1
3		3	CAL005	CEILING PULL CORD patient/staff call		1
1		1	CAL009	PULL CORD, staff emergency call with indicator lamp		1
1		1	CAL012	RESET UNIT, with repeat lamp, patient/staff call		1
1		1	CAL030	LAMP patient reassurance, ceiling mounted		1
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
1		1	DIS202	DISH, soap, recessed		1
1		1	LIG063	LUMINAIRE, single fluorescent lamp, wall, 8 watt, 300 mm		1
1		1	MIR002	MIRROR, wall mounted, 900H 300W		1
1		1	MIR026	MIRROR, unbreakable, wall mounted, 1300H 500W		1
1		1	OUT025	SOCKET outlet, shaver		1
1		1	PIR8000	PIR Sensor for lights, passive infrared motion sensor		1
1		1	RAI047	RAIL, grab, vertical, wall mounted, 500mm		1
4		4	RAI048	RAIL, grab, vertical, wall mounted, 600mm		1
1		1	RAI085	RAIL, grab, horizontal, partially cranked (max 13 deg), wall mounted, 1750mm		1
1		1	RAI158	RAIL, grab, horizontal, wall / door mounted, 500mm		1
2		2	RAI161	RAIL, grab, horizontal, wall mounted, 600mm		1
1		1	RAI172	RAIL, grab, hinged, wall mounted, 650mm		1
1		1	SEA026	SEAT, transfer, fixed, at the foot of the bath, 700mm bath		1
1		1	WCH001	WC/toilet pan with seat, 520-550 projection, hospital pattern, rimless pan, vitreous china, HTM64WCH		1
1		1	WHBN1003	WASH BASIN, en-suite/bathroom, with basin mounted tap/s, assembly: 1 x BAS106, BASIN, medium, general pattern, vitreous china, 1 tap right hand hole, no overflow, bottom outlet, 500W 400D. HTM64LBGM 1 x TAP289, TAP, monobloc, pillar mixer, integral thermostatic, short lever, HTM 64 TP6 1 x WAS101, WASTE, unslotted recessed grated, metal, 1.1/4 in, with plug and chain. HTM64WT3 1 x WAS107, TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
2		2	DIS013	DISPENSER, paper towel, wall mounted		2

ADB	Schedule of Components by Room	V1726C

Project: SG01 South Glasgow v01 (draft)
Department:
Room: V1726C Bathroom: semi-ambulant - HBN 00-02
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	DIS015	DISPENSER, toilet paper, dispense individual sheets, wall mounted		2
3		3	DIS024	DISPENSER, soap, wall mounted		2
2		2	HOO019	HOOK, single, small, wall mounted		2
2		2	SHE101	SHELF, raised edge, non-breakable, 300W 150D		2
1		1	BIN028	BIN, disposal, sealed, operated with one hand, nominal 420H 155W 490D		3
1		1	BIN1000	BIN, sanitary towel disposal to meet HBN00-02 requirements		3
1		1	CHA083	CHAIR, stacking, polypropylene, with seat and back pads, 750H 534W 530D		3
1		1	HOL004	HOLDER, sack, with lid foot operated, small, freestanding		3

ADB	Room Data Sheet	V1727A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	V1727A	Bathroom with bidet: semi-ambulant - HBN 00-02		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Use of bath by semi-ambulant person. 2) Use of toilet by semi-ambulant person. 3) Use of wash-hand basin. 4) Use of bidet. 5) Undressing and dressing in privacy. 6) Hanging clothes. 7) Hanging towels.			
Personnel:	1 x patient Intermittent use			
Planning Relationships:				
Space Data:	**Area (m²):**	7.50	**Height (mm):**	2,400

Notes:

The lamp repeat call is situated over the door outside the room.
Where there is significant risk of assault or self-harm, fixtures, fittings and furniture need to be reviewed.
Luminaires should be sufficiently robust and inherently safe for user groups. Diffusers should be tamper-proof and secure.
The bin for the disposal of sanitary towels will not be required in male only facilities.

ADB	Room Environmental Data	V1727A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	V1727A	Bathroom with bidet: semi-ambulant - HBN 00-02		
Room Number:			**Revision Date:**	01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	22	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):	6.0	
Pressure Relative to Adjoining Space:	NEG	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		

General Notes:

LIGHTING		
Service Illumination (Lux):		Average at floor
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	N	
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes:

Type of control: N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 22

Emergency escape route lighting required? (Yes/No): N
Not normally required unless need to comply with BS 5266.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0.85 metres above finished floor level.

NOISE		
Privacy Factor Required (dB):		Noise intrusion from external sources: equivalent continuous sound pressure level, 1hr. Daytime: 55 Night: Maximum f night:
Mechanical Services (NR):		1. Maximum value inside room space. 2. See Table 1 of HTM 08-01
Intrusive Noise (NR Leq):		Maximum internal noise from M&E services (NR): 45 1. See Table 2 of HTM 08-01. 2. All plant to be operating at maximum normal design duty.
		Sound insulation parameters: Privacy: Moderate Noise generation: Typical Noise sensitivity: Not Sensitive See Table 3 of HTM 08-01
		Sound insulation rating: 37 1. Minimum value of noise sensitivity of receiving room. 2. See Table 4 of HTM 08-01. 3. Adjust for specific room adjacencies in accordance with table 5 of HTM 08-01.
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:

1. Acoustic design to be compliant with HTM 08-01.
2. Maximum weighted standardised impact sound pressure level (L'nT,w) to be 65 dB for floors over noise sensitive areas.
2. A minimum Speech Transmission Index (STI) of 0.5 to BS EN 60268-16 (or equivalent standard) to apply to assessing speech intelligibility of audio systems for public announcements.

SAFETY		
Hot Surface Max. Temp (DegC):		Maximum surface temperature (degC): 43
Hot Water Max. Temp (DegC):		To be achieved in compliance with HGN 'Safe' hot water and surface temperatures: 1998.

General Notes:

FIRE

Enclosure:

Automatic Detection:

General fire notes:

1. Fire detection and alarm systems to comply with HTM 05-03, Part B and BS 5839, where applicable.
2. Fire safety generally to comply with relevant parts of Firecode (HTM 05) together with Building Regulations 2000 and associated Approved Codes of Practice (ACOP).

ADB	Room Design Character	V1727A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	V1727A	Bathroom with bidet: semi-ambulant - HBN 00-02		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 4 i.e. Impervious, smooth Moisture Resistance (HTM 56): H i.e. high humidity. Hygiene and cleaning (HTM 56): Paragraphs 2.3 - 2.4
Floor:	Surface Finish (HTM 61): 4: hard, impervious, jointless, slip resistance Hygiene and cleaning (HTM 61): Paragraphs 2.7 - 2.9
Ceiling:	Surface Finish (HTM 60): 2 i.e. smooth, imperforate Moisture Resistance (HTM 60): H i.e. high humidity Hygiene and cleaning (HTM 60): Paragraphs 2.9 - 2.10
Doorsets:	(HTM 58) 1 x 1000 mm, single leaf, plain flush, occupancy indicator, lockable, outside emergency release See HBN 00-04 for minimum effective clear opening widths.
Windows:	(HTM 55) Obscured
Internal Glazing:	(HTM 57) N/A
Hatch:	N/A

Notes:

ADB	Schedule of Components by Room	V1727A

Project: SG01 South Glasgow v01 (draft)
Department:
Room: V1727A Bathroom with bidet: semi-ambulant - HBN 00-02
Room Number: **Revision Date:** 01/06/2010

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BATH1001	BATH; hospital pattern, with side/end panels and panel mounted taps, assembly: 1 x BAT007, BATH, general pattern, no tap holes, no overflow, no handgrips, 480-500H 1700W 700D. HTM64BAG 1 x TAP830, TAP, bib combination assembly 2x 3/4 in. inlets, single flow, fixed nozzle, short levers, HTM 64 TB6 1 x WAS103, WASTE, unslotted recessed grated, metal, 1.1/2 in, with plug and chain. HTM64WT4 1 x WAS108, TRAP, bottle, 1.1/2 in, plastic resealing. HTM64TRR2/P		1
1		1	BID001	BIDET, hospital pattern, vitreous china, thermostatic mixer, 1 tap hole no overflow, sensor operated spout, 400H 375W 600D. HTM64BDH		1
3		3	CAL005	CEILING PULL CORD patient/staff call		1
1		1	CAL012	RESET UNIT, with repeat lamp, patient/staff call		1
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
1		1	CIS005	CISTERN WC/toilet, concealed, reversible. To suit WC HTM64		1
1		1	DIS202	DISH, soap, recessed		1
1		1	LIG063	LUMINAIRE, single fluorescent lamp, wall, 8 watt, 300 mm		1
1		1	MIR8000	MIRROR, for ambulant &disabled people, unbreakable, wall mounted, 1000x300mm		1
1		1	OUT025	SOCKET outlet, shaver		1
1		1	PIR8000	PIR Sensor for lights, passive infrared motion sensor		1
1		1	RAI047	RAIL, grab, vertical, wall mounted, 500mm		1
4		4	RAI048	RAIL, grab, vertical, wall mounted, 600mm		1
1		1	RAI085	RAIL, grab, horizontal, partially cranked (max 13 deg), wall mounted, 1750mm		1
3		3	RAI161	RAIL, grab, horizontal, wall mounted, 600mm		1
1		1	RAI174	RAIL, grab, hinged, wall mounted, 650mm with toilet roll holder		1
1		1	SEA026	SEAT, transfer, fixed, at the foot of the bath, 700mm bath		1
1		1	WCAD1000	WC, adult, floor mounted, assembly: 1 x CIS005, CISTERN WC/toilet, concealed, reversible. To suit WC HTM64 1 x WCH001, WC/toilet pan with seat, 520-550 projection, hospital pattern, rimless pan, vitreous china, HTM64WCH		1
1		1	WCH001	WC/toilet pan with seat, 520-550 projection, hospital pattern, rimless pan, vitreous china, HTM64WCH		1

ADB	Schedule of Components by Room	V1727A

Project: SG01 South Glasgow v01 (draft)
Department:
Room: V1727A Bathroom with bidet: semi-ambulant - HBN 00-02
Room Number: **Revision Date:** 01/06/2010

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	WHBN1001	WASH BASIN, WC, with basin mounted tap, assembly: 1 x BAS105, BASIN, small, general pattern, vitreous china, 1 tap right hand hole, no overflow, bottom outlet, 400W 300D, HTM64LBGS 1 x TAP289, TAP, monobloc, pillar mixer, integral thermostatic, short lever, HTM 64 TP6 1 x WAS100, WASTE, unslotted flush-grated, metal, 1.1/4 in. HTM64WT1 1 x WAS107, TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	DIS015	DISPENSER, toilet paper, dispense individual sheets, wall mounted		2
1		1	DIS024	DISPENSER, soap, wall mounted		2
2		2	HOO019	HOOK, single, small, wall mounted		2
2		2	SHE101	SHELF, raised edge, non-breakable, 300W 150D		2
1		1	BIN9000	BIN, sanitary towel disposal		3
1		1	CHA083	CHAIR, stacking, polypropylene, with seat and back pads, 750H 534W 530D		3
1		1	HOL004	HOLDER, sack, with lid foot operated, small, freestanding		3

ADB	Room Data Sheet	V1736B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	V1736B	Bathroom: assisted - HBN 00-02		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Use of assisted bath. 2) Use of assisted toilet. 3) Use of wheelchair accessible hand-wash basin. 4) Undressing and dressing in privacy. 5) Hanging clothes. 6) Hanging towels. 7) Use of sanitary chair. 8) Use of shower chair. 9) Use of mobile hoist.			
Personnel:	1 x patient Up to 3 x staff			
Planning Relationships:				
Space Data:	**Area (m²):**	15.00	**Height (mm):**	2,400

Notes:

If used as a treatment bath, space is required to accommodate stretcher hoist.
The lamp repeat call is situated over the door outside the room.
Where there is significant risk of assault or self-harm, fixtures, fittings and furniture need to be reviewed.
Luminaires should be sufficiently robust and inherently safe for user groups. Diffusers should be tamper-proof and secure.
The bin for the disposal of sanitary towels will not be required in male only facilities.

ADB	Room Environmental Data	V1736B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	V1736B	Bathroom: assisted - HBN 00-02		
Room Number:			**Revision Date:**	01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	22	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):	8.0	
Mechanical Ventilation (Extract ac/hr):	10.0	
Pressure Relative to Adjoining Space:	-ve	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		

General Notes:

LIGHTING		
Service Illumination (Lux):		Daytime - general (lux): 100 to 150 1. Average at floor level.
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	Y	Colour rendering characteristics (Ra): 80 Minimum colour appearance of 4000K
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes:

Type of control: N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 19
Areas in which VDT present to comply with CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001

Emergency escape route lighting required? (Yes/No): N
Not normally required unless need to comply with BS 5266.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0.85 metres above finished floor level.

NOISE		
Privacy Factor Required (dB):		Noise intrusion from external sources: equivalent continuous sound pressure level, 1hr. Daytime: 55 Night: Maximum f night:
Mechanical Services (NR):		1. Maximum value inside room space. 2. See Table 1 of HTM 08-01
Intrusive Noise (NR Leq):		Maximum internal noise from M&E services (NR): 45 1. See Table 2 of HTM 08-01. 2. All plant to be operating at maximum normal design duty. Sound insulation parameters: Privacy: Moderate Noise generation: Typical Noise sensitivity: Not Sensitive See Table 3 of HTM 08-01 Sound insulation rating: 37 1. Minimum value of noise sensitivity of receiving room. 2. See Table 4 of HTM 08-01. 3. Adjust for specific room adjacencies in accordance with table 5 of HTM 08-01.
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:
1. Acoustic design to be compliant with HTM 08-01.
2. Maximum weighted standardised impact sound pressure level (L'nT,w) to be 65 dB for floors over noise sensitive areas.
2. A minimum Speech Transmission Index (STI) of 0.5 to BS EN 60268-16 (or equivalent standard) to apply to assessing speech intelligibility of audio systems for public announcements.

SAFETY		
Hot Surface Max. Temp (DegC):	43	Maximum surface temperature (degC): 43 To be achieved in compliance with SHTN 6 'The Safe Operation and Maintenance of Thermostatic Mixing Valves -
Hot Water Max. Temp (DegC):		

General Notes:
Domestic hot water maximum discharge temp (degC): 46
1. Temperature equilibrium to be achieved within 1 minute of draw-off period.
2. Type 3 Thermostatic Mixing Valve.
3. Max hot water discharge temperature of Bath: 43 oC.
4. Max hot water discharge temperature of Washbasin: 41 oC
5. Temperature equilibrium to be achieved within 2 minute draw-off period.

Maximum cold water discharge temperature (degC): 20
Temperature equilibrium to be achieved within 2 minutes of draw-off period.

Safe temperature systems to comply, as applicable, with HTM 04-01, Parts A & B and HSC ACOP 'Legionnaires' disease L8: the control of legionnella bacteria in water systems.

Clinical risk: 2
Maximum patient clinical risk category for which the room should be used.
Business risk: 2
Maximum non-clinical business continuity risk category applicable to the room.
See HTM 06-01, Part A for definition and application of risk categories.

FIRE

Enclosure:

Automatic Detection:

General fire notes:

1. Fire detection and alarm systems to comply with HTM 05-03, Part B and BS 5839, where applicable.
2. Fire safety generally to comply with relevant parts of Firecode (HTM 05) together with Building Regulations 2000 and associated Approved Codes of Practice (ACOP).

ADB	Room Design Character	V1736B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	V1736B	Bathroom: assisted - HBN 00-02		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 4 i.e. Impervious, smooth Moisture Resistance (HTM 56): H i.e. high humidity. Hygiene and cleaning (HTM 56): Paragraphs 2.3 -2.4
Floor:	Surface Finish (HTM 61): 4: hard, impervious, jointless, slip resistance Hygiene and cleaning (HTM 61): Paragraphs 2.7 - 2.9
Ceiling:	Surface Finish (HTM 60): 2 i.e. smooth, imperforate Moisture Resistance (HTM 60): H i.e. high humidity Hygiene and cleaning (HTM 60): Paragraphs 2.9 - 2.10
Doorsets:	(HTM 58) 1 x 1500 mm, one and a half leaf, plain flush, retention 90deg., occupancy indicator, lockable, outside emergency release. Privacy curtain rail against opening door; hoist access. See HBN 00-04 for minimum effective clear opening widths
Windows:	(HTM 55) Obscured
Internal Glazing:	(HTM 57) N/A
Hatch:	N/A

Notes:

ADB	Schedule of Components by Room	V1736B

Project: SG01 South Glasgow v01 (draft)
Department:
Room: V1736B Bathroom: assisted - HBN 00-02
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	BAT015	BATH, variable height, with control panel and all services		1
2		2	CAL006	PULL CORD, patient/staff call (help) with reassurance lamp		1
1		1	CAL009	PULL CORD, staff emergency call with indicator lamp		1
1		1	CAL012	RESET UNIT, with repeat lamp, patient/staff call		1
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
1		1	LIG063	LUMINAIRE, single fluorescent lamp, wall, 8 watt, 300 mm		1
1		1	MIR002	MIRROR, wall mounted, 900H 300W		1
1		1	MIR026	MIRROR, unbreakable, wall mounted, 1300H 500W		1
1		1	OUT025	SOCKET outlet, shaver		1
1		1	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
1		1	OUT345	OUTLET, floor drainage and grating, 150 mm dia. hospital pattern, HTM 64 FOH		1
1		1	PIR8000	PIR Sensor for lights, passive infrared motion sensor		1
4		4	RAI048	RAIL, grab, vertical, wall mounted, 600mm		1
2		2	RAI161	RAIL, grab, horizontal, wall mounted, 600mm		1
1		1	RAI172	RAIL, grab, hinged, wall mounted, 650mm		1
1		1	RAI174	RAIL, grab, hinged, wall mounted, 650mm with toilet roll holder		1
1		1	SHOW1002	SHOWER, IPS/wall mounted, assembly: 1 x SHO002, SHOWER, slip resistant floor with drainage outlet, 900W 900D 1 x SHO018, SHOWER, valve, thermostatic mixer (associated with SHO020), HTM 64 TM1 1 x SHO020, SHOWER, adjustable shower head hand spray (associated with SHO018), HTM 64 TM1		1
1		1	WCAD1001	WC, adult, disabled, floor mounted, assembly: 1 x BAC002, BACKREST, WC/toilet, padded, wall mounted 1 x CIS005, CISTERN WC/toilet, concealed, reversible. To suit WC HTM64 1 x WCH005, WC/toilet pan with seat, 700 mm projection, hospital pattern, rimless pan, vitreous china, HTM64WCHD		1
1		1	WHBN1007	WASH BASIN, wash room, inset, with basin mounted tap/s, assembly: 1 x BAS1002, BASIN, medium, inset, vitreous china, 2 no tap holes, no overflow. 1 x TAP289, TAP, monobloc, pillar mixer, integral thermostatic, short lever, HTM 64 TP6 1 x WAS100, WASTE, unslotted flush-grated, metal, 1.1/4 in. HTM64WT1 1 x WAS107, TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	DIS024	DISPENSER, soap, wall mounted		2

ADB	Schedule of Components by Room	V1736B

Project: SG01 South Glasgow v01 (draft)
Department:
Room: V1736B Bathroom: assisted - HBN 00-02
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
2		2	HOO019	HOOK, single, small, wall mounted		2
1		1	SHE100	SHELF, raised edge, non-breakable, 600W 200D		2
1		1	SHE101	SHELF, raised edge, non-breakable, 300W 150D		2
1		1	BIN028	BIN, disposal, sealed, operated with one hand, nominal 420H 155W 490D		3
1		1	CHA083	CHAIR, stacking, polypropylene, with seat and back pads, 750H 534W 530D		3
1		1	HOI003	HOIST PATIENT, chair type, mobile		3
1		1	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3

ADB	Room Data Sheet	X0145B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	X0145B	Treatment room: double-sided couch access		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Invasive clinical procedures from both sides of the couch. 2) Undressing and dressing in privacy. 3) Preparation of trays/packs for clinical procedures. 4) Use of clinical wash-hand basin. 5) Accessing and updating electronic patient records (EPRs). 6) Holding sterile supplies and consumables on a trolley. 7) Use of mobile diagnostic and therapeutic equipment. 8) Patient may arrive on a trolley.			
Personnel:	1 x patient 2 x staff			
Planning Relationships:	Close to a clean utility room. Close to a dirty utility room.			
Space Data:	**Area (m²):**	16.00	**Height (mm):**	2,700

Notes:

This room includes a 3-section couch and is based on option 1 layout in HBN 00-03. Alternatively, it may accommodate a 2-section couch or specialist treatment chair.
The room includes general engineering services for delivering treatments. For further details see HTM 02-01 and HTM 08-03.
The lamp repeat call is situated over the door outside the room.
The following items are shown on the room layout but are optional:
- room in use switch and indicator;
- the location of the privacy curtain (may be at the door entrance instead of between the couch and clinical workstation).

Where laser treatments are carried out, an illuminated "laser in use" sign must be situated outside the room linked to a door locking mechanism.
Where the room includes a window, blackout blinds are recommended for flexibility in use (e.g. to allow for eye, ENT and ultrasound examinations).
Facilities for nebulised pentamidine treatments may be required for respiratory medicine.

ADB	Room Environmental Data	X0145B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	X0145B	Treatment room: double-sided couch access		
Room Number:			**Revision Date:**	01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):	25	
Mechanical Ventilation (Supply ac/hr):	10.0	
Mechanical Ventilation (Extract ac/hr):	10.0	
Pressure Relative to Adjoining Space:	BAL	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		

General Notes:

LIGHTING		
Service Illumination (Lux):		Daytime - general (lux): 500 1. Average at working plane. 2. Max point illuminance 850 lux.
Service Illumination Night (Lux):		
Local Illumination (Lux):		Local task illumination (lux): 15000 to 30000 1. At couch level. 2. Medical examination lamp.
Colour Rendering Required:	Y	Colour rendering characteristics (Ra): 90 Minimum colour appearance of 4000K
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes:

Type of control: N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 19
Areas in which VDT present to comply with CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001

Emergency escape route lighting required? (Yes/No): Y
Escape route lighting provisions may be required subject to BS 5266-1.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0.85 metres above finished floor level.

NOISE

Privacy Factor Required (dB):		Noise intrusion from external sources: equivalent continuous sound pressure level, 1hr. Daytime: 40 Night: Maximum f night:
Mechanical Services (NR):		1. Maximum value inside room space. 2. See Table 1 of HTM 08-01
Intrusive Noise (NR Leq):		Maximum internal noise from M&E services (NR): 35 1. See Table 2 of HTM 08-01. 2. All plant to be operating at maximum normal design duty. Sound insulation parameters: Privacy: Confidential Noise generation: Typical Noise sensitivity: Medium See Table 3 of HTM 08-01 Sound insulation rating: 47 1. Minimum value of noise sensitivity of receiving room. 2. See Table 4 of HTM 08-01. 3. Adjust for specific room adjacencies in accordance with table 5 of HTM 08-01.
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:
1. Acoustic design to be compliant with HTM 08-01.
2. Maximum weighted standardised impact sound pressure level (L'nT,w) to be 65 dB for floors over noise sensitive areas.
2. A minimum Speech Transmission Index (STI) of 0.5 to BS EN 60268-16 (or equivalent standard) to apply to assessing speech intelligibility of audio systems for public announcements.

SAFETY

Hot Surface Max. Temp (DegC):	43	Maximum surface temperature (degC): 43 To be achieved in compliance with SHTN 6 'The Safe Operation and Maintenance of Thermostatic Mixing Valves
Hot Water Max. Temp (DegC):	41	

General Notes:

Domestic hot water maximum discharge temp (degC): 41
1. Temperature equilibrium to be achieved within 1 minute of draw-off period.
2. Type 3 Thermostatic Mixing Valve.

Maximum cold water discharge temperature (degC): 20
Temperature equilibrium to be achieved within 2 minutes of draw-off period.

Safe temperature systems to comply, as applicable, with HTM 04-01, Parts A & B and HSC ACOP 'Legionnaires' disease L8: the control of legionnella bacteria in water systems.

Clinical risk: 4
Maximum patient clinical risk category for which the room should be used.
Business risk: 4
Maximum non-clinical business continuity risk category applicable to the room.
See HTM 06-01, Part A for definition and application of risk categories.

FIRE

Enclosure:

Automatic Detection: Smoke Ceiling mounted.

General fire notes:

1. Fire detection and alarm systems to comply with HTM 05-03, Part B and BS 5839, where applicable.
2. Fire safety generally to comply with relevant parts of Firecode (HTM 05) together with Building Regulations 2000 and associated Approved Codes of Practice (ACOP).

ADB	Room Design Character	X0145B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	X0145B	Treatment room: double-sided couch access		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. normal humidity. Hygiene and cleaning (HTM 56): Paragraphs 2.3 - 2.4
Floor:	Surface Finish (HTM 56): 5 Hard, impervious, smooth Moisture Resistance (HTM 56): N i.e. Normal humidity. Hygiene and cleaning (HTM 56): Paragraphs 2.3 - 2.4
Ceiling:	Surface Finish (HTM 60): 3 i.e. smooth, imperforate Moisture Resistance (HTM 60): N i.e. normal humidity Hygiene and cleaning (HTM 60): Paragraphs 2.9 - 2.10
Doorsets:	(HTM 58) 1 x 1500 mm, one and a half leaf, vision panel, lockable; patient trolley access See HBN 00-04 for effective clear width access requirements.
Windows:	(HTM 55) NA or Clear, solar and privacy control
Internal Glazing:	(HTM 57) N/A
Hatch:	N/A
Notes:	In areas used by children and young people, door hinge protectors are required

ADB	Schedule of Components by Room	X0145B

Project: SG01 South Glasgow v01 (draft)
Department:
Room: X0145B Treatment room: double-sided couch access
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
2		2	CAL003	PUSH BUTTON, patient/staff call (help) with socket for patient hand-held unit		1
1		1	CAL009	PULL CORD, staff emergency call with indicator lamp		1
1		1	CAL012	RESET UNIT, with repeat lamp, patient/staff call		1
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
1		1	DATA1000	DATA POINTS incorporating two twin power sockets and two data/telecom points, assembly: 2 x OUT010, SOCKET outlet, switched, 13 amp, twin 2 x OUT131, SOCKET outlet double data/voice, wall/trunking mounted		1
1		1	LIG053	LUMINAIRE, examination, ceiling, adjustable, 1000 lux		1
1		1	LIG073	ILLUMINATED SIGN, 'Room in use'		1
1		1	MEST1021	MEDICAL SERVICE TRUNKING, ward treatment bed/trolley space, to HTM 08-03 requirements, assembly: 1 x CAL012, RESET UNIT, with repeat lamp, patient/staff call 1 x CAL043, PUSH BUTTON patient/staff call with socket for extension pear push, trunking mounted 1 x CAL047, PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, trunking mounted 8 x OUT012, SOCKET outlet switched 13amp twin, trunking mounted 4 x OUT121, SOCKET outlet, computer data, single 1 x OUT453, OUTLET, 4 kPa compressed air, medical 1 x OUT470, OUTLET, oxygen, medical 1 x OUT475, OUTLET, vacuum, medical 1 x TRU1001, MEDICAL SERVICE TRUNKING, horizontal, length as drawn.		1
1		1	OUT010	SOCKET outlet switched 13amp twin		1
1		1	OUT049	CONNECTION UNIT, switched, 13 amp, flex outlet		1
1		1	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
1		1	OUT8200	CONNECTION UNIT switched 13amp, flex outlet, ceiling mounted		1
1		1	SMC003	CABINET, tall, modular storage, for 400 facing inserts, with door, on plinth, 2100H		1
2		2	SMC013	CABINET, base, modular storage, for 400 facing inserts, with door, on plinth, 900H		1
2		2	SMC023	CABINET, upper, modular storage, for 400 facing inserts, with door, 750H		1
1		1	SWC034	SWITCH, dimmer, modulating		1
1		1	SWC076	SWITCH, 'Room in use' illunimated sign		1
1		1	SWC8019	DIMMABLE SWITCH 10A retractable, integrated with lighting control system		1

ADB	Schedule of Components by Room	X0145B

Project: SG01 South Glasgow v01 (draft)
Department:
Room: X0145B Treatment room: double-sided couch access
Room Number: **Revision Date:** 01/06/2010

Quantity New	Quantity Trans	Quantity Total	Code	Description	Alt. Code	Grp
1		1	THE005	THERMOSTAT		1
1		1	TRA1003	TRACK, curtain, length and shape as drawn.		1
1		1	WHBN1000	WASH BASIN, clinical, with non touch panel mounted tap/s, assembly: 1 x BAS101, BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM 1 x TAP894, TAP bib, hospital pattern, integral thermostatic mixer, automatic action with sensor operation. HTM64TBH6 1 x WAS100, WASTE, unslotted flush-grated, metal, 1.1/4 in. HTM64WT1 1 x WAS1000, TRAP, concealed waste, for back outlet basins.		1
1		1	WKT1005H	WORKTOP, 920 H 700D 40mm thick with 50mm upstand, length as drawn		1
1		1	BRA003	BRACKET, holder, suction unit, wall mounted		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS438	DISPENSER, disposable gloves set of 3 and disposable apron, wall mounted		2
2		2	HOO019	HOOK, single, small, wall mounted		2
1		1	CHA302	CHAIR, swivel, height adjustable, medium back, wipeable, 5 star base, on castors		3
1		1	COMP1001	COMPUTER; complete with keyboard and screen, assembly: 1 x COM031, COMPUTER CPU 1 x COM033, COMPUTER KEYBOARD 1 x COM1000, COMPUTER MONITOR, TFT, digital flat panel display, desk top		3
1		1	COU010	COUCH, examination/treatment, (3 section), variable height, retractable wheels, with paper roll holder		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	HOL020	HOLDER, sharps box, up to 7 litre capacity, rail/trolley hang or wall mounted, 170H 125W 100D		3
1		1	SMT002	TROLLEY, modular storage, single open frame, including handle and worktop, with up to 5 sets of runners for 600 facing inserts, 850H 730W 450D		3
1		1	STO006	STOOL, surgeon/anaesthetist, height adjustable, includes anti-static seat pads		3
1		1	TRO133	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 750W 450D		3

ADB	Room Data Sheet	X0147B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	X0147B	Treatment room: all-round couch access - HBN 00-03		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Invasive clinical procedures from all sides of the couch, including the head of the couch. 2) Undressing and dressing in privacy. 3) Preparation of trays/packs for clinical procedures. 4) Use of clinical wash-hand basin. 5) Accessing and updating electronic patient records (EPRs). 6) Use of mobile diagnostic and therapeutic equipment. 7) Holding sterile supplies and consumables on a trolley. 8) Patient may arrive on a trolley.			
Personnel:	1 x patient 2 x staff			
Planning Relationships:	Close to a clean utility room. Close to a dirty utility room.			
Space Data:	**Area (m²):**	16.00	**Height (mm):**	2,700

Notes:

This room includes a 3-section couch and is based on option 1 layout in HBN 00-03.
Alternatively, it may accommodate a 2-section couch or specialist treatment chair.
The room includes general engineering services for delivering treatments. For further details see HTM 02-01 and HTM 08-03.
The lamp repeat call is situated over the door outside the room.
The following items are shown on the room layout but are optional:
- room in use switch and indicator.

This room includes a simple fixed pendant for providing engineering services. However, the type of pendant required is project specific.
Where laser treatments are carried out, an illuminated "laser in use" sign must be situated outside the room linked to a door locking mechanism.

ADB	Room Environmental Data	X0147B

Project:	SG01	South Glasgow v01 (draft)
Department:		
Room:	X0147B	Treatment room: all-round couch access - HBN 00-03
Room Number:		**Revision Date:** 01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):	25	
Mechanical Ventilation (Supply ac/hr):	10.0	
Mechanical Ventilation (Extract ac/hr):	10.0	
Pressure Relative to Adjoining Space:	Bal	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		

General Notes:

LIGHTING		
Service Illumination (Lux):	500	Average at couch
Service Illumination Night (Lux):		
Local Illumination (Lux):		Local task illumination (lux): 1000 1. At couch level. 2. Medical examination lamp.
Colour Rendering Required:	Y	Colour rendering characteristics (Ra): 80 Minimum colour appearance of 4000K
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes:

Type of control: N
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 19
Areas in which VDT present to comply with CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001

Emergency escape route lighting required? (Yes/No): N
Not normally required unless need to comply with BS 5266.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0.85 metres above finished floor level.

NOISE

Privacy Factor Required (dB):		Noise intrusion from external sources: equivalent continuous sound pressure level, 1hr. Daytime: 40 Night: Maximum f night:
Mechanical Services (NR):		1. Maximum value inside room space. 2. See Table 1 of HTM 08-01
Intrusive Noise (NR Leq):		Maximum internal noise from M&E services (NR): 35 1. See Table 2 of HTM 08-01. 2. All plant to be operating at maximum normal design duty. Sound insulation parameters: Privacy: Confidential Noise generation: Typical Noise sensitivity: Medium See Table 3 of HTM 08-01 Sound insulation rating: 47 1. Minimum value of noise sensitivity of receiving room. 2. See Table 4 of HTM 08-01. 3. Adjust for specific room adjacencies in accordance with table 5 of HTM 08-01.
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:
1. Acoustic design to be compliant with HTM 08-01.
2. Maximum weighted standardised impact sound pressure level (L'nT,w) to be 65 dB for floors over noise sensitive areas.
2. A minimum Speech Transmission Index (STI) of 0.5 to BS EN 60268-16 (or equivalent standard) to apply to assessing speech intelligibility of audio systems for public announcements.

SAFETY

Hot Surface Max. Temp (DegC):	43	Maximum surface temperature (degC): 43 To be achieved in compliance with SHTN 6 'The Safe Operation and Maintenance of Thermostatic Mixing Valves -
Hot Water Max. Temp (DegC):	41	

General Notes:
Domestic hot water maximum discharge temp (degC): 41
1. Temperature equilibrium to be achieved within 1 minute of draw-off period.
2. Type 3 Thermostatic Mixing Valve.

Maximum cold water discharge temperature (degC): 20
Temperature equilibrium to be achieved within 2 minutes of draw-off period.

Safe temperature systems to comply, as applicable, with HTM 04-01, Parts A & B and HSC ACOP 'Legionnaires' disease L8: the control of legionnella bacteria in water systems.

Clinical risk: 4
Maximum patient clinical risk category for which the room should be used.
Business risk: 4
Maximum non-clinical business continuity risk category applicable to the room.
See HTM 06-01, Part A for definition and application of risk categories.

FIRE

Enclosure:

Automatic Detection: Smoke Ceiling mounted.

General fire notes:

1. Fire detection and alarm systems to comply with HTM 05-03, Part B and BS 5839, where applicable.
2. Fire safety generally to comply with relevant parts of Firecode (HTM 05) together with Building Regulations 2000 and associated Approved Codes of Practice (ACOP).

ADB	Room Design Character	X0147B

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	X0147B	Treatment room: all-round couch access - HBN 00-03		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. normal humidity. Hygiene and cleaning (HTM 56): Paragraphs 2.3 - 2.4
Floor:	Surface Finish (HTM 61): 3 i.e. hard, impervious, jointless, smooth Hygiene and cleaning (HTM 61): Paragraphs 2.7 - 2.9
Ceiling:	Surface Finish (HTM 60): 3 i.e. smooth, imperforate Moisture Resistance (HTM 60): N i.e. normal humidity Hygiene and cleaning (HTM 60): Paragraphs 2.9 - 2.10
Doorsets:	(HTM 58) 1 x 1500 mm, one and a half leaf, vision panel, lockable; patient trolley access
Windows:	(HTM 55) NA or Clear, solar and privacy control
Internal Glazing:	(HTM 57) N/A
Hatch:	N/A
Notes:	In areas used by children and young people, door hinge protectors are required

ADB	Schedule of Components by Room	X0147B

Project: SG01 South Glasgow v01 (draft)
Department:
Room: X0147B Treatment room: all-round couch access - HBN 00-03
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	CAL007	PULL/PUSH BUTTON, staff emergency call, reset and integral/adjacent indicator lamp		1
2		2	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
1		1	CLOC1000	CLOCK, synchronous, wall mounted, assembly: 1 x CLO002, CLOCK synchronous, wall mounted 1 x OUT002, OUTLET cable, 13 amp		1
1		1	DATA1000	DATA POINTS incorporating two twin power sockets and two data/telecom points, assembly: 2 x OUT010, SOCKET outlet, switched, 13 amp, twin 2 x OUT131, SOCKET outlet double data/voice, wall/trunking mounted		1
1		1	LIG053	LUMINAIRE, examination, ceiling, adjustable, 1000 lux		1
1		1	LIG073	ILLUMINATED SIGN, 'Room in use'		1
1		1	MEST1023	MEDICAL SERVICE TRUNKING, A&E treatment bed/trolley space, to HTM 08-03 requirements, assembly: 1 x ALA001, PUSH BUTTON, security alarm 1 x CAL012, RESET UNIT, with repeat lamp, patient/staff call 1 x CAL043, PUSH BUTTON patient/staff call with socket for extension pear push, trunking mounted 1 x CAL047, PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, trunking mounted 8 x OUT012, SOCKET outlet switched 13amp twin, trunking mounted 4 x OUT121, SOCKET outlet, computer data, single 1 x OUT470, OUTLET, oxygen, medical 1 x OUT475, OUTLET, vacuum, medical 1 x OUT480, OUTLET, gas scavenging (AGS), medical 1 x TRU1001, MEDICAL SERVICE TRUNKING, horizontal, length as drawn.		1
4		4	OUT010	SOCKET outlet switched 13amp twin		1
1		1	OUT052	CONNECTION UNIT, switched, 13 amp		1
1		1	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
1		1	OUT8200	CONNECTION UNIT switched 13amp, flex outlet, ceiling mounted		1
1		1	PEN040	PENDANT, electrical services and medical gases		1
1		1	SMW069	WORKTOP, clinical, for 400 facing modular storage cabinets, 900W 700D		1
1		1	SWC076	SWITCH, 'Room in use' illunimated sign		1
1		1	SWC8018	SWITCH 10A retractable, integrated with lighting control system		1
1		1	THE005	THERMOSTAT		1
1		1	TRA1001	TRACK, curtain, door, length and shape as drawn.		1

ADB	Schedule of Components by Room	X0147B

Project: SG01 South Glasgow v01 (draft)
Department:
Room: X0147B Treatment room: all-round couch access - HBN 00-03
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	WHBN1000	WASH BASIN, clinical, with non touch panel mounted tap/s, assembly: 1 x BAS101, BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM 1 x TAP894, TAP bib, hospital pattern, integral thermostatic mixer, automatic action with sensor operation. HTM64TBH6 1 x WAS100, WASTE, unslotted flush-grated, metal, 1.1/4 in. HTM64WT1 1 x WAS1000, TRAP, concealed waste, for back outlet basins.		1
1		1	BRA003	BRACKET, holder, suction unit, wall mounted		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
2		2	DIS438	DISPENSER, disposable gloves set of 3 and disposable apron, wall mounted		2
1		1	CHA302	CHAIR, swivel, height adjustable, medium back, wipeable, 5 star base, on castors		3
1		1	COMP1000	COMPUTER; complete with keyboard, screen and telephone, assembly: 1 x COM031, COMPUTER CPU 1 x COM033, COMPUTER KEYBOARD 1 x COM1000, COMPUTER MONITOR, TFT, digital flat panel display, desk top 1 x TEL1000, TELEPHONE, handset		3
1		1	COU010	COUCH, examination/treatment, (3 section), variable height, retractable wheels, with paper roll holder		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	HOL020	HOLDER, sharps box, up to 7 litre capacity, rail/trolley hang or wall mounted, 170H 125W 100D		3
1		1	SMT002	TROLLEY, modular storage, single open frame, including handle and worktop, with up to 5 sets of runners for 600 facing inserts, 850H 730W 450D		3
1		1	STO006	STOOL, surgeon/anaesthetist, height adjustable, includes anti-static seat pads		3
1		1	TRO133	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 750W 450D		3

ADB	Room Data Sheet	X0221A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	X0221A	Treatment room: Endoscopy		
Room Number:			**Revision Date:**	01/06/2010

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Patient may arrive on a trolley or in a bed. 3) Patient transferred to a treatment trolley. 4) Administration of sedation or local anaesthetic. 5) Clinical procedures. 6) Holding working supply of clean and sterile materials for immediate use. 7) Clinical hand washing. 8) Assessing x-ray images.			
Personnel:	1 x Patient 4 x Staff			
Planning Relationships:	Close to dirty utility. Close to clean utility.			
Space Data:	**Area (m²):**	22.00	**Height (mm):**	2,700

Notes:

Lamp indicator call situated over door outside room.

Monitor for endoscope is required.
The ceiling services pendant may be a rigid or retractable column.
Computer keyboard should be with cleanable or disposable cover.

ADB	Room Environmental Data	X0221A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	X0221A	Treatment room: Endoscopy		
Room Number:			**Revision Date:**	01/06/2010

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):	23	
Mechanical Ventilation (Supply ac/hr):	10.0	
Mechanical Ventilation (Extract ac/hr):	8.0	
Pressure Relative to Adjoining Space:	POS	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		

General Notes:

LIGHTING		
Service Illumination (Lux):	300	Bed/trolley
Service Illumination Night (Lux):		
Local Illumination (Lux):	15,000.0	Trolley
Colour Rendering Required:	Y	Ra 80
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting

General Notes:

Type of control: S/V
N = Normal
S = Selective
V = Variable
EM = Energy Management System

Unified glare rating limit (UGRL): 19
Areas in which VDT present to comply with CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001

Emergency escape route lighting required? (Yes/No): N
Escape route lighting provisions may be required subject to BS 5266-1.

General lighting notes:
1. Healthcare environment lighting installations to comply with CIBSE Lighting Guides LG2, LG3, & LG7 as applicable.
2. Default values to be used where surface reflectance factors not known: Ceilings: 0.7 ; Walls: 0.5; Floors: 0.2
3. The working plane is 0.85 metres above finished floor level.

NOISE		
Privacy Factor Required (dB):	80	
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		

General Notes:

SAFETY		
Hot Surface Max. Temp (DegC):	43	Maximum surface temperature (degC): 43
Hot Water Max. Temp (DegC):	41	To be achieved in compliance with SHTN 6 'The Safe Operation and Maintenance of Thermostatic Mixing Valves

General Notes:

FIRE

Enclosure:

Automatic Detection: Smoke

ADB	Room Design Character	X0221A

Project:	SG01	South Glasgow v01 (draft)		
Department:				
Room:	X0221A	Treatment room: Endoscopy		
Room Number:			**Revision Date:**	01/06/2010

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3 i.e. Smooth, imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Two sets of doors: 1x 1500mm, one & a half leaf, plain flush, lockable. 1x 1000mm, Single leaf, plain flush. lockable; bed access
Windows:	(HTM 55) N/A
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	X0221A

Project: SG01 South Glasgow v01 (draft)
Department:
Room: X0221A Treatment room: Endoscopy
Room Number: **Revision Date:** 01/06/2010

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	CAL007	PULL/PUSH BUTTON, staff emergency call, reset and integral/adjacent indicator lamp		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	DATA1000	DATA POINTS incorporating two twin power sockets and two data/telecom points, assembly: 2 x OUT010, SOCKET outlet, switched, 13 amp, twin 2 x OUT131, SOCKET outlet double data/voice, wall/trunking mounted		1
1		1	LIG050	LUMINAIRE operating (minor)		1
7		7	OUT010	SOCKET outlet switched 13amp twin		1
1		1	OUT052	CONNECTION UNIT, switched, 13 amp		1
1		1	OUT054	CONNECTION UNIT, unswitched, 13 amp, neon indicator		1
1		1	OUT079	OUTLET isolator, equipment manufacturer's specification		1
1		1	OUT1005	CLEANERS SOCKET outlet switched 13amp single, wall mounted		1
1		1	OUT131	SOCKET outlet double data/voice, wall/trunking mounted		1
1		1	OUT8200	CONNECTION UNIT switched 13amp, flex outlet, ceiling mounted		1
1		1	PEN003	PENDANT medical and power supply unit, outlets: 1x 13amp switched double; Medical Oxygen Nitrous oxide, Vacuum medical, Scavenging		1
3		3	SHE221	SHELF, 1200W 300D		1
2		2	STF128	STORAGE UNIT, lower, cupboard, 2 door, 1 shelf, lockable, 550H 600W 450D		1
1		1	SUC002	SUCTION UNIT, pipeline, high pressure, theatre		1
1		1	SWC8018	SWITCH 10A retractable, integrated with lighting control system		1
1		1	WHBN1000	WASH BASIN, clinical, with non touch panel mounted tap/s, assembly: 1 x BAS101, BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM 1 x TAP894, TAP bib, hospital pattern, integral thermostatic mixer, automatic action with sensor operation. HTM64TBH6 1 x WAS100, WASTE, unslotted flush-grated, metal, 1.1/4 in. HTM64WT1 1 x WAS1000, TRAP, concealed waste, for back outlet basins.		1
1		1	WKT124	WORKTOP, cantilevered from wall, 1200W 550D		1
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2

ADB	Schedule of Components by Room	X0221A

Project: SG01 South Glasgow v01 (draft)
Department:
Room: X0221A Treatment room: Endoscopy
Room Number: **Revision Date:** 01/06/2010

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS438	DISPENSER, disposable gloves set of 3 and disposable apron, wall mounted		2
1		1	ILL010	ILLUMINATOR, x-ray film, double, wall mounted		2
1		1	CHA301	CHAIR, swivel, height adjustable, high back, with arms, wipeable, 5 star base, on castors		3
1		1	COM038	COMPUTER PRINTER, laser, A4, 250H 380W 385D		3
1		1	COMP1000	COMPUTER; complete with keyboard, screen and telephone, assembly: 1 x COM031, COMPUTER CPU 1 x COM033, COMPUTER KEYBOARD 1 x COM1000, COMPUTER MONITOR, TFT, digital flat panel display, desk top 1 x TEL1000, TELEPHONE, handset		3
1		1	DES1000	DESK; cantilever; cable management; modesty panel; 900W 700D		3
1		1	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	HOL014	HOLDER, sack, with lid foot operated, large, capacity 120 litre, mobile		3
1		1	REF060	REFRIGERATOR, reagents, capacity 110 litre, external temperature gauge, automatic defrost, underbench, 850H 500W 590D		3
1		1	TRO145	TROLLEY endoscope, 1680H 1190W 600D		3
1		1	TRO295	TROLLEY PATIENT, day surgery, with x-ray translucent platform, with brakes		3
1		1	IMG021	IMAGE INTENSIFIER UNIT, C-arm, mobile		3 *
1		1	IMG023	IMAGE INTENSIFIER, monitor, (Part of IMG021)		3 *
1		1	IMG024	IMAGE INTENSIFIER, monitor trolley, (Part of IMG021)		3 *

NIGHTINGALE
ARCHITECTS

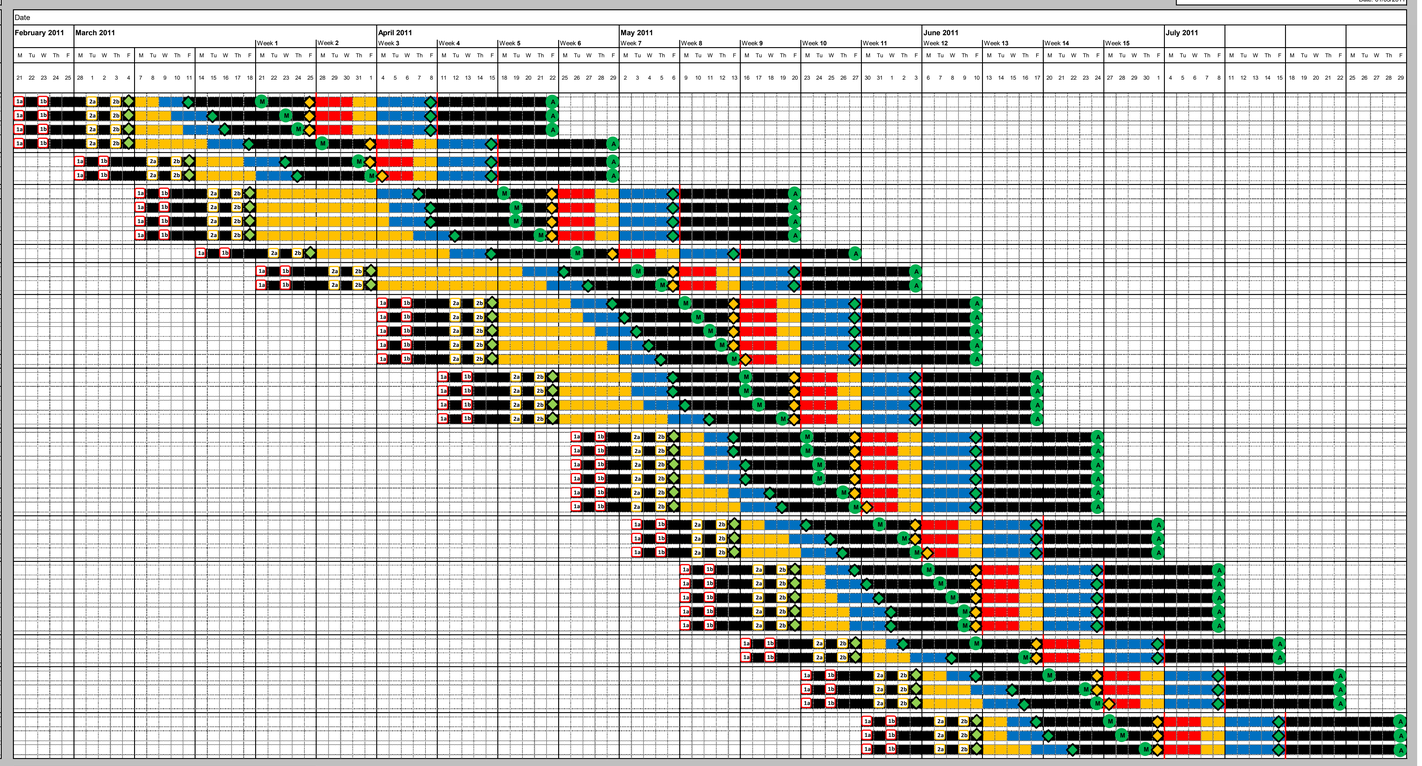
09080 **NEW SOUTH GLASGOW HOSPITALS PROJECT**

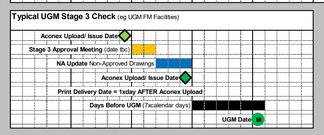
1:50 UGM DRAWING CHECKING & APPROVAL PROGRAMME

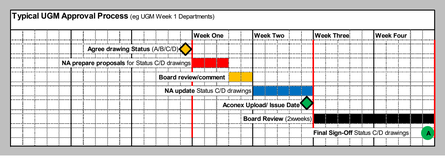
NOTE: UGM Issue Pack = 1:50 Department Drawings/Department RDS/A & A* Room Elevations

Document Number **NA - SH - 012** rev 01
CREATED BY: Emma White
Date: 01/03/2011

				STAGE 1 (Drawn By)				STAGE 2 (Approved By)								STAGE 3 (Client Approval = Acceptance for UGM)					
				First Check (CT) 1a		Second Check (LO) 1b		First Check (CT) 2a		Second Check (LO) 2b						Final Approval (NA/NHS/C&B/BCL)					M
GROUP	BUILDING	DEPARTMENT	DWG TOTAL	CHECK PERSON	CT Issue to LO	CHECK PERSON	LO Issue to CT	CHECK PERSON	CT Issue to LO	CHECK PERSON	LO Issue to CT	CT Final Issue Date	Aconex Upload/ Issue Date	Print Delivery Date (BCL)	Days Before UGM	CHECK PERSON	UGM Pack Delivery	BCL/NHS/C&B A Review	Return Non-Approved Dwgs	Aconex Upload/ Issue Date	UGM Date
1	NSGH/CH	FM Facilities (Adult & Children's)	17	Candice/Gareth	21-Feb	Mark/Carla	23-Feb	Alex/Alan	01-Mar	Emma/Sonja	03-Mar	04-Mar	04-Mar	07-Mar	14xdays	Liane	07-Mar	08-Mar	09-Mar	11-Mar	21-Mar
1	NSGH	Critical Care	6	Candice/Gareth	21-Feb	Mark/Carla	23-Feb	Alex/Alan	01-Mar	Emma/Sonja	03-Mar	04-Mar	04-Mar	07-Mar	16xdays	Liane	07-Mar	08-Mar	09-Mar	11-Mar	24-Mar
1	NCH	Coronary Care Unit (CCU)	2	Candice/Gareth	21-Feb	Mark/Carla	23-Feb	Alex/Alan	01-Mar	Emma/Sonja	03-Mar	04-Mar	04-Mar	07-Mar	17xdays	Liane	07-Mar	08-Mar	09-Mar	11-Mar	25-Mar
1	NSGH	Operating Theatres, ADDOS & Recovery	9	Candice/Gareth	21-Feb	Mark/Carla	23-Feb	Alex/Alan	01-Mar	Emma/Sonja	03-Mar	04-Mar	04-Mar	07-Mar	21xdays	Liane	07-Mar	08-Mar	09-Mar	11-Mar	28-Mar
2	NSGH	Acute Assessment Unit	6	Candice/Gareth	28-Feb	Mark/Carla	02-Mar	Alex/Alan	08-Mar	Emma/Sonja	10-Mar	11-Mar	11-Mar	14-Mar	17xdays	Liane	14-Mar	15-Mar	16-Mar	18-Mar	31-Mar
2	NSGH	Emergency Department	4	Candice/Gareth	28-Feb	Mark/Carla	02-Mar	Alex/Alan	08-Mar	Emma/Sonja	10-Mar	11-Mar	11-Mar	14-Mar	18xdays	Liane	14-Mar	15-Mar	16-Mar	18-Mar	01-Apr
3	NCH	Emergency Department	2	Candice/Gareth	07-Mar	Mark/Carla	09-Mar	Alex/Alan	15-Mar	Emma/Sonja	16-Mar	18-Mar	18-Mar	21-Mar	28xdays	Liane	21-Mar	23-Mar	24-Mar	01-Apr	18-Apr
3	NCH	Observation Ward	2	Candice/Gareth	07-Mar	Mark/Carla	09-Mar	Alex/Alan	15-Mar	Emma/Sonja	16-Mar	18-Mar	18-Mar	21-Mar	29xdays	Liane	21-Mar	23-Mar	24-Mar	01-Apr	19-Apr
3	NCH	Child Protection	1	Candice/Gareth	07-Mar	Mark/Carla	09-Mar	Alex/Alan	15-Mar	Emma/Sonja	16-Mar	18-Mar	18-Mar	21-Mar	29xdays	Liane	21-Mar	23-Mar	24-Mar	01-Apr	19-Apr
3	NSGH/CH	Nuclear Medicine (Adult & Children's)	1	Candice/Gareth	07-Mar	Mark/Carla	09-Mar	Alex/Alan	15-Mar	Emma/Sonja	16-Mar	18-Mar	18-Mar	21-Mar	30xdays	Liane	21-Mar	23-Mar	24-Mar	01-Apr	21-Apr
4	NSGH	Radiology	5	Candice/Gareth	14-Mar	Mark/Carla	16-Mar	Alex/Alan	22-Mar	Emma/Sonja	24-Mar	25-Mar	25-Mar	28-Mar	29xdays	Liane	28-Mar	30-Mar	31-Mar	07-Apr	27-Apr
5	NCH	Radiology/CT/MRI Suite	4	Candice/Gareth	21-Mar	Mark/Carla	23-Mar	Alex/Alan	29-Mar	Emma/Sonja	31-Mar	01-Apr	01-Apr	04-Apr	29xdays	Liane	04-Apr	05-Apr	06-Apr	15-Apr	03-May
5	NCH	Theatres/Endoscopy & Recovery/Day & 23 Hr Unit	7	Candice/Gareth	21-Mar	Mark/Carla	23-Mar	Alex/Alan	29-Mar	Emma/Sonja	31-Mar	01-Apr	01-Apr	04-Apr	31xdays	Liane	04-Apr	05-Apr	06-Apr	15-Apr	05-May
6	NSGH/CH	Pharmacy Aseptic Suite (Adult & Children's)	1	Candice/Gareth	04-Apr	Mark/Carla	06-Apr	Alex/Alan	12-Apr	Emma/Sonja	14-Apr	15-Apr	15-Apr	18-Apr	21xdays	Liane	18-Apr	20-Apr	21-Apr	29-Apr	09-May
6	NSGH/CH	Pharmacy Dispensary (Adult & Children's)	1	Candice/Gareth	04-Apr	Mark/Carla	06-Apr	Alex/Alan	12-Apr	Emma/Sonja	14-Apr	15-Apr	15-Apr	18-Apr	22xdays	Liane	18-Apr	20-Apr	21-Apr	29-Apr	10-May
6	NSGH/CH	Medical Illustration (Adults & Childrens)	1	Candice/Gareth	04-Apr	Mark/Carla	06-Apr	Alex/Alan	12-Apr	Emma/Sonja	14-Apr	15-Apr	15-Apr	18-Apr	23xdays	Liane	18-Apr	20-Apr	21-Apr	29-Apr	11-May
6	NSGH	Renal Inpatients & Day Unit	12	Candice/Gareth	04-Apr	Mark/Carla	06-Apr	Alex/Alan	12-Apr	Emma/Sonja	14-Apr	15-Apr	15-Apr	18-Apr	24xdays	Liane	18-Apr	20-Apr	21-Apr	29-Apr	12-May
6	NSGH	Renal Dialysis	3	Candice/Gareth	04-Apr	Mark/Carla	06-Apr	Alex/Alan	12-Apr	Emma/Sonja	14-Apr	15-Apr	15-Apr	18-Apr	25xdays	Liane	18-Apr	20-Apr	21-Apr	29-Apr	13-May
7	NSGH	MDU/Clinical Investigations Unit	1	Candice/Gareth	11-Apr	Mark/Carla	13-Apr	Alex/Alan	19-Apr	Emma/Sonja	20-Apr	21-Apr	21-Apr	25-Apr	21xdays	Liane	25-Apr	28-Apr	28-Apr	06-May	16-May
7	NSGH	OPD Pre-Assessment Unit	1	Candice/Gareth	11-Apr	Mark/Carla	13-Apr	Alex/Alan	19-Apr	Emma/Sonja	20-Apr	21-Apr	21-Apr	25-Apr	21xdays	Liane	25-Apr	28-Apr	28-Apr	06-May	16-May
7	NSGH	Stroke Ward	2	Candice/Gareth	11-Apr	Mark/Carla	13-Apr	Alex/Alan	19-Apr	Emma/Sonja	20-Apr	21-Apr	21-Apr	25-Apr	22xdays	Liane	25-Apr	28-Apr	28-Apr	06-May	17-May
7	NSGH	Main Entrance & Public Areas	7	Candice/Gareth	11-Apr	Mark/Carla	13-Apr	Alex/Alan	19-Apr	Emma/Sonja	20-Apr	21-Apr	21-Apr	25-Apr	24xdays	Liane	25-Apr	28-Apr	28-Apr	06-May	19-May
8	NSGH	Level 3 - Staff Change/Hotel Services/Staff	5	Candice/Gareth	26-Apr	Mark/Carla	28-Apr	Alex/Alan	04-May	Emma/Sonja	05-May	06-May	06-May	09-May	14xdays	Liane	09-May	10-May	11-May	13-May	23-May
8	NSGH	Admin, Training, Health Records & Staff Facilities	2	Candice/Gareth	26-Apr	Mark/Carla	28-Apr	Alex/Alan	04-May	Emma/Sonja	05-May	06-May	06-May	09-May	14xdays	Liane	09-May	10-May	11-May	13-May	23-May
8	NSGH	Decontamination Suite	1	Candice/Gareth	26-Apr	Mark/Carla	28-Apr	Alex/Alan	04-May	Emma/Sonja	05-May	06-May	06-May	09-May	15xdays	Liane	09-May	10-May	11-May	13-May	24-May
8	NSGH	Medical Physics & Bio-Engineering	1	Candice/Gareth	26-Apr	Mark/Carla	28-Apr	Alex/Alan	04-May	Emma/Sonja	05-May	06-May	06-May	09-May	15xdays	Liane	09-May	10-May	11-May	13-May	24-May
8	NSGH	Haemato-Oncology Ward	2	Candice/Gareth	26-Apr	Mark/Carla	28-Apr	Alex/Alan	04-May	Emma/Sonja	05-May	06-May	06-May	09-May	17xdays	Liane	09-May	10-May	11-May	13-May	26-May
8	NSGH	Dermatology OPD & Ward	5	Candice/Gareth	26-Apr	Mark/Carla	28-Apr	Alex/Alan	04-May	Emma/Sonja	05-May	06-May	06-May	09-May	18xdays	Liane	09-May	10-May	11-May	13-May	27-May
9	NSGH	Rehabilitation & Therapies	2	Candice/Gareth	03-May	Mark/Carla	05-May	Alex/Alan	10-May	Emma/Sonja	12-May	13-May	13-May	16-May	15xdays	Liane	16-May	18-May	19-May	23-May	31-May
9	NCH	Critical Care (PICU)	4	Candice/Gareth	03-May	Mark/Carla	05-May	Alex/Alan	10-May	Emma/Sonja	12-May	13-May	13-May	16-May	17xdays	Liane	16-May	18-May	19-May	23-May	02-Jun
9	NCH	Medical Day Unit	1	Candice/Gareth	03-May	Mark/Carla	05-May	Alex/Alan	10-May	Emma/Sonja	12-May	13-May	13-May	16-May	18xdays	Liane	16-May	18-May	19-May	23-May	03-Jun
10	NCH	Inpatient Wards	13	Candice/Gareth	09-May	Mark/Carla	11-May	Alex/Alan	17-May	Emma/Sonja	19-May	20-May	20-May	23-May	14xdays	Liane	23-May	25-May	26-May	27-May	06-Jun
10	NCH	Renal Services	1	Candice/Gareth	09-May	Mark/Carla	11-May	Alex/Alan	17-May	Emma/Sonja	19-May	20-May	20-May	23-May	15xdays	Liane	23-May	25-May	26-May	27-May	07-Jun
10	NSGH	Endoscopy	1	Candice/Gareth	09-May	Mark/Carla	11-May	Alex/Alan	17-May	Emma/Sonja	19-May	20-May	20-May	23-May	16xdays	Liane	23-May	25-May	26-May	27-May	08-Jun
10	NCH	Cardiology Ward	2	Candice/Gareth	09-May	Mark/Carla	11-May	Alex/Alan	17-May	Emma/Sonja	19-May	20-May	20-May	23-May	17xdays	Liane	23-May	25-May	26-May	27-May	09-Jun
10	NCH	Cardiology Testing & Lung Function Suite	2	Candice/Gareth	09-May	Mark/Carla	11-May	Alex/Alan	17-May	Emma/Sonja	19-May	20-May	20-May	23-May	17xdays	Liane	23-May	25-May	26-May	27-May	09-Jun
11	NSGH	OPD	5	Candice/Gareth	16-May	Mark/Carla	18-May	Alex/Alan	24-May	Emma/Sonja	25-May	26-May	26-May	27-May	14xdays	Liane	27-May	01-Jun	02-Jun	03-Jun	10-Jun
11	NCH	OPD	5	Candice/Gareth	16-May	Mark/Carla	18-May	Alex/Alan	24-May	Emma/Sonja	25-May	26-May	26-May	27-May	16xdays	Liane	27-May	01-Jun	02-Jun	08-Jun	16-Jun
12	NCH	Rehabilitation & Therapies	2	Candice/Gareth	23-May	Mark/Carla	25-May	Alex/Alan	31-May	Emma/Sonja	02-Jun	03-Jun	03-Jun	06-Jun	14xdays	Liane	06-Jun	08-Jun	09-Jun	10-Jun	20-Jun
12	NCH	Schiehallion Ward & Day Unit	2	Candice/Gareth	23-May	Mark/Carla	25-May	Alex/Alan	31-May	Emma/Sonja	02-Jun	03-Jun	03-Jun	06-Jun	17xdays	Liane	06-Jun	08-Jun	09-Jun	14-Jun	23-Jun
12	NCH	Schiehallion Radiotherapy Treatment Suite	1	Candice/Gareth	23-May	Mark/Carla	25-May	Alex/Alan	31-May	Emma/Sonja	02-Jun	03-Jun	03-Jun	06-Jun	18xdays	Liane	06-Jun	08-Jun	09-Jun	16-Jun	23-Jun
13	NCH	Psychiatry / DCFP	3	Candice/Gareth	31-May	Mark/Carla	02-Jun	Alex/Alan	07-Jun	Emma/Sonja	09-Jun	10-Jun	10-Jun	13-Jun	14xdays	Liane	13-Jun	15-Jun	16-Jun	17-Jun	27-Jun
13	NCH	Main Entrance & Public Areas	4	Candice/Gareth	31-May	Mark/Carla	02-Jun	Alex/Alan	07-Jun	Emma/Sonja	09-Jun	10-Jun	10-Jun	13-Jun	15xdays	Liane	13-Jun	15-Jun	16-Jun	20-Jun	28-Jun
13	NSGH	Inpatient Wards	98	Candice/Gareth	31-May	Mark/Carla	02-Jun	Alex/Alan	07-Jun	Emma/Sonja	09-Jun	10-Jun	10-Jun	13-Jun	17xdays	Liane	13-Jun	15-Jun	16-Jun	21-Jun	30-Jun







A52787523

New South Glasgow Hospitals (NSGH) Project

Scheme Design – 1:200 Stage

Clinical User Group Meetings – Purpose of Meetings

To achieve the optimum departmental layout within the parameters of the approved Brief, namely the signed-off 1:500 Department Adjacency Plans and the Schedule of Accommodation (SOA).

To promote Dialogue with the Users and to develop the design ensuring that this meets the clinical requirements, which includes key circulation flows through the department and room adjacencies.

We have made an allowance of 3xUser consultations in order to develop the design of each department to a level that a sign-off can be achieved during the Final (3rd) Meeting. This will then allow us to move onto the 1:50 Detailed Design Stage.

Definition of Design Development

Each Design Stage will have different parameters in terms of defining Design Development. At the 1:200 Stage, all the following are considered to be part of Design Development and are not subject to the Change Process Protocol (unless directed by the Project QS, D&S as noted in the final paragraph below)

- Moving and removing rooms
- Moving and removing doors
- Moving and removing walls
- Moving and removing doors, glazed screens etc
- Moving and removing nurse bases, receptions etc

In addition, at this stage the following are also considered to be Design Development;

1. Incorrect door type drawn (e.g. single leaf door drawn, 1 ½ or double door required for clinical functionality of room/facilitate trolley access)
2. Additional doors to ensure the clinical functionality of the department (e.g. separation of sub-departments and separation of flows such as patient/public and patient/FM), or as required to comply with the Fire Strategy and other Statutory requirements
3. Additional nurse bases/touchdown bases not previously briefed but required to ensure patient safety and clinical functionality. This could occur in non-generic Wards where the design has not been tested within the proposed department boundary/shape.
4. Large rooms, such as storage allocations, can be subdivided into smaller rooms provided this is within the briefed area allocation
5. Smaller rooms, such as stores and offices, can be clustered into one larger room

Items 4 and 5 above will be subject to review for offsetting by D&S within the department and irrespective of any cost considerations, will have to be recorded as this will result in a change to the contract SoA

Finally, if the current department boundary cannot achieve an acceptable solution due to the shape currently proposed or because it is under the scheduled area then as design development we will investigate increasing the department area and counter-balance the addition by the removal of area from another department/area of the building. This will only be considered in a department which is either currently over area, or that we can re-plan more efficiently thus providing the required off-set area reduction. Similarly this will be subject to review for offsetting by D&S within the department and

irrespective of any cost considerations, will have to be recorded as this will result in a change to the contract SoA

In addition to this there may be instances where we need to add area/amend the design to accommodate the design development and co-ordination of structure, M&E or to improve the construction buildability. If this occurs, the designers will liaise with the Contractor and Board to ensure that this does not adversely affect the design/clinical functionality of the departments.

Definition of Design Change

At this Design Stage, the following examples would be considered a Change, and would be subject to the Change Process Protocol:

- Additional area not briefed in the signed-off SOA (unless this is off-set elsewhere by the removal of area within the department or building)
- Movement of the whole department within the signed-off 1:500 Department Adjacency Plans
- Additional doors, glazed screens etc not required for clinical reasons or in order to comply with the Fire Strategy and other Statutory requirements
- Additional nurse bases/touchdown bases etc not required for clinical reasons
- Changes in scope from the Employer's Requirements
- Changes to Room Types which may lead to subsequent amendments to environmental or service loads
- Changes to external walls or building footprint

In addition please note that D&S will also offer bespoke direction both during and after the User Group Meetings should the above not cover a specific occurrence. This definition will likely be subject to review and change as we move through the design process. A different set of design development parameters will be prescribed for the 1:50 Stage.

New Southern General Hospitals

Project Manager Instruction #6755

Status: Accepted

Notification

Raised By

GGC01.NSGLP.gforsyth on 2 Nov 2016 12:17PM

Raised To

BCL01

Response Required By

16 Nov 2016 12:00AM

Title

PMI 493 - Asset Labels

Description

Provide quotation for the supply of enhancement in specification for the asset tagging labels. Carrent contract provision allows for 20,000No standard laminated labels. New requirement is for 20,000No Veneered Ultra-Destructible asset labels. Those labels not installed as part of the Asset labelling works will be handed over to NHS GGC Estates..

Instruction

As above.

Documents

Document Name

PMI 493- MCE Quote.pdf

Description

MCE-PMI-493-QUOTATION

File Type

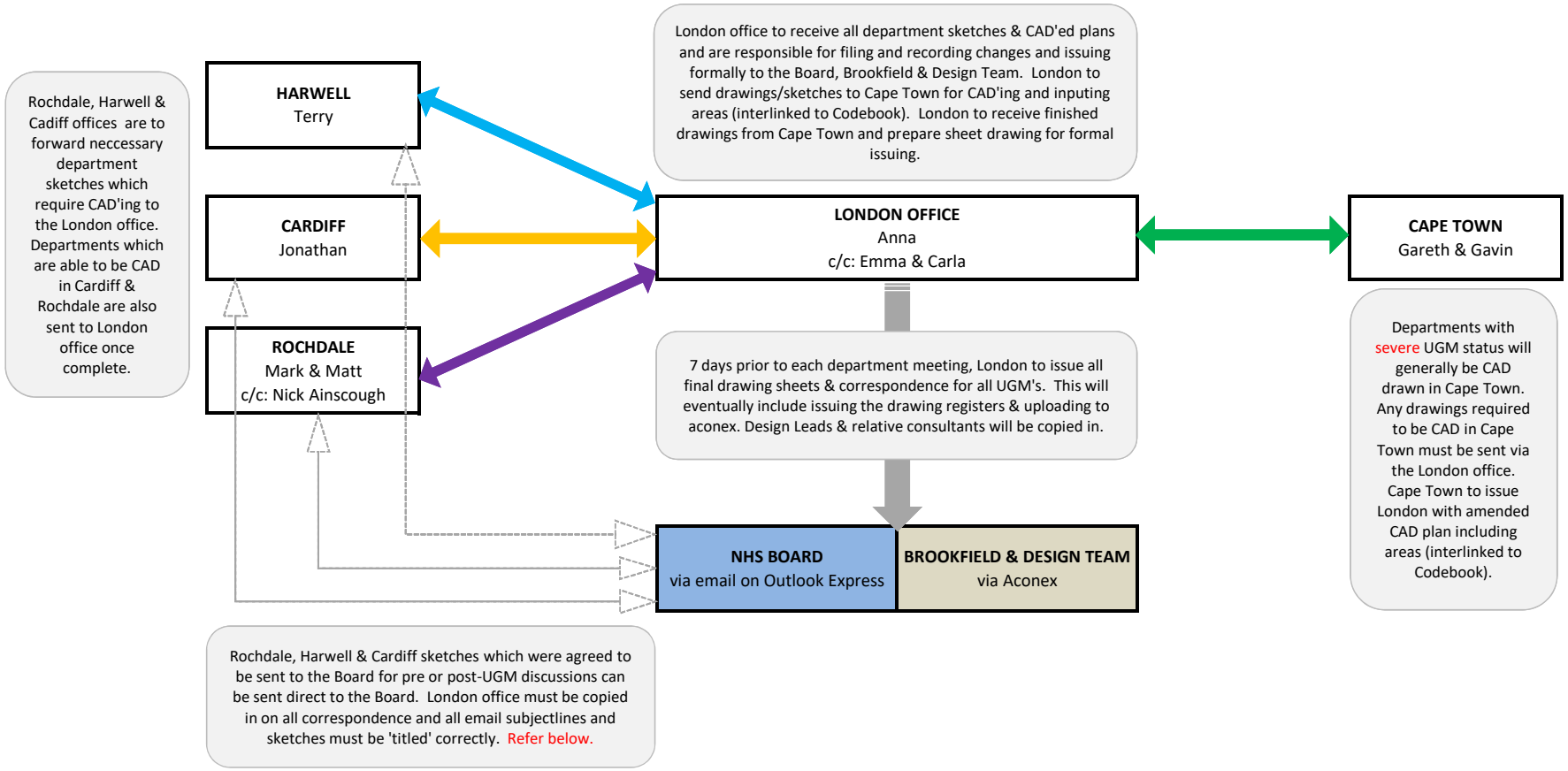
application/pdf

Uploaded

On 10 Nov 2016 by BCL01.NSGLP.leighj

This document states the correct information at time of production (2020/10/14 8:16).
Content is subject to change at any moment in time and cannot be used as evidence of current information. Sypro takes no responsibility for out of date information.

USER GROUP MEETING - DRAWING & CORRESPONDENCE PROTOCOL



EMAILS SUBJECT LINES

"Date" (present date of email)	"NSGH" or "LAB"	"Adults" or "Children"	"-"	"Subject"
In the form 0000 (year) - 00 (month) - 00 (day)	Project Name	Project specific, area or zone (if applicable)	Hyphen	Explanation of subject or reason of email

Example:
2010-02-03 NSGH - Fire Strategy Meeting Agenda

The above is important so that the receiver/s of the email will know immediately what the email is about. It also means that when the email is filed or archived it retains it's 'sent date' at the beginning of the file which means the storing of emails will always be kept in chronological order and will assist everyone in finding information on the project (present & past).

NAMING ALL SKETCHES & MARK UPS

"Date" (of sketch)	"Source / Meeting Type"	"Department Name"	"Floor Level"	"Description"
In the form 0000 (year) - 00 (month) - 00 (day)	Indicates the meeting, source or reason for the sketch	Project Specific (if applicable)	In the form of numerical digit (00)	Markup, Sketch, Diagram etc.

Example:
2010-02-03 UGM1 Radiology 00 Sketch

1st Issue DATE: 03/02/2010

THE NEW SOUTH GLASGOW HOSPITAL (NSGH)

PROJECT

ACONEX USER MANUAL

DOCUMENTS AND INFORMATION CONTROL PROCEDURES

BMCE-DMP-001

Revision	Dated	Brief Description of Changes
01	January 2010	Initial issue
02	January 2010	Updated to incorporate comments from Aconex
03	February 2010	Updated Mail Types, Attributes, Document Types, Status and Disciplines
04	February 2010	Included NEC3 process. Updated Mail and Document default drop down menus and Document numbering convention
05	February 2010	Updated to add Glasgow Document Control Information
06	June 2011	Updated to add additional mail types, attributes, status and disciplines following NTP and change to Brookfield Multiplex Construction Europe

CONTENTS

1.0 INTRODUCTION

2.0 ACONEX SET UP

2.1 Company Registration and Project Invitation for Aconex

2.2 Users

2.3 Aconex Help and System Administration

3.0 MAIL CORRESPONDENCE

3.1 General Correspondence Protocol

3.2 List of Mail Types

3.3 List of Attributes

3.4 Request for Information (RFI)

4.0 DOCUMENTS

4.1 Document Registration

4.2 List of Document Types

4.3 Document Numbering Conventions

4.4 Document Revision Numbering

4.5 Document Status Codes

4.6 Document Discipline Codes

4.7 Document Formats

4.8 Document Delivery/Transmission

4.9 Printing Documents

4.10 Shop Drawings – Workflow

4.11 Samples - Workflow

4.12 Method Statements

4.13 Consultants Cost Check and Adept Programme

APPENDIX A – COMPANY REGISTRATION INSTRUCTION

APPENDIX B – DRAWING & DOCUMENT NUMBERING SYSTEMS

APPENDIX C – NEC3 PROCEDURES AND FORMS

1.0 INTRODUCTION

The purpose of this document is to set out the electronic documentation management procedures and guidelines for the New South Glasgow Hospital (NSGH) Project. All information exchange on this Project shall be in accordance with the protocols described herein.

Brookfield Multiplex Construction Europe (BMCE) has employed Aconex as the primary means of producing, corresponding, distributing, sharing, tracking and filing all correspondence and documentation in relation to this Project.

Aconex is a web-based portal and as such it is accessible from anywhere and at anytime where there is an internet connection. It allows instantaneous dissemination of the Project information and provides the controlled means under which the multiple organisations can communicate in real time whilst ensuring integrity and security of the information.

General information about Aconex services and its functions can be found on the website at www.aconex.com .

The objective of this document is to outline the basic procedures and protocols to ensure consistency amongst all Project team members.

This protocol provides guidance to ensure:

- Documents generated by all participants are in the correct and consistent format
- Documents are appropriately distributed
- Documents status is clearly identified throughout the project life
- Documents are properly reviewed/commented
- Documents and Submittals progress is consistent with the project programmes.

This protocol applies to the Stage 1 (Labs), Stage 2 (FBC), Stage 3 (Hospitals /ECentre) and 3a (Demolition of Surgical block) of the Project and the participants include:

- The Client (NSGH Board);
- The Client Cost Consultants (Currie & Brown); and the NEC Supervisor (Capita Symonds)
- Contractor (BM);
- Authorities;
- Designers;
- Subcontractors and Suppliers;
- Facilities Management Service Providers;
- Others as engaged during the Project

For the avoidance of doubt, the documents and correspondence generated and received by your Company can only been seen by your Company personnel who must be invited by your own Company Aconex administrator ('org admin'). In other words, for people from other Companies (including BMCE) to be able to see/access your documents, you must first send these documents to the "outside" people. If you do not, they will not be able to access that mail or document and thereby providing the required security.

Please note that all Project documentation is to be sent via Aconex which is a recognised Project document in addition to the other specific type/means as described in your (Sub) Contract with BMCE. Any party who for any reason is unable to use Aconex will immediately notify the BMCE org admin.

A separate project directory FOR REFERENCES PURPOSES ONLY has also been set up and requires specific invite to view the content. The project 'NSGH A C & E – NSGH Notice To Proceed' contains drawings

and documents used in the Appendix K submission as reviewed with the NHS Board to achieve Full Business case prior to the issue of the Notice to Proceed in December 2010.

UNDER NO CIRCUMSTANCE IS THE PROJECT DIRECTORY 'NSGH A C & E – NSGH Notice To Proceed' TO BE USED FOR MAIL CORRESPONDENCE OR DRAWING UPLOAD – IT IS PURELY REFERENCE ONLY

2.0 ACONEX SET UP

2.1 Company Registration and Project Invitation for Aconex

All new Companies to the Project will need to register themselves on Aconex once appointed (or requested) by BMCE if not already done so. This is done by visiting the Aconex website at www.aconex.com. – at the home screen, right click over the "Register your Organisation". Fill in the form and submit – see Appendix A. Once registered, you will then be eligible to be invited onto the Aconex NSGH project website.

The Company only need to register once following the aforementioned instructions on the website. If you are not sure whether your Company has already been registered in Aconex, please contact the Aconex Helpdesk.

2.2 Users

The registering person will then become your Company's 'org admin' and will then be able to set up/add users (within your Company) and generally administer your Company information and all your team members/Aconex users. Each person within your Company involved in our Project and required to use Aconex must have a user account created by your org admin. It will be the responsibility of each Company to determine, designate and control the level of authority for their individual users. Once a user account is created, they must be invited to the Project by being sent a mail item (see Mail Correspondence – section 3).

Aconex for the NSGH Project is accessible via the Aconex Europe Login website (https://uk1.aconex.co.uk/Logon).

2.3 Aconex Help and System Administration

All general "day-to-day" queries on Aconex are to be addressed to the Aconex Helpdesk.

Contact Details:

Aconex Helpdesk Phone:	+44 (0) 845 22 66 391.
Email:	support-uk@aconex.com
Link:	http://help.aconex.com

Any suggestions for the improvement or modification of the Aconex and its use on our Project can be addressed to BMCE org admin in the first instance. BMCE will discuss such proposals with the Aconex representative noting that any modification, should it be warranted, can only be implemented by the Aconex software engineer (after the appropriate testing).

Brookfield Multiplex Construction Europe:

Glasgow DocControl

paul.hardin[redacted]
gillian.amos[redacted]

In addition to the Aconex Helpline and the self explanatory nature of Aconex, a training session can be arranged should the need arise in addition to the ones completed at the start of the Project. Please contact the BMCE org admin. Also note that a demonstration project facility is available on the Aconex website home page (www.aconex.com) for those wishing to familiarise themselves with this system. Online Tutorials and Web Videos are also available from http://help.aconex.com/Training/

3.0 MAIL CORRESPONDENCE

All information on Aconex is categorized by either **Mail** (Correspondence) or **Documents** (Controlled Documents). This section deals with Mail correspondence.

For project specific NEC3 procedures and forms, refer to Appendix C.

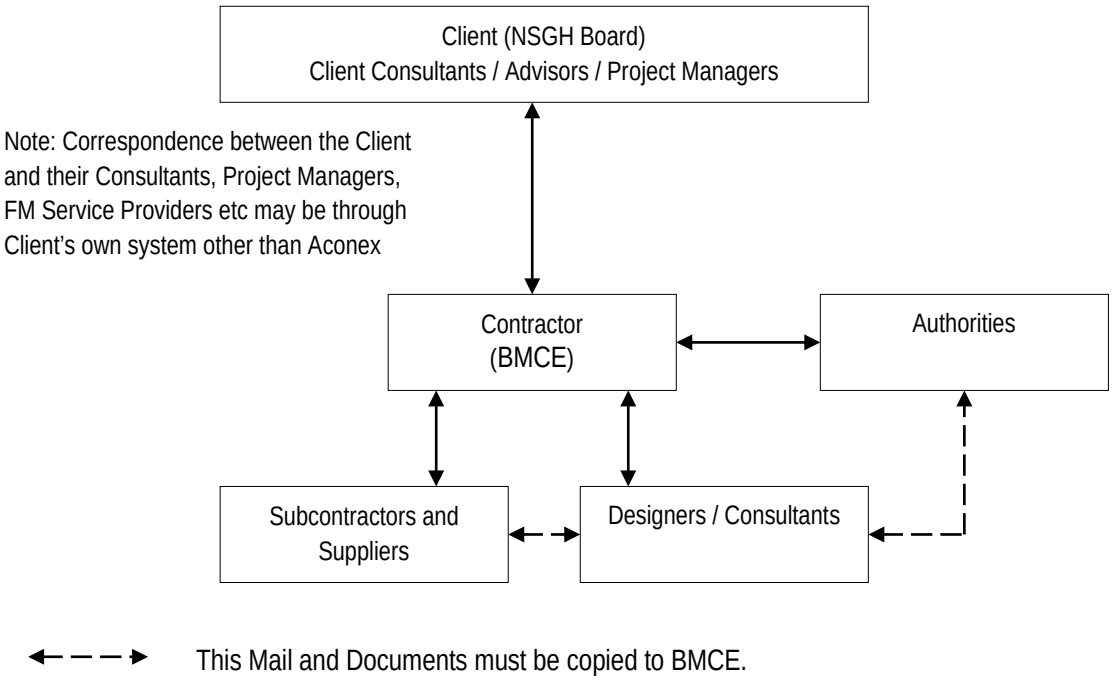
3.1 General Correspondence Protocol

Correspondence shall be communicated via Aconex in lieu of the traditional facsimile/hard copy system. Each piece of correspondence will need to be either produced or up-loaded onto Aconex electronically for distribution/communication to others.

This mail module of Aconex is for general correspondence only i.e. should NOT be used for sending/transmitting Documents such as the drawings, specifications and schedules. These are documents to be handled under the Documents module in Aconex (see Section 4).

All Mail correspondence must be issued in accordance with the line of communication as described in the flowchart below. If changes or revisions to this protocol are required, please contact BMCE.

Mail Correspondence Flowchart



All correspondence issued are required to have a Mail Type and an Attribute selected, both of which are drop down lists as indicated below.

The Subject description should be clear and concise. However, please avoid using too obvious and simplified titles such as “Glasgow Hospital Project”.

An accurate and appropriate data entry including subject description mentioned above will greatly assist in tracking down and referencing the correspondence in future.

3.2 List of Mail Types

The following Mail Types will appear in the drop down menu. Please select the most appropriate and note that selection is mandatory (one mail type per correspondence).

Mail Types	Mail Types (cont)
Advance PM Instruction	PM Instruction
Compensation Event Notice	Progress Claim / Payment Cert.
Defect Notice	Proposal
Contractors Instruction	Contractors Advice
Design Acceptance	Request For Information
Early Warning Notice	Response to EWN
General Correspondence	Response to Non-Conformance
Health and Safety	Response to RFI
Letter*	Supervisor’s Notice
Meeting Minutes	Tender Transmittal
Non-Conformance	Transmittal
Site Advice	Handover Sheet

* Letter mail type should only be used when the Aconex user is attaching a separate, signed letter. Otherwise, use General Correspondence.

Note: access to various Mail Types is restricted depending on your company’s function/role in the project.

3.3 List of Attributes

The following Attribute Types will appear in the drop down menu. Please select as appropriate - it is possible to have more than one - and note that selection is mandatory (including the Secondary Attribute).

Primary Attribute Types
Stage 1 – Laboratories and FM Hub
Stage 2 – Adult New Hospitals Full Business Case (FBC)
Stage 2 – Children’s New Hospital Full Business case (FBC)
Stage 2 - Energy Centre Full Business Case (FBC)
Stage 3 – Adults New Hospital
Stage 3 – Children’s New Hospital
Stage 3 – Energy centre

Stage 3a – Post PC - Demolition and Landscaping	
Secondary Attribute Types	
1. Employer's Requirements	200. Inpatient Wards
	201. Haemato-oncology
010. General Project Administration	202. Renal Inpatients, Day Unit and Services
011. Temporary Works	203. Pharmacy and Aseptic Suite
017. Plastering & Drylining Labs	204. Critical Care (incl PICU)
018. Plastering & Drylining A&C	205. Radiology
	206. Nuclear Medicine
20. Planning Authority	207. Operating Theatres and Recovery Wards
21. Building Control	208. Endoscopy
22. Other Authorities	209. Emergency Centre
23. CDM Coordinator	210. Acute Assessment / Receiving Unit
	211. MDU / Clinical Investigation Unit
30. Architectural	212. Rehabilitation Suite and Special Feeds
31. Healthcare Planning	213. OPD
32. Structural and Civil	214. Admin Training / Records / Staff Facilities
33. M&E Building Services	215. Main Entrances and Public Areas
34. Lift and Vertical Transportation	216. Decontamination Suite
35. Landscaping	217. FM Facilities and BOH Areas
36. Fire Engineering	218. Cardiology and Cardio / Respiratory Investigation
37. Acoustic Engineering	219. Day and 23 Hour Unit
38. Sustainability / Environmental Engineering	220. Bio-Engineering and Medical Services
39. Radiation Protection	221. Medical Physics
	222. Observation Ward
40. Security	223. Schiehallion Ward
41. Disabled Access	224. Day Care Unit and Teenage Cancer Unit
42. Helipad	225. DCFP
43. Kitchen	
	300. Circulation Areas
60. Cost Planning	350. Other Internal Areas
90. 1:200 Design NSGH User Group Review	400. Medical Equipment
95. 1:50 Design NSGH User Group Review	450. Furniture and Fittings

100. Demolition	500. Room Data Sheets (RDS)
101. Services Diversions	550. Schedule of Accommodation (SoA)
102. Survey and Other Enabling Works	
103. Neighbouring Buildings	600. Reviewable Design Data (RDD)
110. Masterplan	601. T1 Cost Check
111. Substructure and Ground Works	602. T2 for Tender
112. Superstructure	603. T3 for Construction
113. Façade and Roof	
114. External Areas and Roads	Community Engagement
115. Plantrooms	

3.4 Request for Information (RFI)

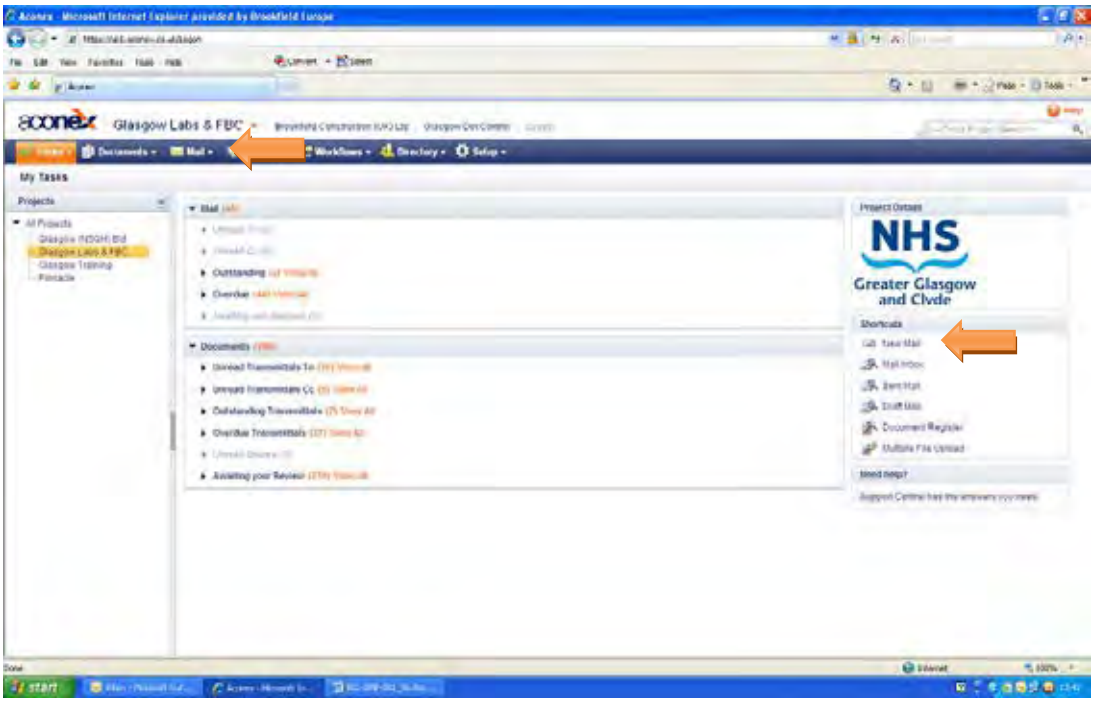
All RFI's shall be raised through Aconex. The Mail type to be used is Request for Information.

When RFI's are raised they shall have only one question per RFI number (which is automatically generated by Aconex). Do not use a single RFI for a whole series of questions, which will only slow the reply and potentially leave many queries un-answered.

When responding to RFI's, the Response to RFI Mail type is to be used.

A further description for raising a RFI and responding it is as follows. Also refer to the flowchart below.

1. Either click on the Mail icon on Aconex opening page (then click New Mail), or click on the 'Create New Mail' link on the task page. Select the Request for Information from the drop down menu under Mail Types.



2. Enter names for To and Cc. Select the Attributes and enter the Subject and type in the question – see example below. The response required by date is to be nominated (it will prompt the RFI recipient especially if and when the RFI response required by date has passed). Note: Fields marked with " * " means they are mandatory data entry fields.

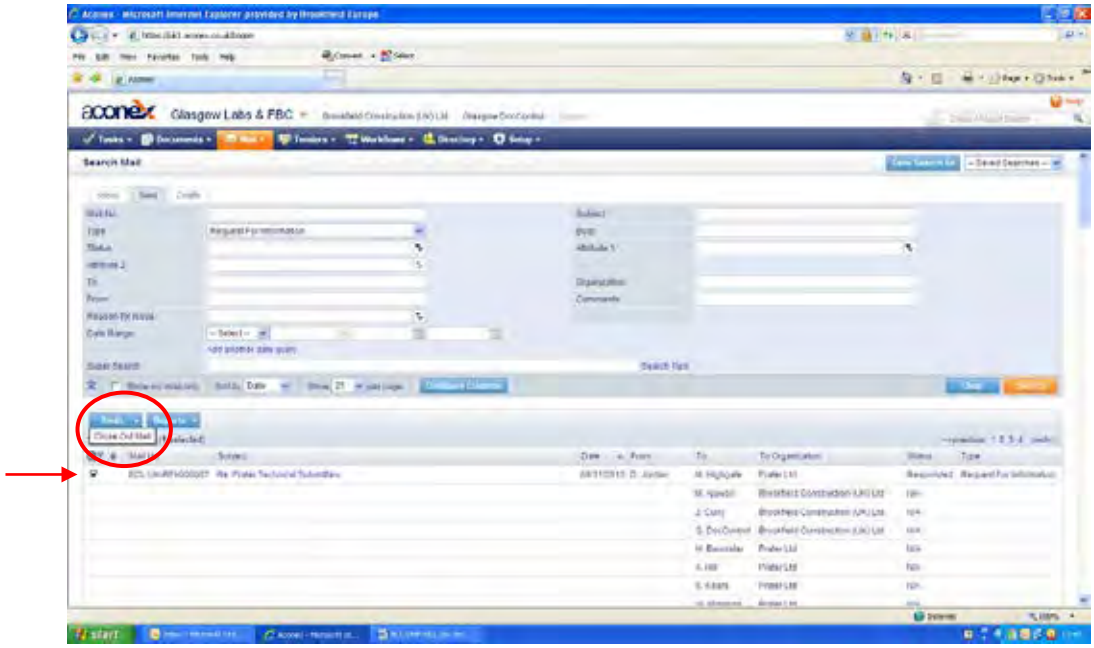
3. The response to the RFI will be returned as Response to RFI. To ensure the response is disseminated to all concerned, the responder must use the 'reply to all' function when replying.

4. Should the instigator/sender of the RFI consider the response does not fully answer the query, he/she must reply to the Response to RFI requesting clarification with a 'General Correspondence' mail type.

5. Once the instigator of the RFI is satisfied that the RFI has been replied in full, the instigator must close out the RFI. Closing out the RFIs is critical should the Company wish to obtain an accurate status of the RFI's at any point in time.

   This is done by selecting the search facility (eg. Super Search), click on Sent tab and using other fields to narrow down the search to locate the RFI. The steps below outline the closing out task.

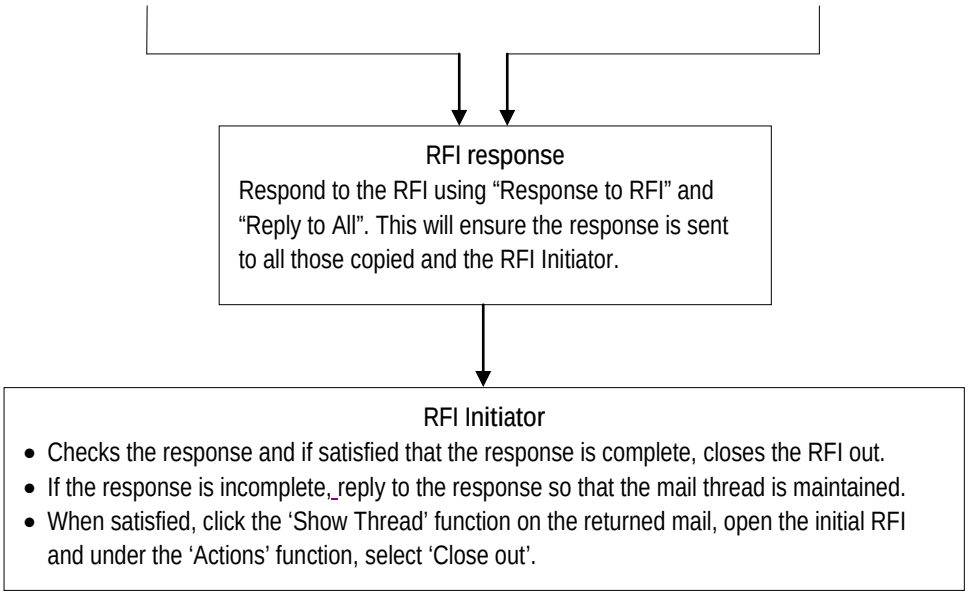
   Select the RFI to be closed out (see ticked), then use the Tools option and select 'Close Out'.



Use this option with the RFI ticked for the close out. Once the screen is refreshed, the RFI will be shown as closed out.

RFI Flowchart

RFI Initiator (Consultants or BMCE)	RFI Initiator (Subcontractor)
1. Addressed TO individual member and/or the Design Consultancy team responsible for the package 2. COPIED to Senior Managers of Architect, Structural Engineer and Services Engineer Consultancy 3. COPIED to BMCE Design Manager	1. Addressed TO individual member and/or the Design Consultancy team responsible for the package 2. COPIED to Senior Managers of Architect, Structural Engineer and/or Services Engineer Consultancy 3. COPIED to BMCE Design Manager 4. COPIED to other relevant BMCE staff (eg. Project Manager, Project Coordinator etc)



Notes:

1. Names of each Design Consultant's senior manager and the individual team member (for each package) will be advised separately (which may be updated as the Project progress).

2. Names of BMCE Design Managers, Project Managers and Coordinators will also be advised under a separate cover.

3. Subcontractor wishing to follow up the RFI (ie. response status) is to contact the relevant BMCE Project Coordinator dealing with that subcontract works in the first instance and if that person is not available/as yet to be designated, contact the BMCE Design Manager.

4. RFIs in relation to the subcontract scope (ie. contractual) and site/construction issues are to be addressed only to the BMCE Project Coordinator or BMCE Commercial Manager assigned to that subcontract works. There is no need to issue/raise this type of RFI to the Design Consultants as the above flowchart is for requesting clarification on design information (and not contractual matters).

5. Should the Subcontractor believe that the Consultant's response to their RFI have material effect on their subcontract obligations, please refer to the subcontract terms and conditions which requires the Subcontractor to notify BMCE of such implication in a timely manner and seek formal instruction from the authorised signatories within BMCE.

6. Subcontractor Design and Value Engineering Proposals;

   - Any proposals instigated by the Subcontractor to deviate from the documented design are to be initially/informally discussed with the BMCE Project Coordinator and/or BM Design Manager assigned to that subcontract works.

- Once considered viable by the BMCE personnel, a formal proposal is to be submitted to BMCE Design Manager by the Subcontractor. BMCE will then undertake an overall Project assessment and respond to the Subcontractor's proposal.

- Please note that these design proposals and alternatives are NOT to be submitted under the cover of an RFI. They will be rejected if done so. The Subcontractor should use the Proposal Mail Type. The format of such a submission is up to each Subcontractor. However, the submission need to at least cover:

  - Reason(s) for the proposed change;
  - Current design documentation reference with extracts attached; and
  - Proposed change details (eg. description/sketches/drawings) including the extent and any technical data in support of your proposal.

4.0 DOCUMENTS

All types of information on Aconex are either **Mail** (Correspondence) or **Documents** (Controlled Documents). This section deals with the Documents.

There are several ways to get documents into your Company's document register. You or someone from your Company can put documents into the register one at a time (or in bulk) or receive documents from other Companies via transmittal.

Please note that Document submissions (not Mail correspondence) to BMCE must be ALL sent (or copied) to Glasgow DocControl which is the Aconex user address ie. there is a user named "Glasgow DocControl".

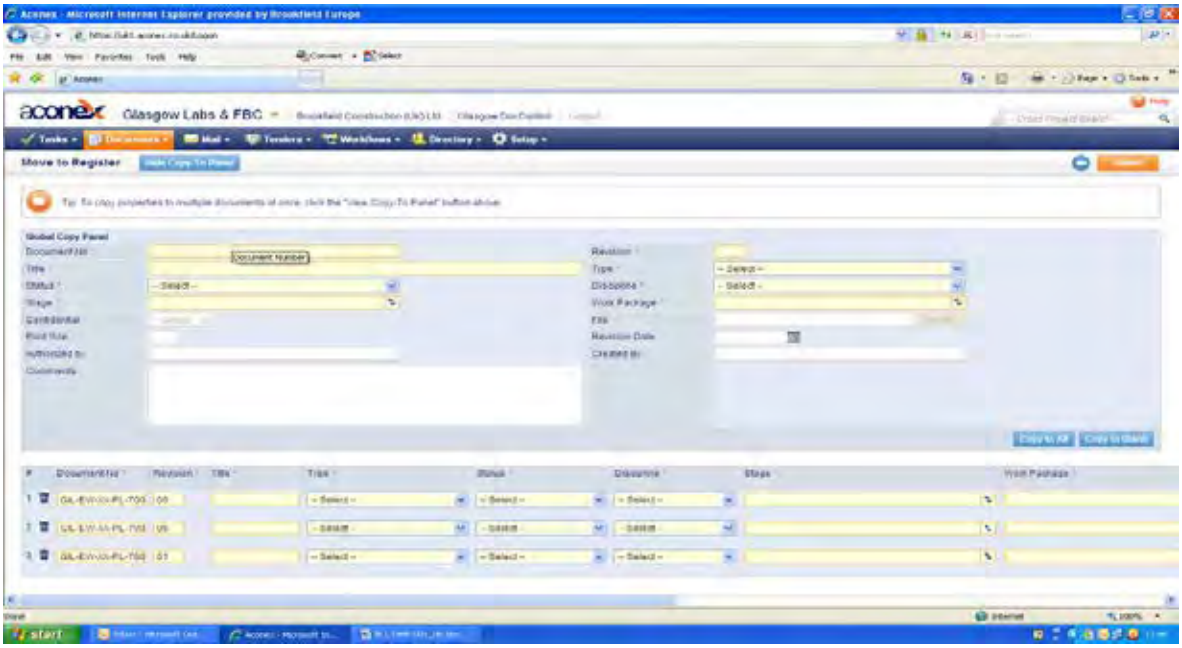
All Companies should nominate their central point of contact for the issuing and receipt of Documents to ensure that documents are correctly and consistently uploaded.

To ensure the integrity of your document register and that of others, please do NOT register the same document twice. If done so by mistake, please remove the duplication at once.

The following standard shall be adopted for all drawings, specifications and other technical data produced for the Project. This will enable all parties to easily identify Documents during the Project (and enable the document control system to run, sort and function efficiently).

4.1 Document Registration

BM requires the following information to be entered for all documents registered on Aconex (see arrows below). The information entered against these fields is utilised for sorting, filtering and reporting. As such, it is important that the following conventions and guidelines are adopted.



Required Fields:

Type	Refer to section 4.2 List of Document Types
Doc No	As designated by the author of the document (though see below)
Title	Descriptive text – to match that on the document
Revision	As designated by the author of the document
Date Created	This is the date the document was first registered on Aconex

Revision Date	This should be updated each time the document is superseded
Status	Refer to section 4.5 Document Status Codes
Discipline	Refer to section 4.6 Document Discipline Codes
Print Size	Appropriate to document size

4.2 List of Document Types

The following Document Types will appear in the drop down menu. Please nominate the most appropriate and note that selection is mandatory (one mail type per document).

Document Types	Document Types (cont)
As-Built Drawings	Report
Calculation	Risk Assessments
Design Briefs	Room Data Sheets
Drawing	Sample
EWN Risk Register	Schedule
Handover Documents	Shop Drawing
Method Statement	Sketch
Operations & Maintenance	Snag List
Photographs, Images & Videos	Specification
Plans and Procedures	Survey
Programme	Technical Data
Quality Assurance	Warranties / Guarantees

Please note that Aconex provides the facility for each Company's org admin to configure their own list of available Document types from those selected by BMCE org admin for the project. If you need a particular Document type which is not on the above list, please contact Glasgow Doccontrol.

4.3 Document Numbering Conventions

Numbering by Consultants

The Design Consultants may utilise their own internal numbering convention. However, the guidelines under section 4.4 below and those highlighted in Appendix B must be followed.

Numbering by Subcontractors

Each Subcontractor is to discuss their Document numbering with BMCE. For example, the BMCE trade package reference number is required to be shown on the Subcontractor documents although BM is aware that this needs to be worked out in consideration of the Subcontractors' internal QA procedures.

4.4 Document Revision Numbering

The following revision numbering convention is used on this Project:

01, 02, 03 etc.	Numeric numbering in sequence from the Design Development stage to For Tender Issues
A, B, C etc.	Alphabet numbering For Construction Issues (Please make the first Construction Issue 'A')

In addition to the above, please note the following general principal requirements:

1. Drawings are to be prepared in a digital form on standard A size sheet (ie. A0, A1, A2, A3). Drawings are not to be any larger than the A0 size.

2. Building Orientation: North to top of sheet, part floors details to be drawn with North to top of sheet. North arrow must be shown on the drawing title block.

3. Documents must contain:

   - Unique document number
   - Full title with no abbreviation
   - Drawn (or prepared) by and checked by – sign offs
   - All details to have scale identified for each
   - Denote full (sheet) size
   - Updated drawing revisions are to be highlighted with a bold cloud around the changed part of the drawing. Please number each cloud. Once the drawing is revised these clouds will be removed and new/latest clouds added to highlight the new drawing amendments
   - Detailed description of the change(s) under each number with a date in the title block (to match the cloud number) so that the change(s) can be easily identified from the previous issue
   - All documents to be prepared in black and white and not colour – please discuss with the BM Design Manager should you consider your design documentation may be more clear if in colour
   - The orientation of all drawings when submitted electronically shall be checked that they are landscape and uploaded in the correct orientation (e.g. not scanned upside down)

4. The text on all Documents including the drawings shall be in UK English. All dimensions shall be given in metric format. Calendar dates shall follow the Day/Month/Year format.

5. When revising a document, such as specifications, the full version is to be issued (ie. do not issue just an addenda/extract of the pages that changed).

6. Revisions to text documents will have the revised text in bold and italics (***this is an example***). Text that has been deleted will be in italics and struck through ~~(*another example*)~~. The Table of Contents shall also highlight in bold italic sections modified. Revised text highlighted must be removed by the Originator prior to issuing the next revision or prior to issuing a document for Tender/Contract and For Construction purposes.

7. Text documents will be prepared on standard A4 size sheets. All text documents will have a title page displaying the relevant information. Each page of the document must show (as a minimum) - document number and its revision, the page number and the total number of pages (ie. page X of Y).

4.5 Document Status Codes

Allocation of a status code against each Document to be uploaded is mandatory in Aconex. The status code indicates the phase of the Project the Document belongs to. The following Document Status Types will appear in the drop down menu. Please nominate the most appropriate (one status code per document).

For Information
For Planning
Building Warrant
For Pricing (To be used for Stage T1 submission as noted in Adept design programme)
For Tender (To be used for Stage T2 submission as noted in Adept design programme)
For Construction (To be used for Stage T3 submission as noted in Adept design programme)
As-Built

Other status codes may appear when searching your document register, but these are redundant codes transferred across if and when a particular document is imported from elsewhere (ie. when imported, whatever the status code given by someone else comes with it and automatically gets added to the search drop down menu).

For each design document with one of the above status designated by the author of that document, BMCE upon the completion of the document review will allocate the acceptance status as follows:

Status A = No Comment
Status B = Proceed Subject to Comments
Status C = Resubmit with Amendments
Status D = Rejected (NHS use only)

Note: Document stages are as mail primary attributes see 3.3 above.

4.6 Document Discipline Codes

Allocation of a Discipline code against each Document to be uploaded is mandatory in Aconex. If your discipline is not available, please contact BMCE Org Admin.

Acoustic Engineering	Kitchen
Administration	Landscaping
Architectural	Mechanical
Building Regulations	Medical Equipment
Civil	Other
Council Planning	Public Health
DDA	Security Design
Demolition	Structural
Electrical	Survey
External Works	Sustainability
Facade	Radiation Protection
Fire Engineering	Temporary Works
Fire Protection	Traffic and Highways
Helipad	Vertical Transportation

Note: Please do not use any other discipline codes in the Aconex drop down menu – if there are redundant codes, these are due to importing the documents from elsewhere (ie. when imported, whatever the discipline code given by someone else comes with it and automatically gets added to the drop down menu).

4.7 Document Formats

This Project may use the following formats for documents:

Drawings	AutoCAD (DWG), Acrobat (PDF)
Specifications	Acrobat (PDF)
Procedures eg. Method Statements	Acrobat (PDF) (or MS Word for drafts)
Schedules	Acrobat (PDF) (or MS Word or Excel for drafts)
As-Built	AutoCAD (DWG), Acrobat (PDF)

All drawings will be produced on CAD software and will be transmitted via Aconex in either a zipped or bound file for reference and coordination purposes amongst the Design Consultants and also with the relevant Subcontractors. In addition, each documents/drawings are to be issued in Adobe Acrobat format (PDF) version to BMCE.

Please note that the same document in a different format is to be differentiated by adding the format abbreviation after the document number (eg. .pdf or .dwg etc). When uploading Documents, it is essential that ALL requested/required formats are uploaded at the same time – for example, the GAs (General Arrangement drawings) are usually required to be uploaded in both pdf and dwg files at the same time as the dwg version is required by other to extract the background layers to prepare shop drawings.

4.8 Document Delivery/Transmission

With the use of Aconex, all Consultants and Subcontractors are generally not required to send hard copy of their documents unless requested by BMCE depending on the documents being received. The flowchart for the processing of the Drawings is outlined at end of section 4.

4.9 Printing Documents

It is the sole responsibility of each Company to have any printing requirements done at their expense. Should BMCE able to negotiate a reduction to the standard rate, BMCE may request its supplier to extend that rate to others involved in this Project.

It will be the responsibility of each individual Consultant and Subcontractor to arrange their prints. Each Company may print Documents directly from Aconex via their own printers or order prints online via Aconex. Each Company will be billed directly by the copy centre, whose contact details may be found on the Aconex directory.

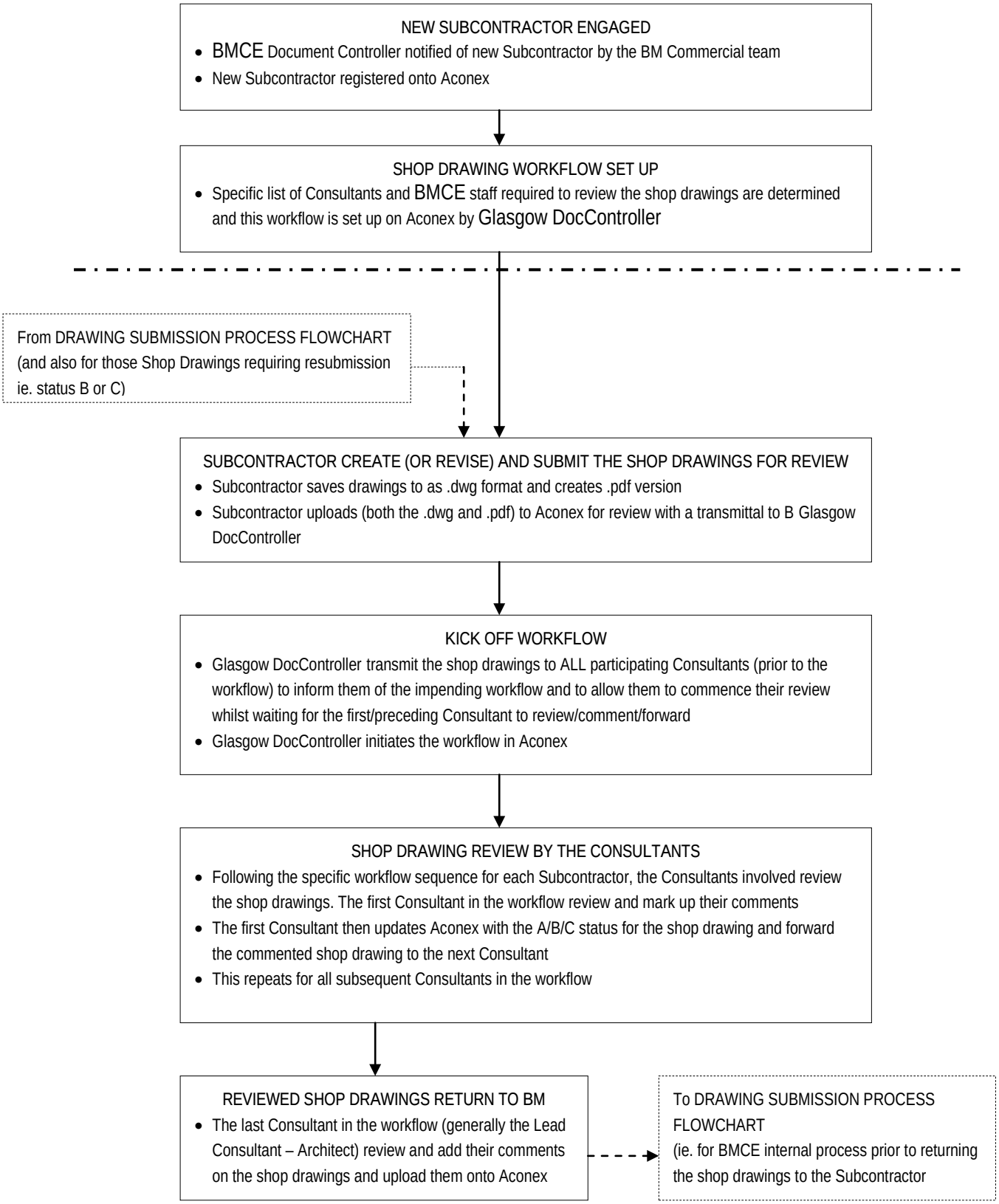
4.10 Shop Drawings – Workflow

Shop drawing workflows is used to assist monitoring of the review process. Consultants will comment/mark-up the shop drawings and report their progress through Aconex prompting the next reviewer in the workflow. This predetermined serial (as opposed to parallel/concurrent) sequence allows each Consultant's review comments to be captured on a single/same copy of the shop drawing.

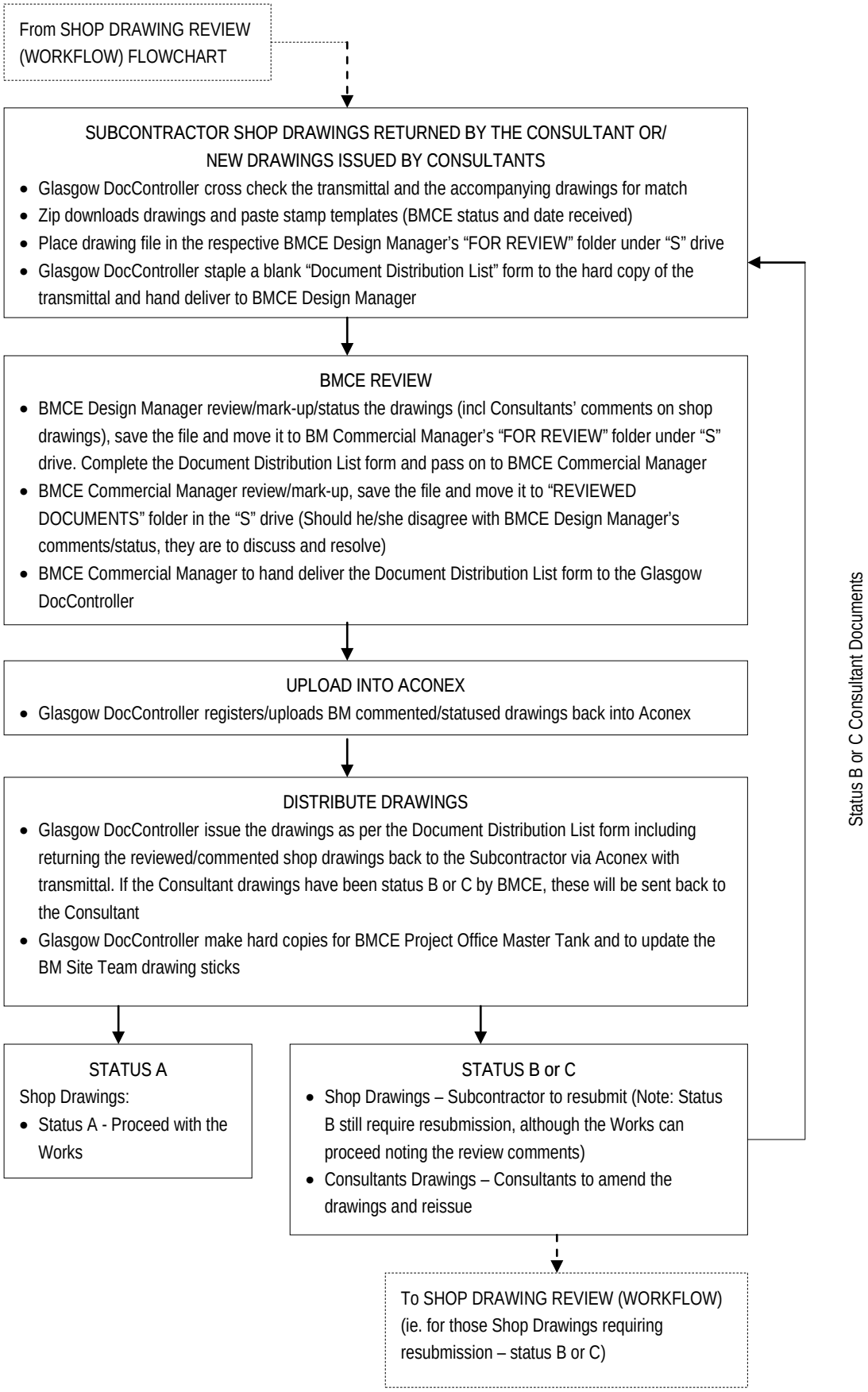
Specific workflows will be determined for each Subcontractor (depending on which Consultant need to review) and preset in Aconex. Please note that under certain circumstances where a particular document requires an alteration to the set workflow, then only the Glasgow DocController can modify the existing workflow for that document (eg. terminating the workflow). Please see the shop drawing review flowchart below.

Note: The duration allocated for each reviewer to process the document is generally 3 working days. After this period, if the reviewer has not notified Aconex that the review is completed, he/she will be marked in Aconex as overdue/late. All workflow participants are able to view the progress of the workflow at any time.

Shop Drawing Review (Workflow) Flowchart



Drawing Submission Process Flowchart (Using WACOM)

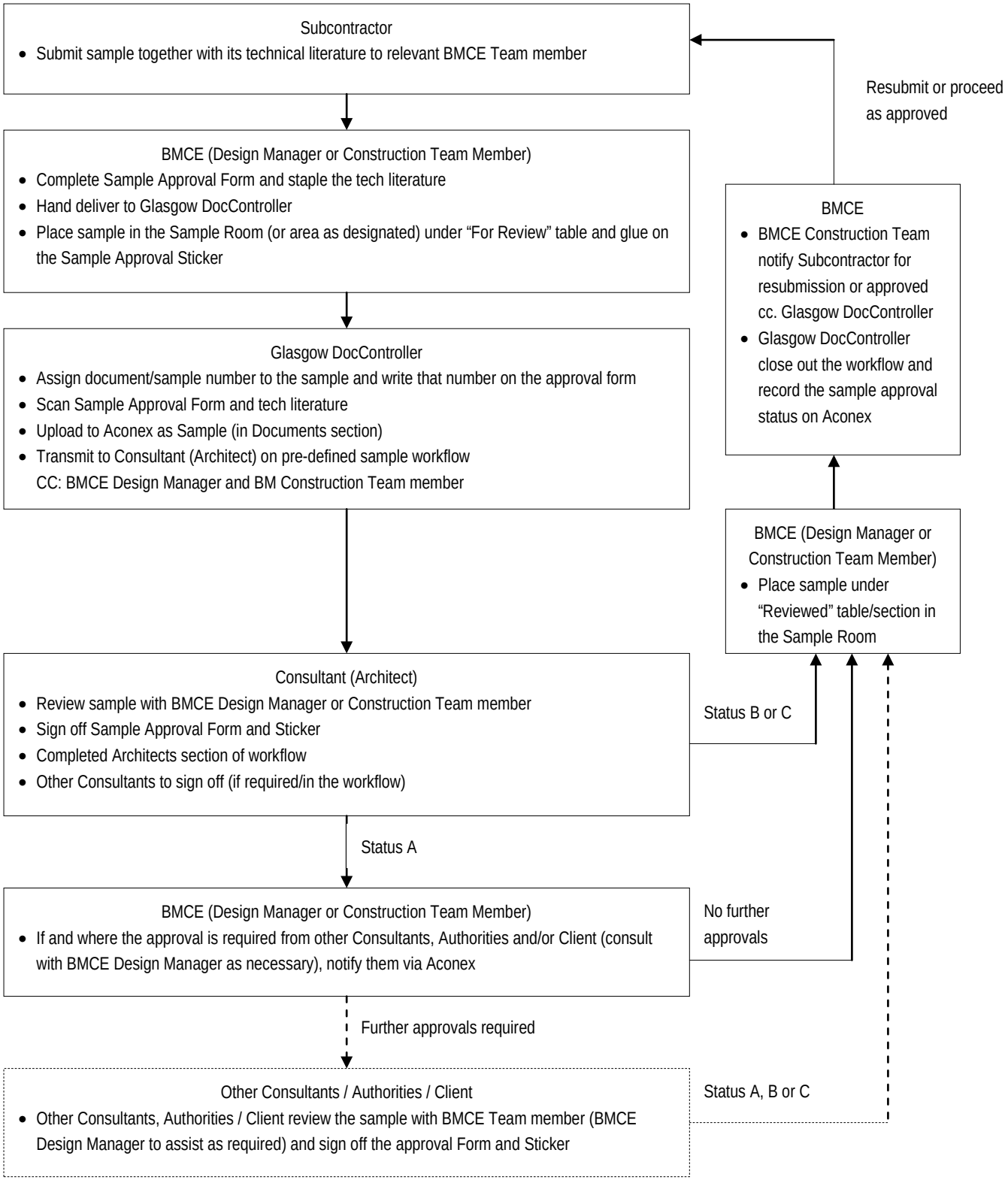

From SHOP DRAWING REVIEW (WORKFLOW) FLOWCHART
SUBCONTRACTOR SHOP DRAWINGS RETURNED BY THE CONSULTANT OR/ NEW DRAWINGS ISSUED BY CONSULTANTS
• Glasgow DocController cross check the transmittal and the accompanying drawings for match
• Zip downloads drawings and paste stamp templates (BMCE status and date received)
• Place drawing file in the respective BMCE Design Manager's "FOR REVIEW" folder under "S" drive
• Glasgow DocController staple a blank "Document Distribution List" form to the hard copy of the transmittal and hand deliver to BMCE Design Manager
BMCE REVIEW
• BMCE Design Manager review/mark-up/status the drawings (incl Consultants' comments on shop drawings), save the file and move it to BM Commercial Manager's "FOR REVIEW" folder under "S" drive. Complete the Document Distribution List form and pass on to BMCE Commercial Manager
• BMCE Commercial Manager review/mark-up, save the file and move it to "REVIEWED DOCUMENTS" folder in the "S" drive (Should he/she disagree with BMCE Design Manager's comments/status, they are to discuss and resolve)
• BMCE Commercial Manager to hand deliver the Document Distribution List form to the Glasgow DocController
UPLOAD INTO ACONEX
• Glasgow DocController registers/uploads BM commented/statused drawings back into Aconex
DISTRIBUTE DRAWINGS
• Glasgow DocController issue the drawings as per the Document Distribution List form including returning the reviewed/commented shop drawings back to the Subcontractor via Aconex with transmittal. If the Consultant drawings have been status B or C by BMCE, these will be sent back to the Consultant
• Glasgow DocController make hard copies for BMCE Project Office Master Tank and to update the BM Site Team drawing sticks
STATUS A
Shop Drawings:
• Status A - Proceed with the Works
STATUS B or C
• Shop Drawings – Subcontractor to resubmit (Note: Status B still require resubmission, although the Works can proceed noting the review comments)
• Consultants Drawings – Consultants to amend the drawings and reissue
Status B or C Consultant Documents
To SHOP DRAWING REVIEW (WORKFLOW) (ie. for those Shop Drawings requiring resubmission – status B or C)

4.11 Samples - Workflow

The samples submitted by the Subcontractor must have the following approval sticker glued to it. BMCE Design Manager is to assist BMCE Construction team in obtaining the relevant signatories for the record (where BMCE Construction team member has not be nominated, BMCE Design Manager is to see through the approval process). The samples are to be kept in the BMCE Project Office.

BROOKFIELD MULTIPLEX CONSTRUCTION EUROPE THE NEW SOUTH GLASGOW HOSPITAL PROJECT					
SAMPLE No.:					
SUBMITED BY:					
DESCRIPTION:					
	Architect	Services Engineer	Client	AUTHORITY	OTHER
NAME:					
DATE:					
SIGN:					
STATUS A / B / C					

The flowchart of the sample review is as follows:



The sample approval form template is as follows:

SAMPLE / MOCK-UP/ BENCHMARK APPROVAL FORM	BROOKFIELD MULTIPLEX CONSTRUCTION EUROPE NEW SOUTH GALSGOW HOSPITAL (NSGH) PROJECT
Works Package:	Subcontractor / Supplier:
Sample / Mock-Up/Benchmark Description:	

Date:		Reference No:	
To: Cc:	BMCE	Attention: Attention:	

Floor/Area		*Photograph of submitted sample with sticker*
Gridline / Coordinate		
Specification Reference		
Other		

Submittal Notes:

Signed		On behalf of:	(Architect)	Date	
Status: A B C (circle one) Comment:					
Signed		On behalf of:	(Engineer)	Date	
Status: A B C (circle one) Comment:					
Signed		On behalf of:	(Client)	Date	
Status: A B C (circle one) Comment:					
Signed		On behalf of:	AUTHORITIES	Date	
Status: A B C (circle one) Comment:					
Signed		On behalf of:	OTHER (specify)	Date	
Status: A B C (circle one) Comment:					
Signed		On behalf of:	BMCE	Date	
Status: A B C (circle one) Comment:					

4.12 Method Statements

The flowchart for the method statements are as follows:

The flowchart for the method statements are as follows:

Contractor produces Method Statement Programme for their works and submits to the relevant BMCE Package Manager. Programme to be reviewed and updated at Contractor Progress Meetings.
Contractor Method Statement Programme and updates to be passed to Project Planner, who will update the Project Master Method Statement Programme. (Note 1)

↓

Contractor produces Method Statement with relevant risk assessments attached.

↓

Contractor issues Method Statement to Glasgow DocController via ACONEX System. (Note 3)
(Package Manager can be included on distribution)

Change Process for Emergency Works Only. (Note 4)
Contractor additionally issues separate hard copy of Method Statement to Lead Reviewer with

↓

Document Control prints Method Statement, adds Document Review and Sign Off sheet (UK-COM-F-005) and issues to Lead Reviewer. (Note 5)
(Package Manager can undertake this task)

↓

Lead Reviewer along with H&S determines who needs to review Method Statement and marks cover page with distribution

↓

All parties review content of Method Statement and mark up with any comments

↓

Lead reviewer assesses comments (can be in conjunction with EHS Manager), issues Method Statement an overall status (A/B/C) and marks up Method Statement sign off sheet.

↓

Lead Reviewer forwards original of reviewed Method Statement to Glasgow Document Control
(Copy to Safety Department optional). (Note 6)

↓

Glasgow Document Control advises Project Planner of Method Statement submittals and changes in status.
Project Planner updates Method Statement Programme. (Note 7)

↓

Glasgow Document Control scans, supersedes the reviewed Method Statement on ACONEX and transmits to Contractor.
(B status Method Statements must be resubmitted within 14 days). (Note 8)
Original Method Statements will be held in Glasgow Document Control filing system.

Note 1 - Method Statement Register

Each subcontractor is responsible for producing their own Method Statement register, which lists all the elements of work to be carried out. This will be updated during Progress meetings.

Method Statements / Risk Assessments must be submitted a minimum of 14 days prior to works commencing.

This register contains a list of all method statements issued by subcontractors working on the Project. Within the register, key dates are entered, such as;

- Date Activity Commences
- Date submitted
- Date status 'A' received

The subcontractor is then able to use the information as a planning tool, to ensure that method statements are issued in good time for comment / review and have an A or B status before work starts on site.

Method statements will be logged via this process. Risk Assessments which support a method statement, must be attached as an appendix to a method statement i.e. Subcontractors must not submit generic risk assessments on their own, as they will not be accepted.

Note 2 - Project Numbering of Method Statements

Each contractor is assigned a unique four digit package number. This number must prefix any method statement submitted to Brookfield for comment and review. A typical example of the numbering system a subcontractor should use would be;

Example: 444-MS-AAA- BBB-001_00

444 = Contractors individual ACONEX identification number
MS = Method Statement
AAA = Company's initials
BBB = Company's internal job number (optional)
001 = Number of method statement, increasing sequentially 002,003,004 etc
00 = Revision status, starting at 00 increasing sequentially 01, 02, 03 etc when revisions are made. So the above example's file name will be 001_00 for its first issue addition. The revision is to be separated by an underscore

Electronic file names must be identical to the document number, with the addition of the document revision, separated from it by an underscore. Revisions will start at 00 increasing sequentially 01, 02, 03 etc, when revisions are made. So the above example's file name will be 2000-MS-001_00 for its first issue.

Note 3 – Formal Submission of Method Statements

The formal submission of method statements by subcontractors is shown here by the solid lined boxes and arrows. If a subcontractor also chooses to provide a hard copy of a method statement (see note 7) to the site office it must be accompanied with the Aconex transmittal sheet to show that it has been submitted to the Glasgow DocController.

Note 4 – Copies of Reviewed Method Statements

Following the review of a method statement, a hard copy of the MS must always be given to the BMCE safety department in the site office. In addition a hard copy may be given to the subcontractor directly thereby allowing

the subcontractor to revise their document quickly or commence work. The original method statement with comments must be sent to Document Control, who will return the document to the subcontractor via the Aconex.

Note 5 – Revision of Method Statements

Where a method statement document needs to be revised, in the case of a C status the subcontractor cannot start work until a revised document is resubmitted and is given an 'A or B' status.

In the case of a B status, the subcontractor can start work but must incorporate the comments made and communicate those changes to their work force before work starts. In addition the subcontractor must resubmit the revised document within 14 days back to BMCE. It is clearly better to issue the amended method statement in advance of works commencing.

Where a revision to the method statement is required, the whole document must be updated as necessary and resubmitted. Addendum's e.g. additional pages to the method statement will not be accepted by BMCE.

For clarification, a method statement that may be at an 'A –status', but following observations of working practices on site or an accident, BMCE reserves the right to stop the work and ask the subcontractor to revise their method statement.

Note 6 – Change Process for Emergency Works / Immediate Change to Safe System of Work

To allow for certain unplanned situations or changes to the safe system of work, which requires the work to be carried out immediately. Subcontractor can submit hard copies of a new or revised method statement direct to the site office. This is only used under exceptional circumstances –such as remedial actions following an accident or stoppage of works due to unsafe working practices. In this case the method statement must be reviewed by a Site Manager and the Safety Department as a minimum.

Note 7 – Reviewing personnel

Typically those reviewing the method statement will be safety, quality and project managers who will require the works to be undertaken in their areas.

METHOD STATEMENT SIGN OFF SHEET

Document Review and Sign-Off			
Project Reference		Rev	

PROJECT: New South Glasgow Hospital (NSGH) Project	**ACTIVITY:**
CONTRACTOR:	
DOCUMENT **Ref No** :	
Title :	
LEAD REVIEWER :	

Document Reviewed for the following Aspects (tick as appropriate)	YES	NO
Purpose/Extent of application.		
Controlling Documents (e.g. drawings, specification, etc.).		
Quality Plan including Organogram and references to project specifications.		
Inspection and Test Criteria (including associated responsibilities).		
Special Procedures / Processes (e.g. control of welding, fabrication, coatings etc.).		
EHS - Safety Controls		
- COSHH		
- Risk Assessment(s)		
Resources. a) Plant; b) Labour; c) Supervision (including associated responsibilities).		
Environmental Management Plan (incl. Aspects Register, SWMP etc)		
Delivery, handling, storage and protection.		
Quality Records/Plan (e.g. checklists, as-built drawings).		

Date Received:		Date for Return:	
Distribution for Review:	End Date for Review	Comments	Initials

General Comment

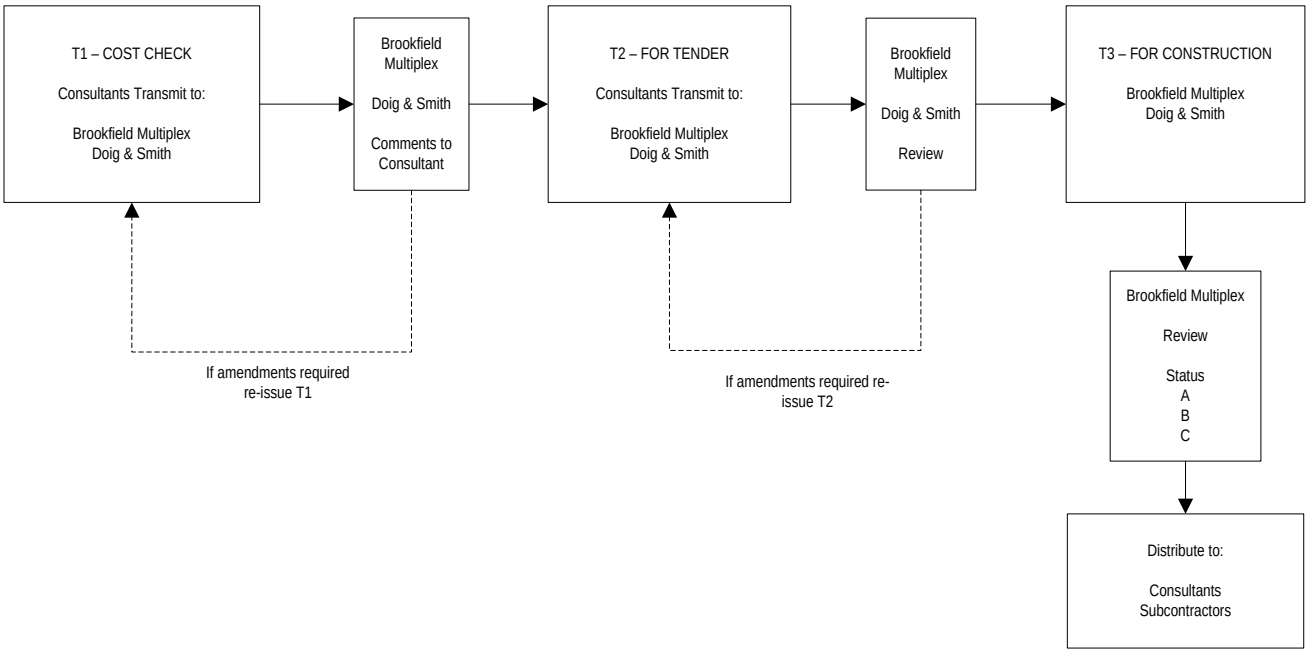
Date Returned to Contractor	

Signed		Status	A - Acceptable B - Acceptable as marked, revise document and reissue C - Unacceptable, resubmit.
Dated			

4.13 Consultants - Cost Check and Adept Programme

The adept design programme indentifies the following as key milestones for the consultants deliverables

T1 – Cost Check	ACONEX upload document status – 'For Cost Check'
T2 – Tender	ACONEX upload document status – 'For Tender' (not required for key supply chain partners)
T3 – Construction	ACONEX upload document status – 'For Construction'



APPENDIX A – COMPANY REGISTRATION INSTRUCTON

Please follow the instructions below to register your Company with Aconex. There is no charge for this as all licenses are paid by BM for all users on our Projects.

1. Open a new internet browser eg. Internet Explorer
2. Go to www.aconex.com
3. Select 'Register your organization'
4. Select the Project Region 'Europe'
5. Fill in the Aconex registration form (see screen shot below) – all the fields marked with an asterisk are obligatory.
6. Submit the form.

Companies tendering work packages (including potential Consultants) will be shielded from the rest of the Project team until their (Sub)Contract is awarded. Their status will be then be updated to 'User'. This will mean that only the BM Commercial/Procurement Manager and the BM Project Aconex Administrator will be able to send and receive documents to/from the Tenderers.

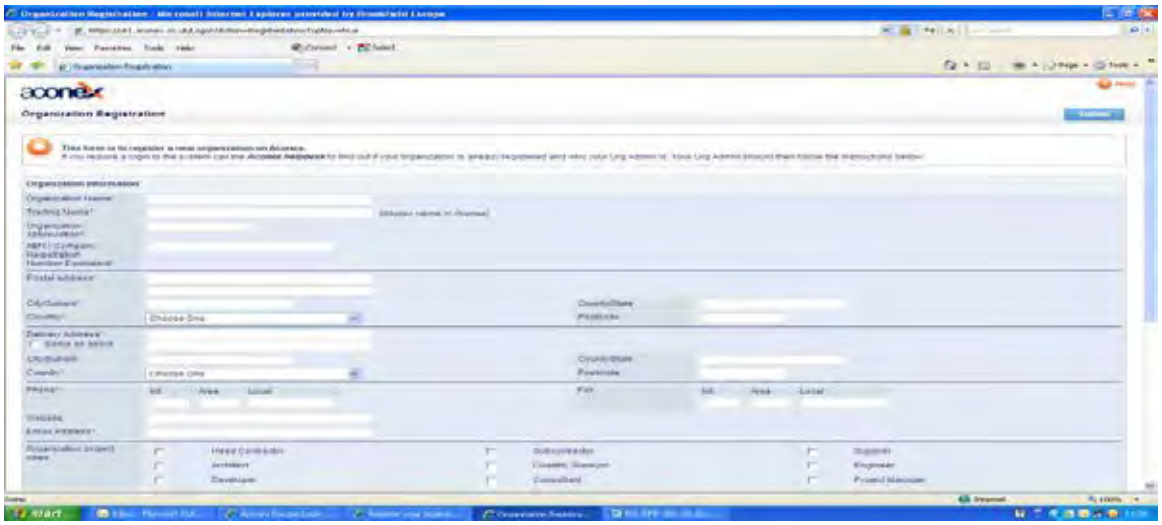
New Organization Registration Only

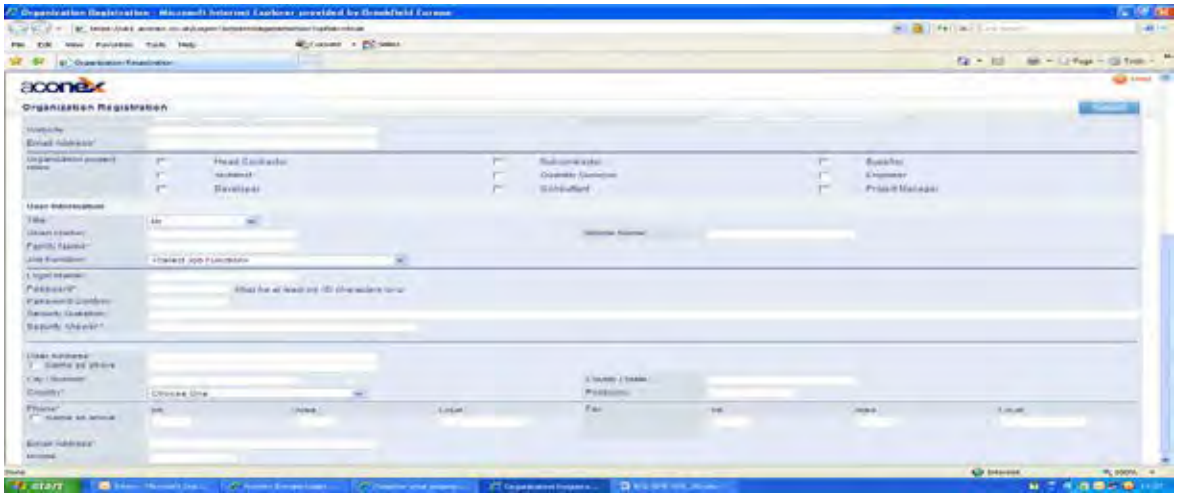
This form is to register a NEW ORGANIZATION on the Aconex system ONLY.

If you require a login to the system call the ***Aconex Help Desk*** to find out if your organization is already registered and who your Org Admin is. Your Org Admin should then follow the instructions below:

How to create a new user login:

1. Go to the ***System Menu*** and click the **Key** icon.
2. Scroll to the bottom of the ***Organization Information*** page and click the **New User** button.
3. Complete the ***New Member Information*** page, ensuring all mandatory fields are completed (*).
4. Click **Save**.
5. Click the **Security** button to adjust their role only if required.
6. To invite them to a project that you are on, send them a project mail.





APPENDIX B – DRAWING & DOCUMENT NUMBERING SYSTEM

INTRODUCTION

The drawing, document and file naming system are based on the Uniclass System which is unified classification for the construction industry, a RIBA publication, and the BS1192 Code of Practice 'A Collaborative Production of Architectural, Engineering and Construction information'.

The CAD level/layer naming system within the drawings is also based on this system along with the AEC (UK) CAD Standards versions 1.1 & 2.4.

NOTE: For all documents or drawings that are not related to any particular field, the space in this field is to be filled with an 'X' or multiple 'X's e.g. 'XX'.

DRAWING NUMBERING CONVENTION

Fields ➔ 1 – 2 – 3 – 4 – 5 – 6 _ 7

Field 1	- Origin or Author of drawing or document which indicates the discipline (Company name or in case of sub contractors this can be the BM trade package ref number)
Field 2	- Building Zone
Field 3	- Level (for plans only) *Note:* this field to be omitted if not a plan and replaced with 'XX'
Field 4	- Drawing Type indicated by 2 letters
Field 5	- 3 digit series code which indicates the elements of building shown on the drawing
Field 6	- 3 digit Sequential Number
Field 7	- Revision status (Numbers for pre-construction; Letters for Construction stage onwards)

Field 1 options - Origin/Author

NHSGC	- NHS Greater Glasgow & Clyde	- Client
DS	- Doig & Smith	- Cost Manager/Quantity Surveyors
BCL, BMCE	- Brookfield Multiplex Construction Europe	- D & B Contractors
NA	- Nightingale Associates	- Architects
TG	- Tribal Group	- Healthcare Planners
ZBP	- Zisman Bowyer Partnership LLP	- Services Consultants
WSP	- WSP Group	- Structural & Civil Engineers
GIL	- Gillespies	- Landscape Architects
WSP	- WSP Group	- Fire Consultants
IF	- Ironside Farrar	- Environmental Consultants
ALC	- Acoustic Logic Consultancy (UK) Ltd	- Acoustic Consultant
MER	- Mercury Engineering	- M&E Contractor
SUK	- Structal (UK) Ltd	- Envelope & Cladding Contractor
AST	- Astins	- Partitions Contractor
DG	- Dunne Group	- Concrete Frame Contractor

Field 2 options - Zone

The New South Glasgow Hospitals is divided structurally into 20 zones on plan which is carried through the building vertically at each level. Each zone is identified by a letter and a number or by two letters. The following codes correspond to the following 'zoned' areas for the project. Please refer to the zone key plan for further detail & explanation:

ZA - Children's Hospital southern end
ZB - Children's Hospital middle section, & Neurology Link Bridge
ZC - Children's Hospital northern end
ZD - Adult's Hospital south western zone
ZE - Adult's Hospital centre zone & western tower wing
ZF - Adult's Hospital northern corner & tower wing
ZG - Adult's Hospital southern corner
ZH - Adult's Hospital southern corner & tower wing, & NeuroscienceLink Bridge
ZJ - Adult's Hospital eastern corner & tower wing
ZK - Adult's Hospital Central Atrium Core

LB - Laboratory Building
EC - Energy Centre
EW - External Works & Master-planning
AB - Ancillary Buildings
CP - Carparks
XX – no relation to any particular zone
SZ - Several Zones

Field 3 options - Level

This field indicates the floor level of plans. For all other drawings that are not related to any particular floor, this field is to have an 'XX'.

XX – No relation to any particular floor
B1 - Basement
00 - Ground Floor
01 - First Floor
02 - Second Floor
03 - Third Floor
04 - Fourth Floor
05 - Fifth Floor
06 - Sixth Floor
07 - Seventh Floor
08 - Eighth Floor
09 - Ninth Floor
10 - Tenth Floor
11 - Eleventh Floor
12 - Twelfth Floor, Plant
13 - Thirteenth Floor, ETFE Roof
14 - Fourteenth Floor, Helipad
SL – Several Levels

Field 4 options - Type

This field will give details of the drawing/documents type and use two alphabetical letters. Below is a list of the options to use for this field.

PL - Plan
SE - Section
EL - Elevation
DT - Detail
SH - Schedule
SC – Schematic/Diagram
SK - Sketch
SP - Specification
GR - Grid
DC - Document
IM – Images (photos, illustrations & 3D's)
RD – Room Data Sheet
AS - Assembly

Field 5 options - Elements of Building Series

This field will give detail of the drawing/documents direct relationship to the building. It uses a three digits number which relates to the RIBA Uniclass classification Section G 'Elements for Buildings'. These will be consistent for all building design disciplines.

The first digit in this series will identify the general elemental type:

100 - Site Preparation
200 - Fabric: complete elements
300 - Fabric: parts of elements
400 - Fittings / Furniture / Equipment (FFE)
500 - Services: complete elements
600 - Services: parts of elements
700 - External / Site Works (Non-Adoptable)
800 - Adoptable External Road Works
900 - Transportation Planning

The second two digits in this field will define the elemental type more precisely as listed in the table below. We have highlighted the different categories for the main disciplines for the Architect, Structural Engineer, M&E Engineer & Landscaping. Please refer to the colour coding below and comment as necessary if further categories are required.

- Architect
- M&E Engineer
- Multiple disciplines & Other
- Structural Engineer
- Landscaping & External Works

100 - Site Preparation
110 - Site Clearance
120 - Ground Contouring
130 - Stabilisation
200 - Fabric: complete elements
210 - Foundations
220 - Floors
230 - Stairs, Ramps & Balustrades
240 - Roofs
250 - Walls
251 - External Walls
252 - Internal Walls
260 - Structural framing Generally

300 - Building Fabric & Finishes
310 - Carcass / Structure / Fabric
311 - Core Fabric
312 - Coverings / External Finishes
320 - Openings
321 - Windows / Roof Lights - Internal & External
322 - Doors - Internal & External
330 - Internal Finishes
331 - Floor Finishes including Stairs & Ramps
332 - Ceilings / Soffit Finishes
333 - Internal Wall Finish
340 - Roof & Gutters

400 - Fittings / Furniture / Equipment (FFE)
410 - Circulation Fittings
420 - Rest Fittings
430 - Culinary Fittings
440 - Sanitary Fittings
450 - Cleaning & Maintenance Fittings
460 - Storage Fittings
470 - Works of Art & Soft Furnishings
480 - Special Activity Fittings
490 - Other Fittings (Group 3)

500 - Services: complete elements
500 - Water Supply (combined hot & cold)
501 - Cold Water Supply (if required)
502 - Hot Water Supply (if required)
509 - Special Activity Water Supply
510 - Fuel Supply
511 - Natural Gas
512 - Medical Gas
513 - Fuel Oil
520 - Heating / Ventilation / Air Conditioning
521 - Heating only
523 - Heating + cooling (chilled water)
524 - Ventilation
525 - Cooling only
526 - Environmental Treatment
530 - Electric Power
531 - Electric Power Outlets (small power)
532 - Electric Power Systems (HV & LV)
533 - Power Containment
539 - Special Activity Power Supply
540 - Lighting
541 - General Lighting (inc. emergency lighting)
542 - Emergency Lighting only
549 - Special Activity Lighting
550 - Communications
551 - Communications - Public Address
552 - Communications - Visual Display
553 - Communications - Radio
554 - Communications - TV
555 - Communications - Telephones
556 - Communications - Computer networks
559 - Communications - Special Activity
560 - Transport
561 - Transport - Lifts & Hoists
562 - Transport - Escalators
563 - Transport - Conveyors
564 - Transport - Travelling Cradles
569 - Transport – Pneumatic Tube
570 - Protection
571 - Security Protection
572 - Fire Protection
579 - Special Activity Protection
580 - Removal / Disposal
581 - Sanitation and Rainwater (above ground)
590 - Other Services - (Dimensions)
591 - Combined site Services

600 - Services: parts of elements
610 - Energy generation / Storage / Conversion
611 - Heat Output
612 - Electricity Output
613 - Cooling Output
614 - Combined Heat / Power / Cooling
620 - Non-energy treatment / storage
630 - Distribution
631 - Ductwork
632 - Pipework
633 - Cables
634 - Pumps
635 - Fans
640 - Terminals
650 - Package Units
660 - Monitoring and Control
690 - Other Parts of Service Elements
700 - External / Site Works (Non-Adoptable)
710 - Surface Treatment
711 - Hard Surface Landscaping
712 - Soft Landscaping
713 - Road Geometry
714 - Road Construction
715 - Signs & Road Markings
716 - Street Lighting
717 - Traffic Signals & Controls
720 - Enclosure / Division
721 - Fencing / Walling / Hedges
722 - Retaining Walls
730 - Special Purpose Works
731 - Water Features & pools
732 - Shelters & Minor Buildings
733 - Bridges & Underpasses
739 - Other
740 - Fittings / Furniture / Equipment
741 - Street Furniture
750 - Mains Supply Systems (combined)
751 - Water Mains
752 - Fire Mains
753 - Hot Water / Stream Mains
754 - Gas Mains
755 - Electric Mains
756 - Communications Cables Mains
760 - External Distributed Services
761 - Lighting
762 - Other
770 - Site / Underground Drainage
771 - Drainage

800 – Adoptable External Road Works
810 - Surface Treatment
811 - Hard Surface Landscaping
812 - Soft Landscaping
813 - Road Geometry
814 - Road Construction
815 - Signs & Road Markings
816 - Street Lighting
817 - Traffic Signal & Control
840 - Fittings / Furniture / Equipment
841 - Street Furniture
870 - Site / Underground Drainage
871 - Drainage
900 – Transportation Planning
910 - External Junctions
911 - New Main Access Junction to Renfrew Road
912 - New Main Access Junction to Hardgate Road
913 - Existing Junction to Renfrew Road
914 - Existing Junction to Hardgate Road
920 - Site Circulation
921 - Pedestrians
922 - Cyclists
923 - Public Transport
924 - Service Vehicles
925 - Other Vehicles
926 - Combined

Note For the Above Table:

Adoptable External Road Works refers to works which will or can be adopted for maintenance by the local authority. Non-adoptable works relate to works where required maintenance is the responsibility of the Health Board.

Field 6 options - Sequential number

Represented in a three digit sequential number.
Examples:

001, 002, 003, 004, 005 etc.
100, 101, 102, 103, 104 etc.

010, 011, 012, 113, 014 etc.
600, 601, 602, 603, 604 etc.

Field 7 Options - Revisions

EXAMPLE 1 Please use dashes between the fields as shown except for before the issue or revision reference, where an under score is needed by the Aconex system

NA-P1-01-PL-252-103_01

ORIGIN:	ZONE:	LEVEL:	TYPE:	CONTENT:	SEQUENTIAL:	REVISION:
By Nightingale Associates	Podium 1	First Floor	Plan	Series elemental code – Internal walls	Sequential number given to drawing	Numerical for Design Development & Tender issues. Must be proceeded by an underscore..

NA-P1-01-PL-252-103_A

NOTE: Revisions as letters represent 'For Construction' stage drawings onwards

EXAMPLE 2

ZBP-EW-XX-SC-751-002_04

ORIGIN:	ZONE:	LEVEL:	TYPE:	CONTENT:	SEQUENTIAL:	REVISION:
Zisman Bowyer Partnership LLP	External Works	N/A	Schematic	Series elemental code – Water Mains	Sequential number given to drawing	Numerical for Design Development & Tender issues. Must be proceeded by an underscore..

EXAMPLE 3

WSP-FM-B1-DT-210-005_A

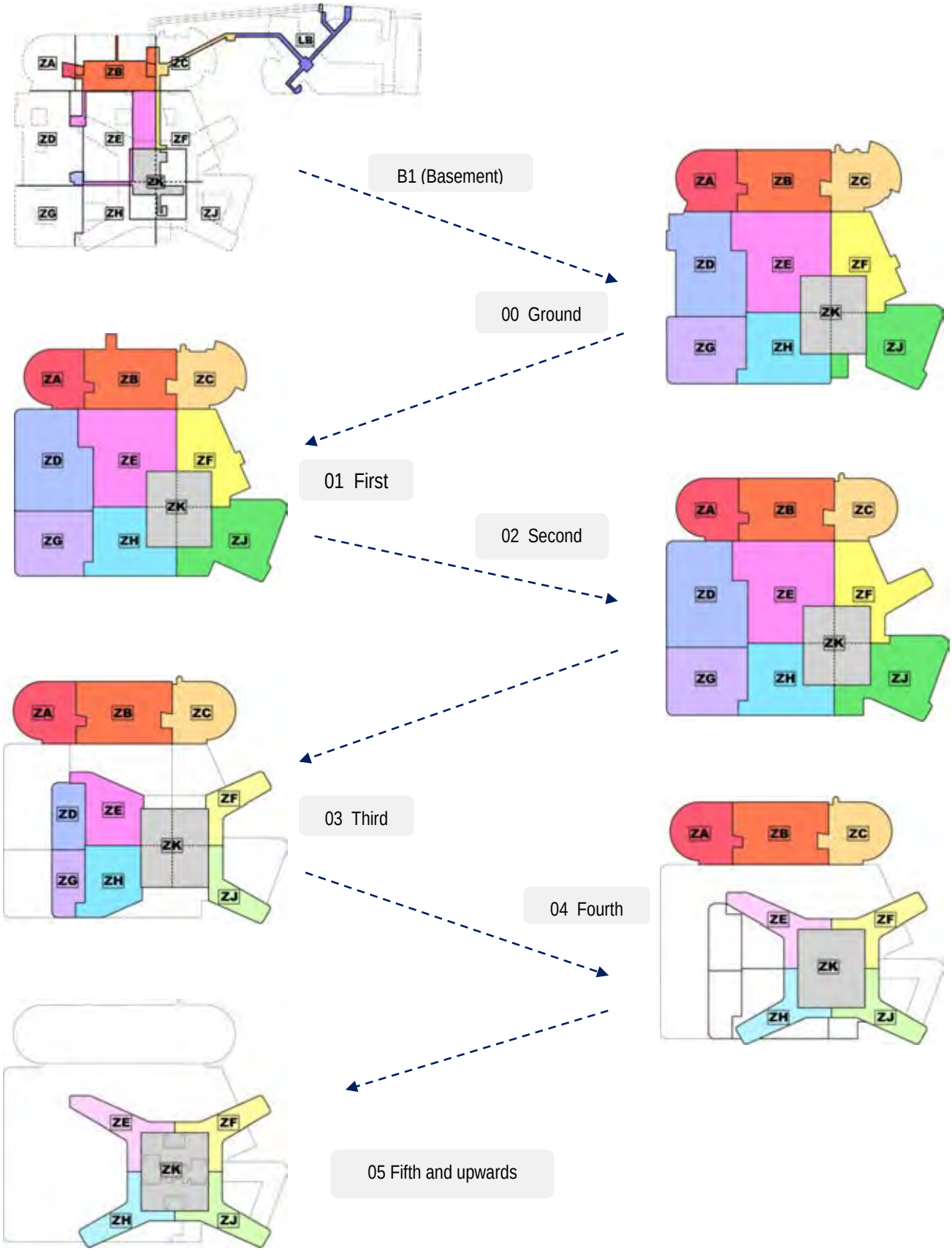
ORIGIN:	ZONE:	LEVEL:	TYPE:	CONTENT:	SEQUENTIAL:	REVISION:
WSP Group	Underground Tunnel	Basement	Detail	Series elemental code - Foundations	Sequential number given to drawing	Alphabetical for Design Construction Issue. Must be proceeded by an underscore.

EXAMPLE 4

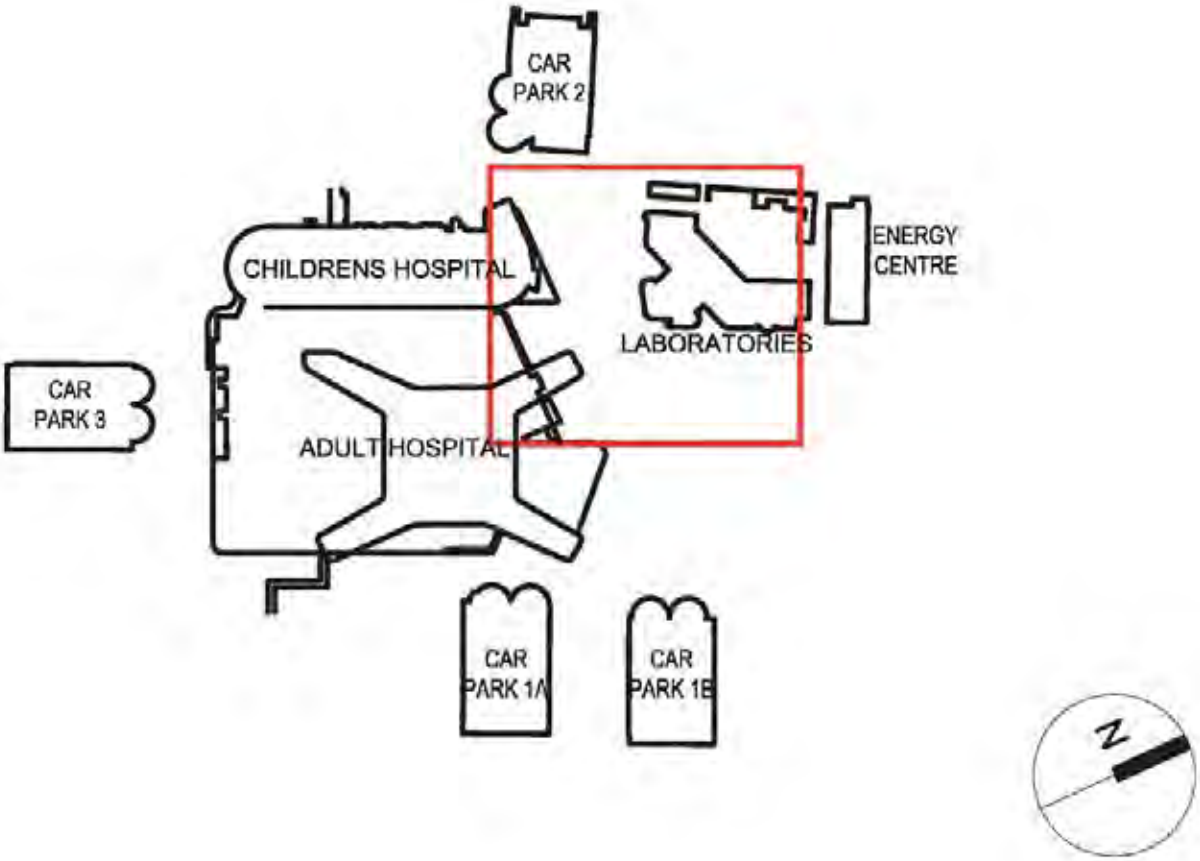
GIL-XX-00-SH-712-001_D

ORIGIN:	ZONE:	LEVEL:	TYPE:	CONTENT:	SEQUENTIAL:	REVISION:
Gillespies	N/A	Ground Floor	Schedule	Series elemental code - Landscaping	Sequential number given to drawing	Alphabetical for Design Construction Issue. Must proceeded by an underscore.

EXAMPLE KEY PLANS – Main Adult & Children's Hospital Buildings including FM Basement & Tunnel

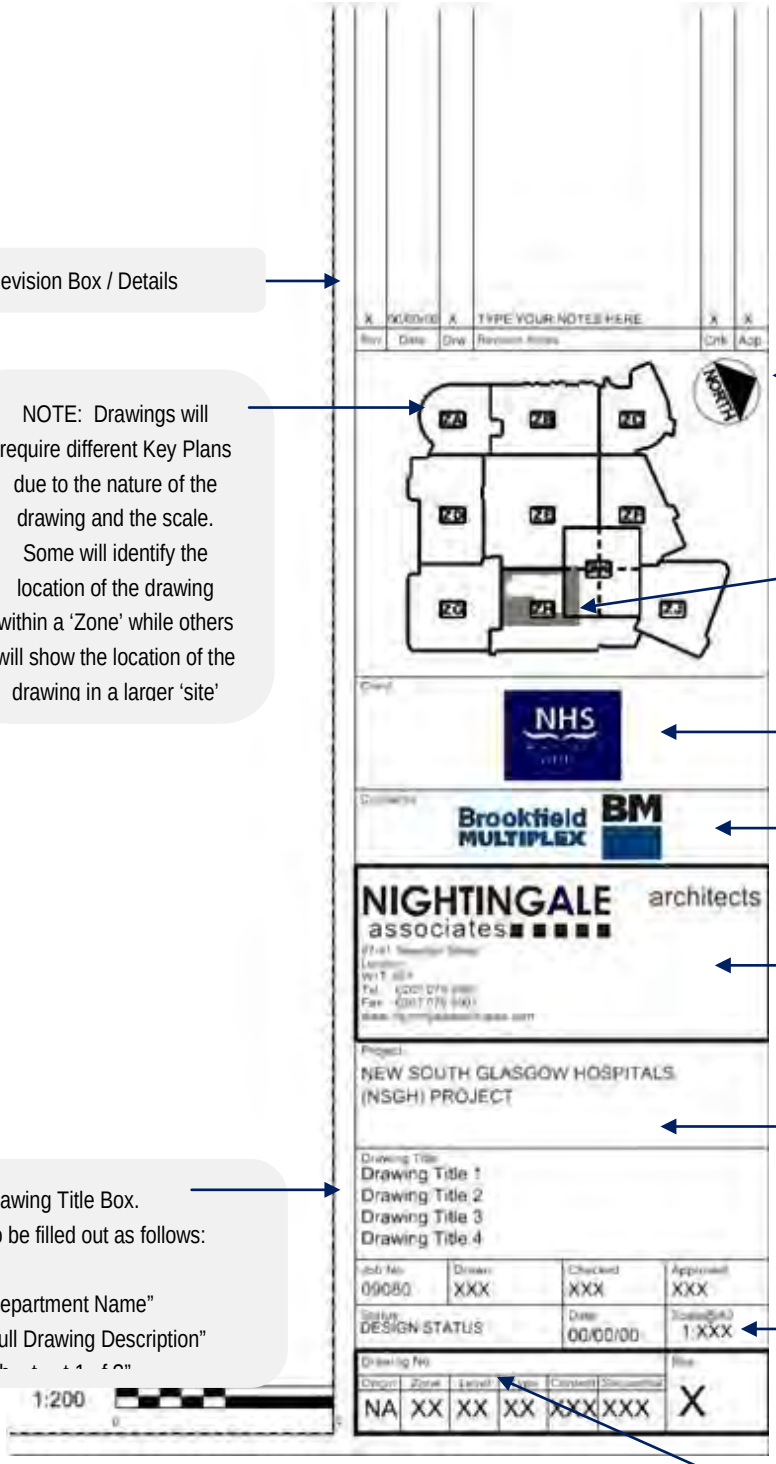


EXAMPLE KEY PLANS – Overall Site Plan



Carparks, Energy Centre, Lab Building & External Works

EXAMPLE TITLE SHEET
NSGH - Typical Drawing Sheet Title Block



Revision Box / Details

NOTE: Drawings will require different Key Plans due to the nature of the drawing and the scale. Some will identify the location of the drawing within a 'Zone' while others will show the location of the drawing in a larger 'site'

North point to be used for all plans and orientated correctly to suit

Drawing identified in a Key Plan for explaining the context & location

Client's Details

Main Contractor's Details

Drawing Originator's (Consultant) Details

Project Name & Details

Drawing Title Box.
To be filled out as follows:

"Department Name"
"Full Drawing Description"
"Sheet text 1 of 2"

Drawing Checking Box including: Job Number, Drawn, Checked, and Approved By, Date and Scale. Scale bar to be included on drawing & job number will be specific to each

One drawing bar scale to be located here and match that of the scale in the title block

Drawing Number & Revision Box

Drawing Status Box.
To be filled out as follows:

"Preliminary"
"Design Development"
"Planning"
"Tender"
"Full Business Case"
"Building Warrant"
"Construction"

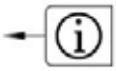
Designer Hazard Identification

Notes:

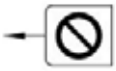
- This drawing is copyright.
- Do not scale dimensions from this drawing.
- All discrepancies on this drawing are to be reported to the architect.
- Do not modify any element of this drawing.
- Use drawing only for purpose(s) issued.

Designer Identification of Hazard/Risk

Indicates a Residual Risk requiring a Compulsory Action



Indicates a Residual Risk for Information



Indicates a Residual Risk requiring a Prohibitive Action

Indicates a Residual Risk as a Warning

Key Design Risks need to be added to drawings. To include the following symbols & a short description of the

CAD MODEL FILE NAMING CONVENTION (Reference & X-Reference CAD files)

Model files which are to be exchanged with other consultants will follow the drawing numbering convention outlined at the beginning of this document with the following variations identified in red:

Fields ➔ 1 – 2 – 3 – 4 – 5 – 6 – 7_ 8

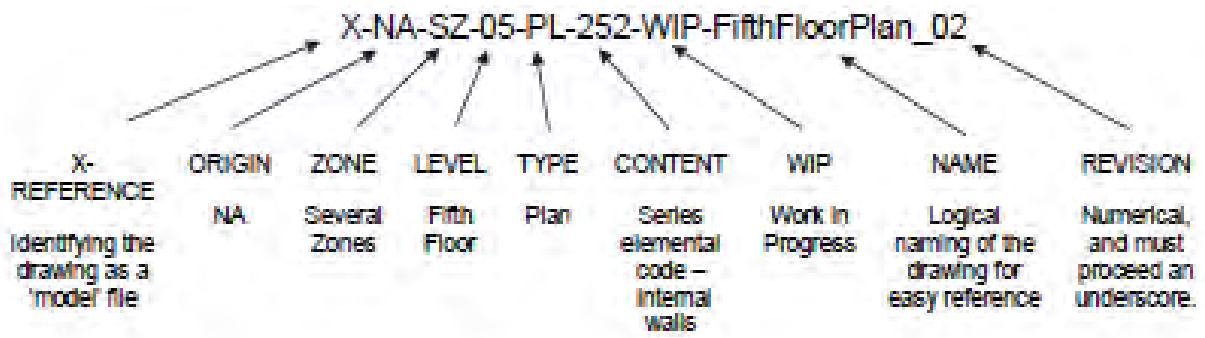
Field 1 - Fixed – Identifies the file as a Reference or X-reference drawing
Field 2 - Origin or Author of drawing or document which indicates the discipline (Company/Organisation name)
Field 3 - Building zone
Field 4 - Level (for plans only) *Note:* this field to be omitted if not a plan and replaced with 'XX'
Field 5 - Drawing Type indicated by 2 letters
Field 6 - 3 digit series code which indicates the elements of building shown on the drawing
Field 7 - Fixed - Work In Progress
Field 8 - Logical Name
Field 9 - Revision status using numbers only

The 3 digit Sequential Number from the drawing numbering convention (field 6) is omitted for model file naming as it will not be required. The logical name (field 8) is to assist identifying the drawing quickly, it is to have no gaps or spaces in between the letters (or digits).

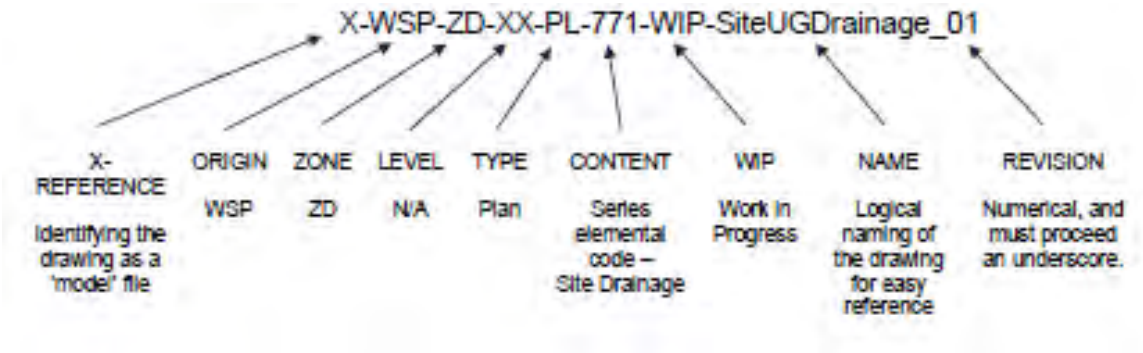
EXAMPLES OF CAD MODEL FILE NAMES

EXAMPLE 1

Please use dashes between the fields as shown except for before the issue or revision reference, where an under score is needed by the Aconex system.



1.1 EXAMPLE



EXAMPLES OF CONSULTANTS DRAWING RESPONSIBILITIES

The originator of a 2D or 3D CAD file drawing will be responsible for drawing only what their discipline is responsible for and in effect 'owns'. Any 'other' drawing information that may be required will be the responsibility of 'other' consultants and be provided in the form of x-reference files (AutoCAD) or reference files (Micro-station). Refer to the Consultant drawing responsibilities which are outlined in the lists below against the series number to issued with.

X-reference or reference files should be set-out and located at the correct project origin point which in most cases is a local grid insertion point. This aspect of the progress is imperative to ensure that all drawings from any consultants within the design team will align in the right place when inserted/overlaid.

ARCHITECT

- Whole Building Perimeter Model with:
- External walls: 251
- Windows: 251
- FM hubs: 252
- Street internal partition separations and doors: 252
- Rainwater pipe locations: 252
- Department internal partitions: 252
- Street boundary walls: 252
- Doors: 252
- Viewing panels: 252
- Room names: 252
- Fittings, Furniture, Equipment: 400
- Ceiling Layout & Finish: 332
- Raised floor (This will show any required pedestals): 252
- Floor Finish: 331

NOT TO INCLUDE:

- Project grids.
- Structural walls, structural slabs, columns

MECHANICAL ENGINEER / CONTRACTOR

- Ductwork, Pipework, mechanical plant.
- Secondary steelwork supporting mechanisms (where only mechanical is required).
- Shared mechanical C electrical supporting mechanisms.
- Mechanical C electrical required conceal set-in fixing positions.(True position and level)

NOT TO INCLUDE:

- Project grids.
- Architectural features.
- First fix structural steelwork.

STRUCTURAL ENGINEER

- Structural walls, structural slabs, columns.
- Structural risers, staircases, boxed out
- Penetrations, plinths and bund walls.

NOT TO INCLUDE:

- Project grids.
- Architectural features.

CONTROLS CONTRACTOR

- Required Containment (various type i.e. tray, basket etc)
- Controls Plant.
- Required Secondary steelwork supporting mechanisms.

NOT TO INCLUDE:

- Project grids
- Architectural features
- First fix structural steelwork
- Shared mechanical/electrical mechanisms

ELECTRICAL ENGINEER / CONTRACTOR

- Containment (various type i.e. tray, basket and trucking)
- Secondary steelwork supporting mechanisms (where only electrical is required).
- Small power, Comms, Fire Alarm and specialist electronic fittings and fixtures. (True position and level)

NOT TO INCLUDE:

- Project grids.
- Architectural features.
- First fix structural steelwork.
- Shared mechanical C electrical supporting mechanisms.

1.0 CAD COORDINATION PRINCIPALS

INTRODUCTION

Set of guidelines for the release of CAD information between the main contractors for NGSH to be used in conjunction with Drawing & Document Numbering System NA-DC-000-001.

CAD COORDINATION GUIDLINES

(a) Sheet files (or paper space) will not be used to exchange CAD Information. Instead a separate series of plans will be made up based on the working model files by using reference/x-refs that are merged through when creating a new cad file for exporting to Aconex.

(b) The CAD Model Files will be numbered similarly to the document/drawing numbering system e.g. 'NA-XX-00-PL-252_02, however, at the end a logical name shall be added to aid identification. An 'X' is also to be added to the beginning to highlight the model file is an x-reference or reference file.

X-NA-00-PL-332-WIP-CeilingGroundFloor_01

WIP is also added to the name and will stand for Work In Progress.

(c) Work In Progress Files to be released between parties will be in Autocad 2007 format unless a formal request for DGN/DWG etc. is made by another party.

(d) Work In Progress Files shall be released as either the entire floor plate as specified in NA -DC-000-001 or as per W.I.P Key Plan Set and in a federated manner i.e. Nightingales will issue internal fabric (300 series), ceilings (332 series), internal fittings (400 series) as separate CAD model files. For a full list of areas of responsibility see above

(e) Work In Progress Files will only contain information relating to the parties area of responsibility i.e. Nightingales CAD Model files will not contain any structural information from WSP. This will keep the size of the model files to manageable level, prevent duplicates and hence avoid errors in the information provided to the Design Team, Client and Contractor.

(f) Work In Progress Files are not to be released as a single large Cell/Block. This makes manipulation of the components difficult and can cause software crashes if the file is especially large.

(g) Work In Progress Files to be released to WSP by Nightingales, ZBP, Gillespies will be positioned according to WSPs Rivet requirements. This will be achieved by creating a separate series of model files with the relevant CAD files referenced/x-ref into them. The references can then be moved to the location that suits WSP. These files can then be used to export to .dgn or .dwg's and issued via Aconex. The file will be named: X-NA-00-PL-332-WIP-CeilingGroundFloor-ToWSP_01

(h) Work In Progress Files released by WSP will be positioned in reference to the O.S grid used in the site survey on which Gillespies and Nightingales plans are based on.

(i) Due to the scale of the building, all major changes on CAD files to be shared with other consultants should be identified with a revision bubble and note on their own layer/level so that it can be switched off if required. This is in order for other Consultants and the Contractor to pick up vital changes especially if they have not been party to the discussions involving the decision of such changes.

WALLACE WHITTLE

9.6 All drawing's should be numbered in accordance with BS:1192 part 5, as follows:

GO999 / Prefix / Code / Bldg Ref / No / Rev (typical: G0999/E(63)101/A)

Revision (A, B, C etc.)

Drawing number (01 etc.)

Building ref.
(optional if building layout complex)
(1 denotes building no. 1, etc.)

Service Code. (Listed below)

Prefix.
Electrical drawings are prefixed with the letter `E'.
Mechanical drawings are prefixed with the letter `M'.
Public health drawings are prefixed with the letters `P'
Utilities drawings are prefixed with the letters `U'

Job number. (specific to each office G0 = Glasgow office)

The AutoCAD computer file would be: G0999_E(63)101A.dwg If saving a drawing with multiple tabs this should be saved thus G0999_E(63)01, 02, 03.dwg Thus when revising the revision letter can be inserted after the relevant drawing number; G0999_E(63)01A, 02B, 03D.dwg ETC..
Building Warrant drawings are prefixed with the letter `BW' as well as either `M' or `E'.

Service Codes:

P50	**Public Health – General**	**E60**	**Electrical - General**
P52	Waste Disposal, drainage	E61	Electrical supply & Containment
P53	Water and liquid supply	E62	Small Power
P53	Oil \ Petrol Supply	E63	Lighting
P58	Public Health & Raw water	E64	Audio \ Visual \ CCTV
P67	Sprinklers	E65	Telecommunications
M50	**Mechanical - General**	E66	Transport, lifts, escalators, cranes etc.
M54	Gas supply	E67	Fire Alarms
M55	Air Conditioning.	E68	Security & Electrical BMS
M56	Heating	E69	Earthing, Lightning Protection
M57	Ventilation	E97	External Lighting
M59	Parts \ details boilers schematics		
M68	Mechanical BMS controls	U96	Utilities \ Combined Site Services
ME30	Low Level Co-ordinated services	ME51	Downtakings
ME35	Ceiling co-ordination		
ME50	Ceiling Void Coordination & sections		

URS
Structural Drawings Numbering System

1300	to	1324	Piling and Substructure - Plans and Sections
1400	to	1424	Superstructure - General Building Floor Plans 1:200
1425	to	1499	General Building Sections and Elevations
1500	to	1599	Reinforcement Details
2300	to	2349	General Building Floor Plans 1:100
2400	to	2449	Structural Steelwork Plans and Details
3000	to	3024	General Details.

Drawing Numbering System:

AA – Architectural Assembly:

(2-) – Structure
(21) – External Walls
(22) – Internal Walls
(24) – Stairs
(25) – Curtain Walling
(27) – Roofs
(31) – External Doors & Windows
(32) – Internal Doors & Screens
(35) – Ceilings
(43) – Floor Finishes
(70) – Room Layouts
(72) – Furniture
(73) – General Joinery

AC – Architectural Components

(31) – External Doors & Windows
(32) – Internal Doors & Screens
(74) – Sanitary ware
(76) - Special Fittings

AL – Architectural Layouts:

(00) – General Arrangement
(05) – Elevations
(20) – Builderswork Plans
(20.1) – Slab & Core Drawings
(24) – Stairs
(27) – Fire Compartmentation Strategy
(35) – Ceilings
(43) – Finishes
(70) – Furniture Layouts
(72) – Fixed Furniture Layouts

AS – Architectural Schedules:

(31) – External Doors & Windows
(32) – Internal Doors & Screens

SK – Sketch's:

NEC 3 PROCESS
EARLY WARNING NOTICE (EWN)
ADVANCE PROJECT MANAGER'S INSTRUCTION (APMI)
PROJECT MANAGER'S INSTRUCTION (PMI)
COMPENSATION EVENT NOTICE (CEN)
USER GUIDE TO ACONEX

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NEC 3 PROCESS

Content:	➚ Part A – Procedure Summary ➚ Part B – Flow Diagram ➚ Part C – How To In Aconex
Purpose:	To provide a controlled, fully auditable, formal communication process, in accordance with clause 16.1 of the NEC 3 Contract, where all relevant parties are bound by the obligation to notify, as soon as they are aware, any matter that may affect the Total Prices; Delay Completion; Delay meeting a Key Date; and/or Impair the performance of the works in use.
Application:	For all EWNs, PMIs and CENs initiated by the relevant project participants.

PART A – PROCEDURE SUMMARY

Roles and Responsibilities:	Subcontractor (SC)	1. Submit EWNs to Project Manager (BMCE) through Aconex and specify a response required date as required. 2. To attend Risk Reduction meetings 3. Review all relevant EWN's as sent by the BM and provide responses as required by the due date. 4. Take action on instructions issued by BMCE.
	Consultant (CON)	1. Submit EWNs to Project Manager (BMCE) through Aconex and specify a response required date as required. 2. To attend Risk Reduction meetings. 3. Review all relevant EWN's as sent by the BM and provide responses as required by the due date. 4. Take action on instructions issued by BMCE.
	Project Manager (PM) Brookfield (BM)	1. Submit EWNs to Project Manager (NSGH Board) and specify a response required date as required. 2. Attend Risk Reduction meetings. 3. Manage and co-ordinate EWN's submitted by Sub-contractors/ Consultants and issue responses as required. 4. Manage and co-ordinate EWN's where Consultant team and Sub-contractor's advice is required. 5. Respond to SC/CON EWN's either via formal PMI or with a Response to EWN advising that the EWN is closed. 6. Maintain Risk Register, entering all EWNs and decisions made at Risk Reduction Meetings. 7. Monitor EWN's and proactively manage any items which could pose a risk to time, cost or quality on the project.
	Cost Consultant (CC) Doig & Smith	1. Submit EWNs to Project Manager (BMCE) through Aconex and specify a response required date as required. 2. Attend Risk Reduction meetings. 3. Notify PM where cost impact is likely to occur. 4. Monitor and review all EWN's and make necessary forecasts to project budget.
	Project Manager (PM) NSGH Board Note: Use of Aconex by NSGH Board to be advised	1. Raise EWNs to Project Manager (BMCE) and specify a response required date as required. 2. Attend Risk Reduction meetings 3. Manage and co-ordinate EWN's submitted by BMCE and issue responses as required. 4. Manage and co-ordinate EWN's where client representative advice is required. 5. Respond to BMCE EWN's either via formal PM instructions or with a Response to EWN advising that the EWN should be closed. 6. Maintain Risk Register, entering all EWNs and decisions made at Risk Reduction Meetings 7. Monitor EWN's and proactively manage any items which could pose a risk to time, cost or quality on the project.
Other Requirements:	None	
Other References:	PMI Procedures Guide, CEN Procedures Guide.	
Procedure/Document No:		
Date of Procedure:	11/02/2010	
Revision:	F	
Status:	For Implementation	
Approved By:	John Ko (BMCE)	

Aconex Recommendations

This section outlines the required system configurations (e.g. Project mail types, nominated participants, auto-text and rules of use) required to execute the EWN procedure.

Project Mail

The following settings to Project Mail are required on the project.

Key settings:	Mail Type	Who is to use	Rules of Use
	Early Warning Notice	Subcontractor	➚ To notify as soon as the subcontractor is aware of any matter which could increase the total of the Prices; Delay Completion; Delay meeting a Key Date; or Impair the performance of the Works in use. All in accordance with clause 16 of the contract.
	Early Warning Notice	Project Manager Brookfield	➚ To notify as soon as the PM BM is aware of any matter which could increase the total of the Prices; Delay Completion; Delay meeting a Key Date; or Impair the performance of the Works in use. All in accordance with clause 16 of the contract.
	Early Warning Notice	Project Manager Client (NSGH Board)	➚ To notify as soon as the PM Client is aware of any matter which could increase the total of the Prices; Delay Completion; Delay meeting a Key Date; or Impair the performance of the Works in use. All in accordance with clause 16 of the contract.
	Early Warning Notice	Consultant	➚ To notify as soon as the consultant is aware of any matter which could increase the total of the Prices; Delay Completion; Delay meeting a Key Date; or Impair the performance of the Works in use. All in accordance with clause 16 of the contract
	Notice of Meeting	Project Manager BMCE (Delegated to Doig & Smith)	➚ For arranging Risk Reduction Meeting.
	Project Manager Instruction	Project Manager BMCE	➚ For issuing instructions in response to EWNs submitted by subcontractors/ consultants.
	Project Manager Instruction	Project Manager NSGH Board	➚ For issuing instructions in response to EWNs submitted by BM.
	Response to EWN	Project Manager	➚ To instruct the originator to close an EWN where no further action is required.
Other settings:	➚ Create relevant **distribution groups** in each organisations directoryi ➚ Complete default template **auto-text** form (refer Mail Autotext Forms below) o Early Warning Notice o Advance Project Manager's Instruction o Project Manager's Instruction o Compensation Event Form ➚ Enable **mail approval** if senior/supervisory approvals are required as part of each Company's internal protocol.		

Mail Autotext Forms

EARLY WARNING NOTICE

You must nominate the RESPONSE REQUIRED DATE of NOT more than 7 calendar days.

* Please input / add as appropriate

EARLY WARNING NOTICE
The following matters could: *(delete as appropriate) • Increase the total of the prices • Delay Completion • Delay meeting a Key Date • Impair performance of the works in use
*DETAILS OF EARLY WARNING NOTIFICATION (Please attach relevant documents)
*The following works may be affected: • • •
*PROPOSALS REQUIRED (Assumptions to be noted if any)
You are instructed to attend a risk reduction meeting on *(DD/MM/YY) to discuss the above.

ADVANCE PROJECT MANAGER'S INSTRUCTION

The response date must be set as a maximum of 7 calendar days from the date of issue in accordance with your contract.

* Please input / add as appropriate

ADVANCE PROJECT MANAGER'S INSTRUCTION (APMI)
*DESCRIPTION
*TIME/COST/QUALITY IMPACT
Advise the Time/Cost/Quality impact of the above. • For works in progress, maintain records • Where there is more than one item above, the Contractors shall use this sheet as summary only and the Time/Cost/Quality impact of each of the individual items shall be identified on appended documentation.

PROJECT MANAGER'S INSTRUCTION

The response date must be set as a maximum of 21 calendar days from the date of issue in accordance with your contract.

* Please input / add as appropriate

PROJECT MANAGER'S INSTRUCTION (PMI)
*DESCRIPTION
*Related EWN and/ or CEN Number or Attach (if any)
• • • • •
*TIME/COST/QUALITY IMPACT
Advise the Time/Cost/Quality impact of the above. • For works in progress, maintain records • Where there is more than one item above, the Contractors shall use this sheet as summary only and the Time/Cost/Quality impact of each of the individual items shall be identified on appended documentation.

COMPENSATION EVENT NOTICE

This is a CONFIDENTIAL Correspondence - To designate this mail as confidential please see the instructions below:
1. Click Option button
2. Select Confidential tick box
3. Click OK

* Please input / add as appropriate

COMPENSATION EVENT NOTICE (CEN) Part 1

In accordance with the Contract you are notified of the Compensation Event described below.
*The relevant Compensation Event(s) are:

-
-
-

The agreed changes to the price and programme together with the revised Contract Price and Completion Date are summarised below. The Compensation Event is now implemented.
For related PMI's and/ or EWN's (if applicable) see table below in Part 2.

COST SUMMARY		PROGRAMME SUMMARY	
Orig. Contract Price	£	Original Completion Date	
Current Contract Price	£	Current Completion Date	
This Addition/ Omission	£	This Change	
Revised Contract Price	£	Revised Completion Date	

Signed for and on behalf of (Contractor)

Title: Date:

Signed for and on behalf of (Project Manager)

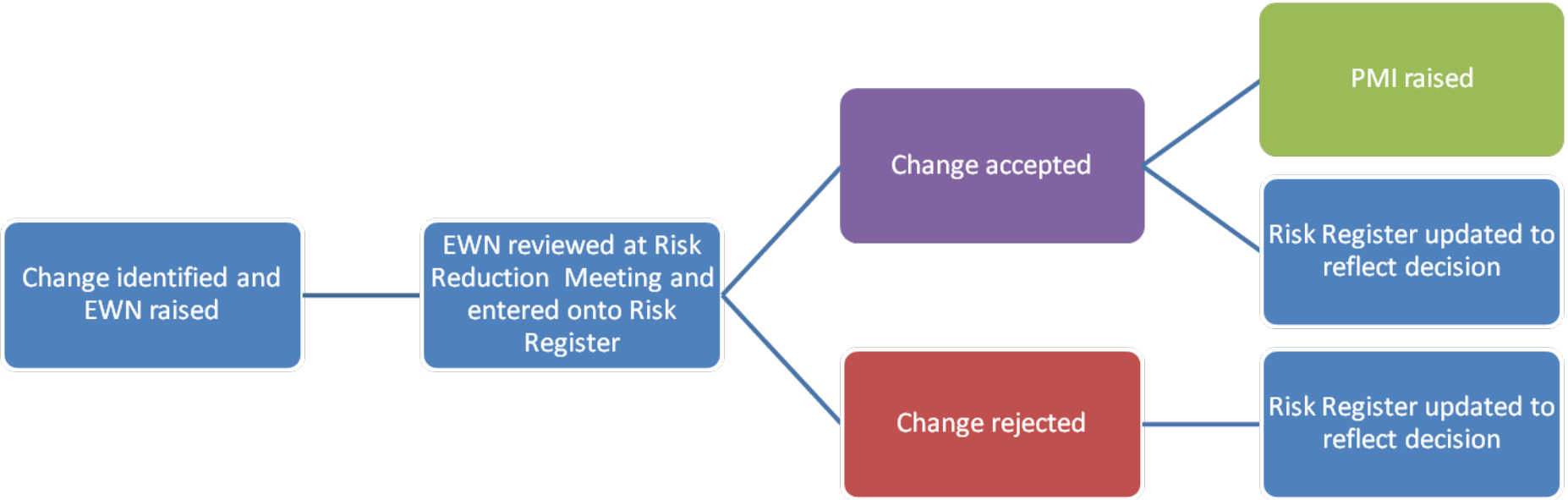
Title: Date:

COMPENSATION EVENT NOTICE (CEN) Part 2

The following PMI's / EWN's are included in this CEN:

PMI /EWN No.	Value
TOTAL	£

PART B –FLOW DIAGRAM



Overview of EW process. All users should refer to NEC3 flow chart for full process.

PART C – HOW TO IN ACONEX

Initiating an EWN (ALL)

1. Click the **Mail** icon from the *Module Menu*.
2. Click **New Mail** from the *Mail Sub Menu*.
3. Select the project mail type **Early Warning Notice** from the *Type:* menu.

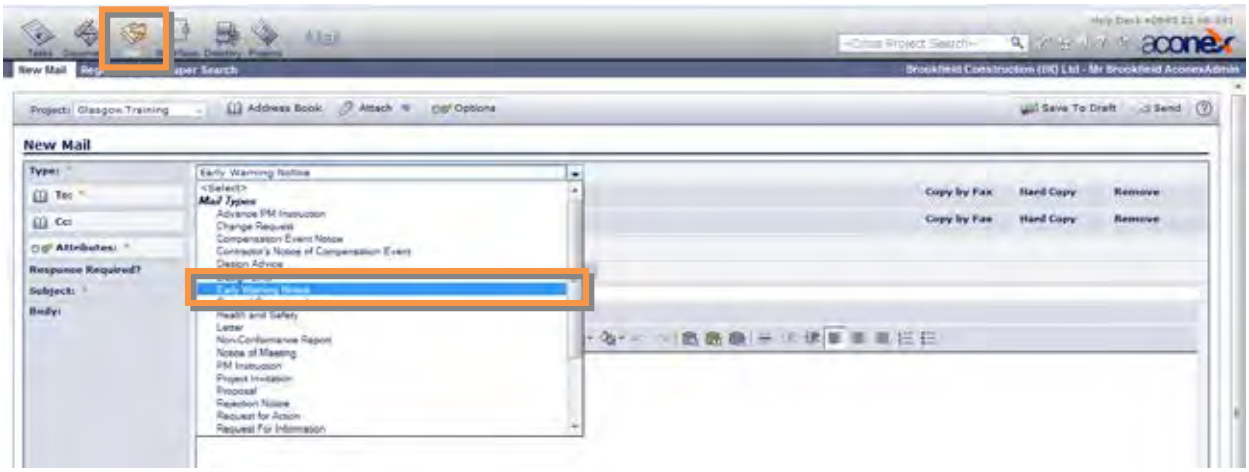


Figure 1 - Early Warning Notice

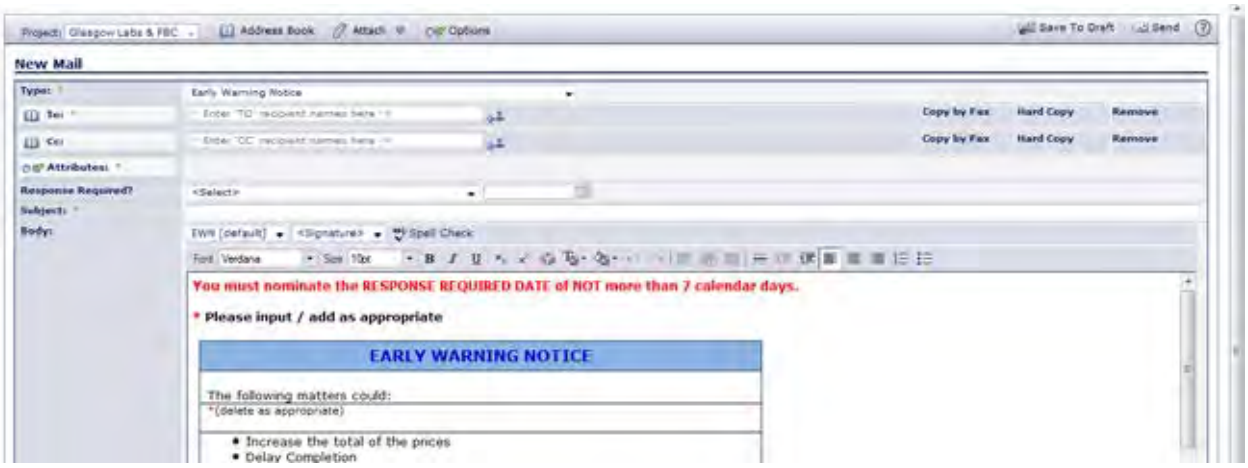


Figure 2 - Early Warning Notice Form

4. Type the name(s) into the **To:** field and click **Add Recipient** button. Add **Cc:** recipient(s) as required.
5. Choose **response is required by** from the *Response Required?* and click the **Calendar** icon.

Select a response date of NOT more 7 calendar days.

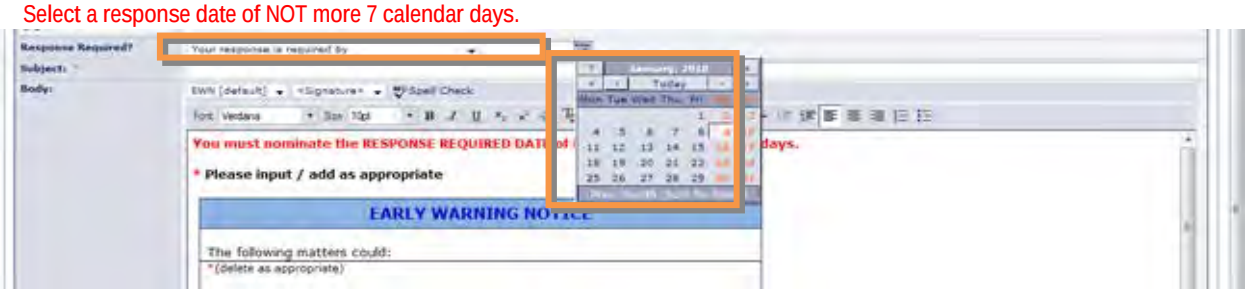


Figure 3 – Enter Response Required by Date

6. Enter a subject for the project mail in the **Subject** field.
7. Add a *Mail Attribute 1 & 2* by clicking the **Attribute** button.
    a. Double-click the relevant attribute/s to move them to the Selected Attributes box.
    b. Click **OK** button.

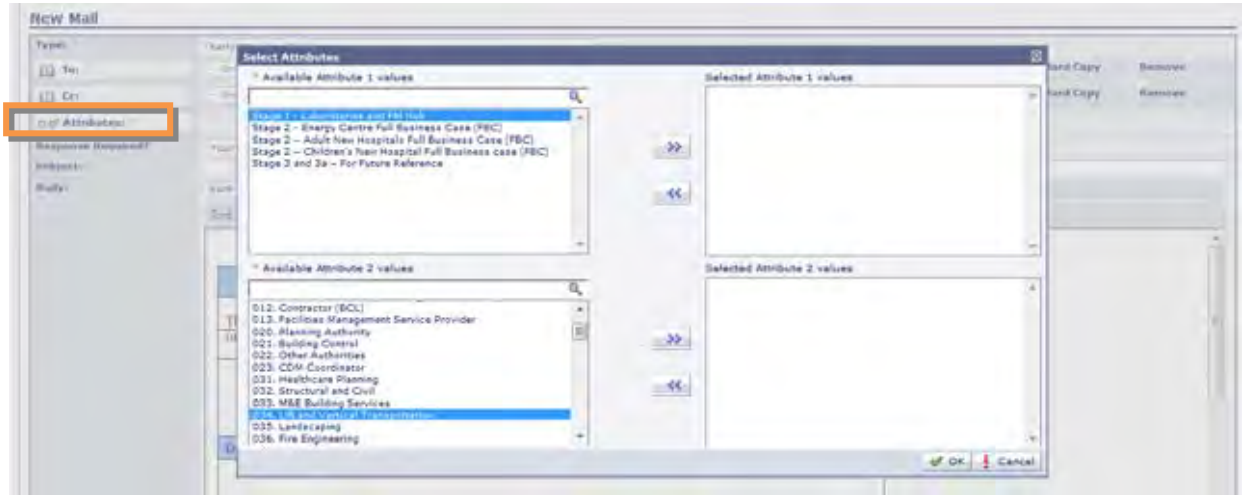


Figure 4 - Add Attributes

8. Click **Attach** button to add a file (if required).
9. Complete *Early Warning Notice* form.
10. Click the **Send** button.

Issuing a PMI (for use by BMCE and NSGH Board Only) and Closing out EWN

NOTE: The PMI should be issued as a Reply *to the original EWN where this is agreed as being the appropriate response at the Risk Reduction Meeting. This will flag the EWN as being* Responded *to.*

Alternatively a Response to EWN should be issued telling the originator that the EWN should be Closed Out as no further action is necessary.

In both instances the organisation that created the EWN is responsible for ensuring they are Closed Out. Please see "Closing Out an EWN" below.

1. Open the original *Early Warning Notice* project mail from the *Mail Inbox*.
2. Click the Reply to All button.

Figure 5 - Reply to All

3. Select the project mail type PM Instruction from the *Type:* menu.
4. Click Attach button to add a file (if required).
5. Complete *PM Instruction* form.
6. Click the Send button.

Issuing a Response to EWN

7. Open the original *Early Warning Notice* project mail from the *Mail Inbox*.
8. Click the Reply to All button.

Figure 6 - Reply to All

9. Select the project mail type Response to EWN from the *Type:* menu.
10. Click Attach button to add a file (if required).
11. Complete *Response to EWN* mail.
12. Click the Send button.

Forwarding an EWN

NOTE: Each EWN in Aconex will be allocated a unique number for the appropriate organisation, e.g. ACX-EWN-000001. This number is sequential for items raised and can be viewed from the Mail Sent Items. The first prefix is the originator Company reference eg. BMCE is Brookfield – this can be selected by your company's Aconex 'org admin'.

When forwarding an EWN a new unique EWN number will be allocated for that organisation. This will allow you to monitor EWN's forwarded on for response from the design team for example vs. an original EWN received.

Every EWN forwarded will always have an *In Ref to:* and *Mail Thread* showing the original EWN issue (see *Viewing Mail Threads* and *In Reference To Links* below).

It should also be noted that although incoming EWN may not run in sequential order, Aconex is a secure platform that does not allow for issued communications to be amended or deleted. The EWN results displayed in your project mail is there for a current and accurate list of all items issued are received.

All incoming EWNs can be filtered by organisation name, date, recipient etc, for easy retrieval etc.

1. Open the original *Early Warning Notice* project mail item.
2. Click the Forward button.

Figure 7 – Forward Project Mail

3. Select the project mail type Early Warning Notice from the *Type:* menu.
4. Type the name(s) of recipient(s) in the To: and/or Cc: fields and click Add Recipient button.
5. Continue with project mail.
6. Click Attach button to add a file (if required).
7. Click the Send button.

Closing Out an EWN

NOTE: Mail items raised with a *Response Required* date MUST be *Closed Out* once no further action is required. Mail items can ONLY be *Closed Out* by the organisation that issued the mail. Mail items can also be closed in bulk from the *Mail Sent* items. This should only be done when instructed to do so by the Project Manager.

1. Open the original *Early Warning Notice* project mail item.
2. Click the *Action* button.

Figure 8 – Closing Out Project Mail

3. Click the *Close Out* option.

Viewing Mail Threads

1. Open the *Early Warning Notice* project mail item.
2. Click the *View Thread* button.

Figure 9 – Viewing Project Mail Thread

3. Click the *Hide View Thread* to close the thread.

In Reference To Link

NOTE: Every mail item responded to or forwarded on will have an *In Reference To* link. This is displayed above the Mail Number. Searches can be performed on the *In Ref To* number from the *Mail Supersearch* field to locate any mail linked to the reference number (Please refer to the Aconex Online Help Centre for further information).

1. Open the *Early Warning Notice* project mail item.
2. *In Ref To number* is displayed above the current *Mail Number*.

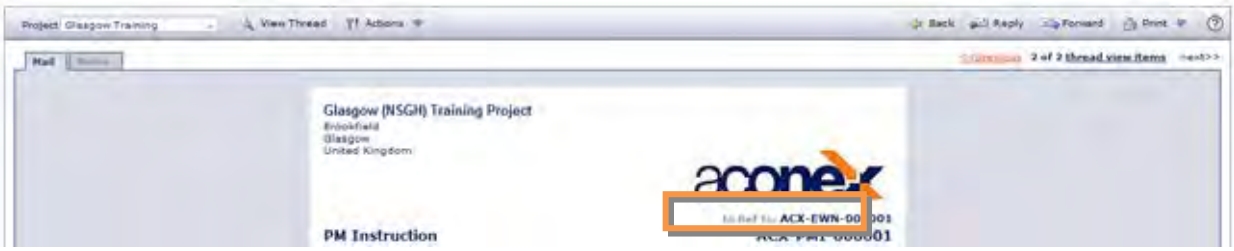


Figure 10 – In Ref To Link

Mail Status Options

Outstanding	Mail response date is within current time frame.
Overdue	Mail response date has passed. Automatically updated.
Responded	Mail received has been replied to
Closed Out	Original mail item raised has been manually closed out.
N/A	No date of response or mail recipient is in the Cc field.

Reporting

Standard saved reports can be created to assist with reviewing Outstanding, Overdue, Responded and Close EWN's.

Creating a Saved Search

NOTE: You may wish to configure the columns displayed in the mail results to display information such as Due Date, Response mail number and Response Date.

1. Click the **Mail** icon from the *Module Menu*.
2. Click **Configure Columns** button.

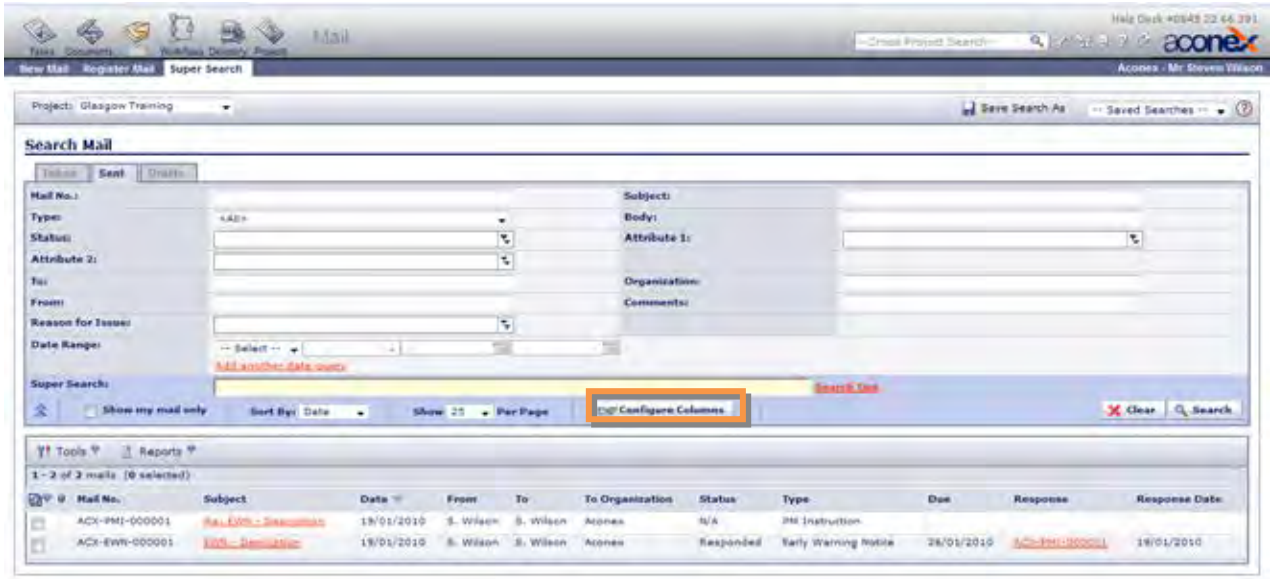


Figure 11 - Configure Columns

3. Add the required columns to **Selected Columns** box.
4. Click **OK** button.
5. Select the project mail type **Early Warning Notice** from the *Type:* menu.
6. Click **Status** button and select the relevant mail status (**Outstanding**, **Overdue**, **Responded or Closed Out**).
7. Click **OK**.

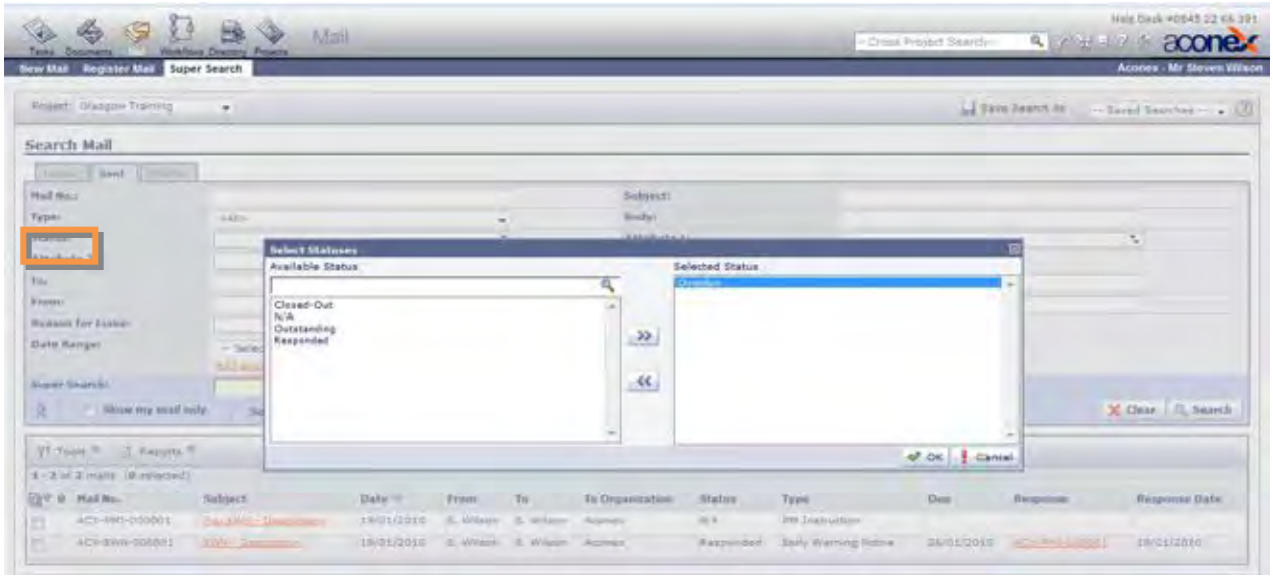


Figure 12 – Searching for Overdue, Outstanding or Responded Items

8. Click Search button.
9. Click Save Search As button and enter in a name and description.

Figure 13 – Saved Searches

10. Click OK.
11. Run report by clicking on search from the Saved Searches menu.
12. Search results can be exported to M.S. Excel from the Report menu.

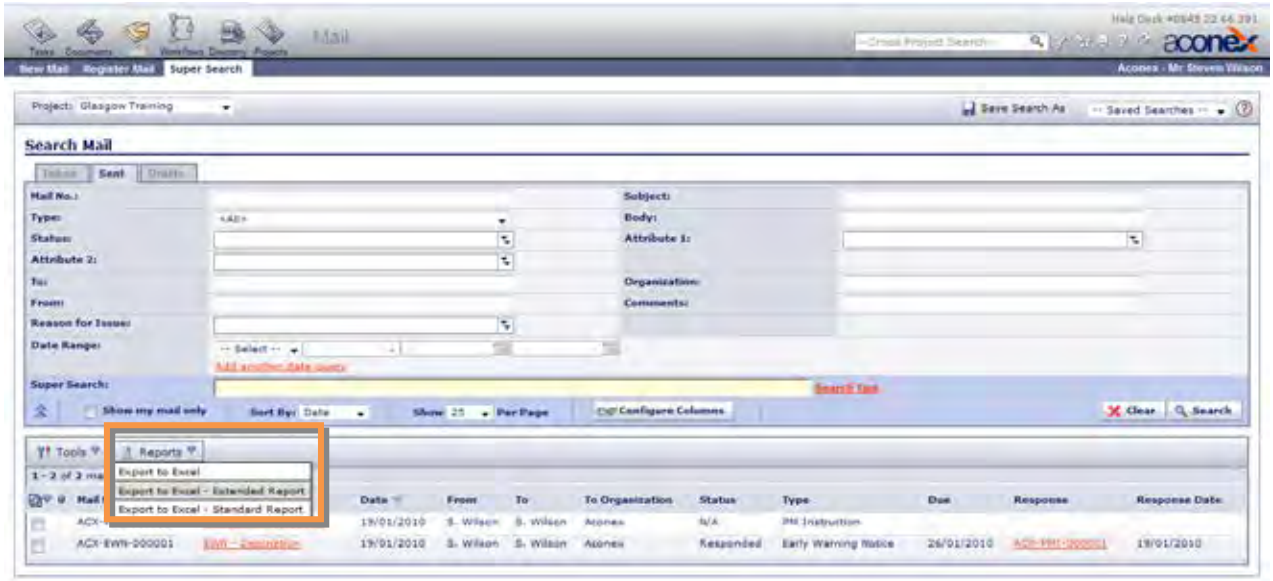


Figure 14 - Export to Excel

J B Russell House
Gartnavel Royal Hospital
1055 Great Western Road
Glasgow
G12 0XH

Mr Ross Ballingall
Non-Executive Director - Europe
Multiplex Construction Europe Ltd
99 Bishopsgate
2nd Floor
EC2M 3XD

London
Date 29th March 2019
Your Ref
Our Ref TS/AH
Enquiries to Tom Steele
Direct line [redacted]
E-mail [redacted]

Dear Sirs

Queen Elizabeth University Hospital – Post Contract Review

The new QEUH Adult Hospital and RHC facility have now been in operation almost four years. During that period, a number of issues have arisen that have been detrimental to the seamless delivery of health care and which NHS Greater Glasgow and Clyde would not have expected to occur in a new facility. Consequently, Independent construction consultants have been appointed and a detailed review of these issues has been commissioned and on completion the findings will be presented to the NHS Greater Glasgow and Clyde Board..

A strategy and plan for has been developed, and the main investigative review is now underway. The exercise will comprise of a comprehensive analysis of each issue through the briefing, design, construction, maintenance and operation of facilities. The anticipated output is an evidence based assessment of what the issues are, why they have arisen and recommendations on how the issues can be taken forward and addressed.

The Health Secretary Health Secretary Jeane Freeman announced earlier this month two co-chairs to lead an independent review into the design, commissioning, construction, handover and maintenance of Glasgow's Queen Elizabeth Hospital, Dr Brian Montgomery, former Medical Director and interim Chief Executive of NHS Fife and Dr Andrew Fraser, Director of Public Health Science, NHS Health Scotland. The technical information and findings of the NHS Greater Glasgow & Clyde review will be provided to the chairs as part of their wider Independent Review.

NHS Greater Glasgow and Clyde would respectfully request that Multiplex representatives, and in particular colleagues who were directly involved with the delivery of the project, work together with the Health Board's staff to enable the review team to be provided with information which is as complete as possible. NHS Greater Glasgow & Clyde truly consider that full co-operation and transparency amongst all parties will be of benefit to all, and facilitate the earliest resolution of these issues.

Please do not hesitate to contact me if you require any further clarification.

Yours sincerely

[redacted]

Tom Steele
Director of Estates and Facilities

DESIGN ACCEPTANCE PROCEDURE FORM

Generic Ward User Group meeting 20/1/10
ACTION POINTS

Generic Wards

- Can isolation lobby area be used to provide additional storage space? Architect to check. If not, can space be taken from socialisation area to achieve this?
- Controlled drug cupboard should be within the clean utility
- Relocate food trolley bay adjacent to pantry
- Wheelchair bay : merge the two areas (keep fire partition at one side of area)
- Clinical supplies bay : merge into the clean utility
- Centralise the Resus trolley bay (relative to beds)
- 2 x single bedroom at end of ward finger : can window be relocated to improve observation? Architect to investigate.
- Socialisation space : investigate options for an open plan area in an alternative location of ward (i.e. end of ward finger), or open plan area in current location
- Reception area : utilise this area for additional waiting space

Ward Support Cluster

- No action points

NHS Greater Glasgow and Clyde

New South Glasgow Hospitals (NSGH) Project

INVITATION TO PARTICIPATE IN COMPETITIVE DIALOGUE

VOLUME THREE

BID DELIVERABLES AND EVALUATION

Contents

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3.0 Bid Deliverables

4.0 Submission of Bids

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Appendix C Legal Evaluation

Appendix D Financial Evaluation

Appendix E Board Evaluation Process / Structure

Appendix F Certificates

1.0 Introduction

1.1 This Volume of the ITPB sets out the Bid Deliverable Requirements and the Bid Evaluation Process.

2.0 Selection Procedure and Evaluation Criteria

2.1 Introduction

The Tender Return Date is for submissions relating to this Project is 11 September 2009. In terms of the Public Contracts (Scotland) Regulations 2006 (as amended), which implement EU directives into UK law, the Board will award the contract on the basis of the most economically advantageous Bid.

The Board must be satisfied that the proposed solution offers value for money and meets the Board's affordability criteria and minimum requirements for the Project. This will be determined by reference to the bid submission requirements in the Appendix A of Volume 3 of this ITPD and the evaluation criteria set out in Section 2.3. Having undertaken a detailed pricing analysis of the exemplar design, the Board has produced a "should cost" figure for the Project of £590M. The Board believes that this is a robust target for the pricing of the Project and expects bids to be received which meet or better this price. This figure has provided the basis for the Board's budget allocation for design, construction and risk.

Separately, the Board has an affordability ceiling of £621M and reserves the right to reject any bid submission that exceeds this figure

2.2 Evaluation Team

A team composed of individuals with relevant knowledge and expertise will carry out the evaluation of technical and commercial submissions. The Evaluation Team will comprise relevant individuals from the Board, Technical, Legal and Financial Advisors, and representatives from the Board. A Team Leader shall be appointed to co-ordinate the review of the bid submissions under the following sections:-

- Design Group
- Site Logistics Group
- Laboratories Group
- Commercial Group

2.3 Evaluation Methodology

The bid evaluation process is outlined as follows:-

- *Stage 1 - Compliance & Completeness Review*

Each bid submissions will be subject to an initial compliance and completeness review. This initial review will not involve a qualitative assessment of a Bidder's proposals but will simply check whether or not the submission requirements of the ITPD have been satisfied. Any omissions will be notified to the Team Leader via a Compliance & Completeness Review Schedule and forwarded to the Project Director. All requests for missing information will be made to Bidders from the Project Director and requested information should be provided within 7 days of request.

The Financial Evaluation Team will undertake a high level review of the priced bids and any bid above the maximum affordability threshold may be discarded at this initial stage.

At this stage the Board reserves the right to either reject any non-compliant or substantially incomplete Bids or request further information from the Bidder to address any such non-compliance or shortcomings with the Bid.

- *Stage 2 – Bid Evaluation*

In order to determine the bid that represents the Most Economically Advantageous Tender, each bid will be subject to the following process:-

1. A detailed scoring evaluation will be undertaken in accordance with the Bid Evaluation Schedule included in Appendix B and the scoring matrix below to determine the Qualitative Score. Further detail on the Board's approach to the evaluation of the Bidders' responses on the draft Contract and ancillary matters is set out in Appendix [C].

Scores	Value	Description
Excellent	9 - 10	Performs significantly well on all key factors and offers substantial additional benefits
Good	7 - 8	Performs well on all key factors and offers some additional benefits
Adequate	5 - 6	Passes thresholds on all key factors but offers few additional benefits
Poor	3 - 4	Fails to meet threshold on some key factors
Very Poor	2	Fails to meet threshold on majority of key factors
Unacceptable	1	Fails to meet threshold on all key factors

2. Pricing evaluation will be carried out, based on price / risk scenario modelling to assess the most likely final outturn price to the Board. This process aims to evaluate the true cost of the bids to the Board and reflect a comparable risk position between bids. The expected outturn price will be determined based on cost modelling of bid submissions with the assessed impact of Board retained risk. Modelling will consider scenarios to establish the expected outturn price by reference to the bidders price submissions, priced risk registers for contractor accepted risk and board retained risk, and the pain / gain ratios.

3. A Value for Money / Most Economically Advantageous Tender assessment will follow, the outcome of which will be determined by dividing the Qualitative Score by the expected outturn price (MEAT Score).

   The outcome of the calculation performed in accordance with Paragraph 3, above, will identify a provisional combined ranking of the tenders assessed. The MEAT Score for each bidder should aim to achieve a minimum overall level [as determined with reference to the Board's indicative MEAT Score, which is calculated by dividing baseline requirements of Volume 3 Employer Requirements by the "should cost" figure in Section 2.1], i.e. 400.

   There will then be a final meeting of the evaluation team to agree that the provisional ranking is robust. The outcome of this meeting will form the basis of a recommendation to the Board as to which tender is the most economically advantageous. Subject to Board approval, the Contract will be awarded to the Bidder who submits this tender.

As part of the evaluation process the Board reserve the right to convene meetings with the Bidders in order to clarify any part of the bidders submission where the proposals are considered to be unclear.

The Board also reserve the right to request the bidders to attend an Interview / Presentation in order that the Bidder can fully explain his design proposals, management procedures, construction methodology, and any other matter considered relevant to the Board. The Interview / Presentation will not form part of the bid evaluation process.

Further details on the Evaluation Process / Structure is included in Appendix E.

1.0 Bid Deliverables

The bid deliverables to be submitted by bidders for are set out in Appendix A

2.0 Submission of Bids

The format of the bid submissions shall be as follows:-

- Separate volumes or sections for each of the Bid Deliverable categories identified in Appendix A
- Front Cover for each Volume noting
  - New South Glasgow Hospitals Project
  - Volume Nr & Bid Deliverables Sections
  - Bidder Name & Logo
- General text minimum font size 10pt
- A4 or A3 paper size (A0 drawing size will be acceptable if folded to A3 size)
- Each page to have Header with – New South Glasgow Hospitals Project & Bidders Name (no Company logo)
- Each page to have Footer with – Volume Nr and Page Nr
- 2 or 4 hole punch Lever Arch Folders
- A1 or A0 Drawings folded and contained in plastic folders within appropriate volume

Appendix A Bid Deliverables

NEC3 CONDITIONS OF CONTRACT - CONTRACT DATA PART 2 – DATA PROVIDED BY THE CONTRACTOR

The Bidders tender submission require to be a full and comprehensive response to the Works Information (Employers requirements) clearly demonstrating compliance, and as a minimum requires the following information to be submitted.

Section	Submission	Checklist
1.0 Accommodation Schedule		
1.1	Net Area – room by room, including all ducts, pipe boxing and service zones	
1.2	Circulation area	
1.3	Communication & plant space area	
1.4	Total Gross Floor Area	
2.0 Drawing Information		
2.1	1:500 scale Masterplan proposals, indicating the following information:- ▪ Communication routes into and out of the site & buildings for o Vehicles • Public transport (Buses & fastlink) • Private cars • Taxis • Ambulances • Services Vehicles • Cycles o Pedestrians • Patients • Visitors • Staff ▪ Planning restrictions affecting the development and modifications to highways, response to specific local authority planning requirements ▪ Orientation of buildings and relationship to other buildings and infrastructure on the site ▪ Hard & soft landscaping proposals ▪ Car Parking arrangements with distribution of spaces and use identified ▪ Areas of differing Carriageway Construction ▪ Road, footway and cycle way geometry ▪ Indicative Signalised layouts at external roads ▪ Main access points to buildings (existing & proposed) ▪ Major service routes ▪ Response to the surrounding and wider urban context ▪ Phasing plans / temporary works plans for the implementation of roads and drainage infrastructure	
2.2	1:500 departmental relationship drawings for all levels indicating functional relationships, main circulation routes and FM flows.	
2.3	1:200 departmental layouts (minimum 11nr) indicating the following information:- ▪ Room adjacencies ▪ Circulation layouts ▪ Corridor widths ▪ Door widths ▪ Communication routes / wayfinding ▪ Entrances ▪ Egresses	

	▪ FM flows (in and out) and distribution	
2.4	1:200 departmental drawing for Accident & Emergency Department, ▪ floor finishes ▪ ceiling finishes ▪ wall finishes ▪ door types & ironmongery ▪ wall protection ▪ Lighting proposals ▪ CCTV locations ▪ door entry locations	
2.5	1:200 departmental drawing for Adult Theatres Department, fully annotated to indicate :- ▪ floor finishes ▪ ceiling finishes ▪ wall finishes ▪ door types & ironmongery ▪ wall protection ▪ Lighting proposals ▪ CCTV locations ▪ door entry locations	
2.6	1:200 departmental drawing for Adult Ward, fully annotated to indicate ▪ floor finishes ▪ ceiling finishes ▪ wall finishes ▪ door types & ironmongery ▪ wall protection ▪ Lighting proposals ▪ CCTV locations ▪ door entry locations	
2.7	1:200 departmental drawing for Childrens Ward, fully annotated to indicate ▪ floor finishes ▪ ceiling finishes ▪ wall finishes ▪ door types & ironmongery ▪ wall protection ▪ Lighting proposals ▪ CCTV locations ▪ door entry locations	
2.8	1:200 departmental drawing for Childrens A&E Department fully annotated to indicate ▪ floor finishes ▪ ceiling finishes ▪ wall finishes ▪ door types & ironmongery ▪ wall protection ▪ Lighting proposals ▪ CCTV locations ▪ door entry locations	
2.8a	1:200 drawing(s) for FM departments (other than FM areas in the laboratory building) fully annotated to indicate ▪ floor finishes ▪ ceiling finishes ▪ wall finishes ▪ door types & ironmongery ▪ wall protection	

	▪ Lighting proposals ▪ CCTV locations ▪ door entry locations ▪ storage provision and proposals This to address (as a minimum) FM offices, staff changing, catering/kitchen, FM stores and holding, AGV holding and distribution areas.	
2.9	1:50 room layout and wall elevations fully developed for the rooms included as part of the Employers Requirements indicating:- ▪ room size and useable floor space ▪ room shape and compliance with ergonomic data and minimum critical dimensions ▪ room elevations ▪ reflected ceiling plans ▪ access points / locations of doors and windows ▪ location of utilities, engineering and specialist services ▪ location of equipment	
2.10	1:500 Fire Strategy drawings & Fire Strategy Report indicating the following information:- ▪ Strategic plans, highlighting evacuation strategies and staff implications in the event of fire ▪ Specialist Fire Engineer's Report providing a clear understanding or risk and protection measures ▪ Outline of principles adopted underlying approach to fire safety indicating compliance with Employers Requirements, NHS Firecode and Technical Standards	
2.11	1:200 Elevations – incorporating external signage proposals	
2.12	1:200 Roof plan indicating the following ▪ Form ▪ Materials ▪ Helipad proposals	
2.13	1:200 Exemplar sections indicating the following:- ▪ Floor to floor heights ▪ Floor to ceiling heights ▪ Architectural vision – space, height, form, composition, scale, character and use of materials ▪ Consideration of patient environment – natural light, views etc	
2.14	3D images / perspective (internal & external) indicating the following:- ▪ Architectural vision – space, height, form, composition, scale, character and use of materials	
2.15	Hospital Main Entrance / atrium / public space proposals / visuals	
2.16	1:500 site hard & soft landscaping proposals indicating:- ▪ Soft landscaping strategy ▪ Hard landscaping strategy ▪ Car Parking arrangements with distribution of spaces and use identified ▪ Areas of differing Carriageway Construction ▪ Road, footway and cycle way geometry ▪ Indicative Signalised layouts at external roads ▪ Retention / protection of existing trees ▪ Incorporation of art ▪ Special features ▪ Courtyards	

	▪ External lighting and CCTV locations and coverage	
2.17	Typical Sections and details to appropriate scale showing:- Carriageway Construction Footway / Cycleway Construction	
2.18	1:1250 (or greater) plans showing :- ▪ Drainage provision in support of SUDS and Drainage Strategy	
2.19	1:500 scale plans showing:- ▪ Layout of roads and buildings ▪ Layout of sewers, outfalls, underground storage, and SUDS features	
2.20	Finishes Schedule for 10 Nr Departments (other than those identified above for detailed 1:200 drawing submissions) and key circulation & communication routes, and main entrances	
2.21	Door & ironmongery Schedule for 10 Nr Departments (other than those identified above for detailed 1:200 drawing submissions) and key circulation & communication routes, and main entrances	
2.22	Outline design drawings demonstrating structural philosophy and should include as a minimum: ▪ Foundations: Typical layout and detail of proposed solution ▪ Basement: Outline construction detail; plan of slabs, sections of retaining walls ▪ Ground level slab: Typical layout and details ▪ Podium level floor: Typical layout and details, transfer structures ▪ Ward level floors: Typical plan layout indicating slab and supporting structure, (columns, beams), core layout (stability elements) ▪ Roof level: Typical layout indicating structure, including helipad (Acute Adults & Childrens)	
2.23	1:200 Energy Centre Services Layout and Plant Room locations	
2.24	Schematic for Main Services incoming routes and distribution from Energy Centre to Main Hospital Building – tunnel cross sections (1:50 scale)	
2.25	MTHW Schematic	
2.26	LTHW Schematic	
2.27	Hot & Cold Water Services Schematic	
2.28	Filtered Water Schematic	
2.29	Renal Water Schematic	
2.30	Medical gases Schematic	
2.40	Sprinklers Schematic	
2.41	Fire alarm & damper controls Schematic	
2.42	BMS Schematic	
2.43	MV Power Schematic	
2.44	LV Schematic	
2.45	Air supply Schematic, including additional sketches for Theatre supply	
2.46	Air extract Schematic, including additional sketches for Theatre supply	
2.47	Air Treatment Schematic (cooling), including additional sketches for Theatre supply	
3.0 Design Strategy	(Strategies to be up to 1,500 words per strategy, unless	

	noted otherwise, and may be supplemented with sketches/illustrations/tables)	
3.1	Architectural design strategy (up to 4,000 words)	
3.2	Wayfinding strategy	
3.3	Arts Strategy	
3.4	Acoustic Report indicating the following information:- ▪ Specialist Acoustic Engineer's report providing a clear demonstration of compliance with HTM 08-01 ▪ Outline principles adopted underlying bidder approach to acoustics with particular regard to issues around items such as rooftop helipad, atrium etc	
3.5	FM Strategy (up to 4,000 words) This to identify and address (as a minimum): ▪ Goods In and Out proposals for deliveries and removal off site ▪ Distribution proposals (hospitals and to lab building) from delivery to site to end user stations and back to location of removal off site ▪ Separation of flows ▪ Systems and technologies ▪ Interface of systems ▪ Resilience of systems and proposals ▪ External façade access (cleaning and maintenance/replacement) solution	
3.6	Main incoming utilities design / connection strategy	
3.7	Water Services & Drainage design strategy	
3.8	Heating design strategy	
3.9	Ventilation & air treatment design strategy, including statements on odour control from adjacent sewage works	
3.10	Mains power distribution design strategy	
3.11	Sub-mains power distribution design strategy	
3.12	Lighting design strategy, including reference to energy and aesthetics to improve patient experience	
3.13	Lift Engineering design strategy (to include lift movement analysis)	
3.14	Communication design strategy	
3.15	Protective systems design strategy	
3.16	Medical gases design strategy	
3.17	Pneumatic tube system design strategy	
3.18	Fire engineering design strategy	
3.19	Plant room design strategy	
3.20	Energy strategy including approach to renewables, sustainability	
3.21	BREEAM scoring schedule	
3.22	Helipad M&E services design strategy	
3.23	Maintenance & major plant and equipment replacement strategy – including resilience provisions and strategy (up to 3,000 words)	
3.24	Building Services Commissioning, Handover, Training strategy (up to 4,000 words)	
3.25	Drainage strategy including:- ▪ Methodology for Addressing the requirements of the Hydraulic Assessment and Flood Risk Assessment as scoped out on the Drainage Impact Assessment and Strategy Report ▪ SUDS and Drainage Strategy statement which recognises the requirements as outlined in the Drainage Impact and Strategy Report	
3.26	Structural Design Strategy which should include:-	

	▪ Outline description demonstrating understanding of: topography, geology, soil conditions, contamination, ground water, history, services ▪ Demonstrate outline principles or design including, general description, stability, joints, floors, vertical structure, foundations, stairs and ramps, retaining walls, earthworks, slope stability, drainage, external works etc. ▪ Design Standards and Sources of Reference (Codes of Practice and Standards)	
3.27	Demolitions Strategy which should include/identify: ▪ Separation from new hospital, labs, energy centre and other buildings – safe pedestrian and traffic routes ▪ Access routes for construction traffic and site accommodation ▪ Protective measures – live services, noise, dust, removal of debris off site	
3.28	Diversions Strategy which should include/identify ▪ Culvert diversion ▪ Other diversions ▪ Medical gas line workplans	
4.0 Specifications		
4.1	Substructure	
4.2	Frame	
4.3	Upper Floors	
4.4	Roof Structure	
4.5	Roof coverings	
4.6	Roof drainage	
4.7	Roof lights	
4.8	Stair structure	
4.9	Stair finishes	
4.10	Stair balustrades & handrails	
4.11	External walls	
4.12	Windows	
4.13	External doors	
4.14	Internal walls and partitions	
4.15	Internal doors	
4.16	Wall finishes	
4.17	Floor finishes	
4.18	Ceiling finishes	
4.19	Fittings, fixtures & furniture	
4.20	Soft furnishings	
4.21	Works of Art	
4.22	Equipment	
4.23	Sanitary appliances (in relation to Group 1 appliances identified in the Equipment List)	
4.24	Services equipment	
4.25	Disposal installations	
4.26	Mains Water installations	
4.27	Cold water services	
4.28	Hot water services	
4.29	Steam & condensate	
4.30	Heat source	
4.31	Space heating	
4.32	Space cooling	
4.33	Ventilating system	
4.34	Electric source & mains	
4.35	Electric power supplies	
4.36	Electric lighting & fittings	

4.37	Gas installations	
4.38	Lift installations	
4.39	Sprinkler installations	
4.40	Fire-fighting installations and alarms	
4.41	Lightning protection	
4.42	Communication installations	
4.43	Special installations– Renal Water, Filtered Water	
4.44	Special installations – Building management System and Asset Management System	
4.45	Special installations– Pneumatic tube system	
4.45a	Special installations – Security systems, access control, CCTV and intruder alarms	
4.45b	Special installations – Other (e.g. AGVs)	
4.46	Roads, car parks, pavements, cycle paths	
4.47	Soft landscaping	
4.48	Site enclosure	
4.49	External fittings & furniture	
4.50	Drainage	
4.51	Water Mains	
4.52	Fire Mains	
4.53	Heating Mains	
4.54	Gas Mains	
4.55	Electric Mains	
4.56	Site Lighting	
4.57	Minor building works	
5.0 Component / Product & Manufacturer Schedule		
5.1	Boilers	
5.2	Calorifiers	
5.3	Pumps	
5.4	Switchgear	
5.5	AHU's	
5.6	Fans	
5.7	Internal Doors	
5.8	Ironmongery	
5.9	External doors & screens	
5.10	Roof Coverings	
5.11	Cladding / Curtain Walling / Windows	
5.12	Vinyl Flooring	
5.13	Carpet	
5.14	Ceiling systems	
5.15	CHP systems	
5.16	Generators	
5.17	Chillers	
5.18	Light fittings	
6.0 Equipment Schedule		
6.1	Proposed Equipment Schedule (this to be the schedule issued by the Board priced. No variant or alternative schedule to be utilised or considered).	
7.0 SHTM Compliance Statement		
7.1	Confirm compliance with required SHTM's and other standards noted in the ERs (Section 5) and state how compliance is being achieved (this to take the form of both Table 2 and Table 3 (5.1.2 and 5.1.3 of Vol 2/1 respectively) being reproduced and column(s) added confirming compliance and stating how compliance is being achieved).	

	Further, a compliance statement with regard each of the Additional Guidance listing entries at 5.1.4 of Volume 2/1 is also required.	
8.0 ADB Compliance Statement		
8.1	Confirm compliance with requirements of ADB sheets issued	
8.2	Confirm compliance with environmental matrix issued, return completed carbon tracker and evaluation matrix	
9.0 Programme		
9.1	Master programme	
9.2	Stage 1 Laboratory sub-programme	
9.3	Stage 2 FBC Stage sub-programme	
9.4	Stage 3 Construction stage sub-programme	
10.0 Project / Site Management		
10.1	Project Execution Plan comprising:-	
	▪ Management structure	
	▪ Management Staff – key personnel & structure	
	▪ Design Staff - key personnel & structure	
	▪ Temporary Accommodation & Welfare	
	▪ Logistics (through timeline on site)	
	▪ Traffic Management	
	▪ Car Parking	
	▪ Staff Movement (construction operatives)	
	▪ Site Security	
	▪ Site Safety, including Construction Phase Health & Safety Plan	
	▪ Site interfaces	
	▪ Waste management	
	▪ Community engagement and benefits	
	▪ Initiation of NEC working practices and cascade of this through supply chain	
11.0 Contract Conditions		
11.1	A detailed and full mark-up of the Draft Contract; An electronic version, capable of being read in Microsoft Word 2000, of the Draft Contract; Details of any of the proposed conditions contained in the Draft Contract that the Bidder is not prepared to accept and the reasoning behind the Bidder's position;	
11.2	Details of any of the proposed conditions contained in the Draft Contract that the Bidder is not prepared to accept and the reasoning behind the Bidder's position;	
11.3	A letter of support from the Bidders' insurers or other form of evidence demonstrating that the Board's expectations relative to insurance cover will be met.	
11.4	Performance Bond	
11.5	Performance Damages	
11.6	Collateral Warranties	
12.0 Financial		
12.1	Statement on Commercial proposals, operation of Target Pricing, Open Book audit	
12.2	Target & Maximum Price Proposals ▪ Overall Project ▪ Stage 1 New Labs ▪ Stage 2 FBC Design ▪ Stage 3 Design & Construction New Hospitals	

12.3	Detailed Elemental Cost Plan, comprising elemental summary with supporting detail comprising work items, approximate quantities, rates etc ▪ Stage 1 New Labs ▪ Stage 2 FBC Design ▪ Stage 3 Design & Construction New Hospitals ▪ Stage 3A Hard & Soft Landscaping Completion	
12.4	Priced Activity Schedules & Supporting Monthly Cashflows ▪ Overall Project ▪ Stage 1 New Labs ▪ Stage 2 FBC Design ▪ Stage 3 Design & Construction New Hospitals ▪ Stage 3A Hard & Soft Landscaping Completion	
12.5	Payment proposals	
12.6	Priced Risk Register & Risk Allocation ▪ Stage 1 New Labs ▪ Stage 2 FBC Design ▪ Stage 3 Design & Construction New Hospitals ▪ Stage 3A Hard & Soft Landscaping Completion	
12.7	Incentivisation Proposals Pain / Gain ▪ Stage 1 New Labs ▪ Stage 2 FBC Design ▪ Stage 3 Design & Construction New Hospitals & Stage 3A Hard & Soft Landscaping Completion	
12.8	Whole Life Cycle Cost Estimate for 30 year period detailing, replacement costs & timescales, planned & preventative maintenance, energy usage including:- ▪ Overall Project Summary ▪ Stage 1 New Labs ▪ Stage 3 Construction New Hospitals ▪ Stage 3A Hard & Soft Landscaping Completion Energy costs assumptions should be clearly stated	

Appendix B Qualitative Scoring Schedule

B

ITPD Evaluation Criteria	Individual Weighting	Technical Weighting
DESIGN	**550**	**50**
Space	**20**	
The design should achieve appropriate clinical space standards as required by the ITPD Schedule of	10	
The circulation, communication & plant space should be adequate and optimised	10	
Drawing information:-	**250**	
1:500 scale Masterplan proposals	30	
1:500 departmental relationship drawings for all levels indicating functional relationships & main circulation routes	45	
1:200 departmental layouts reflect the required space standards and functionality	40	
1:200 departmental drawing for Accident & Energency Department, fully Annotated	10	
1:200 departmental drawing for Adult Theatres Department, fully Annotated	10	
1:200 departmental drawing for Adult Ward, fully annotated	10	
1:200 departmental drawing for Childrens Ward, fully annotated	10	
1:200 departmental drawing for Childrens A&E, fully annotated	10	
1:50 room layout and wall elevations fully developed	10	
1:200 Elevations – incorporating external signage proposals	5	
1:200 Exemplar sections	5	
3D images / perspective (internal & external) indicating the following:-		
▪ Architectural vision – space, height, form, composition, scale, character and use of materials		
▪ Hospital Main Entrance / atrium / public space proposals / visuals	20	
1:500 site hard & soft landscaping proposals indicating:-		
▪ Soft landscaping strategy		
▪ Hard landscaping strategy		
▪ Car Parking arrangements with distribution of spaces and use identified		
▪ Areas of differing Carriageway Construction		
▪ Road, footway and cycle way geometry		
▪ Indicative Signalised layouts at external roads		
▪ Retention / protection of existing trees		
▪ Incorporation of art		
▪ Special features		
▪ Courtyards	10	
Finishes Schedule for 11 Departments, and key circulation & communication routes, and main entrances	10	
Door & ironmongery Schedule for 11 Departments, key circulation & communication routes, and main entrances	10	
Roof level: Typical layout indicating structure, including helipad (Acute Adults & Childrens)	5	
Architectural design strategy statement in support of drawing information	5	
Wayfinding strategy	5	

ITPD Evaluation Criteria	Individual Weighting	Technical Weighting
Design Strategy	**155**	
Acoustic Strategy & Report	5	
Arts Strategy	5	
Fire engineering design strategy including drawings	5	
Structural Engineering design strategy including outline design drawings demonstrating structural philosophy	5	
Drainage design strategy including 1:1250 (or greater) plans showing drainage provision in support of SUDS and Drainage Strategy1:500 scale plans showing:-		
▪ Layout of roads and buildings		
Layout of sewers, outfalls, underground storage, and SUDS features	5	
Main incoming utilities design / connection strategy including Schematic for Main Services distribution	5	
Water Services Strategy including Hot & Cold Water Services Schematic, Filtered Water Schematic and Renal Water Schematic	5	
Heating design strategy including MTHW Schematic & LTHW Schematic	10	
Ventilation & air treatment design strategy including Schematic drawings	10	
Mains and Sub-mains power distribution design strategy including MV Power Schematic and LV Power Schematic	10	
Lighting design strategy	10	
Lift Engineering design strategy	10	
Communication design strategy	5	
Protective systems design strategy including Sprinklers schematic and Fire alarm & damper controls	5	
Medical gases design strategy including schematic drawings	5	
Pneumatic tube system design strategy including schematic drawings	5	
Plant room design strategy	5	
Control systems including BMS schematic	5	
Helipad M&E services design strategy	5	
Maintenance & major plant replacement strategy	35	
Sustainability	**75**	
Sustainable design statement	25	
BREEAM scoring schedule	25	
Energy strategy including approach to renewables, sustainability	25	
AEDET Review	**50**	
Overall AEDET review score	50	
Design Score	**550**	**50**

ITPD Evaluation Criteria	Individual Weighting	Technical Weighting
DELIVERABILITY AND APPROACH	**275**	**30**
Project management:	**90**	
Structure & approach	20	
Site Management Team;	5	
Design Team;	5	
Community Engagement	60	
Construction Approach:	**20**	
There should be minimal impact on service delivery;	10	
The construction exploits any innovation benefits from standardisation and prefabrication;	10	
Site Management:	**80**	
Temporary Accommodation proposals	15	
Logistics proposals	10	
Traffic management	10	
Car Parking	10	
Staff Movement	5	
Site Security & Safety	10	
Site interfaces	10	
Waste Management	10	
Programme:	**40**	
Master programme	5	
Stage 1 Laboratory programme	10	
Stage 2 FBC sub programme	10	
Stage 3 Construction programme	10	
Stage 3A Hard & landscaping completion programme	5	
Commissioning & Handover	**45**	
▪ Commissioning plans, including Building Services testing & commissioning	15	
▪ Handover process	15	
▪ Extended defects requirement	15	
Logistics Score	**275**	**30**

ITPD Evaluation Criteria	Individual Weighting	Commercial Weighting
COMMERCIAL	**175**	**20**
Contract:	**25**	
Compliance with Contract Conditions	5	
Insurances	5	
Performance Bond	10	
Collateral Warranties	5	
Pricing	**150**	
Statement on Commercial proposals, operation of Target Pricing, Open Book audit	5	
Target / Maximum Price assessment	20	
Priced Risk Register & Risk Allocation	55	
Stage 1 Laboratory Design & Construction detailed elemental cost & resource plans	5	
Stage 1 Laboratory Design & Construction Priced Activity Schedules, Cashflow & Payment Proposals	5	
Stage 2 FBC Stage Priced Activity Schedules including supporting detailed costed resource plan,	10	
Stage 3 Adult / Childrens / Site Works Design & Construction detailed elemental cost & resource plans	5	
Stage 3 Adult / Childrens / Site Works Design & Construction Priced Activity Schedules, Cashflow &	5	
Project Whole Life Cycle Cost Plan	40	
Total Commercial Score	**175**	**20**

Appendix C Legal Evaluation

C

Purpose of Legal Evaluation

The legal evaluation has two primary functions:

- to give comfort as to deliverability - demonstrated by the robustness of the legal submission and mark-up of the draft Contract and a constructive approach to resolving complex issues; and

- to better inform the financial or technical evaluations.

Legal Evaluation Criteria

(i) The legal evaluation will focus on the detailed mark-up of the draft Contract including the schedules, Appendices, Contract Data Part 1 and Contract Data part two (together, the "Contract Documents") submitted by the Bidders.

(ii) Bidder's responses to the Contract Documents will be evaluated in accordance with the following criteria (of equal importance):-

- the extent to which the Bidder has accepted the conditions set out in the Contract Documents and the extent to which the Bidder has provided detailed comments on the Contract Documents and a constructive approach to issues which it does not accept;

- the extent to which the Bidder demonstrates that it understands and accepts the risks inherent in the Project and the extent to which the Bidder's qualifications (if any) to risk allocation position set out in the Contract Documents are acceptable to the Board; and

- the sufficiency of Bidder's insurance proposals.

How the Legal Evaluation will be conducted

Firstly, the legal evaluation team will evaluate the individual responses against the legal evaluation criteria.

Thereafter, the legal evaluation team will produce a detailed commentary on the mark-up of the Contract Documents which will allow the legal evaluation team to:

- inform the technical and financial evaluation teams of any amendment to the Contract Documents which will have an impact on the price/risk profile or service being offered;

- identify any deficiencies in the legal submission which they consider should be brought to the attention of the Bidder prior to completion of the evaluation to give the Bidder an opportunity to clarify and ensure that tenders are compliant from a legal submission point of view(recognising the constraints on the degree of clarifications that might be requested under the Competitive Dialogue process);

- clearly identify any commercial issues which in the view of the legal evaluation team should be clarified with tenderers prior to appointment of Preferred Bidder. Clarification will be required when the Bidder 's position is not clear; and

- score the legal submissions taking all of the above into account, in accordance with the evaluation scoring matrix set out elsewhere in this ITPD.

Legal Evaluation Report

The legal evaluation team will complete a comprehensive legal report for each of the tenders evaluated.

Each legal report will contain the following:

- a summary of the legal submission including confirmation that the legal submissions were compliant;
- a summary of the quality of the responses in the legal submission against the legal evaluation criteria set out in this ITPD;
- a detailed commercial commentary on the mark-up of the Contract Documents which will identify:
    - the points considered relevant to the financial evaluation (which will have already been passed to the financial evaluation team);
    - the points relevant to the technical evaluation (which will have been passed to the technical evaluation team);
    - a list of key commercial issues which, in the legal evaluation team's view, should be addressed/developed prior Contract Award (as appropriate).

In addition, at an early stage in the process, the legal evaluation team will have identified any deficiencies in the legal submission which they consider should be brought to the attention of the tenderer prior to completion of the evaluation to give the Bidder an opportunity to clarify and ensure that tenders are compliant from a legal submission point of view.

The legal evaluation team will also rank the Bids according to the quality of their responses against the legal evaluation criteria.

Bidder mark-up to the Contract Documents

Legal submissions will be assessed on how thorough and constructive the Bidder's responses are. The key concern here is to satisfy ourselves that if a particular Bid is selected on the basis of the overall evaluation, that selection is made on a full understanding of their position on **all** commercial issues and on the basis of us being confident that they have thought through the implications of all commercial aspects of their Bid.

Where contract conditions are not acceptable to Bidders, weight will be given to responses which represent constructive alternatives rather than simple rejections.

Conclusion

The key issue in the tender evaluation to meet the “most economically advantageous” test remains identifying the compliant affordable Bid which offers the Board the best balance between price and quality. Much of the legal evaluation therefore focuses on assisting that process by identifying issues which are relevant to the overall evaluation but which are expressed by the Bidder through the legal submission documents.

Appendix D Financial Evaluation

D

1. Background to the Financial Evaluation

1.1 Overview of the Approach

The use of competitive dialogue requires the appointment of the successful bidder to be made on the basis of the most economically advantageous tender.

In order to make this assessment NHS Greater Glasgow & Clyde has set out an evaluation method which considers the qualitative aspects of the tenderer's proposals in ratio to the expected cost of the project. The bidder demonstrating the best ratio of outputs to cost will be deemed successful.

The evaluation approach has been set out in the information provided to bidders.

1.2 Financial Evaluation

The evaluation of the pricing proposals is carried out as part of the commercial assessment of bids. In addition it is will consider the pricing proposals submitted with the aim of establishing the expected cost to the Board of the proposals.

1.2.1 Pricing and Cost Structure

1.2.1.1 Price Structure

In order to understand the approach to evaluation it is necessary to consider the pricing mechanism set out in the contract. The key elements are

Target Price – Bidders are required to provide their best estimate of target price being made up of best estimate of cost plus, with what is in effect a lump sum profit amount

Pain/Gain percentages – the proportion by which cost variations from those used to establish the target price will be met by both the board and the bidder

Maximum Price – The price after which all additional costs will be the responsibility of the bidder

1.2.1.2 Other Costs

It is possible that the pricing proposals will result in costs being borne directly by the board. For example should the bidder propose a cap on cost inflation which if exceeded would not form part of the normal pain/gain mechanism. Costs such as these will be included in the valuation as a direct cost consequence of the bidders proposals

2. Approach to financial evaluation

2.1 Aim of the Approach

The key aim of the approach is to establish the most likely costs to NHSGG&C of the bidders proposals and to use those estimated cost to establish the most economically advantageous tender.

2.2 Stages of Evaluation

2.2.1 Affordability

Bids that breach the stated affordability thresholds of NHSGG&C may be excluded from further analysis

2.2.2 Establishing expected outturn prices

The target price will be based upon the bidder's best estimate of the final costs of the project plus a lump sum profit. The pricing structure recognises that this is an estimate and therefore allows for a predetermined price variation process to be applied.

The causes for price variation will be set out in the risk registers prepared by each bidder. This will be used to establish the expected outturn price by applying statistical techniques such as but not limited to Monte Carlo Analysis.

It will be for each bidder to set out what they believe their post mitigation risks will be that will drive the price variation. If however it is apparent that this estimate is materially different from what me be expected in normal circumstances, this will be clarified with the bidder and additional sensitivity testing may be applied.

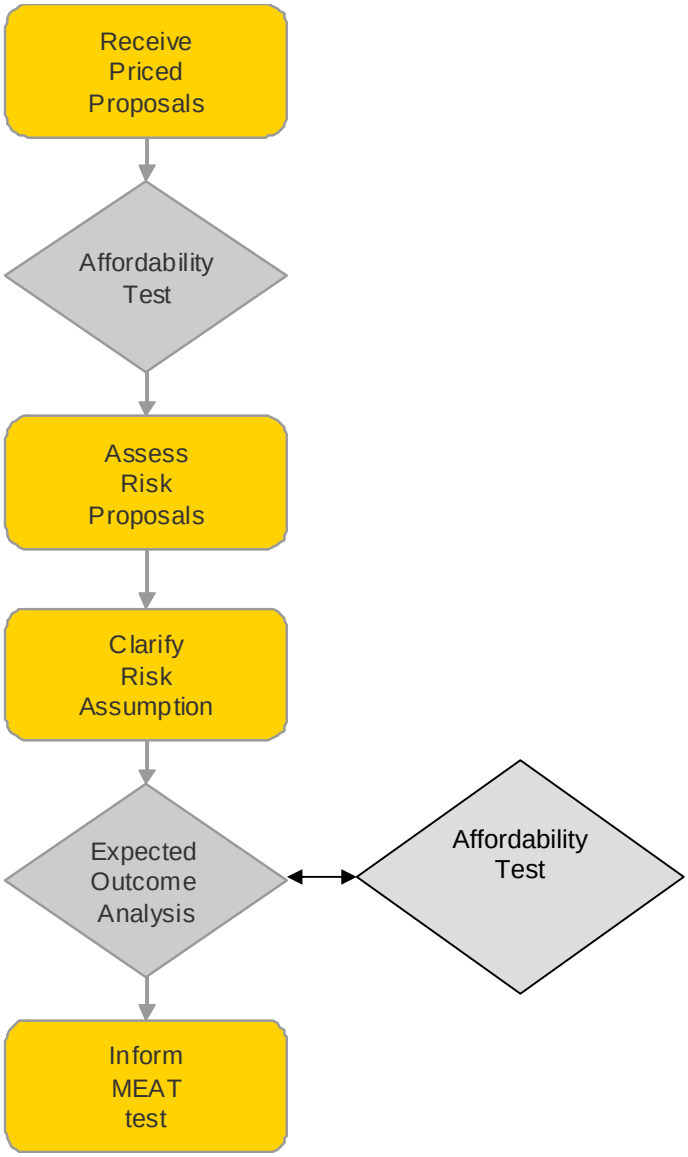
Categories of Risk Impact

In assessing the risk impact the following categories will be considered.

a. Those risks borne by the bidder which may impact the final outturn price and ultimately the pain/gain and max price mechanism

b. Those risks borne solely by the board

The following diagram sets out the processes that will be followed



Specific Treatment of Inflation

A risk common to all bidders on projects with extended periods of delivery is the impact of inflation. Bidders are required to set out their own approach to inflation, but for evaluation purposes NHSGGC has taken the view that inflation will be evaluated on the basis of 2.5% per annum, this being the government' target for RPI over the period of the project.

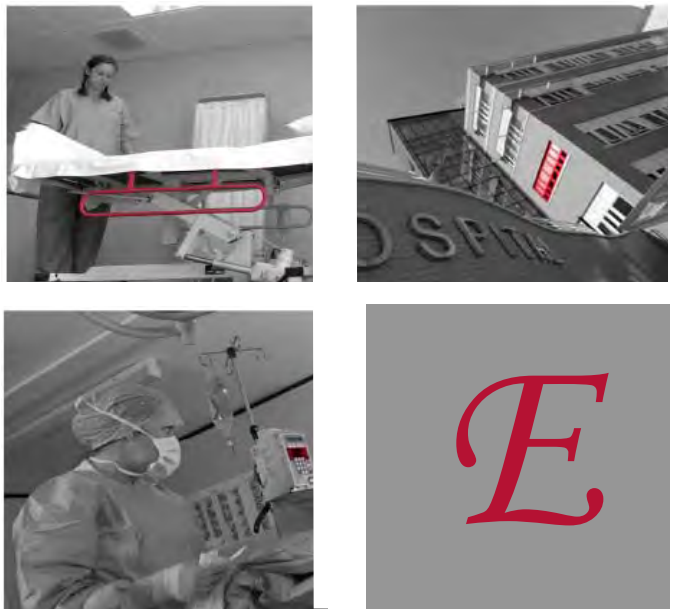
2.2.3 Other aspects of Financial Evaluation

In order to obtain a full picture of the financial elements of the bids, we will consider factors such as

- The quantum of difference between the bidders target and maximum price
- Any caveats or exclusions submitted by bidders, and there possible impact upon the risks borne by the board

► The clarity of the bidders pricing proposals and the degree to which they could be practicably implemented

Appendix E Board Evaluation Process / Structure



New South Glasgow Hospitals and Laboratory Project

New South Glasgow Hospitals Project Evaluation Process and Structure

The purpose of this paper is to set out the evaluation programme, process and teams for the New South Glasgow Hospitals and Laboratory Project. (It should be noted that Volume 3 of the Invitation to Participate in Dialogue (ITPD) (appendix A) sets out the bid deliverables which require to be evaluated.)

Evaluation Process

The evaluation process contains all activities required to provide the Board with a robust evaluation mechanism to ensure confidence that the evaluation will be appropriate, accurate and auditable. The evaluation of the tenders will be carried out by those who have been involved in compiling the ITPD and/or involved with the bidders in the Competitive Dialogue Process. This will ensure that tenders will be considered by those who have the most knowledge and understanding of the Board's requirements and who have also been providing clarity to the bidders in Competitive Dialogue.

The bid deliverables split naturally into four evaluation groupings and therefore there will be four evaluation groups, these being Design, Logistics, Laboratory Block and Commercial. A training seminar for all those involved in the process based on the information contained in the ITPD is arranged for 21st August 2009.

Following receipt of the tenders for the works on September 11th 2009, the evaluation groups will commence the initial evaluation process. The whole evaluation process will take approximately 5 weeks and will conclude on the 16th October 2009. The main parts of the evaluation process are:

1. Check all information is complete (Request missing information if required);
2. Evaluation groups consider all tender information for their groupings;
3. Bidders attend evaluation meeting to present their proposals and answer any questions from evaluation groups;
4. The evaluation groups carry out their initial evaluation of their respective sections of the tenders and complete an initial scoring in line with Volume 3, appendix A of the ITPD;
5. During the evaluation period there may be a need for the evaluation group leads to meet with a sub-group of the New South Glasgow Hospitals and Labs Project Executive Board (NSGH&LPEB) to provide information about the progress of the evaluation of tenders and allow them to request more detail on any particular aspects of that process. The proposed dates for these meetings are 30th September and 13th October 2009.
6. The Commercial Group will carryout a review of all outputs from the evaluation groups (provided by the Group Leads). The Commercial Group will complete a moderation exercise to ensure consistency of approach, scoring and reasoning of the initial evaluation and scoring of each tender submission.
   The Commercial Group will complete the final scoring of the tenders and will rank the tenders and establish a preferred bidder.
   A comprehensive evaluation report will be completed by the 16th October 2009.
7. After the completion of the evaluation process the Commercial Group will present its conclusions to a seminar/workshop of the NSGH&LPEB on 22nd October 2009 to provide them with a comprehensive understanding of the tender submissions to enable them to make an informed judgement at their formal meeting to be held on the 26th October 2009. The NSGH&LPEB will consider all relevant information and, if they agree with the recommendation of the Commercial Group, take forward the formal recommendation to the NHS Greater Glasgow & Clyde Board Performance Review Group.

Remit and Groups

a) Evaluation Groups
- Carry out analysis of all information for their groupings provided by the Bidders and seek any clarifications regarding any missing information.
- Complete a detailed review and initial evaluation of each submitted bid (as in ITPD Volume 3) and compile summary of bid compliance with expected deliverables. This to be completed for the four work-streams which have been the subject of Competitive Dialogue (i.e. Design, Labs, Logistics and Commercial).
- Write up a detailed evaluation report on all aspects of their work stream.

b) Commercial Group
- Carry out final evaluation review of all bid submissions and conclude the evaluation scoring assessment (as in ITPD Volume 3).
- Determine ranking of each bid.
- Write up detailed summary evaluation report of all aspects of the evaluation of the bids
- Present recommendations to the NSGH&LPEB.

c) New South Glasgow Hospitals & Labs Project Executive Board
- Receive and consider the recommendation from the Commercial Group and make a decision on the successful bidder to go forward as the project's design and construction partner.
- Make formal recommendation to NHS Greater Glasgow & Clyde Board Performance Review Group.

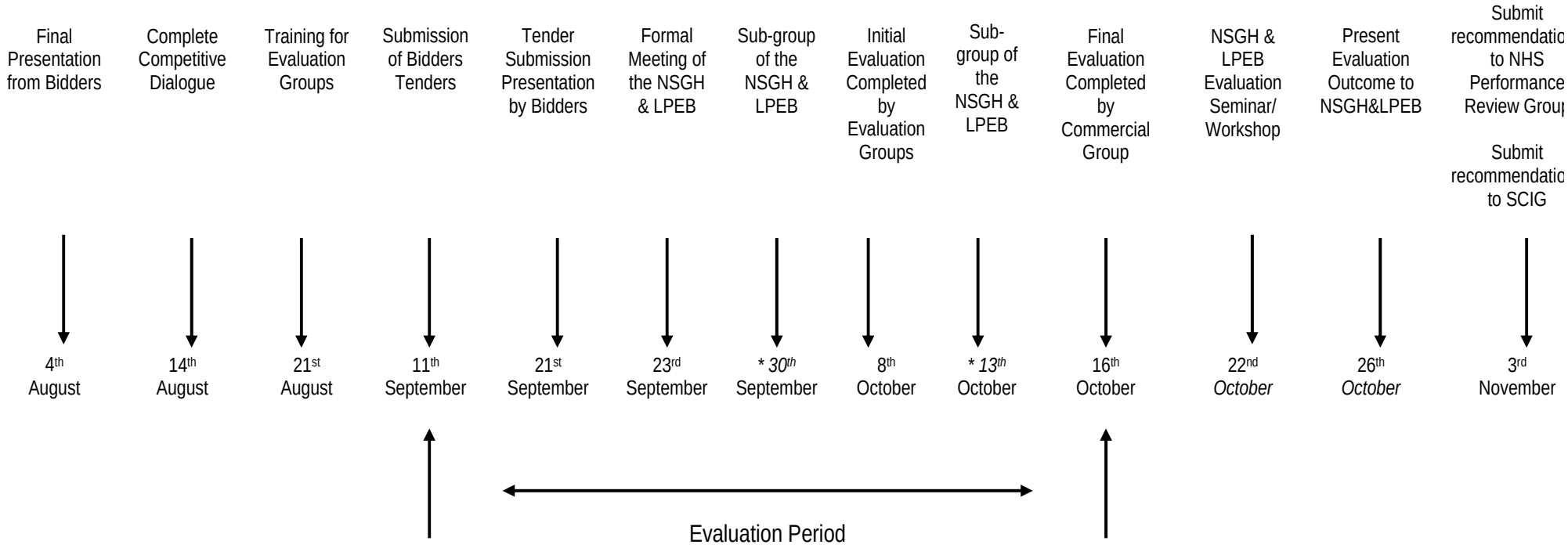
Membership of Groups

Table 1 shows the membership of each evaluation group.

TABLE 1 - BOARD EVALUATION GROUPS
a) Technical Evaluation Groups

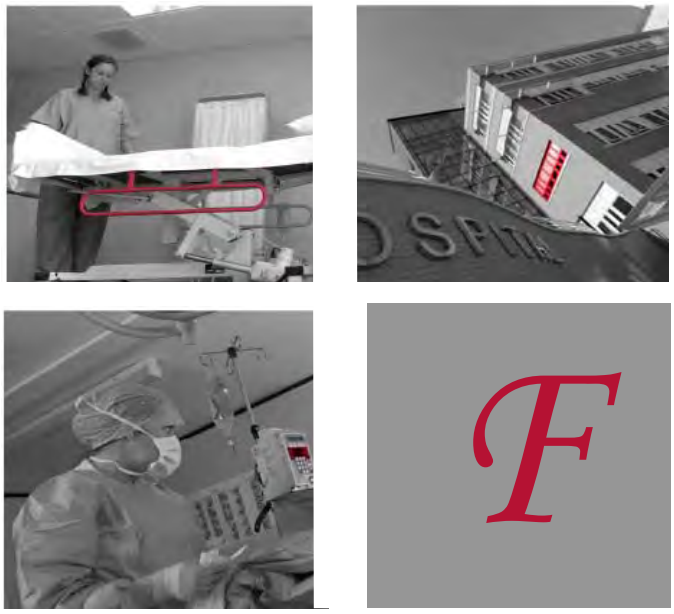
GROUP	DESIGN	LOGISTICS	LABS	COMMERCIAL
BOARD	Alan Seabourne Alex McIntyre Annette Rankin Fiona McCluskey Frances Wrath Heather Griffin Hugh McDerment Mairi Macleod Mark McAllister Mary Ann Kane Morgan Jamieson Peter Moir Stephen Gallacher	Alan Seabourne Alex McIntyre Frances Wrath John Green Peter Moir	Alan McCubbin Alan Seabourne Alex McIntyre Annette Rankin Frances Wrath Hugh McDerment Jim Crombie (Lead) Isabel Ferguson Mary Ann Kane Peter Moir Dr Margaret Burgoyne Dr Rachel Green	Alan McCubbin Alan Seabourne Alex McIntyre Peter Gallagher Peter Moir
TA ADVISORS	David Hall (Lead) Graham Annandale Harry Smith Iain Buchan John Bushfield Mark Baird Robert Menzies Susan Logan	David Hall (Lead) Mark Baird	Douglas Ross Graham Annandale Neil Robson Raj Deb Stewart McKechnie	Douglas Ross (Lead) Jim Hackett Juliet Haldane Michael McVeigh Simon Fraser

Appendix 1 – EVALUATION PROGRAMME



(- provisional date)*

Appendix F Certificates



Part 1 – Confidentiality Agreement

Name of bidder:

We undertake that we shall keep confidential and will not use for our own purposes or reveal to any person, firm or company the information contained in or sent with the ITPD issued by the Board in relation to the Project or which is made available in connection with any further enquiries in relation to that Project (the "Information Provided") unless we obtain in each case the prior written consent of the Board. Such consent shall not be required where the Information Provided is:

(i) disclosed on a "need to know" basis to such of our directors, officers, employees or advisers who are directly involved with the preparation of bids on our behalf provided that we shall inform each person to whom the Information Provided is made aware of the confidential nature of the Information Provided and the obligations under this Confidentiality Agreement and has given an undertaking at the time of receipt of the Information Provided to keep such information confidential;

(ii) in the public domain or shall come into the public domain otherwise than by breach of this undertaking or any other undertaking;

(iii) made available to us by a third party who is entitled to divulge such information and who is not under any obligation of confidentiality in respect of such disclosure; or

(iv) required to be disclosed by any applicable law provided that the party disclosing the information shall notify the Board of the information to be disclosed (and of the circumstances in which the disclosure is alleged to be required) as early as reasonably possible before such disclosure must be made and shall take all reasonable action to avoid and limit such disclosure.

We undertake at the request of the Board that we shall immediately return to the Board all Information Provided and all and any copies or any part thereof including any information derived or produced partly or wholly from the Information Provided which is in a tangible form. If any such information is not in a tangible form, the bidder shall destroy or permanently erase that information and all and any copies or part thereof including any information derived or produced partly or wholly from the Information Provided.

Without prejudice to any other rights or remedies which the Board may have, the bidder acknowledges and agrees that (a) damages would not be an adequate remedy for any breach by the bidder of the provisions of this undertaking and (b) the Board shall be entitled to the remedies of interdict and other relief for any threatened or actual breach of this undertaking.

Signed for and on behalf of [**bidder**] by [**name of signatory and nature of authority to sign**] and [**name of signatory and nature of authority to sign**] on the day of 2009.

……...

……...

NOTE: (i) Where the bidder is a company, to be signed by two directors or by a director and the secretary of the company, such persons being duly authorised for that purpose.
(ii) Where the bidder is a consortium yet to be established as a company, to be signed by persons duly authorised by each of the prospective members of the consortium.

Part 2 – Certificate of Non-Canvassing

Name of bidder:

We hereby undertake that we have not (nor will we in the future):

1. Committed any offence under the Prevention of Corruption Acts 1889 to 1916; or

2. Contacted any other officer of the Board about any aspect of the Project, except as authorised by the ITPD, including (but without limitation) for the purposes of discussing the possible transfer to the employment of the Bidder of such officer for the purpose of the Project or for soliciting information in connection with the Project; or

3. Offered any inducement, fee or reward to any member or officer of the Board or any person acting as an advisor for the Board or in connection with the project; or

4. Canvassed any of the persons referred to in paragraph 3 above in connection with the Project.

In this Certificate the word "person" includes any persons and any body or association, corporate or unincorporate and "agreement" or "arrangement" include any such transactions, whether formal or informal, legally binding or not.

Signed for and on behalf of [bidder] by [name of signatory and nature of authority to sign] and [name of signatory and nature of authority to sign] on the day of 2009.

……...

……...

NOTE: (i) Where the bidder is a company, to be signed by two directors or by a director and the secretary of the company, such persons being duly authorised for that purpose.
(ii) Where the bidder is a consortium yet to be established as a company, to be signed by persons duly authorised by each of the prospective members of the consortium.

Part 3 – Certificate of Non-Collusion

Name of bidder:

We certify that we will submit a bona fide bid and that we have not adjusted and will not adjust our bid in agreement or by arrangement with any other person.

We also certify that we have not done and we undertake not to do at any time during the competition any of the following acts:

1. Entered into any agreement with any other person with the aim of preventing bids being made or as to the fixing or adjusting of the amount of any bid or the conditions on which any bid is made;

2. Caused or induced any person to enter into such an agreement as is mentioned in paragraph 1., above, or to inform us of the amount or the approximate amount of any rival bid for the Project; or

3. Informed any other person, other than the person calling for this bid, of the amount or the approximate amount of our bid, except where the disclosure, in confidence, of the amount of the bid was necessary to obtain quotations necessary for the preparation of the bid, for insurance, for performance bonds and/or contract guarantee bonds or for professional advice required or the preparation of the bid; or

4. Offered or agreed to pay or give any sum of money, inducement or valuable consideration directly or indirectly to any person for doing or having done or causing or having cause to be done in relation to any other bid or proposed bid for the works any act or omission; or

5. Canvassed any other persons referred to in paragraph 1., above, in connection with the project.

We also undertake not to procure the doing of any of the acts mentioned in paragraphs 1 to 5 above before the hour and date specified for the return of the bid nor (in the event of the bid being accepted) shall we do so while the resulting contract continues in force between us (or our successors in title) and the Board.

In this Certificate, the word “person” includes any persons and any body or association, corporate or unincorporate, and “agreement” or “arrangement” include any such transactions, whether formal or informal, legally binding or not.

Signed for and on behalf of [**bidder**] by [**name of signatory and nature of authority to sign**] and [**name of signatory and nature of authority to sign**] on the day of 2009.

…….

... ……..

NOTE: (i) Where the bidder is a company, to be signed by two directors or by a director and the secretary of the company, such persons being duly authorised for that purpose.
(ii) Where the bidder is a consortium yet to be established as a company, to be signed by persons duly authorised by each of the prospective members of the consortium.

From: Emma White
To: Neil Evans; Terry Sullivan; Mark Drane; Matthew Cromack; Garry Howard; Graham Harris; Anna Brown; Paul Britton; Scott McCallum; "Bill McGaugie"; "spardy[redacted]"
Subject: FW: Haemato-oncology - revised schedule.
Date: 17 March 2010 13:04:05
Attachments: haemo-oncology.xls

All,

Please find attached revised SoA for the Haematology-Oncology Ward.

Neil/Matt – I think given the time constraints that a hand drawn sketch to show this would suffice for the next meeting. Can you let me know how long you need (given the meeting is next Thursday 25th March) so I can advise Heather when she can expect a drawing? Thanks!

Kind regards,

Emma

From: Griffin, Heather [redacted]
Sent: 17 March 2010 12:44
To: Emma White; David Bower
Cc: Moir, Peter; Wrath, Frances; Seabourne, Alan
Subject: FW:Haemato-oncology - revised schedule.

Dear Emma,

Please find the revised schedule for Haemato-oncology enclosed. As discussed Haemato-- oncology are reducing from 14 inpatient beds and a day case area to 10 beds and no day case area. However ,as highlighted on the attached schedule, please note that the areas released by Haemato-oncology (ie 4 beds and day case area) should be ring fenced on the layouts for future development.

If you require any further information please do not hesitate to contact us.

Many Thanks

Heather

From: Wrath, Frances
Sent: 17 March 2010 12:18
To: Griffin, Heather
Subject:

Heather

Revised Haemato-oncology

Frances

****
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HAEMATO-ONCOLOGY WARD

NB: 3 Beds are to be plumbed for haemodialysis

NB: All bedrooms will require positive pressure

Number of Beds		**14+ 4 day recliners**		
Percentage Single Rooms		**100%**		
Description	**Qty**	**Unit Area m²**	**Total Area m²**	**ADB Code**
Bed area facilities				
Acute single bedroom (incl family & clinical support space)	10	16.5	165.0	
Patients en-suite wc & wash double assist	10	4.5	45.0	V1610
Sub-Total			**210.0**	
Day Case Zone				
Day Case Room - Recliner Space	4	13.5	54.0	
Staff Base	1	3.0	3.0	
Treatment Room	1	16.5	16.5	
WC - W'chair	1	4.5	4.5	
Sub-Total			**78.0**	
Patient support facilities				
Consulting/examination (or treatment) room	1	16.5	16.5	
Treatment Room	1	16.5	16.5	
Interview/sitting room	1	9.0	9.0	
Resuscitation trolley parking bay: 1 trolley	1	2.0	2.0	
Pantry/Beverage making area	1	12.0	12.0	
Ward Food trolley parking bay	1	1.5	1.5	
Wheelchair bay	1	4.0	4.0	
Nurses Station	1	8.0	8.0	
Touch Down Spaces	4	2.0	8.0	
Sub-Total			**77.5**	
Backup Storage				
Linen trolley parking bay	1	1.5	1.5	
Clinical supplies trolley	1	1.5	1.5	
Clinical Store/Controlled drug Cupboard	1	1.5	1.5	
Clean Utility Room	1	12.0	12.0	T0505
Large Eqpt Store	1	20.0	20.0	
Sub-Total			**36.5**	
Utilities				
Dirty utility/Sluice/Test Room - small	1	6.5	6.5	

Dirty utility/Disposal hold)	1	8.0	8.0	Y0315
Cleaners room	1	7.0	7.0	
WC/WHB - type 1	1	2.0	2.0	
Switchgear cupboard	1	1.0	1.0	
Sub-Total			**24.5**	

Office and Administrative Services				
Reception - 2 position - open	1	8.0	8.0	
Office - 1 position + meeting area	1	12.0	12.0	
Charge Nurse/Sister's Office	1	9.0	9.0	
Printer/IT/Admin Store Room	1	6.0	6.0	
Waiting Area - 5-10 persons	1	16.0	16.0	
Sub-Total			**51.0**	

Essential Complementary Accomodation				
Assisted Bathroom	1	16.0	16.0	
Sub-Total			**16.0**	

Additional Accomodation and Services				
Medical Hot Desking (2 Places)	1	10.0	10.0	
Sub-Total			**10.0**	

Total net			**503.5**
Planning	5%		25.2
Sub-Total			528.7
Engineering	3%		15.9
Circulation	31%		163.9
Total			**708.4**

Areas above are no longer required by Haemato-oncology. Areas should however be "rin
development

Comment	
Positive Pressure	bed numbers reduced
(as per HBN 00-02)	

	Day Area no longer required

pentamidine treatment
Intrathecal chemotherapy
(as per HBN 04-01)

Interim Disposal Hold on Ward

g-fenced" on layouts for future

DESIGN ACCEPTANCE PROCEDURE FORM

Haemato-Oncology User Group Meeting – 4th February 2010

ACTION POINTS

1. Currently Haemato-Oncology has 14 inpatient beds and 4 day beds planned for the New South Glasgow Hospital. Director to alert COO within 7 days of potential change (10th Feb 2010).

2. Potential options for Haemato-Oncology are:

	Inpatient Beds	Day Beds
Option 1	10	0
Option 2	7	0
Option 3 *	0	0

* Under this option Haemato-Oncology would be absorbed into current medicine beds and day activity to ACH.

14 inpatient beds and 4 day beds is no longer an option.

3. High level review of Schedule of Accommodation

> Remove Assisted Bathroom

> Remove Reception

> Amalgamate Drug Cupboard into Clean Utility

> Linen and Clinical Supplies Trolley to be co-located beside Clean Utility

> Equipment Store Area for review once bed numbers identified

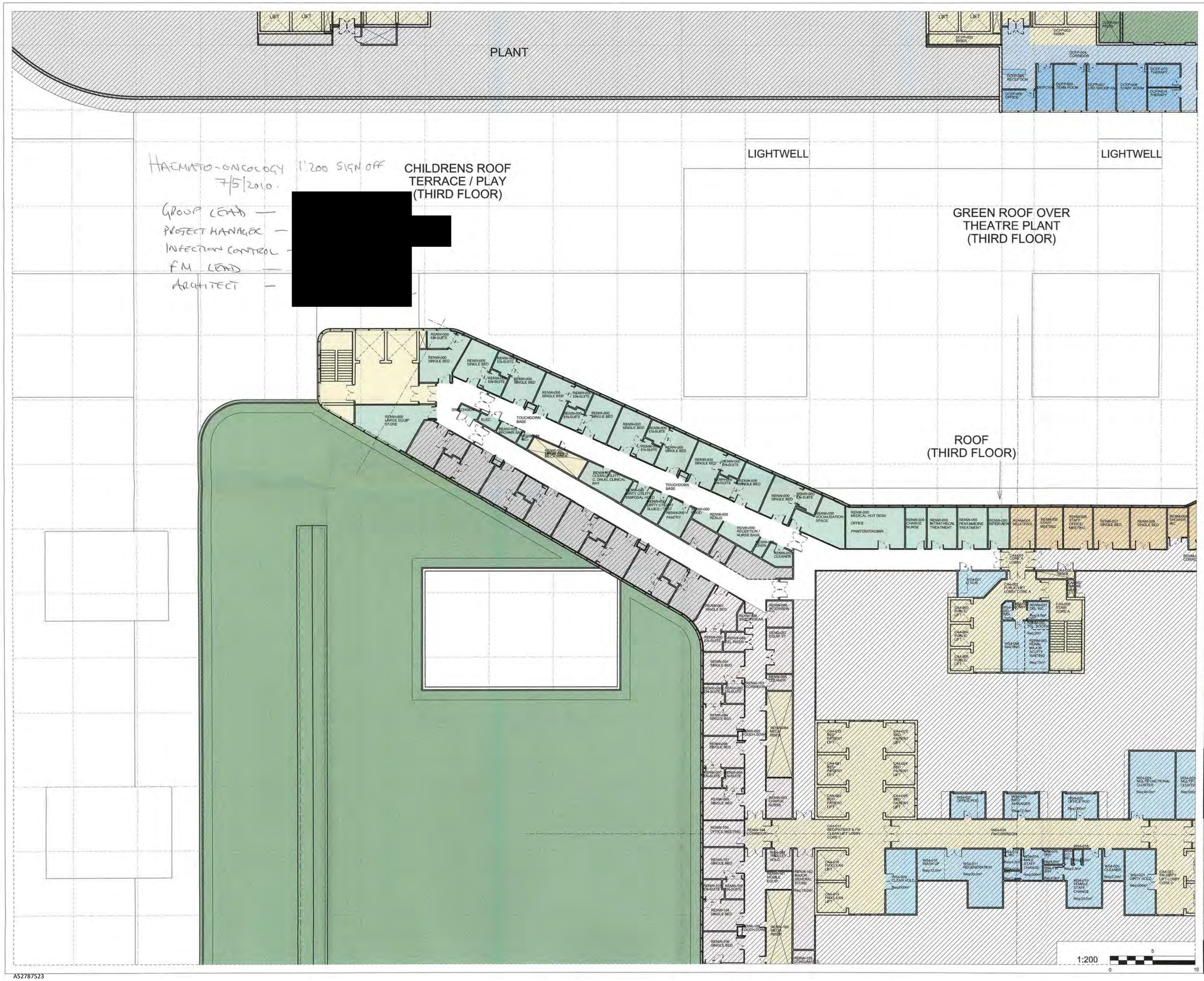
> No options include Day Case – therefore, Day Case Zone (78m^2) can be removed

> Ventilation – Options 1 & 2 – require Hepa Filtered and no opening windows, reliance on mechanical ventilation throughout

> One Treatment Room negatively pressurised as before

> Ensure digital pressure monitoring outside patient bedrooms

- Disposal Hold at entrance to Ward (still inside the Ward)
- Directorate to confirm which option within 2 weeks of this meeting (i.e. by 18 February 2010)



Notes:
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Designer Identification of Hazard/Risk

KEY

NSGH HAEMO ONCOLOGY WARD

Rev	Date	Drw	Revision Notes	Chk	App
03	28/04/10	MD	Revised for User Group Meeting 3	MD	X
02	17/03/10	GO	Revised for User Group Meeting 2	MD	X
01	22/01/10	GO	Issued for User Group Meeting 1	MD	X

NORTH

Client

NHS Greater Glasgow and Clyde

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Project
NEW SOUTH GLASGOW HOSPITALS (NSGH) PROJECT

Drawing Title
FOURTH FLOOR PLAN
NSGH HAEMATO-ONCOLOGY WARD

Job No	Drawn	Checked	Approved
09080	GO	NE	NE
Status: Preliminary		Date: 02/09/09	Scale@A1: 1:200

Drawing No						Rev
Origin	Zone	Level	Type	Content	Sequential	
NA	XX	04	PL	252	403	03

09080_IBI-N_PMI228 Proposal
22 July 2013

- all rooms denoted * hepa-filtrated
- ward cross over at mid point as agreed
- door to end of ward retained
- mid ward corridor doors already included
- additional glazed screen as requested
- extended nurse station desk as requested
- cleaners room incorporate in lieue of equipment bay
- office reduced to 5pax

VOID

ATRIUM VOID

✓ Rooms RENW046 RENW041

Plumbing for dialysis facility to remain in these rooms including media panels

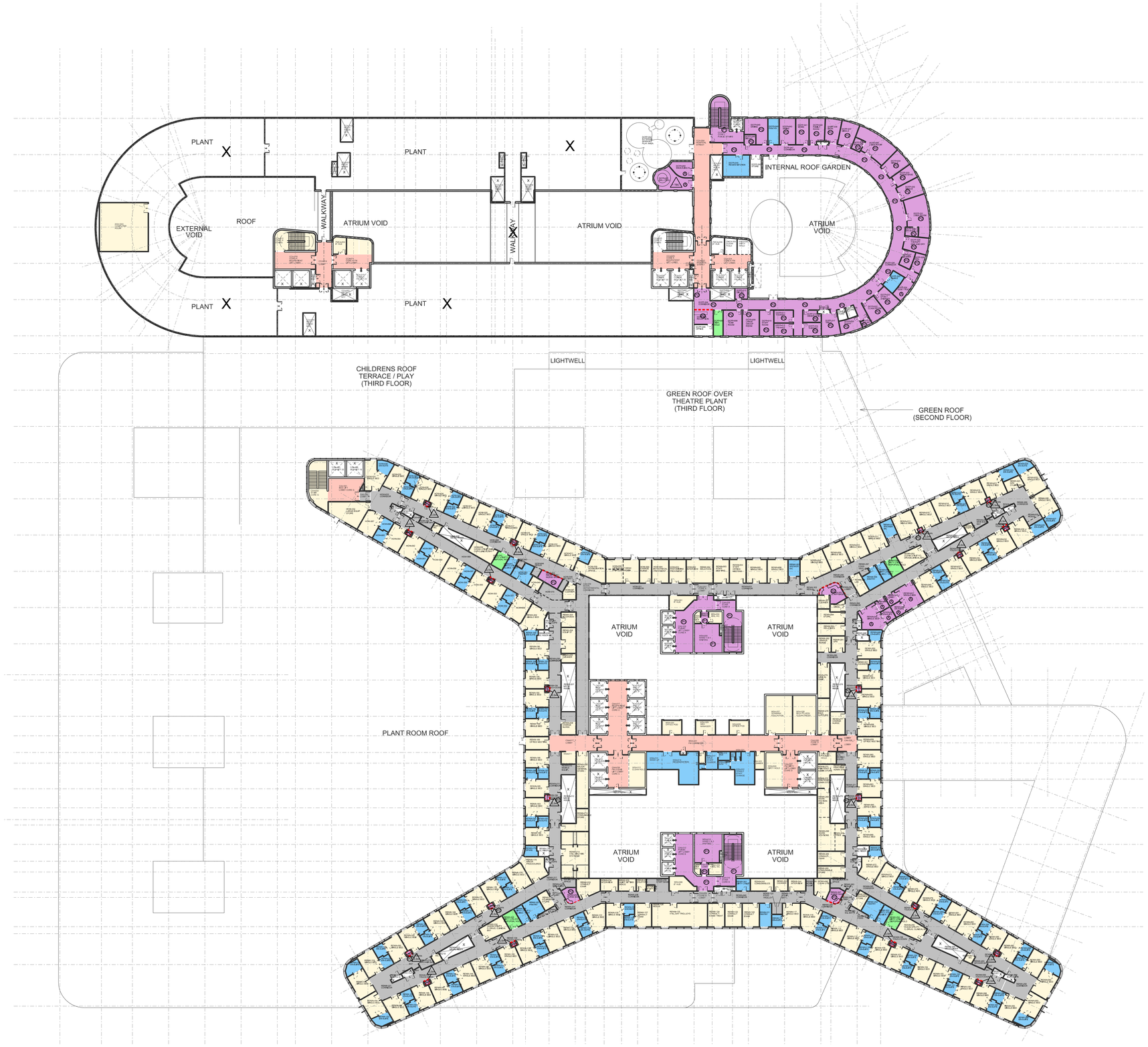
IN ORIGINAL PLANS Rooms RENW190 RENW193 RENW195 RENW198 RENW202 WERE PLUMBED FOR DIALYSIS — THIS IS TO REMAIN including media panels

✓ Preferred option for glazed vision panel

Alternative option to incorporate glazed vision panel

Equipment Bay replaced with cleaners room

A52787523



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Designer Identification of Hazard/Risk

X TYPE YOUR NOTES HERE

CEILING TYPE KEY

A	PLASTERBOARD CEILING - IMPERFORATE AND JOINTLESS MEMBRANE WITH CONCEALED GRID SYSTEM, NORMAL HUMIDITY AND CLASS 1 SURFACE SPREAD OF FLAME (SHTM 60 CATEGORY 1)
B	600x600mm MOISTURE RESISTANT MINERAL FIBRE TILES - IMPERFORATE AND JOINTED MEMBRANE WITH CONCEALED GRID SYSTEM, HIGH HUMIDITY AND CLASS 1 SURFACE SPREAD OF (SHTM 60 CATEGORY 2)
C	600x600mm MINERAL FIBRE TILES - IMPERFORATE AND JOINTED MEMBRANE WITH CONCEALED GRID SYSTEM, NORMAL HUMIDITY AND CLASS 0 SURFACE SPREAD OF FLAME (SHTM 60 CATEGORY 3 & 5)
D	600x600mm MINERAL FIBRE TILES - IMPERFORATE AND JOINTED MEMBRANE WITH EXPOSED GRID SYSTEM, NORMAL HUMIDITY AND CLASS 0 SURFACE SPREAD OF FLAME (SHTM 60 CATEGORY 4)
E	600x600mm MINERAL FIBRE TILES - IMPERFORATE AND JOINTED MEMBRANE WITH EXPOSED GRID SYSTEM, NORMAL HUMIDITY AND CLASS 1 SURFACE SPREAD OF FLAME (SHTM 60 CATEGORY 4 & 5)
F	600x1200mm SUSPENDED MINERAL TILE PLANK SYSTEM WITH REDUCED FACE PLASTERBOARD MARGIN DETAIL - IMPERFORATE AND JOINTED MEMBRANE WITH EXPOSED GRID SYSTEM, NORMAL HUMIDITY AND CLASS 0 SURFACE SPREAD OF FLAME (SHTM 60 CATEGORY 4)
G	300x1200mm SUSPENDED MINERAL TILE PLANK WITH REDUCED FACE PLASTERBOARD MARGIN DETAIL - IMPERFORATE AND JOINTED MEMBRANE WITH EXPOSED GRID SYSTEM, NORMAL HUMIDITY AND CLASS 0 SURFACE SPREAD OF FLAME (SHTM 60 CATEGORY 4)
H	SUSPENDED FABRIC STRETCH CEILING SYSTEM WITH BACKLIGHTING, SMOOTH, IMPERFORATE AND JOINTLESS MEMBRANE CONCEALED SUPPORT SYSTEM, NORMAL HUMIDITY AND CLASS 1 SURFACE SPREAD OF FLAME (SHTM 60 CATEGORY 4)
J	TIMBER SHEATHING WITH ACOUSTIC PROPERTIES AS PER ACOUSTIC CONSULTANTS RECOMMENDATIONS e.g. WITH PERFORATIONS & CONCEALED ACOUSTIC INSULATION
K	SPECIAL 400x600mm ACOUSTIC TILE SPECIFICATION TO BE IN LINE WITH THE ACOUSTIC BOOTH DESIGN & AS PER ACOUSTIC CONSULTANTS RECOMMENDATIONS
L	TYPICALLY NO CEILING FINISH REQUIRED BUT ALLOW FOR DUSTPROOF SEALANT APPLIED TO SOFFITS OF ALL VOIDS, RISERS & M&E CUPBOARDS & PLANT AREAS - UNLESS SPECIFIED SEPARATELY BY THE M&E ENGINEER
M	LARGE MODULE METAL CEILING PANEL SYSTEM WITH CONCEALED GRID (Size approximately 1200x1200mm) EXCEPTION HIGH ENTRANCE SPACE IN LINE WITH EXTERNAL CANOPY SOFFIT DESIGN (Size approximately 2400x300mm)
N	SMALL MODULE METAL CEILING PANEL SYSTEM WITH CONCEALED GRID (Size approximately 1200x600mm)
P	SPECIAL CEILING FINISH BY SPECIALISTS (TO ADVISE)
R	LOCKABLE METAL ACCESS CEILING PANELS WITHIN FINISH PLASTERBOARD CEILING

CEILING FINISHES & HEIGHT DETAILS KEY

1	'BLANK' = FACTORY SELF-FINISH - ALL TILES AND TILE PLANKS
2	ASEPTIC PAINT FINISH / ELASTOMERIC HYGIENE COATING WITH ANTI BACTERIAL PROPERTIES
3	WATER BASED ACRYLIC DIAMOND EGGSHELL EMULSION PAINT
4	WATER BASED ACRYLIC DIAMOND EGGSHELL EMULSION PAINT WITH ANTI-BACTERIAL PROPERTIES
5	BULKHEAD DETAIL - ALL BULKHEADS TYPICALLY MEASURE 300mm BELOW THE ADJACENT CEILING HEIGHT
6	CEILING HEIGHT IN METRES (FROM FFL TO UNDERSIDE OF CEILING SOFFIT) NOTE: ALL CEILING HEIGHTS ARE +/-2.7m UNLESS OTHERWISE STATED OR NOTED ON THE DRAWINGS

Rev	Date	Drw	Revision Notes	Chk	App
02	24/09/10	CQ	Issued for Appendix K (FBC)	AB	AB
01	30/07/10	CQ	FIRST ISSUE	AB	AB

Client

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Project

NEW SOUTH GLASGOW HOSPITALS (NSGH) PROJECT

Drawing Title

FOURTH FLOOR PLAN
CEILING FINISHES
STRATEGY PLAN

Job No	Drawn	Checked	Approved
09080	---	EW	EW
Status: Design Development		Date: 15/07/10	Scale@A0: 1:300

Drawing No							Rev
Origin	Zone	Level	Type	Content	Sequential		
NA	XX	04	PL	332	150		02

NEW SOUTH GLASGOW HOSPITALS PROJECT

DESIGN WORK GROUPS & PACKAGE CO-ORDINATION SCHEDULE

Reporting Period 17/07/2012 - 20/08/2012 **Revision** 07

DESIGN WORK GROUP					WORK PACKAGE										LEAD	CONSULTANT
No.	Priority	Name	Meeting Date	Frequency	WP No.	Work Package	Package Launch Date	T2 Date	Issue Date	Aconex Ref	Status	Comments	Action	Date Required		
1		**Masterplan/External Works**														
		External Services													Jim Murray	BM
		External Works													Grant Wallace	BM
		Landscape													Alasdair Fernie	BM
		Roads													John Wiggett	NA
		Site levels													David Campbell	WSP
		Courtyards													Jamie Philip	WSP
															Eddie Picton	ZBP
															Laura Scott-Simmons	GIL
															Brendan Coffey	MER
															Jeff Murdoch	URS
DG 1	HIGH - 1	Construction Co-ordination Workshop	Tuesday	Weekly	**Masterplan/External Works**											
DG 1	MED - 2	Design Co-ordination Workshop	Wednesday	Monthly	**External Works & External Areas** (Main Meeting - All Attendees)											
			Wednesday	Fortnightly	Workshops - Attendees as required											
												Design Work Group Review meeting took place 09/05/12. Agenda split to cover the following - External Areas to the Building; Courtyards Internal to the Building; Roofs; Other Areas (Labs, Energy Centre, VIE, Car Parks)	GIL/WSP/ZBP/MER/NA			
	LOW - 3	Hard & Soft Landscaping			WP800b	Hard Landscaping Stage 3 - External Areas	06/11/2012	04/12/2012	25/01/2012	GIL-TRANSMIT-000113	ISSUED FOR T2	External Works Work Group meeting under way: No 1: 9th May 2012 No2: 13th June 2012 No 3: 18th July 2012 etc.	GIL/WSP/ZBP/MER/NA	Ongoing	Laura Scott-Simmons	GIL
					WP800a	Hard Landscaping Stage 3a	06/11/2012	04/12/2012	25/01/2012	GIL-TRANSMIT-000113	ISSUED FOR T2	Stage 3A appears to have been removed from the latest TES. BM to clarify?	BM			
					WP815	Hard Landscaping Stage 3 - Courtyards	06/11/2012	04/12/2012	25/01/2012	GIL-TRANSMIT-000113	ISSUED FOR T2	Courtyard External Works meeting scheduled for 27th June. BM Tender issue imminent - additional details to be issued. Procurement review meetingTBA.	GIL/NA/WSP/ZBP/BM	30/06/2012		
					tbc	Hard Landscaping Stage 3 - Roofs	06/11/2012	04/12/2012	25/01/2012	GIL-TRANSMIT-000113	ISSUED FOR T2	Specialist External Work Group meetings under way: 30th May 2012 - A+E/Discharge Lounge 20th June 2012 - Roofs (with Prater) 27th June 2012 - Courtyards	GIL/WSP/ZBP/MER/NA	Ongoing		
					tbc	Hard Landscaping Stage 3 - Other Areas	06/11/2012	04/12/2012	25/01/2012	GIL-TRANSMIT-000113	ISSUED FOR T2	External Works Work Group meeting under way: No 1: 9th May 2012 No2: 13th June 2012 No 3: 18th July 2012 etc.	GIL/WSP/ZBP/MER/NA	Ongoing		
					WP810a	Soft Landscaping/Planting Stage 3 - External Areas	17/07/2012	14/08/2012	25/01/2012	GIL-TRANSMIT-000113	ISSUED FOR T2	This package is to be brought forward to enable early purchase of trees. Construction programming issue in terms of installing trees into courtyards. INTERNAL PACKAGE REVIEW REQUIRED.	GIL/BM	August 2012	Laura Scott-Simmons	GIL
					WP815	Soft Landscaping/Planting Stage 3 - Courtyards	18th July 2012	End July 2012	12/07/12	GIL-TRANSMIT-000113 12.07.12 TBC	ISSUED FOR T2	Courtyard External Works meeting held 27th June. BM Tender issue imminent. T2 Courtyard WP update and full T2 Landscape Specification issued 12.07.12. Courtyard procurement review meeting (T2 Launch) arranged for 18th July 2012 with JM, GM and AF (BM). **Items to be developed for T3:** Extent of slab to C1, weight loading to roofs in C3 and C4, C8 layout, Vents to C9, drainage and lighting to all courtyards.	GIL/BM	Following T2 Tender Release		
					tbc	Soft Landscaping/Planting Stage 3 - Roofs	17/07/2012	14/08/2012	25/01/2012	GIL-TRANSMIT-000113	ISSUED FOR T2	Specialist External Work Group meetings under way: 30th May 2012 - A+E/Discharge Lounge 20th June 2012 - Roofs (with Prater) 27th June 2012 - Courtyards	GIL/WSP/ZBP/MER/NA	Ongoing		
					tbc	Soft Landscaping/Planting Stage 3 - Other Areas	17/07/2012	14/08/2012	25/01/2012	GIL-TRANSMIT-000113	ISSUED FOR T2	External Works Work Group meeting under way: No 1: 9th May 2012 No2: 13th June 2012 No 3: 18th July 2012 etc.	GIL/WSP/ZBP/MER/NA	Ongoing		
					WP810b	Soft Landscaping/Planting Stage 3a	06/11/2012	04/12/2012	25/01/2012	GIL-TRANSMIT-000113	ISSUED FOR T2	Stage 3A appears to have been removed from the latest TES. BM to clarify?	BM	**Outstanding**		
					WP801	Resin Pavings	06/11/2012	04/12/2012			ISSUED FOR T2	Design Work Group review of these packages took place at the External Works Group meeting on 09/05/12.	GIL/WSP/NA		Laura Scott-Simmons	GIL
					WP807	Playtop Surfaces	06/11/2012	04/12/2012			ISSUED FOR T2				Jim Murray	BM
					WP835	Buildersworks (External Landscaping)	06/11/2012	04/12/2012			ISSUED FOR T2					
DG 1	LOW - 3	Design Co-ordination Workshop External Furniture			WP830	Fencing	06/11/2012	04/12/2012			ISSUED FOR T2	Design Work Group review of these packages took place at the External Works Group meeting on 09/05/12.	GIL/WSP/NA		Laura Scott-Simmons	GIL
					WP840	Street Furniture	06/11/2012	04/12/2012			ISSUED FOR T2		GIL/WSP			
					WP845	External Signage (Statutory & NHS)	06/11/2012	04/12/2012			ISSUED FOR T2	GIL to issue External Signage drawings and spec to NA for co-ordination with Signage meetings.	GIL/WSP/NA	Ongoing		
					tbc	Adoptable & Non-Adoptable Lighting	tbc	tbc			ISSUED FOR T2		GIL/WSP/ZBP/MER/NA			
					WP890 &WP895	Shelters (Art, Bus Shelters)	06/11/2012	04/12/2012			ISSUED FOR T2	Ginko informally noted 'Stage D' type info to be compiled by end August. Design workshop required with GIL and WSP prior to this.	GIL/WSP/ZBP/MER/NA	August 2012		
					WP860	Tensile Structures (Canopies)	24/09/2012	22/10/2012			ISSUED FOR T2		GIL/WSP/GIN			
					WP841	Children's Play Equipment	06/11/2012	04/12/2012			ISSUED FOR T2		GIL			
					tbc	CCTV	tbc	tbc			PENDING		GIL/WSP/ZBP/MER/NA			
DG 1	LOW - 3	Design Co-ordination Workshop Roads			WP805a	Roadworks Stage 3	06/11/2012	04/12/2012			PENDING		WSP/GIL		David Campbell	WSP
					WP805b	Roadworks Stage 3a	06/11/2012	04/12/2012			PENDING		WSP/GIL		Laura Scott-Simmons	GIL
					WP856	Traffic Signals	06/11/2012	04/12/2012			PENDING		WSP		Jim Murray	BM
DG 1	LOW - 3	Design Co-ordination Workshop Demolitions			WP010a	Early Demolition Stage 3A	?	27/01/2012			?	BM to review and confirm	BM		Jim Murray	BM
					WP010b	Demolition Stage 3A	?	26/02/2015			?	BM to review and confirm	BM			
					WP680	Alterations to Existing Buildings	13/03/2012	29/03/2012			PENDING	NA awaiting package scope confirmation	BM			

NEW SOUTH GLASGOW HOSPITALS PROJECT

DESIGN WORK GROUPS & PACKAGE CO-ORDINATION SCHEDULE

Reporting Period 17/07/2012 - 20/08/2012 **Revision** 07

DESIGN WORK GROUP					WORK PACKAGE										LEAD	CONSULTANT
No.	Priority	Name	Meeting Date	Frequency	WP No.	Work Package	Package Launch Date	T2 Date	Issue Date	Aconex Ref	Status	Comments	Action	Date Required		
2		**Structural / Interface Co-ordination**														
		Columns & Shear Walls													Jim Murray	BM
		Structural Slabs													Grant Wallace	BM
		Slab Penetrations													Alasdair Fernie	BM
		Risers													Stuart Jackson	BM
		Drainage													Liane Edwards	NA
		Cores													Jason Truscott	NA
		Stairs													John Wiggett	NA
		Atrium Bridge													Justin Liebenberg	NA
		Slab Recesses													Neil McGarry	WSP
		Tunnel													Brendan Rooney	MER
		Tunnel interface with Labs													Mark Harris	ZBP
		Lifts & Escalators													Jeff Murdoch	URS
		AGVs														
		Basement Kitchen														
		Below ground waterproofing														
		Pop-Up Co-ordination														
		Manholes														
DG 2	HIGH - 1	Construction Co-ordination Workshop	Tuesday	Weekly	**Structural / Interface Co-ordination**							Monitored within WorkGroup				
												DPM not installed as NA design drawings. NA reviewing each 'as built' situation and providing comments/rectification as required. Programme of dates to be agreed. BM Construction proposing different product - NA require confirmation/clear instruction from BM. Meeting arranged 11/07/12 to review and agree final actions.	BM/NA	ongoing	John Wiggett/Peter Standley	NA
DG 2	MED - 2	Design Co-ordination Workshop	Wednesday		WP250	Level 12 Plantroom , Helipad & Top of Core G	08/02/2012 - completed	07/03/2012			IN PROGRESS	Appointment of Specialist Subcontractor required to allow structural design to be completed.	BM	ongoing	John Wiggett	NA
												Meeting took place 05/07/12 to review updated design drawings prior to issue to close out Planning issues (following receipt of updated NA drawings). Awaiting final NHS comments. NA to re-issue drawings 13/07/12; meeting with Planners w/c 16/07/12.	Closed	Complete		
												List of queries from NA to be responsed to by BM.	BM	Outstanding		
												Outstanding structural design input required to allow NA to complete T3 drawings. WSP require appointment of specialist subcontractor to allow development of steel design & avoid abortive work.	BM/WSP	Outstanding		
												NA awaiting BM confirmation of meeting date; all NA queries to be reviewed in the meeting (Sub-C input required to close out).	BM	07/09/2012		
DG 2	HIGH - 1	Subcontractor Co-ordination Workshop	Monday	Fortnightly	WP270	Atrium Link Structure Core C-D	04/07/2011 - completed	COMPLETE			CONSTRUCTION	Outstanding issue over joint detail to be resolved to ensure satisfactory aesthetic. NA issued design intent details to indicate over-cladding to bracing structure.	BM	Outstanding	Justin Liebenberg	NA
												NA currently reviewing handrail detail. Sketch issued to BM for review. Comments returned by BM 10/07/12. NA/WSP to resolve fixing detail to floor slab. To be anchored in slab, not welded - detail principle resolved.	Closed	Complete		
DG 2	MED - 2	Design Co-ordination Workshop	Tuesday		WP280	Structural Steel - Link Bridges (Neo & Neuro)	10/05/2012	07/06/2012			IN PROGRESS	Initial design completed to allow construction of piles. Main steel design in progress.	WSP	Outstanding	Justin Liebenberg	NA
												RDD comments returned - WSP to review ramps. Scope of works to existing buildings to be agreed.	WSP/BM	Outstanding		
												WSP issued draft drawing pack to BM/NA on 03/07/12. NA currently reviewing; BM to provide comments to release package for T1. NA note that GF steelwork up to date to match pile locations; 1F level steelwork still in previous location.	WSP/BM/NA	Outstanding		
												BM currently reviewing phasing of link bridges in the construction programme. Neo Bridge - Nov13 to Mar 14 (ties in with external works late Mar 14) to enable use of access route for another 6-8months. Neuro - move to May 14 (from Jul 13 - Nov 13). BM to review and agree logistics with NHS and issue programme to DT.	BM	01/10/2012		
												Next meeting arranged for 01/10/12 to progress design.	WSP/BM/NA/ZBP	01/10/2012		

NEW SOUTH GLASGOW HOSPITALS PROJECT

DESIGN WORK GROUPS & PACKAGE CO-ORDINATION SCHEDULE

Reporting Period 17/07/2012 - 20/08/2012 **Revision** 07

DESIGN WORK GROUP					WORK PACKAGE										LEAD	CONSULTANT
No.	Priority	Name	Meeting Date	Frequency	WP No.	Work Package	Package Launch Date	T2 Date	Issue Date	Aconex Ref	Status	Comments	Action	Date Required		
3		**External Envelope**														
		Cladding													Jim Murray	BM
		Plant Rooms													Grant Wallace	BM
		Roofs													Alasdair Fernie	BM
		Roof Garden													Stuart Andrews	BM
		Bridge Links													John Wiggett	NA
		Helipad													Justin Liebenberg	NA
		Cleaning & Maintenance													John Young/Neil McGarry	WSP
		Planning Sample Approval													Andrew Percival	ZBP
															Laura Scott-Simmons	GIL
															Brendan Coffey	MER
															Jeff Murdoch	URS
DG 3	HIGH - 1	Subcontractor Co-ordination Workshop	Wednesday	Fortnightly	**External Envelope** - Unitised Cladding							Monitored within WorkGroup				
												Rostek appointed - BMU outstanding issues to be confirmed with specialist Subcontractor. BM to confirm subcontractor's design programme - no current progress to report. Rostek to attend SUK workshop 22/08/12.	BM	Outstanding	John Wiggett	NA
												Blinds - final operation/mechanism and blind detail (width) to be agreed with NHS. NHS rejected wand proposal. Full size mock-up currently being procured/manufactured by SUK (due for completion 10/09/12).	BM	10/09/2012		
												New Structal Wand proposal to be presented to NA 11/07/12. This is to combine the proposals to include first option teleflex head fixing with second option triangular wand. Date for NHS RDD review tbc by BM; sign-off process tbc by BM.	Closed	Complete		
DG 3	HIGH - 1	Subcontractor Co-ordination Workshop	Wednesday	Fortnightly	**External Envelope** - Podium Cladding & Roofs							Monitored within WorkGroup				
												NA Programme for T3 issue dates agreed with BM/Praters. Drawing Issues to be tracked on NA External Envelope Production Programme (Podium). NA updated programme; T3 dates revised to align with plantroom design and sign-off process. Feedback required from Praters/BM.	BM	Outstanding	John Wiggett	NA
												Praters Programme T3 discrepancies between steel design/installation dates/plantroom design etc. WSP have agreed steelwork dates to co-ordinate with Praters requirements; M&E design programme still behind/more critical. BM to confirm this is acceptable.	BM	Outstanding		
												BM are not issuing NA T3 drawings to Praters by agreed dates.	BM			
												Praters & Astins to have meeting 30/05/12 to resolve interface issues. BM to re-arrange as Praters were not in attendance.	BM	Outstanding		
					WP370	Windows & Glazing	completed	COMPLETE			CONSTRUCTION	Review of whole 'Entrance' elevation required to address Planning comments. Options issued to BM/Praters - response outstanding.	BM	Outstanding	Rob Hall/ Justin Liebenberg	NA
					WP395	Interstitial Blinds	completed	COMPLETE			Design review following RDD	NHS/BM to review & provide marked up amended 'scope' strategy requirements. Final design solution to be agreed to allow design completion. Subject to final full-size mock-up of 'toblerone' wand on site - due 10/09/12.	BM/NHS	10/09/2012	Jason Truscott	NA
					WP380	Glazed Automatic Doors	completed	COMPLETE			Design review following RDD	Further Subcontractor details to be provided for RDD submission to NHS. NA to review maximum sizes for revolving door to respond to NHS RDD comments on entrance proportional size. NA have issued options to BM/Praters increasing heights as requested. BM to issue to NHS under RDD. Awaiting confirmation of which option to complete work.	BM	Outstanding	Rob Hall/ John Wiggett	NA
					WP360	Soffit Cladding	completed	COMPLETE			Design review - V/E option	NA developing alternative design to Adult Main Entrance Soffit (fabric ceiling). Ongoing co-ordination with ZBP on levels of soffits ongoing.	NA	Ongoing	Rob Hall	NA
DG 3	HIGH - 1	Subcontractor Co-ordination Workshop	Tuesday		WP460	BMU Façade Cleaning System	12/09/2011 - completed	COMPLETE	14/10/2011	NA-TRANSMIT-001870	Subcontractor Design Development	Subcontractor drawings need to be updated to reflect current design & issued to Structal. Meeting 22/08/12 with Rostek to review updates to BMU@level 12 and monorail over core G.	BM/Sub-C	22/08/2012	John Wiggett	NA
DG 3	HIGH - 1	Subcontractor Co-ordination Workshop	tbc	tbc	WP702	Glazing & Cladding to Link Bridges (Neuro & Neo)	07/03/2012 - completed	COMPLETE	14/02/2012	NA-TRANSMIT-002342	ISSUED FOR T2	Tender Returns due back 27.01.12	BM	Outstanding	Justin Liebenberg	NA
									23/02/2012	NA-TRANSMIT-002343		Confirmation/further details required from BM re: pre-fab & construction sequencing. BM confirmed Neo-Natal to be in-situ; Neuro to be prefab. NA/WSP to update drawings for re-issue to discuss in meeting on 01/10/12.	BM/NA/WSP	for meeting on 01/10/12		
												Scope of works required for existing buildings (BM/NHS action)	BM/NHS	Outstanding		
												NHS requested heating to Neuro Link (ZBP to raise EWN - not in current design. BM to issue instruction to change design)	ZBP	Outstanding		
												ZBP to confirm M&E scope/brief.	ZBP	tbc		
DG 3	LOW - 3	Design Co-ordination Workshop	Wednesday		WP480	Glazed Canopies (Main Entrances)	29/10/2012	29/11/2012			PENDING	Planning concerns to Children's Entrance Canopy to be addressed. NA preparing options for review by BM.	NA	28/09/2012	Rob Hall; Justin Liebenberg	NA
DG 3	MED - 2	Design Co-ordination Workshop	Tuesday		WP671	Children's Sanctuary	18/05/2012	15/06/2012	20/06/2012	NA-TTRAN-000019	ISSUED FOR T2	Plinth detail to be updated; BM confirm likely to be added to Praters package scope.	BM/NA	Outstanding	Danielle Barnard	NA

NEW SOUTH GLASGOW HOSPITALS PROJECT

DESIGN WORK GROUPS & PACKAGE CO-ORDINATION SCHEDULE

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No.	Priority	Name	Meeting Date	Frequency	WP No.	Work Package	Package Launch Date	T2 Date	Issue Date	Aconex Ref	Status	Comments	Action	Date Required		
4		**Internal Fabric**														
		Services													Gavin Burnett	BM
		Equipment													Grant Wallace	BM
		Medical Planning													Alasdair Fernie	BM
		Reflected Ceilings													George Miller	BM
		M&E Systems													Paul Heath	BM
		CCTV													Ken Hall	BM
		Partitions & Dry Lining													Phil Biginton	BM
		Acoustics													Liane Edwards	NA
		Radiation Protection													Jason Truscott	NA
		Doors & Ironmongery													John Young/Neil McGarry	WSP
		Fixed Furniture													Neil Ross	ZBP
		Fixtures & Fittings													Brendan Rooney	MER
		Architectural Metalwork													Paul Goring	ACL
		Interior Design - Finishes													Jeff Murdoch	URS
		Wayfinding - Internal Signage														
		Art														
DG 4	HIGH - 1	Construction Co-ordination Workshop	Wednesday	Monthly	**Internal Fabric** - Partitions & Dry Lining Workshop to include Internal M&E Co-ordination issues							Monitored within WorkGroup				
												Progress ongoing as per 252 series programme	NA/BM	Ongoing	Liane Edwards	NA
												Co-ordination issues reviewed in 1:50 M&E Construction Meeting for PG1. Principles agreed for inclusion in T3 1:50 Equipment Plans. NA T3 programme agreed with BM - BM to manage NHS.	Closed	Process agreed	Sonja Von Maltzahn/Annie Cheung/Emma White	NA
												Additional M&E Co-ordination Review meetings tba following completion of RDD programme to ensure all comments co-ordinated from NA 1:50 plans to M&E construction drawings.	Closed	Process agreed		
												Internal M&E co-ordination issues to be monitored in Workgroup (items raised in 1:50 M&E Meeting).	Closed	Process agreed	Justin Liebenberg	NA
												The process/dates for the update of M&E drawings following co-ordination on NA 1:50 Equipment Plans needs to be agreed. This should include consideration to the concurrent return of NHS RDD comments on M&E Drawings.	Closed	Process agreed		
DG 4	HIGH - 1	Construction Co-ordination Workshop	Wednesday	Fortnightly		Acoustic Strategy						Acoustic Reports RDD comments received. ACL issued response on NCH Atrium noise levels to BM for review @ DTM 18/06/12. NA re-issued drawings; BM comments received; currently being reviewed. Meeting 20/08/12 to agree outstanding acousitc issues.	ACL/BM/NA	20/08/2012	Paul Goring	ACL
DG 4	HIGH - 1	Design Co-ordination Workshop			WP710	Internal Doors	26/03/2012	30/04/2012	25/05/2012	NA-TRANSMIT-002704	ISSUED FOR T2	Early doors & exemplar rooms T3 issued 20/07/12; PG01 T3 due to be issued 17/08/12. Refer to NA Programme.	NA	ongoing	Jason Truscott/Silvio Rodriguez/Andreas Schultz	NA
		Internal Doors & Ironmongery			WP711	Ironmongery to Internal Doors			25/05/2012	NA-TRANSMIT-002704		NA/MER review of access control PG01, 02 and 03 to commence 25/07/12. Final update required to advise TDSL of any discrepancies. NHS may need to be consulted to agree.	Closed	Complete		
												Building Control summary report currently being prepared to review proposals regarding locks on doors across escape routes with BCo 17/07/12.	Issued 27/08/12	ongoing		
		Internal Glazed Screens			WP708a	Internal Glazed Screens (Timber)		30/04/2012	21/05/2012	NA-TRANSMIT-002682	ISSUED FOR T2	Outstanding NHS commented RDD drawings urgently required.	Closed	Complete		
												Blind operation review work from external envelope to be carried through. BM/NHS to complete mark-ups on NA Strategy. NHS Design Philosophy for control mechanism received - control required both sides of al interstitial blinds.	Closed	Complete		
												Check if 'specialist' radiation screens in main package? NA suggest these are likely to be provided by a different Subcontractor, in particular screens to MRI rooms. TDSL confirmed only MRI doors & screens required to be excluded and part of specialist package. Note Aseptic Suite screens part of Aseptic package.	Closed	TDSL scope includes all excuding Aseptic & MRI		
												NA issued draft T3 programme for internal doors & timber screens, including secondary glazing. NA updated programme to pick up proposed BM amended production group sheets & accelerated dates; PG01 T3 to be issued 17/08/12.	Closed	Programme agreed		
												Access control & locking review took place with NHS 25/07/12. Strategy agreed with NHS and now being incorporated into the Internal Doors T3 pacakge for PG01.	NA/BM	In progress		
DG 4	MED - 2				WP720	General Joinery			08/03/2012	NA-TRANSMIT-002387	ISSUED FOR T2				Jason Truscott/Aurelio Bethencourt	NA
DG 4	HIGH - 1	Design Co-ordination Workshop			WP730a	Suspended Ceilings (Adult Podium)	07/02/2012 - completed	07/03/2012	07/03/2012	NA-TRANSMIT-002384	ISSUED FOR T2	New pendant location confirmation still required; BM to urgently action. Currently being marked up by NHS on NA drawings	BM	In progress	Liane Edwards/Mark Lloyd	NA
		Ceilings - Adult Podium			WP735a	MF Ceilings (Adult Podium)			09/03/2012	NA-TRANSMIT-002390		Change to Hospital Street tile plank size requested by BM. NA to advise on programme/possible cost implications (change to T2/T3 drawings, will also involve re-coordination & change to M&E drawings). NA to raise EWN & BM to instruct change. Being updated through PG sequence.	Closed	Process agreed; part of RCP programme		
									29/03/2012	NA-TRANSMIT-002461, 002462, 002463, 002464		PG02 RCP RDD meeting took place. 2 no. drawings to be urgently re-issued; currently awaiting updated CAD background from MER.	Closed	Complete		
									27/03/2012	NA-TRANSMIT-002448		NA reviewing RCP Programme/Co-ordination Process to improve; in particular with respect to RDD meetings with NHS.	NA/BM/MER	Ongoing		
												Additional late comments returned by BM on T2 details and specification. BM to ensure that they comment at the appropriate time according to the agreed programme/process. NA to update	NA/BM	In progress		
												Change to Hospital Street plasterboard margin; EWN raised against request by BM to omit. Discussions ongoing.	NA/BM/MER	Ongoing		

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No.	Priority	Name	Meeting Date	Frequency	WP No.	Work Package	Package Launch Date	T2 Date	Issue Date	Aconex Ref	Status	Comments	Action	Date Required		
DG 4	LOW - 3	Design Co-ordination Workshop			WP730b	Suspended Ceilings (Adult Tower)		19/11/2012			PENDING	Likely to be different Subcontractor to BM Procurement Strategy. NA specification to be followed to ensure consistant design/installation.			Mark Lloyd	NA
		Ceilings - Adult Tower			WP735b	MF Ceilings (Adult Tower)		03/12/2012			PENDING					
DG 4	LOW - 3	Design Co-ordination Workshop			WP730c	Suspended Ceilings (Children's)		06/12/2012			PENDING	Likely to be different Subcontractor to BM Procurement Strategy. NA specification to be followed to ensure consistant design/installation.			Mark Lloyd	NA
		Ceilings - Children's			WP735c	MF Ceilings (Children's)		20/12/2012			PENDING					
DG 4	HIGH - 1	Design Co-ordination Workshop			WP775a	Screeds (Adult Podium)	07/02/2012 - completed	05/03/2012	16/03/2012	NA-TRANSMIT-002417	ISSUED FOR T2	Further BM comments currently reviewed by NA.	NA	Ongoing	Andreas Schulz; Elizabeth Petrovitch	NA
		Finishes - Adult Podium			WP760a	Vinyl Floors (Adult Podium)			23/03/2012 & 30/03/2012	NA-TRANSMIT-002440 & 002472						
					WP780a	Painting (Adult Podium)		23/04/2012	30/04/2012 & 03/05/2012	NA-TRANSMIT-002553 & 002566	ISSUED FOR T2	BM commented package returned. NA to review & respond.	NA	Outstanding		
											COMPLETE	Interior Design RDD Workshops completed. Final RDD approval of colours by NHS received. NA prepared a revised Level 04 wayfinding colour scheme in response to NHS comments. Alternative ensuite 'wet' vinyl product to be investigated due to potential cleaning issues & concerns relating to demenetia patients. Flooring updated to Aquarius product; approved by NHS.	Closed	Complete		
												PG01 Internal Finishes plans & Finishes Schedule issued for T3. BM comments received and NA to update.	NA	In progress		
DG 4	LOW - 3	Design Co-ordination Workshop			WP775b	Screeds (Adult Tower)		19/11/2012			PENDING	Likely to be different Subcontractor to BM Procurement Strategy. NA specification to be followed to ensure consistant design/installation.			Andreas Schulz; Elizabeth Petrovitch	NA
		Finishes - Adult Tower			WP760b	Vinyl Floors (Adult Tower)		18/10/2012			PENDING					
					WP780b	Painting (Adult Tower)		13/03/2013			PENDING					
											COMPLETE	Interior Design RDD Workshops completed. Final RDD approval of colours by NHS received. NA prepared a revised Level 04 wayfinding colour scheme in response to NHS comments. Alternative ensuite 'wet' vinyl product to be investigated due to potential cleaning issues & concerns relating to demenetia patients. Flooring updated to Aquarius product; approved by NHS.	Closed	Complete		
DG 4	LOW - 3	Design Co-ordination Workshop			WP775c	Screeds (Children's)		21/08/2012			PENDING	Likely to be different Subcontractor to BM Procurement Strategy. NA specification to be followed to ensure consistant design/installation.			Andreas Schulz; Elizabeth Petrovitch	NA
		Finishes - Children's			WP760c	Vinyl Floors (Children's)		04/12/2012			PENDING					
					WP780c	Painting (Children's)		31/01/2013			PENDING					
											COMPLETE	Interior Design RDD Workshops completed. Final RDD approval of colours by NHS received. NA prepared a revised Level 04 wayfinding colour scheme in response to NHS comments. Alternative ensuite 'wet' vinyl product to be investigated due to potential cleaning issues & concerns relating to demenetia patients. Flooring updated to Aquarius product; approved by NHS.	Closed	Complete		
DG 4	MED - 2	Design Co-ordination Workshop			WP900a	HTM Furniture (Adult Podium)		30/03/2012	30/04/2012	NA-TRANSMIT-002548	ISSUED FOR T2	Out for tender - additional Schedule of Equipment Queries issued with package for BM review following Subcontractor appointment. Meeting took place to review queries; to be tabled in NMS in 2/3 months.	BM/NA	Ongoing	Sonja Von Malthzahn; Annie Cheung	NA
		Fixed Furniture - Adult Podium			WP905a	Nurse Stations & Desks (Adult Podium)		23/04/2012	11/05/2012	NA-TRANSMIT-002605	ISSUED FOR T2	1:50 Equipment plans to be updated to reflect desk strategy drawings (final RDD comments from NHS awaited).	NA	Ongoing	Elizabeth Petrovitch; Lindsay Gibbon	NA
												NA reviewed Sub-C details with BM; mock-up carcass being prepared to agree final detail.	BM/NA	Ongoing		
DG 4	LOW - 3	Design Co-ordination Workshop			WP900b	HTM Furniture (Adult Tower)		18/10/2012			PENDING	Likely to be different Subcontractor to BM Procurement Strategy. NA specification to be followed to ensure consistant design/installation.			Elizabeth Petrovitch	NA
		Fixed Furniture - Adult Tower			WP905b	Nurse Stations & Desks (Adult Tower)		26/10/2012			PENDING	NHS comments from Interior Design RDD meeting presentations to be included.	NA		Sonja Von Malthzahn	NA
DG 4	LOW - 3	Design Co-ordination Workshop			WP900c	HTM Furniture (Children's)		15/01/2013			PENDING	Likely to be different Subcontractor to BM Procurement Strategy. NA specification to be followed to ensure consistant design/installation.			Elizabeth Petrovitch	NA
		Fixed Furniture - Children's			WP905c	Nurse Stations & Desks (Children's)		23/01/2013			PENDING	NHS comments from Interior Design RDD meeting presentations to be included.	NA		Sonja Von Malthzahn	NA
DG 4	LOW - 3	Design Co-ordination Workshop			WP705	Toilet Cubicles	14/05/12	13/02/2013	22/06/2023	NA-TRANSMIT-002803	ISSUED FOR T2	TES date moved to next year. NA progressing package.	Closed	Complete	Jason Truscott	NA
		Fixtures & Fittings - Adult Podium			WP709a	Wall Protection (Adult Podium)	12/06/12	10/07/2012	varies per Production Group	various per Production Group	COMPLETE	Detailed Wall Protection being added to 1:50 Equipment Plans for review by NHS under RDD.	Closed	Part of 1:50 programme	Sonja Von Malthzahn	NA
											IN PROGRESS	NA to issue Package Dashboard including spec and drawing no. references.	NA	07/09/2012		
											IN PROGRESS	BM request NA to produce set of standard details which reflect the agreed principles shown on the 1:50 plans.	NA	07/09/2012		
					WP902a	Cubicle Tracks (Adult Podium)	26/06/12	23/07/2012			IN PROGRESS	NA to issue Package Dashboard including spec and drawing no. references.	NA	07/09/2012		
DG 4	LOW - 3	Design Co-ordination Workshop			WP709b	Wall Protection (Adult Tower)		20/02/2013			PENDING	Likely to be different Subcontractor to BM Procurement Strategy. NA specification to be followed to ensure consistant design/installation.			Jason Truscott	NA
		Fixtures & Fittings - Adult Tower			WP902b	Cubicle Tracks (Adult Tower)		tbc			PENDING				Sonja Von Malthzahn	NA
DG 4	LOW - 3	Design Co-ordination Workshop			WP709c	Wall Protection (Children's)		26/04/2013			PENDING	Likely to be different Subcontractor to BM Procurement Strategy. NA specification to be followed to ensure consistant design/installation.			Jason Truscott	NA
		Fixtures & Fittings - Children's			WP902c	Cubicle Tracks (Adult Podium)		tbc			PENDING				Sonja Von Malthzahn	NA

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DG 4	LOW - 3	Design Co-ordination Workshop			WP930a	Wayfinding Signage (Adult Podium)		14/01/2013			PENDING	T2 dates put back by BM. RDD meetings to be run with NHS to agree strategy prior to T2 issue.			Elizabeth Petrovitch	NA
		Internal Signage - Adult Podium			WP930a	Statutory Signage (Adult Podium)						RDD Stategy meetings commenced with NHS.	NA/BM	Ongoing	Jason Truscott	NA
DG 4	LOW - 3	Design Co-ordination Workshop			WP930b	Wayfinding Signage (Adult Tower)		14/03/2013			PENDING	T2 dates put back by BM. RDD meetings to be run with NHS to agree strategy prior to T2 issue.			Elizabeth Petrovitch	NA
		Internal Signage - Adult Tower			WP930b	Statutory Signage (Adult Tower)						RDD Stategy meetings commenced with NHS.	NA/BM	Ongoing	Jason Truscott	NA
DG 4	LOW - 3	Design Co-ordination Workshop			WP930c	Wayfinding Signage (Children's)		29/05/2013			PENDING	T2 dates put back by BM. RDD meetings to be run with NHS to agree strategy prior to T2 issue.			Elizabeth Petrovitch	NA
		Internal Signage - Children's			WP930c	Statutory Signage (Children's)						RDD Stategy meetings commenced with NHS.	NA/BM	Ongoing	Jason Truscott	NA

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5		**Adult Atrium**														
DG 5	HIGH - 1	Design Co-ordination Workshop	Wednesday	monthly?	**Adult Atrium**						IN PROGRESS	Meeting to review T2 details with BM Construction Team required.	BM	Ongoing	Stephen O'Shea	NA
		Integration into RDD Interior Design Group presentations	(alternate with Children's Atrium)									Agree issue dates/priority tasks for T3.	BM	Ongoing	Rob Hall	NA
		Access & Maintenance Strategy										Access & Maintenance Meeting 23/08/12 to review overall atrium strategy with NHS.	NA/BM/URS	23/08/2012	Emma White	NA
		Co-ordination with M&E Feature Lighting										Atrium RDD presentations with NHS postponed until subcontractor details confirmed. New dates to be agreed when detailed programme agreed.	BM	Outstanding	Liane Edwards	NA
		Co-ordination with Astins													Justin Liebenberg	NA
		Fire Strategy													Jim Murray	BM
															Alasdair Fernie	BM
															John Curry	BM
															Paul Heath	BM
															Gavin Burnett	BM
															Ken Hall	BM
															Kenny Hamill	WSP
															John Young/Neil McGarry	WSP
															Andrew Percival	ZBP
															Brendan Rooney	MER
															Jeff Murdoch	URS
															tbc	Subcontractors
DG 5	HIGH - 1	ETFE Roof			WP420	ETFE inc Structural Support - Adults	03/10/2011 - completed	07/03/12	20/03/2012	NA-TTRAN-000002	Subcontractor Design Development	NHS request further details on ETFE roof during HDG held on 04/07/12, including exact burn-off locations - BM to advise when subcontractor drawings will be available.	BM	Ongoing	Stephen O'Shea	NA
												Subcontractor design has commenced; NA responding to queries as required.	BM/NA	Ongoing		
DG 5	HIGH - 1	Atrium Cladding			WP785a	Internal Wall Cladding - Adults Atrium Cores (C&D, A&B)	completed	13/02/2012	13/04/12, 17/04/12, 14/05/12 & 16/05/12	NA-TRANSMIT-002513, NA-TTRAN-000008, NA-TRANSMIT-002630 & 002661	ISSUED FOR T2	BM confirmed all core cladding options fit within Cost Plan. NA have reviewed the completed mock-up panels and provided comments; recommendation to progress to T3 with aluminium SAS panels. Currently liasing with subcontractor over panel sizes and corner details. BM to provide detailed programme for Adult Atrium for NA to review T3 dates. BM to provide additional hand-held samples with NA colour options (installed panel standard white RAL9010). Formal NHS RDD sample approval outstanding.	Closed	Complete	Stephen O'Shea; Rob Hall	NA
					WP785b	Internal Wall Cladding - Adults Atrium Ward Tower (Internal Corners)										
												Alternative metal cladding options with larger format panels being investigated by BM.	BM/NA	Ongoing		
												Astins to be appointed for atrium works to enable NA to complete detailing. BM to urgently action.	BM	Outstanding		
DG 5	HIGH - 1	Atrium Link Bridge	Monday	Fortnightly	WP701	Atrium Pods	30/01/2012	COMPLETE	10/04/2012	NA-TRANSMIT-002496	Subcontractor Design Development	Atrium Pod structure & cladding drawings to be issued on Aconex Workflow urgently by BM.	Closed	Complete	Justin Liebenberg	NA
												NA issued sample boards for RDD presentation to NHS on 22/05/12. NHS approval/sign-off of cladding sample colours outstanding. BM reviewed detailed programme - approvals required by end 30/07/12. NA re-presented alternative pod colours to NHS on 03/07/12. Samples did not arrive from Subcontrator - RDD sample approval outstanding. NHS approved colours of pods & cladding to FM side of bridge.	Closed	Complete	Jim Murray	BM
															JD Pierce	Subcontractor
			Monday	Fortnightly	WP790a	Atrium Glazing to link structure (Pre Pod Delivery)	30/01/2012	COMPLETE	10/04/2012	NA-TRANSMIT-002496	Subcontractor Design Development	Design drawings awaited from Sub-C for review. BM to issue on Aconex Workflow. Meeting to be arranged with NA/BM/WSP and Sub-C. Sub-C design to commence 23/07/12. Henshaws appointed.	BM	Ongoing		
												Handrail to take load and reduce glazing spec to bridge. NA/WSP to develop design intent. NA suggest this should be part of WP921 - Internal Stair & Balcony Balustrades.	NA/WSP	Ongoing		
															Charles Henshaw & Sons	Subcontractor
DG 5	HIGH - 1	Atrium Glazing			WP790b	Glazing to Adult's Atrium Ward Towers (Internal Corners)	completed	07/03/2012	14/05/12 & 16/05/2012	NA-TRANSMIT-002630 & 002661	ISSUED FOR T2	Adult Atrium RDD Workshop took place on 22/05/12. Package currently out to tender and NA/BM responding to Subcontractor queries. NA attended meeting with Henshaws on 04/07/12; additional information requested from Subcontractor to support tender. NA to update drawings to reflect amended glazing sizes due to core cladding construction design development.	NA/BM	ongoing	Stephen O'Shea; Rob Hall	NA
					WP790c	Glazing to Adult's Atrium Cores (A, B, C & D)	completed	07/03/2012	14/05/12 & 16/05/2012	NA-TRANSMIT-002630 & 002661	ISSUED FOR T2	BM to provide detailed programme for Adult Atrium for NA to review T3 dates.	BM	Outstanding		
DG 5	LOW - 3	Internal Roller Shutters			WP715	Internal Roller Shutters - Restaurant, Cafe, Pharmacy		25/01/2013			PENDING	Co-ordinate with Catering (CDS) package			Stephen O'Shea	NA
DG 5	MED - 2	Feature Ceilings & Lighting Panels			WP731a	Fabric Ceilings (Barrisol) Adults	completed	08/10/2012			IN PROGRESS	Incorporates Main Entrance fabric ceiling, soffit of Link Bridge and ceiling lighting panels. Dates amended & agreed. Co-ordinate with MER (Feature Lighting).			Rob Hall	NA
												T2 dates amended.				
DG 5	MED - 2	Adult Sanctuary			WP785c	Internal Wall Cladding - Adult Sanctuary (outer cladding)	completed	16/03/2013			IN PROGRESS	Incorporates wall cladding, glazing & barrisol. Dates amended & agreed. Co-ordinate with MER (Feature Lighting).			Rob Hall	NA
												Design/detailing to match Atrium Pod Cladding.				

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DG 5	LOW - 3	Atrium Flooring			WP740	Ceramic Tiling/Terrazzo		19/04/2013			PENDING	Co-ordinate with Artist's design			Rob Hall; Elizabeth Petrovitch	NA
					WP752	Timber Floors (Restaurant, Sanctuary, Level 01 Balcony)		10/12/2012			PENDING	Dates amended & agreed			Andreas Schulz; Elizabeth Petrovitch	NA
					WP741	Entrance Matting		03/06/2013			PENDING	Dates amended & agreed			Andreas Schulz; Elizabeth Petrovitch	NA
DG 5	LOW - 3	Feature Balconies			WP921	Metalwork - Internal Stair & Balcony Balustrade		16/04/2013			PENDING	Glazing infill panels, balustrades, handrails & feature white wall. Co-ordinate with Astins (clarify scope of works)			Stephen O'Shea	NA
DG 5	LOW - 3	Coffee Lounge & Restaurant			WP950	Coffee Areas		24/03/2013			PENDING	Co-ordinate with Catering (CDS) package. Includes wall cladding to 1st floor Coffee Shop			Rob Hall	NA
DG 5	LOW - 3	Retail / TPI									PENDING	RFI raised with NHS to clarify scope	BM		Stephen O'Shea	NA
6		**Children's Atrium**														
DG 6	HIGH - 1	Design Co-ordination Workshop	Wednesday	monthly?	**Children's Atrium**						IN PROGRESS	NA suggest focus Work Group for each atrium			Danielle Barnard	NA
		Integration into RDD Interior Design Group presentations	(alternate with Adult Atrium)									BM to complete full cost review of NCH atrium to follow similar format/process as completed Adult Atrium exercise.	BM/NA	Ongoing	Emma White	NA
		Access & Maintenance Strategy										NCH Atrium meeting aranged 29/08/12	BM/NA	29/08/2012	Liane Edwards	NA
		Co-ordination with M&E Feature Lighting										Atrium RDD presentations with NHS postponed until subcontractor details confirmed. New dates to be agreed when detailed programme agreed.	BM	Outstanding	Jim Murray	BM
		Co-ordination with Astins													Alasdair Fernie	BM
		Fire Strategy													Paul Heath	BM
															Gavin Burnett	BM
															Ken Hall	BM
															Kenny Hamill	WSP
															John Young/Neil McGarry	WSP
															Andrew Percival	ZBP
															Brendan Rooney	MER
															Jeff Murdoch	URS
															tbc	Subcontractors
DG 6	HIGH - 1	ETFE Roof			WP420	ETFE inc Structural Support – Children's	03/10/2011 - completed	07/03/12	21/03/2012	NA-TRANSMIT-0002429 and NA-TTRAN-000004	Subcontractor Design Development	NHS request further details on ETFE roof during HDG held on 04/07/12 - BM to advise when subcontractor drawings will be available.	BM	Ongoing	Stephen O'Shea; Danielle Barnard	NA
												Subcontractor design has commenced; NA responding to queries as required. Next meeting 29/08/12.	BM/NA	Ongoing		
DG 6	MED - 2	Atrium Cladding			WP788	Internal Wall Cladding - Children's Atrium	completed	24/08/2012			IN PROGRESS	Dates amended & agreed. T1 full set of NCH Atrium drawings issued to BM for Cost Review. BM reviewing draft T2 package; feedback meeting 14/09/12 to agree content/details on final T2 package.	BM/NA	Ongoing	Danielle Barnard	NA
DG 6	MED - 2	Atrium Glazing			WP790d	Glazing to Children's Atrium	completed	02/07/2012	10/07/2012	NA-TTRAN-000004	ISSUED FOR T2	BM reviewing draft T2 package; feedback meeting 14/09/12 to agree content/details on final T2 package.	BM/NA	Ongoing	Danielle Barnard	NA
DG 6	LOW - 3	Internal Roller Shutters			WP715	Internal Roller Shutters - Family Info, Retail		25/01/2013			PENDING				Danielle Barnard	NA
DG 6	LOW - 3	Feature Light Boxes			WP731b	Feature Screens (Barrisol) Childrens		08/10/2012			IN PROGRESS	T2 dates amended.			Danielle Barnard	NA
											IN PROGRESS	Initial meeting with Soundtex took place on 06/03/12. Agreed list of actions distributed by BM to develop design & costing with Subcontractor in advance of programme.				
DG 6	LOW - 3	Atrium Flooring			WP740	Ceramic Tiling/Terrazzo		19/04/2013			PENDING	Co-ordinate with YCF/Glasgow Science Centre Enhancement Project			Rob Hall	NA
					WP752	Timber Floors (Sanctuary)		10/12/2012			PENDING	Dates amended & agreed			Elizabeth Petrovitch	NA
					WP741	Entrance Matting		03/06/2013			PENDING	Dates amended & agreed			Danielle Barnard	NA
DG 6	MED - 2	Medicinema			WP731b	Feature Screens (Barrisol) Childrens		08/10/2012			IN PROGRESS	T2 dates moved forward due to structural implications & BM requirement to let all Barrisol at same time. Co-ordinate with MER (Feature Lighting).			Danielle Barnard	NA
					WP731c	Support Structure for (Barrisol) Ceilings & Screens		08/10/2012			IN PROGRESS	NA developed alternative option for NCH Medicinema based on GRP due to issues delivering the design intent with full feature lighting (access & maintenance). BM confirmed costs OK - revised design will require submission to NHS under RDD before change implemented to package.	BM/NA	Ongoing		
DG 6	LOW - 3	Retail / TPI										RFI raised with NHS to clarify scope. BM to chase response & confirm full brief/Contractual requirements	BM		Danielle Barnard	NA

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No.	Priority	Name	Meeting Date	Frequency	WP No.	Work Package	Package Launch Date	T2 Date	Issue Date	Aconex Ref	Status	Comments	Action	Date Required		
7		**Specialist Areas & Equipment**														
DG 7	HIGH - 1	Design Co-ordination Workshop	09/05/12	Weekly	**Specialist Areas & Equipment**						IN PROGRESS	BM Schedule to be issued & urgent meeting to prioritise issues required. Co-ordination with NHS & Clinical Users	Closed	Initial Action Complete		
												Series of Design Meetings set-up by BM to review Design Checklists and finalise outstanding project requirements. First meeting took place on 09/05/12. Meetings completed - BM to discuss further internally and issue reduced Schedule/List to DT.	Closed	Initial Action Complete	Liane Edwards	NA
															Emma White	NA
															Jason Truscott	NA
															Annie Cheung	NA
															David Cartwright	BM
															Gavin Burnett	BM
															Ken Hall	BM
															Alasdair Fernie	BM
															Phil Biginton	BM
															Grant Wallace	BM
															John Young/Neil McGarry	WSP
															Andrew Percival	ZBP
															Brendan Rooney	MER
															Jeff Murdoch	URS
															tbc	Subcontractors
DG 7	HIGH - 1	Design Co-ordination Workshop			WP980a	Aseptic Suite		26/04/2012			Awaiting Subcontractor Appointment	BM confirm this will be a turn-key package. BM Specialist Area Workshop to be arranged. No current Design Team actions.	BM	Outstanding		
		Specialist Areas & Equipment			WP980b	Hatches Specialist (subject to strategy)		15/01/2013			PENDING	BM to confirm if this will be a turn-key package (note this should be Aseptic AND Decontamination). BM Specialist Area Workshop to be arranged.	BM	Outstanding		
					WP985	Audiology Rooms		09/07/2012			PENDING	Specialist Subcontractor design input required. BM Specialist Area Workshop to be arranged	BM			
					WP990	Hydrotherapy Pool	COMPLETE	30/01/2012	COMPLETE		ISSUED FOR T2	Awaiting Specialist Subcontractor design details for formal review. Drawings are required to be issued urgently by Workflow for Design Team review. NA issued setting-out for hoist; to be reviewed by NHS & subcontractor.	BM	Outstanding		
DG 7	LOW - 3	Catering Equipment (CDS)			WP610	Catering Equipment (CDS)	COMPLETE	COMPLETE	COMPLETE		ISSUED FOR T2	Construction co-ordination to be considered. All CDS regen kitchen drawings to be updated to reflect omission of food waste (as stated in PMI).	BM	Outstanding		
DG 7	HIGH - 1	Radiation Protection										RDD comments on RPA Strategy received - NA updated & re-issued. Additional RFI's raised by NA on details. Responses received; drawings re-issued and 1:50s reflect assumed LIG locations (NHS to review).	Closed	Initial Action Complete		
DG 7	HIGH - 1	Imaging Equipment (Group 5)										RFI raised with Client to confirm scope of works for BM fitting out. Equipment Schedule confirmation required	BM	Outstanding		
DG 7	MED - 2	Group 1 Equipment (Theatre Panels, Pendants etc)									IN PROGRESS	NHS issued PMI to advise Equipment amendments to Pendants, Canopies & Lights. NA including in updated 1:50 equipment plans, elevations & equipment lists/RDS. Any further amendments will need to take place after the current 1:50 Post Sign-Off (Stages, 2, 3, 4) Programme	BM/MER	Initial Action completed. Ongoing management of process by BM until final equipment approvals.		
DG 7	MED - 2	Decontamination Unit										Specialist Subcontractor design input required. BM to advise status	BM	Outstanding		

NEW SOUTH GLASGOW HOSPITALS PROJECT

DESIGN WORK GROUPS & PACKAGE CO-ORDINATION SCHEDULE

Reporting Period 17/07/2012 - 20/08/2012 **Revision** 07

DESIGN WORK GROUP					WORK PACKAGE										LEAD	CONSULTANT
No.	Priority	Name	Meeting Date	Frequency	WP No.	Work Package	Package Launch Date	T2 Date	Issue Date	Aconex Ref	Status	Comments	Action	Date Required		
8		**Building Control**	07/02/12	fortnightly		Local Authority Meetings/Approvals						Monitored within WorkGroup				
		Monitor Building Warrant Schedule										Stage 8 (A&C Fire Strategy): Outstanding items: escape ironmongery and Corridor smoke control doors; all other items cleared. 21 day consultation with AF&R completed, awaiting outturn report from Building Control.	BM/NA/WSP	**Ongoing**	Jason Truscott	**NA**
		Prepare Building Warrant Submissions										Stage 24 (Internal Fit-out PG 1, 2,3 & whole building sanitaryware): submitted (30/04/12) and awaiting response from Building Control. Response received; NA/BM currently reviewing.	NA/BM	**Ongoing**	Jim Murray	**BM**
		Respond to Building Control queries										Stage 20 (Building Envelope) - Bco raised additional queries, NA responding for 17/07/12. Responded 27/07/12 (NA-GC-008106).	Closed	**Complete**	Ken Hall	**BM**
															Darren Smith	**BM**
															John Young/Neil McGarry	**WSP**
															Andrew Percival	**ZBP**
															Laura Scott-Simmons	**GLL**
															Brendan Rooney	**MER**
															Jeff Murdoch	**URS**
																Building Control
9		**Fire Strategy**	08/02/12	fortnightly		Local Authority/Client Approval Meetings						Monitored within WorkGroup				
		Fire Cause & Effect										Escape ironmongery: Summary Report and RDD Access Control & Locking Strategy drawings submitted for Bco comment 27/07/12 (NA-GC-00810).	NA/WSP/BM	**Ongoing**	Jason Truscott	**NA**
		Building Control Fire Strategy issues										Corridor smoke control doors: Meeting with Bco 11/07/12 to confirm acceptance of additional doors offered. BCo rejected the proposals. WSP are producing Design Note to support not including any additional doors. Currently in final review stage prior to submission to BCo.	NA/WSP/BM	**Ongoing**	Darren Pike	**BM**
															Darren Smith	**BM**
															Kenny Hamill	**WSP**
															Andrew Percival	**ZBP**
															Brendan Rooney	**MER**
															Jeff Murdoch	**URS**
																NHS Client
																Building Control
10		**Planning Authorities**				Local Authority Meetings/Approvals						Monitored within DTM				
												List of outstanding Planning concerns to be addressed: rooftop plant, Children's Hospital Entrance Canopy/Columns & blanking panels to Main Entrance Elevation. NA issued proposals to BM for cost review - response outstanding.	NA/BM/IF	**Ongoing**	Neil Murphy	**NA**
												Review with NHS to close out remaining comments on location of 'fins' and ledges. NA to update 1:20 sections following agreement. Presentation to NHS required - date agreed for 27/06/12. Meeting took place; NA updated drwaings were issued and presented to Planners 18/07/12.	Closed	**Complete**	John Wiggett	**NA**
												External Feature Lighting to be reviewed against Design Statement submitted for Planning. NA & ZBP issued outline strategy to BM/MER. MER producing proposals/cost plan. Meeting scheduled for 18/08/12.	NA/BM/IF/ZBP	**18/08/2012**	Jim Miller	**IF**
												Courtyard Elevation - detail for recessed 'band' agreed to be omitted. NA updated drawings & issued to Board for RDD review prior to submission to Planners. Drawings presented and approved by Planners.	Closed	**Complete**	Jim Murray	**BM**
												Meeting took place 05/07/12 to review updated design drawings prior to issue to close out Planning issues (following receipt of updated NA drawings). NHS comments received & drawings amended. Drawings presented and issued to Planners 18/07/12.	Closed	**Complete**	Darren Smith	**BM**
															John Young/Neil McGarry	**WSP**
															Andrew Percival	**ZBP**
															Laura Scott-Simmons	**GIL**
11a		**Design Team Meeting**	Third Monday	monthly		Progress Meetings						Monitored within WorkGroup				
		Monthly Progress Reporting Meeting													Neil Murphy	**NA**
		Design Work Group Progress Update													Emma White	**NA**
		Construction Progress Update													Liane Edwards	**NA**
															Jim Murray	**BM**
															Gavin Burnett	**BM**
															Ken Hall	**BM**
															Alasdair Fernie	**BM**
															George Miller	**BM**
															Grant Wallace	**BM**
															Pete Dunbar	**WSP**
															Neil McGarry	**WSP**
															Steve Pardy	**ZBP**
															Brendan Rooney	**MER**
															Laura Scott-Simmons	**GIL**
															Jim Miller	**IF**
															Paul Goring	**ACL**
															Pete Dunbar/Neil McGarry	**WSP**
															Jeff Murdoch	**URS**
11b		**A&C Design Group Meeting** (NHS)	First Wednesday	monthly		Client Progress/Approval Meetings						Monitored within WorkGroup				
		A&C Design Group Meeting													Emma White	**NA**
		Pre-RDD Workshops													Liane Edwards	**NA**
		RDD Workshops													Jim Murray	**BM**
		RDD Schedule													Gavin Burnett	**BM**
															Ken Hall	**BM**
															Neil McGarry	**WSP**
															Steve Pardy	**ZBP**
															Laura Scott-Simmons; Ceara Pimley	**GIL**
															Brendan Rooney	**MER**
															Jim Miller	**IF**
															Jeff Murdoch	**URS**
																NHS Client

NEW SOUTH GLASGOW HOSPITALS PROJECT

DESIGN WORK GROUPS & PACKAGE CO-ORDINATION SCHEDULE

Reporting Period 17/07/2012 - 20/08/2012 **Revision** 07

DESIGN WORK GROUP					WORK PACKAGE											LEAD	CONSULTANT
No.	Priority	Name	Meeting Date	Frequency	WP No.	Work Package	Package Launch Date	T2 Date	Issue Date	Aconex Ref	Status	Comments	Action	Date Required			
12		**Programmes**	Friday	fortnightly		Progress Meetings						Monitored within DTM					
		Tender Event Schedule	Tuesday	fortnightly								Fortnightly TES Meeting arranged (Tuesdays). BM to update TES to reflect progress agreed in TES Meeting. NA suggest to move this to a monthly meeting due to limited no. of available attendees.	Note		Emma White	NA
		Design Programme										Design Programme dates reflective in TES and Consultant's Design Programmes.	Note		Jason Truscott	NA
		Construction Programme										Issues to be raised in fortnightly Tuesday Construction Meetings or escalated to DTM if unresolved	BM		Liane Edwards	NA
												BM to incorporate Consultant's comments to finalise Programme for future reporting.	BM		John Wiggett	NA
												BM issued early construction proposed programme for internal fit-out. NA responded and further details required from BM to allow NA to re-analyse all Internal Fitting-Out T3 programme dates. EWN to be raised.	BM		George Miller	BM
												NA reviewed accelerated BM programme and provided combined internal fit-out analysis design programme. NA have adjusted issue dates to suit BM requirements and confirm that generally these dates are achievable. Final confirmation of NA dates to be provided by 27/07/12. BM to then update Design Programme to reflect the final agreed dates.	NA	Ongoing	Jim Murray	BM
															Gavin Burnett	BM
															Nigel Hollowell	BM
															Alasdair Fernie	BM
															Grant Wallace	BM
															Andy Bebbington	BM
															Ope Adebanjo	BM
															John Young/Neil McGarry	WSP
															Steve Pardy	ZBP
															Laura Scott-Simmons	GIL
															Brendan Rooney	MER
															Jeff Murdoch	URS
															tbc	Subcontractors
13		**Early Warning Notices**	Friday	weekly		Progress Meetings						Monitored within WorkGroup					
		EWN Meeting										Reviewed in weekly Friday EWN Meetings. Major issues escalated to DTM if required.			Liane Edwards	NA
		EWN Schedule													Justin Liebenberg	NA
		Change Control													Darren Smith	BM
		RFI Schedule													Grant Wallace	BM
															Jim Murray	BM
															Neil McGarry/Michael Woods	WSP
															Mark Harris	ZBP
															Laura Scott-Simmons	GIL
															Brendan Rooney	MER
14		**Low Carbon/Sustainability**	First Wednesday	monthly		Client Progress Meetings						Monitored within WorkGroup					
		BREEAM										BRE comments returned on BREEAM on interim report. WSP forwarded architectural issues to NA. BRE comments inconsistant with Labs items which were previously approved by BRE. Currently reviewing actions (3xcredits) and providing additional supporting detail.	Closed	Complete	John Wiggett	NA
												1xcredit reuired signature on minutes by ALO; NHS will not request this; WSP to question BRE.	WSP			
		WRAP										Photovoltaics - BM to confirm status of package. Subcontractor details required to allow detailed design/planning to be completed. NA to indicate on roof plan for planning.	BM	Outstanding	Darren Pike	BM
		LOW CARBON TRACKER										NA/ZBP Daylighting report to be issued to NHS by BM.	BM	Outstanding	Gail Williams	WSP
		SECURE BY DESIGN										Initial meeting with NHS took place. DT producing a SBD Compliance Schedule. MER comments outstanding. BM to confirm whether design needs to respond to SBD requirements as noted on Compliance Schedule. Follow-up meeting held 13/08/12. NA to produce presentation and issue to NHS 12/09/12; meeting with Police ALO 19/09/12.	NA	Outstanding	Eddie Picton	ZBP
												MER meeting with police to review CCTVs/security design. BM to confirm if similar meetings required to close out architectual aspects and whether this is the process BM would like to continue. NHS request that consultation with ALO is to be 'managed' appropriately (i.e. co-ordinated response).	MER/BM	tba	Laura Scott-Simmons	GIL
															Brendan Rooney	MER
																NHS Client
15		**Energy Centre**	Thursday	weekly		Progress Meetings						Monitored within WorkGroup					
		Co-ordination Issues													Matthias Peretz	NA
		Design Progress Update													Jim Murray	BM
		Construction Progress Update													Tim Baillie	BM
															Russell Johnson	BM
															Dave Jordan	BM
															Neil McGarry	WSP
															William McColgan	WSP
															David Campbell	WSP
															Eddie Picton	ZBP
															Laura Scott-Simmons	GIL
															Declan O'Donovan	MER
															Robert O'Donovan	MER
															Brendan Coffey	MER
															Paul Goring	ACL
															Jeff Murdoch	URS

NHS Greater Glasgow and Clyde

New South Glasgow Hospitals (NSGH) Project

INVITATION TO PARTICIPATE IN COMPETITIVE DIALOGUE

VOLUME 2/1

EMPLOYER'S REQUIREMENTS (Hospitals)

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Section 1.0 Development Context

1.1 Introduction

The provision of new facilities at the Southern General Hospital site in Glasgow represents the second phase of the Acute Services Strategy of the Board.

As illustrated in Appendix A, the Hospital Campus extends to some 28.6 hectares and is located within the Govan area, lying to the south-west of Glasgow City Centre adjacent to the residential neighbourhood of Drumoyne and the industrial areas of Shieldhall and King George V Dock. The site is located 500 metres south of the River Clyde. The sites northern boundary is defined by Renfrew Road/Govan Road with the eastern boundary defined by Moss Road/A739 (Clyde Tunnel approach road). Langlands Drive and residential developments delineate the southern boundary and Hardgate Road runs north-westwards to identify the western boundary of the Hospital Campus.

The Site extends to some 8.6 hectares and is located in the west-central area of the Hospital Campus (see Appendix A). The Site is bounded by operational healthcare buildings to three sides, with boundaries to neighbouring industrial areas to the north/north-west. The existing buildings within the Site (excluding the Surgical Block) are to be demolished by the Board in advance of the scheme, as described in Section 2.3 below.

The scheme includes the provision of 1,109 adult and 240 children's beds. The bed numbers are illustrated in *Table 1 – Proposed Bed Numbers – Adult and Children's Hospitals.* Key elements of the project include:

a. Development of an integrated adult acute and children's hospital proving the full range of acute health services;

b. Development of a new Laboratory facility including Mortuary and Post-Mortem Services, Biochemistry, Microbiology, Haematology and Medical Genetics;

c. Provision of a rooftop helipad; and

d. The supply and installation of Group 1 equipment, location and/or fitting of Group 2 equipment supplied by the Board and provision of structural, space and services requirements to support Group 3 and 4 equipment.

It should be noted that Information Management and Technology (IM&T) is outwith the project, the Board is procuring software and end-use hardware as part of a separate IM&T project. The Contractor shall, however, provide the required space within the building and the requisite hard infrastructure and containment, in accordance with Section 8.0 and Appendix M, to support the Board IM&T requirements

Adult Hospital		Children's Hospital	
Specialty	**Beds**	**Specialty**	**Beds**
General Medicine (incl MHDU + AAU)	405	Inpatient (incl critical care areas) (*12 beds in maternity facility)	193*
CCU	20	Short-stay (observation ward)	20
Stroke	26	Day Care/Day Surgery	27
Haematology	14	**Total Inpatient Beds**	**240**
Dermatology	18		
Nephrology	80		
Geriatric Medicine	93		
Surgery & Vascular (incl AAU)	164		
Urology	39		
Orthopaedics/rehab	139		
ENT	31		
ITU	20		
SHDU	23		
Clyde/Contingency	37		
Total Inpatient Beds	**1,109**		

Table 1 – Proposed Bed Numbers – Adult and Children's Hospitals

1.2 Accommodation Overview

1.2.1 New Adult Hospital

This will provide A&E services and acute specialist in-patient care as well as medical day services and out-patient clinics serving the local population.

Key components of the facility will include:

a. <u>In Patient Accommodation</u>
Surgical beds (general surgery, orthopaedics, urology, vascular, ENT and renal); Medical beds; Acute Assessment Unit – 118 beds, ICU/HDU/CCU – 79 beds, Acute Stroke – 26 Beds and Care of the Elderly 93 beds;

b. <u>Out Patient Accommodation</u>
Full range of general outpatient clinics including, among others, diabetic unit, respiratory, orthopaedics and urology;

c. Day Services
22 medical day bed area; 30 station dialysis unit;

d. Treatment & Diagnostic Services
Emergency Department, 20 operating theatres, imaging, and endoscopy;

e. Clinical Support Services
Pharmacy dispensary, medical physics, medical illustration. Laboratory services linked to the hospital by underground route and pneumatic tube system, aseptic unit within the children's hospital. The pneumatic system to extend across the abutment with maternity and the link to neurosciences to provide for expansion of the system to these areas; and

f. Non Clinical Support Services
Main entrance, medical records, administration, chaplaincy, social work, staff changing, switchboard, estates, facilities, security, catering, portering, domestic, management and energy centre.

1.2.2 New Children's Hospital

This will provide A&E services and a comprehensive range of inpatient and day case specialist medical and surgical paediatric services on a local, regional and national basis. The new development will also have outpatient facilities. The care strategy is that all of Glasgow's Children's Services (up to the age of 16 and up to 18 years where appropriate) will be provided at the New Children's Hospital. Of the 240 beds planned, around 20% of the beds will be for day patients and the balance for in-patient requirements.

Key components of the facility will include:

a. Outpatient Accommodation
Full range of Children's outpatient clinics including audiology, general paediatrics, orthopaedics, ENT etc;

b. Day Services
Circa 10 medical day beds; 4 dialysis stations and circa 25 day surgery beds;

c. Treatment & Diagnostic
Accident and Emergency, minor injuries, Imaging, 9 theatres, rehabilitation;

d. Clinical Support Services
Aseptic unit, pharmacy, medical physics, medical illustration (laboratory services linked to hospital by underground route and pneumatic tube system – tube system to be extended across abutment with maternity/neo-natal to provide for potential expansion of the system); and

e. Non Clinical Support Services
Facilities, ancillary services, administration, spiritual services, medical records, staff change, staff dining.

1.2.3 Laboratory Facilities

The new facilities will be one of two major Laboratory sites in Glasgow (the other at Gartnavel General). The services planned to be delivered from the new Laboratory build at the New South Glasgow Hospitals include Biochemistry, Microbiology, Haematology, Medical Genetics, Mortuary and Post Mortem. The mortuary and post mortem facilities include the re-provision of the Glasgow City mortuary which also provides forensic services for the City of Glasgow. The Employer's Requirements in relation to the laboratory facilities form Volume 2/2 of the ITPD and laboratories (buildability and interfaces) shall form a workstream of competitive dialogue between the Board and bidders.

1.2.4 Facilities Management Building and Energy Centre

These key support accommodation areas shall be developed in line with the operational needs of the Board and the energy strategy adopted for the project. The Facilities Management accommodation is located in the Laboratory building and the requirements in this regard are included in Volume 2/2 of this ITPD.

1.2.5 Retained Services

The Southern General Hospital site will retain approximately 630 beds within the institute of neurological sciences, Maternity, Spinal Injuries and Langlands buildings. The Langlands facility provides older people's services, dermatology and services for the young physically disabled.

1.3 Elements of Procurement

1.3.1 As detailed in Volume 1 of the ITPD, the procurement is following a competitive dialogue route. The areas for inclusion in the competitive dialogue have been established, with the following topics identified:

a. Design;

b. Logistics;

c. Laboratories (incl FM accommodation); and

d. Commercial.

Volume 1 of the ITPD provides further detail on the scope, extent and requirements of the competitive dialogue, including identification of the issues and aspects of each topic that shall be considered.

1.3.2 As detailed in Volume 1 of the ITPD, the Works are comprised of several Stages, namely:

a. Stage 1 – Laboratory Design & Construction;

b. Stage 2 – Hospitals Detail Design to FBC;

c. Stage 3 – Construction of Hospitals; and

d. Stage 3A – Landscaping Completion (including demolition).

Section 2.0 Responsibilities of the Parties

2.1 Introduction

The Board wish to procure Works which shall enable it to carry out its clinical functions, to combat health acquired infection and to maintain physical assets and clinical and non-clinical functionality with ease; and it shall be the responsibility of the Contractor to deliver a design and construction solution that optimises these requirements. The Board wish to provide its clinical functions in a high quality care environment which is accessible to the community, welcoming, safe and aesthetically pleasing. Innovative design and construction proposals, which as a minimum meet the requirements of the Works Information, Site Information and Employer's Requirements are sought from the Contractor.

2.2 Responsibilities of the Contractor

The Contractor shall be responsible for the following:

2.2.1 Providing Works that are fit for purpose;

2.2.2 Meeting all of the requirements of the Board stated in the Works Information, Site Information and Employer's Requirements as a minimum requirement;

2.2.3 The tasks, risks and aspects of the project identified as owned by the Contractor in the Risk Register;

2.2.4 Assisting the Board with the management of the risks identified as owned by the Board in the Risk Register;

2.2.5 Working with the Board and it's advisers in fulfilling all of the requirements and good practice inherent in the NEC3 contract;

2.2.6 Compliance with the requirements of the Construction (Design & Management) Regulations;

2.2.7 Providing a design that meets the relationships identified in the Adjacency Matrix;

2.2.8 Diverting the culverts that cross the Site and the other remaining services;

2.2.9 Obtaining all Consents required for the construction of the Works, including but not limited to the under noted. With regard to the under noted the Contractor shall provide to the Board copies of the following documents within 10 working days of all purification and discharge notices from date of issue by the appropriate authority:

2.2.9.1 Planning Approvals;

2.2.9.2 Building Warrant (incl Stage applications if applicable);

2.2.9.3 Building Warrant – Certificates for full occupancy;

2.2.9.4 Pre-construction Information and Construction Phase Health &Safety Plan;

2.2.9.5 Health and Safety File;

2.2.9.6 Utilities Suppliers Consents;

2.2.9.7 Other Local Authority Consents, including Building Control, Roads Construction Consent, Fire Strategy etc;

2.2.9.8 Certification for PMG installation;

2.2.9.9 Relevant Civil Aviation Authority and Strathclyde Fire and Rescue documentation in relation to the provision by the Contractor of a rooftop helipad;

2.2.10 Procuring that the Works are at all times performed:

a. In compliance with all Law and Consents;

b. In a manner that is not likely to be injurious to health or to cause damage to property;

c. Without injury, nuisance, interruption to, or other detriment of the existing clinical and support services current on the site;

d. In a manner consistent with the Quality Plans;

e. Except to the extent expressly stated to the contrary in the Works Information, Site Information or Employer's Requirements in compliance with all NHS Mandatory Documentation, NHS Guidance Documentation and Additional Guidance contained in Section 5.1;

f. In a manner consistent with the Board discharging its statutory duties and other functions undertaken by it as the same may be notified to the Contractor from time to time;

g. In accordance with all British and European Standards; and

h. In accordance with Good Industry Practice.

2.3 **Responsibilities of the Board**

The Board is responsible for the following:

2.3.1 The provision of the area of the Site agreed between the Board and the Contractor clear of buildings and known utilities unless otherwise illustrated. This to include the grubbing out and removal of foundations and underbuildings. Remaining utilities to be addressed by the Contractor are identified on the drawing illustrating same in Appendix M; and

2.3.2 The provision of access (agreed by the Board in writing in advance) to areas of the Hospital Campus to allow the Contractor to make utility connections, corridor/building linkages and other relevant activities identified to carry out the Works.

Section 3.0 The Site

3.1 The Site

The Site is located at 1345 Govan Road within the Hospital Campus. The boundary of the Site is identified in Appendix A.

Site Investigation (SI) work has been undertaken by the Board. The relevant SI information and associated interpretative reporting is located in Appendix N.

3.2 Travel Plan

The draft Travel Plan developed by the Board is located in Appendix W.

3.3 Planning

Outline planning permission has been secured by the Board (a copy of the communication issued by GCC in relation to the permission is attached at Appendix D.1). The outline permission has forty-three conditions attached and was conditional to the Section 75 Agreement being concluded in respect of transportation issues.

The Section 75 Heads of Terms (HoTs) are agreed between the Board and the Council, the HoTs for a proposed Fastlink service will be concluded by the Board as an aspect of the masterplanning prior to the conclusion of the competitive dialogue process.

The status of planning matters are identified in Appendix D.2, with details of the Masterplanning carried out by the Board in Section 7.0 of the ERs. As noted in Section 2.2, above, the Contractor is responsible for gaining and discharging Detailed Planning Approval.

3.4 Live Hospital Site

The Hospital Campus is a live hospital site, and as such will place restrictions on the Contractor in the construction of the Works. Essential ‘blue light’ and other access routes will require to be unobstructed by the Contractor 24hours per day, every day.

The ‘blue light’ and other access routes/site constraints are identified in Appendix A.

3.5 Other Projects On-Site

In addition to the ongoing access and operational requirements of the Board to deliver medical and related services, there shall be other construction projects and programmes ongoing on the Hospital Campus at varying times when the Contractor will be constructing the Works. This may include (but not be limited to) works to create a new-neo natal facility, multi-storey car parks and university facilities as well as a variety of site enabling, ongoing maintenance, utilities and demolitions works.

3.6 Site Logistics

Site Logistics shall form a Dialogue Issue during the Bid Period, this will include discussions in respect of both the live hospital site and other projects on-site, with relevant responsibilities, interface protocols, communications plans and emergency/contingent planning to be discussed and agreed with the Board.

Section 4.0 General Design Requirements

The following section provides an overview of the Board's key objectives for the Works. The Contractor's proposals should clearly demonstrate cognisance of these objectives in relation to the design and the construction process. In particular, the operational, functional and equipment issues contained in the Employer's Requirements must, as a minimum standard, be met by the design and construction solutions of the Contractor. Further to this, the Contractor shall ensure the design delivers a solution which indicates acknowledgement and understanding of the types of patients that are planned for the facility.

The Contractor must take cognisance of the following documentation in his design solutions and shall require to demonstrate in his bid return strategies to embrace the ethos of the documentation in the development of the design:

a. Scottish Government's Policy and Design Quality for NHSScotland;

b. The NHS Greater Glasgow and Clyde Design Action Plan;

c. Achieving Excellence in Design Toolkit (AEDET Evolution);

d. Scottish Planning Policy SPP6; and

e. Planning Advice Note 84.

Further, the Contractor shall design the Works to address the following issues:

4.1 Uses

4.1.1 Functional Requirements

The design of the Works shall:

a. Function efficiently, effectively and economically;

b. Optimise the Board's operating costs;

c. Demonstrate that the design fully reflects the special needs for each patient group in terms of access, functional relationships and planning. Patient groups are described and their particular requirements are defined in the Clinical Output Specifications in Appendix B and the mandatory and relevant guidance listed in Section 5.1. The facility as a whole should be fully accessible to the widest variety of patient groups, ambulatory, assisted and non ambulatory patients of all ages providing access to specialist services led by medical staff, allied health professionals and nursing staff;

d. Interface easily with other service providers in particular the wider services provided by the Board; and

e. The design shall be able to do this in terms of environment, scale, comfort, privacy, reassurance, style and security.

4.1.2 Human Dignity

To achieve appropriate levels of privacy, the Contractor shall provide Works which allow adequate space around patients. This may include space for relatives to sit with patients, adequate space between chairs, and seating in rest bays along corridors to provide rest places along the route of the patient / visitor journey. The privacy afforded to patients, staff and visitors shall not be compromised by inappropriate or inadequate sound reduction measures in the design or in the build standard.

Sill heights for windows shall enable outward visibility, in particular for children, patients in wheelchairs and in beds. Special consideration shall be given to the needs of the elderly and those with poor sight. Some doors and internal glazed screens shall require vision panels or other glazing systems, which may be obscured or controlled for privacy. The ability to use vision panels to view objects / small children on the other side is desirable.

4.1.3 Functional Relationships

The design shall offer all users of the Works the highest level of efficiency in their operations by way of relationships and adjacencies between functional units. Layouts shall reflect the workflow and logistics inherent in the Clinical Output Specifications in Appendix B; the parameters identified in the Adjacency Matrix; and the requirements of the housekeeping and domestic staff, catering, staff welfare and related management needs.

4.1.4 Work Flows & Logistics

Workflows within and between departments shall be direct and the routes for patients and staff as short as possible. Internal traffic cross-flows which could be inefficient or conducive to the transmission of micro-organisms either through airborne or other means shall be avoided.

The movement of people and the distribution of supplies and waste shall be carefully considered and the circulation routes shall be clear and appropriately sized, with the use of automated material transfer systems where relevant.

4.1.5 Adaptability & Expansion

The design shall consider the needs for departments to be adapted or expanded. This will require a range of approaches to be taken including the allocation of soft space adjacent to clinical spaces. The design shall demonstrate that potential change or expansion has been considered by the provision of adequate space either at the external perimeter and / or between functions and departments.

The structural grid, construction technique, structure, service penetration and engineering services strategy shall demonstrate that the design proposals for expansion, adaptation and flexibility are co-ordinated.

The provision of engineering, telecommunications infrastructure and building services shall be appropriate for the provision of anticipated changes in medical equipment.

4.2 **Spaces**

4.2.1 Space Standards

The Contractor shall provide designs which are efficient, economical and flexible for immediate and future use, and which can be managed efficiently to cope with seasonal and strategic variations in activity.

Appropriate space provision shall be given to circulation, waiting and sub-waiting space for the movement of patients, pedestrians and the storage and transportation of goods.

Space shall be considered to allow informal discussion, therapy and interaction within open and reception areas in the clinical environment, such as consultation and main waiting and reception areas. Consideration shall also be given to making use of open space areas within clinical areas and main circulation routes for 'break-away' space such as corridor recesses and courtyards.

The Contractor shall recognise that patients' and staff's perception of the spaces created may assist with their feeling of belonging and of not being intimidated, and may help with their orientation, mobility, confidence, privacy and their ability to socialise.

4.2.2 Floor Layouts

The design of departmental and unit layouts shall reflect the demand for space defined by occupancy and usage as described in the Clinical Output Specifications and reflected in the Exemplar Design/SoA. Where areas and shape of rooms results in undesirable spaces, the Contractor shall discuss with the Board alternative solutions, which may or may not result in shared space providing a more appropriate environment as well as optimising the available use of space. These may include locker rooms, sitting areas, seminar rooms etc.

4.2.3 Character & Innovation

4.2.4 Excellence for Patients

The design of buildings, external and internal appearance as well as the design of the external works, and landscape can have a positive or a negative effect upon patient care, staff experience at the work place and the way NHS healthcare buildings are perceived. The Contractor shall develop design solutions which by the use of materials, lighting, shape, scale, mass and form of the building elements make a positive contribution to engendering well-being of patients and staff.

4.2.5 Healthcare Excellence

Healthcare buildings should fit within their community and be compatible in design and the use of materials with their neighbourhood and have a strong NHS identity. The Contractor shall develop building design solutions that:

Reinforce the dependability and reassurance that the NHS means to the local community;

Respect their local environment but at the same time make a positive contribution to the urban context that they are in;

Clearly expresses their function in external and internal appearance;

Allows patient diagnostic and treatment areas that can be differentiated in design concept and detail from inpatient areas; and

Reflect that design considerations such as the distribution, size and proportion of windows and the use of materials can reflect the clinical function.

These elements shall be expressed in the scale and mass of the buildings, as well as the disposition of functions.

4.2.6 Architectural Vision

The Contractor shall develop building design solutions, which create an ordered composition of building elements in a stimulating form that successfully combines good standards of space, height, form, scale and use of materials and colours / images with associated functional requirements and its surroundings.

4.2.7 Stimulating Design

The Contractor shall develop building design solutions which create a high quality, good working environment, both externally and internally, which shall provide a reassuring, enjoyable, convenient and safe environment for all patients, their families, visitors and staff. This objective shall not be in conflict with the desire to produce a stimulating design. The Contractor shall meet this objective and shall develop a design which will not date and be capable of coping with future changes in a way that does not destroy the original design vision / concept. Further, the design shall incorporate best practice in terms of aspects of design that positively impact on health and recovery.

4.2.8 Design Innovation

Innovation in design can range from whole concepts of healthcare facilities' planning, distribution of functions etc to detail design of components, materials, spaces, use of technology etc. The Contractor shall develop designs at the concept level which shall translate the NHS modernisation agenda, and new forms of service delivery into new and innovative building solutions.

4.2.9 Recognisable Quality

The Board expects high quality design to match the best national standards of healthcare provision it intends to implement.

Materials shall be substantial and of high quality. They shall be carefully detailed and constructed such that the quality is appreciated throughout the life of the Works. They shall retain their appearance within a compatible maintenance regime. For example, detailing of external materials shall not cause unsightly staining.

The lifecycle plan and design detailing shall allow for replacement of elements in a way that does not impair design quality or service provision. A schedule of required life expectancies of building elements can be found in Section 5.3.

4.3 Citizen Satisfaction

4.3.1 Design Concept

The visual forms shall enhance the sense of place. They shall make best advantage of the environmental qualities of the Works and the wider Site.

The design concept shall be clear, and will not be compromised by the subsequent detailed design development. The design concept shall be complete and well balanced, with all parts relating to the whole.

4.3.2 Scale & Proportion

Appropriate scale and proportions shall reflect the human scale, adjoining urban surroundings and any existing buildings / structures retained on the Site. Plant rooms, lift and stair towers shall express form and function, but they shall not be perceived as dominating and oppressive.

4.3.3 Composition

The composition of the buildings shall be complete, cohesive and well balanced in massing. The visual form shall enhance the Site and sense of place. This can be done in a number of ways including by linkages to surroundings in plan form, expressions in the design of local character and including natural features of the Site in the composition.

The overall form of the buildings shall be designed to demonstrate the special needs of the function of each unit. The design shall clearly express in the form of the buildings the individuality and special nature of parts of the Works, yet the parts should harmonise with the Works and the overall site. The Contractor should give particular consideration to the architectural composition and expression of the following key aspects of the facility;

a. The form of the Adult Acute and Children's Hospital while mutually compatible should have an identifiably distinct character expressed both externally and internally as befits the nature of the patient groups; and

b. The Contractor will be require to ensure that the new Works are consistent with the overall masterplan strategy and with the existing facilities on the site, as such particular consideration should be given to the adjoining neonatal unit (which requires to be co-joined by an abutment) and the provision of a link to the institute of neurological sciences.

4.3.4 Aesthetics

The overall visual form of the buildings shall combine good standards of space, height, form and scale. The form of the buildings shall appeal to the aesthetic senses of patients, visitors and staff as follows:

The lines of the design shall clearly define forms and surfaces of the buildings;

The skyline shall reflect the mass of the buildings but not be out of scale and dominating;

The sky line shall not be monotonous;

The solid forms shall be in scale and have harmonious shapes; and

The interplay of light and shade shall add to the definition of the building form and the balance between solid and glazed elements should be carefully considered.

4.3.5 Colour & Texture

Colour decoration and motifs shall be used to facilitate identity of the Works; and its designated areas / zones and in addition improve wayfinding. It can also be used to create an immediate and distinct 'image' of the Works to visitors, which is interesting and stimulating.

The use of colour shall be co-ordinated and adapted with the lighting to the activities of each area, toned down in certain areas e.g., quiet areas, seminar rooms; but bright and stimulating in others, such as waiting and corridor areas.

The Board shall be entitled to choose the colour scheme in consultation with the Contractor and the Contractor shall liaise with the Board and nominated User groups and other representatives (e.g. BATH – Better Access To Health) in this regard.
An interior designer shall be included in the Contractor's design team to secure a clear co-ordination of the interior materials within the Works, matching the furniture, furnishings and equipment being procured by the Board. The colour scheme should be selected with due regard to integration with the Art Strategy as identified in Section 7.17.

4.4 Internal Environment

4.4.1 Quality Environment

The design of the Works shall create a high quality, good working environment, both externally and internally which will provide a reassuring, enjoyable, convenient and safe environment for all patients, their families, visitors and staff.

4.4.2 Light & Colour

The design shall provide quiet, comfortable areas with pleasing outlook easily accessible from clinical areas where patients and their families / visitors can "escape" from the clinical environment. Such areas may facilitate informal discussions with health professionals in the future, and be equipped for play / recreation. Where possible natural sunlight is to be brought into areas. The Contractor shall liaise with the Board and nominated User groups and other representatives (e.g. BATH – Better Access To Health) with regard to light and colour aspects.

4.4.3 Views

The Works shall provide quiet, comfortable areas with pleasing outlooks and easy access from clinical areas.

4.4.4 Internal Wayfinding

Design solutions shall incorporate an integrated, comprehensive wayfinding strategy that enables patients, visitors and staff to self-navigate with ease and lack of stress throughout the buildings.

The wayfinding strategy shall be designed to meet the needs of patients and visitors but routes shall be clearly defined to ensure that parts of the buildings that are restricted to staff are not used as short cuts by patients and visitors. The use of enclosed internal courtyards as an integral part of a route shall be considered. The Contractor shall liaise with the Board and nominated User groups and other representatives (e.g. BATH – Better Access To Health) with regard to the use and detailing of internal wayfinding.

Internal signage shall be easily understood and consistent throughout the journey from the entrance to the department reception and on to rooms. It shall not create clutter and the use of pictograms and graphic art should be considered.

Proposals shall be developed which acknowledge the multi-sensory process used in wayfinding and which address the need of people with impairment in touch, smell, sight or sound. The proposals should be developed with due regard to the requirements of the NHS Identikit guidance.

4.4.5 Internal Spaces

All internal spaces shall be well planned and appropriate within clinical areas.

Some spaces shall be designed to encourage social interaction for patients, visitors and staff.

Public spaces shall be used to integrate the various parts of the buildings, and shall be designed to avoid being a space joined by long, narrow corridors.

4.5 Urban & Social Integration

4.5.1 The Contractor should recognise that the design of the new hospital offers the opportunity for a responsive design which addresses the requirement for the sharing of Works with the wider community for the mutual benefit of both the functioning hospital campus and the local community at large.

Embodied in this approach will be the Travel Plan which addresses issues of local and regional access to the new Works in terms of

a. Car parking provision;

b. Public Transport Nodes;

c. Distance to Local Amenities;

d. Pedestrian routes and links;

e. Facilities for cyclists; and

f. Segregation of emergency servicing and visitor access routes.

The Contractor's objective should be to create an easily accessible healthcare facility which incorporates a Green Transport Strategy, segregates traffic flows and prioritises pedestrian routes. The strategy will require to be jointly developed by the Contractor in conjunction with the Board and Glasgow City Planning Authority taking cognisance of the Board's site-wide masterplan requirements.

Given the nature of the patient group, the children's hospital shall be extensively accessed by family groups and parents at varying time of night and day. Accessibility and amenity in design should take cognisance of this consideration.

The Contractor should consider opportunities in the building for third party development of support facilities such as retail outlets, cafes, health clubs, sports injury clinics, gymnasiums etc.

4.5.2 Sense of Place

The Works shall be designed to compliment and enhance the quality of the design in the locality in which it is sited. It shall create a welcoming, inclusive and vibrant environment, and shall enable easy access by the communities and groups who will use it. It shall be seen as a leading edge community resource reflecting the objectives of a modern NHS in the regeneration of healthcare facilities.

The Works shall be organised to establish a continuity of building frontage and a clear definition of public and private spaces. The viewing of service areas or more "industrial" looking parts of the Works from public entrances or from adjoining public spaces shall be avoided.

4.5.3 Good Neighbour

The Contractor shall ensure they are considered as a 'good neighbour' throughout design and construction periods. It shall add value to the neighbourhood, not detract nor be a nuisance. The Contractor shall register with and fully comply with the requirements of the Considerate Constructors Scheme. All sites registered with the Scheme are monitored by an experienced industry professional to assess their performance against the eight point Code of Considerate Practice which includes the categories Considerate, Environment, Cleanliness, Good Neighbour, Respectful, Safe, Responsible and Accountable.

The three main areas that the Scheme's Code covers are:

a. The Environment: Registered sites should do all they can to reduce any negative effect they have on the environment. They should work in an environmentally conscious, sustainable manner;

b. The Workforce: Registered sites should provide clean, appropriate facilities for those who work on them. Works should be comparable to any other working environment;

c. The General Public: Registered sites should do all they can to reduce any negative impact they may have on the area in which they are working. Sites should aim to leave a positive impression on those they affect.

The Contractor shall provide Works which contribute to improving civic design, sensitive to its relationship with its surroundings, public transport and overall visual impact.

4.5.4 Neighbourhood & Community

The building height, volume and skyline shall relate well to the surrounding environment.

The design shall reflect the importance of the project in the context of community healthcare in the heart of an urban conurbation. Attention shall be paid to detail in the elevations, to ensure that blandness and lack of relief is avoided.

The form of development shall follow any changing topography across the Site, neighbouring properties, existing streetscape and landscape. The design of the Works shall be sensitive to and maximise existing Site features. It is envisaged that the buildings should compliment other new building developments in the area.

4.5.5 Site Fit

New buildings, parking areas, other infrastructure and services shall be located with regard to the existing landscape and topography. Amenity space shall be planned around the buildings at appropriate places.

The Contractor shall ensure that the design of the Works shall take account of the ecological and landscape features of the Site and maximise the retention of trees. There shall be a clear programme for future environmental improvements e.g., an arboricultural strategy for tree management and replanting, dedicated access to external grounds by patients, visitors, local communities and staff.

The design of the Works shall identify areas of the Site as possible expansion zones.

Suitable provision shall be made for refuse storage including provision of appropriate refuse bins and recycling facilities. Full details to be submitted to, and approved by the planning authority prior to the commencement of works

4.5.6 Hard & Soft Landscaping

The landscaping scheme shall be of a high quality. It shall assist in knitting the Works into its surroundings, and provide an interlinked network of attractive public spaces for amenity and circulation for use by patients, staff and visitors. The soft landscape design and choice of species shall be sympathetic to the character of the existing parkland landscape.

External hard and soft landscaping (including courtyards) shall be designed for therapeutic use and provide patient access. The landscape scheme shall facilitate security of pedestrians and avoid 'No-Go' areas. The design shall contribute to improving the environment of the local community.

Both hard and soft landscaping design require to specifically accommodate the needs of children and family groups, particularly in the areas adjacent to/around the children's hospital.

Courtyards adjacent to the amenity area require to be accessible to patients, visitors and staff, with the Contractor to co-ordinate fire escape solutions to support this function.

A comprehensive and integrated landscape strategy taking into account the existing landscape features shall be developed. A clear strategy shall be developed for appropriate formal and informal treatment of public and private areas.

For further detailed landscaping scheme requirements refer to Sections 7.13 and 7.14.

4.6 **AEDET and ASPECT**

Healthcare building design frequently involves complex concepts which are difficult to measure and evaluate. In order to assist both the Board and the Contractor, the Board expects the Contractor to utilise the Achieving Excellence Design Evaluation Toolkit, more commonly known as AEDET Evolution and the associated supplementary tool ASPECT which are recognised as the exemplars of Design Quality Indicator (DQI) tools.

AEDET and ASPECT are to be used to assist in achieving the appropriate level of project design management and will be specifically directed towards achieving excellence in design rather than ensuring compliance with legislation, regulation and guidance. The toolkit poses a series of clear, non-technical statements, encompassing the three key areas of Impact, Build Quality and Functionality as a tool for evaluating the quality of design in healthcare buildings which have been evolved from sources including the Commission for Architecture and the Built Environment (CABE) and the Construction Industry Council (CIC) to establish an industry-wide framework for assessing design.

AEDET shall be used at various stages during the design – as the level of detail of the information available increases it should be possible to respond to more of the statements in the tool. As a minimum AEDET assessments will take place on the return bids as well as in preparation for FBC.

To complement AEDET Evolution, the Department of Health (England) Estates and Facilities Directorate has developed the ASPECT toolkit. ASPECT stands for A Staff and Patient Environment Calibration Tool and is based on a database of over 600 pieces of research. That research deals with the way the healthcare environment can impact on the levels of satisfaction shown by staff and patients and on the health outcomes of patients and the performance of staff. This research and the ASPECT toolkit itself are set out under 8 headings. When used to support AEDET Evolution ASPECT enables the user to score the Staff and Patient Environment Heading of AEDET Evolution in a more detailed, accurate way.

Section 5.0 General Design & Construction Requirements

5.1 Minimum Design & Construction Standards

5.1.1 NHS Publications

General

5.1.1.1 The Board has considered the documentary advice and guidance provided by Health Facilities Scotland and the Facilities Directorate of the Department of Health in relation to Health Building Notes ("HBN"), Health Technical Memoranda ("HTM"), Fire Practice Notes ("FPN") and other National Health Service published material.

5.1.1.2 The Contractor in carrying out of the Works shall comply with the requirements of the documents listed in *Table 2 – NHS Mandatory Documentation* in Section 5.1.2. Specific statements of compliance form an aspect and element of the bid return and evaluation process and requirements, with the requirement for bidders to clarify their approach during the bid period as an aspect of the dialogue process.

5.1.1.3 The Contractor in carrying out the Works shall have regard to and take into consideration the requirements of the documents listed *Table 3 - NHS Guidance Documentation* in Section 5.1.3. Specific statements of compliance form an aspect and element of the bid return and evaluation process and requirements, with the requirement for bidders to clarify their approach during the bid period as an aspect of the dialogue process.

5.1.1.4 Documents listed in *Tables 2 and 3* (together part of "NHS Publications") are deemed to include all volumes, supplements and any other associated requirements, unless specific volumes, parts or the like are specifically noted or noted as excluded.

5.1.1.5 Any reference to HTM/HBN is deemed to include SHTM/SHPN. The requirements of SHTM/SHPN shall take precedence over HTM/HBN unless expressly required otherwise by the Board and noted in *Table 2 or 3.* Presently *Tables 2 and 3* include reference to HTMs in relation to services systems. It is the intention of the Board that the new SHTMs in these areas, due for release by HFS late April/early May 2009, will be adopted and require to be complied with, as shall other SHTMs issued during the procurement process (subject to 5.1.9 below) – this to be clarified by the Board during the bid period. Current draft documentation is marked in *Tables 2 and 3* in blue shading.

5.1.1.6 In the event of any conflict (including differing requirements or interpretations) between the requirements of the documents listed in *Table 2 or Table 3* and the requirements of building control officers, such conflict should be highlighted to the Board for agreement and resolution. The Contractor shall notify the Board in writing of any such conflict as soon as he becomes aware of same;

5.1.1.7 In the event of any conflict between the requirements of the documents listed in *Table 2 or Table 3* or any other drawn or written information issued by the Board and the Schedule of Accommodation (SoA) information issued by the Board in this ITPD, the SoA identifies the minimum area requirements of the Board (in relation to room sizes).

5.1.1.8 In the event of any conflict between the requirements of the documents listed in *Table 2 or Table 3* and any written or drawn information issued to the Contractor by the Board in this ITPD, the information issued by the Board shall take precedence.

5.1.1.9 All references in these Employer's Requirements to NHS Facilities Scotland Requirements, building and engineering standards, Building Regulations, legislation,

Statutory Requirements, Codes of Practice, Department of Health publications, NHS Publications and other published guidance shall be deemed to mean those in place at the date of signing the construction contract. Any date reference in *Table 2 or Table 3*, therefore, may be replaced/read as that in place at the date of signing the construction contract.

5.1.1.10 Except as noted in 5.1.7 or 5.1.8 above, the Contractor shall provide Works which comply at all times with the requirements of *Table 2, Table 3* and the Additional Guidance identified at Section 5.1.4.

5.1.2 NHS Mandatory Documentation

In relation to the architectural design, structural design, and services design of the new buildings comprised in the Works, the documents listed in the following *Table 2* below set out that guidance which the Board considers to be mandatory.

Document	Title
CEL 25	Fire Safety policy for NHS Scotland 2008
SHTM 81	Fire Precautions in new hospitals Version 3
SHTM 82	Alarm and detection systems Version 2
SHTM 82 SUPP A	Automatic fire control systems and voice alarm systems
SHTM 83	Fire safety in healthcare premises - general fire precautions Version 2
SHTM 85	Fire precautions in existing hospitals Version 3
SHTM 86	Fire risk assessment Part 2 Healthcare Premises Version 4
SHTM 87	Textiles and furniture Version 2
HTM 05 – 01	Firecode – Fire safety in the NHS
HTM 05 – 02	Firecode – Fire safety in the NHS
HTM 05 – 03 (incl.)	Firecode – Fire safety in the NHS
HSANs	All published Health and Safety Action Notices
NHSE 10	Cubicle Rails
NHSE HN04	Curtain Tracks
NHSE HN03	Centre Pivot Window
SAN05/08	Flooring Materials
SN(01)01	Cubicle Rail
HVHNs	All published High Voltage Hazard Notices
SHTM	EnCOde – making energy work in healthcare
	EnCOde resource material
CEL 18	Healthcare Associated Infection: SHFN 30 and HAI SCRIBE Implementation Strategy
	HAI SCRIBE
SHFN 30	Infection Control in the built environment:design and planning.

Document	Title
	Access Audit Survey Toolkit V1
	Access Audit Checklist V1
	Fully Accessible Toilets
	SHFN 14 Disability Access
	SHFN Access audits of primary healthcare facilities
SFPN 3	Escape bed lifts Version 2
SFPN 4	Hospital main kitchens Version 2
SFPN 5	Commercial enterprises on hospital premises Version 2
HBN 04-01	Adult in-patient Facilities
HBN 00-04	Common activity spaces: circulation areas
HBN 15 – 03	Hospital helipads
SHTM 00	Scottish Health Technical Memorandum 00: Best practice guidance for healthcare engineering
SHTM 2005	Building Management Systems Parts 1 – 4
HTM 06-01 Part A	Part A Elec Services Supply and Distribution
HTM 06-01 Part B	Part B Elec Services Supply and Distribution
Draft for Consultation SHTM 06-01 Part A	Part A Elec Services Supply and Distribution
Draft for Consultation SHTM 06-01 Part B	Part B Elec Services Supply and Distribution
SHTM 2007	Scottish Health Technical Memorandum 2007 (Part 3 of 4): Validation and verification Electrical services: supply and distribution
SHTM 2007	Scottish Health Technical Memorandum 2007 (Part 4 of 4): Operational management Electrical services: supply and distribution
SHTM 2009	Pneumatic Tube Systems Parts 1 – 2
SHTM 2010	Sterilization Parts 1 – 6
SHTM 2011	Emergency Electrical Services Parts 1 – 4
SHTM 2014	Abatement of Electrical Interference Parts 1 – 4
SHTM 2015	Bedhead services
	Part 1 Overview and management responsibilities
	Part 2 Design considerations
	SHTM 2015 forms
SHTM 2020	Electrical safety code for low voltage systems
	Volume 1 Operational management
	SHTM Volume 1 forms
	HTM Volume 2 forms

Document	Title
SHTM 2021	Electrical safety code for high voltage systems
	Part 1 Overview and management responsibilities
	Part 2 Operational management
	SHTM 2021 forms
HTM 02-01 Part A	Medical gas pipeline systems : Part A
HTM 02-01 Part B	Medical gas pipeline systems : Part B
Draft for Consultation SHTM 02-01 Part A	Medical gas pipeline systems : Part A
Draft for Consultation SHTM 02-01 Part B	Medical gas pipeline systems : Part B
SHTM 2022 March 2004	Supp 1 Dental compressed air and vacuum systems
	SHTM 2022 forms
SHTM 2023	Access and accommodation for engineering services
	Part 1 Overview and management responsibilities
	Part 2 Good practice guide
SHTM 2024	Lfts
	Part 1 Overview and management responsibilities
	Part 2 Design considerations
	Part 3 Validation and verification
	Part 4 Operational management
	SHTM 2024 forms
HTM 03-01	Specialised Ventilation for Healthcare Premises
HTM 03-01 Part B	Specialised Ventilation for Healthcare Premises Part B
HTM 03-01 Part A	Specialised Ventilation for Healthcare Premises Part A
Draft for Consultation SHTM 03-01 Part A	Specialised Ventilation for Healthcare Premises Part A
Draft for Consultation SHTM 03-01 Part B	Specialised Ventilation for Healthcare Premises Part B
	SHTM 2025 forms
SHTM 2027	Hot and cold water supply, storage and mains services
	Part 1 Overview and management responsibilities
	Part 4 Validation and verification
HTM 04-01 Part A	Control of Legionella...drinking systems Part A
HTM 04-01 Part B	Control of Legionella...drinking systems Part B
Draft for Consultation SHTM 04-01 Part A	Control of Legionella...drinking systems Part A
Draft for Consultation SHTM 04-01 Part B	Control of Legionella...drinking systems Part B

Document	Title
SHTM 2030	Washer disinfectors
	Part 1 Design considerations
	Part 2 Operational management
	Part 3 Validation and verification
SHFN	Access Audit Survey Toolkit V1
SHFN	Access Audit Checklist V1
SHFN	Fully Accessible Toilets
SHFN 14	Disability Access
SHFN	Access audits of primary healthcare facilities
SFPN 3	Escape bed lifts Version 2
SFPN 4	Hospital main kitchens Version 2
SFPN 5	Commercial enterprises on hospital premises Version 2
HBN 00 -02	Sanitary spaces
HBN 04-01	Adult in-patient Facilities
HBN 00-04	Common activity spaces: circulation areas
HBN 15 – 03	Hospital helipads
SHTM 00	Scottish Health Technical Memorandum 00: Best practice guidance for healthcare engineering
SHTM 2005	Building Management Systems: Parts 1 – 4 (incl)
HTM 06-01 Part B	Part B Elec Services Supply and Distribution
HTM 06-01 Part A	Part A Elec Services Supply and Distribution
SHTM 2007	Scottish Health Technical Memorandum 2007 (Part 3 of 4): Validation and verification Electrical services: supply and distribution
SHTM 2007	Scottish Health Technical Memorandum 2007 (Part 4 of 4): Operational management Electrical services: supply and distribution
SHTM 2009	Pneumatic Tube Systems: Parts 1 – 2 (incl)
SHTM 2010	Sterilization: Parts 1 – 6 (incl)
SHTM 2011	Emergency Electrical Services: Parts 1 – 4 (incl)
SHTM 2014	Abatement of Electrical Interference: Parts 1 – 4 (incl)

Document	Title
SHTM 2015	Bedhead services
	Part 1 Overview and management responsibilities
	Part 2 Design considerations
	SHTM 2015 forms
SHTM 2020	Electrical safety code for low voltage systems
	Volume 1 Operational management
	SHTM Volume 1 forms
	HTM Volume 2 forms
SHTM 2031	Clean steam for sterilization
SHTM 2035	Mains signalling
	Part 1 Overview and management responsibilities
	Part 2 Design considerations
	Part 3 Validation and verification
SHTM 2040	The control of legionellae in healthcare premises – a code of practice
	Part 1 Overview and management responsibilities
	Part 4 Validation and verification
	Part 5 Good practice guide
	Part 6 supplementary guidance applicable to intermittently used healthcare premises
	SHTM 2040 forms
HTM 08-01	Acoustics
MEIGaN	Medical Electrical Installation Guidance Notes (MEIGaN)
SHTM 54	User Manual
SHTM 55	Windows
SHTM 56	Partitions
SHTM 57	Internal glazing
SHTM 58	Internal doorsets
SHTM 59	Ironmongery
SHTM 60	Ceilings
SHTM 61	Flooring
SHTM 62	Demountable storage systems
SHTM 63	Fitted storage systems
SHTM 64	Sanitary assemblies

Document	Title
SHTM 66	Cubicle curtain track
SHTM 67	Laboratory fitting out systems
HTM 68	Duct and Panel assemblies
SHTM 69	Protection
Draft for Consultation SHTM 87	Textiles & Furniture

Table 2 – NHS Mandatory Documentation

5.1.3 **NHS Guidance Documentation**

In relation to the architectural design, structural design, and services design of the new buildings comprised in the Works, the documents listed in the following *Table 3* set out that guidance which the Board considers to be guidance.

Document	Title
	NHSSCOTLAND National Cleaning Services Specification
SFPN 6	The prevention and control of deliberate fire-raising in NHS Scotland healthcare premises Version 3
SFPN 10	Laboratories on hospital premises
SFPN 11	Reducing unwanted fire signals in healthcare premises
SHGN	Magnetic Resonance Imaging
SHGN	"Safe" hot water and surface temperatures
SHGN	Static discharges
SHGN	Structured cabling for IT systems
SHTN 2	Domestic Hot and Cold Water Systems for Scottish Health Care Premises
SHTN 4	General Purpose Estates and Facilities Model Safety Permit-to-Work System
SHTN 5	The Operation and Management of Emergency Electrical Generators in Scottish Healthcare Premises
SHTN 6	The Safe Operation and Maintenance of Thermostatic Mixing Valves
SHPN 03	General Design Guidance
SHPN 06 Part 1	Facilities for diagnostic imaging and interventional radiology
SHPN 08	Facilities for rehabilitation services
SHPN 13 Part 2	Decontamination Facilities: Local Decontamination Units
SHPN 20	Facilities for mortuary and post mortem room services
SHPN 22	Accident and emergency facilities for adults and children

Document	Title
SHPN 27	Intensive care unit
SHPN 28	Facilities for cardiac services
SHPN 35	Accommodation for people with mental illness
SHPN 52	Accommodation for day care: Day surgery unit
SHPN 52	Accommodation for day care: Endoscopy unit
SHPN 52	Accommodation for day care: Medical investigation and treatment unit
SHPN 54	Facilities for cancer care centres - design and briefing guide
Draft for Consultation SHPN 06 Part 2	Facilities for Diagnostic Imaging
Draft for Consultation SHPN 23	Hospital Accommodation for Children and Young People
Draft for Consultation SHPN 28	Facilities for Cardiac Services
Draft for Consultation SHPN 57	Facilities for Critical Care
	Wayfinding: Effective Wayfinding and Signing Systems guidance for healthcare
	Handover checklist for buildings
HBN 04 Supp	Isolation facilities in acute settings
HBN 06	Facilities for diagnostic imaging and interventional radiology
HBN 06 Vol 2	PACS and specialist imaging
HBN 06 Vol 3	Extremity and open MRI
HBN 08	Facilities for rehabilitation services
HBN 10	Catering department
HBN 12	Out-patients department
HBN 22	Accident and emergency facilities for adults and children
HBN 23	Hospital accommodation for children and young people
HBN 26	Operating Departments – Facilities for Surgical Procedures
HBN 28	Facilities for Cardiac Services
HBN 29	Accommodation for pharmaceutical services
HBN 37	In-patient facilities for older people
HBN 40 Vol 1	Common activity spaces: public areas
HBN 40 Vol 2	Common activity spaces: treatment areas
HBN 40 Vol 3	Common activity spaces: staff areas

Document	Title
HBN 45	External works for health buildings
HBN 51	Accommodation at the main entrance of a District General Hospital
HBN 52 Vol 1	Accommodation for day care: Day surgery unit
HBN 52 Vol 1 Supp 1	Review of schedules of accommodation
HBN 52 Vol 3	Accommodation for day care: Medical investigation and treatment unit
HBN 54	Facilities for cancer care centres
HBN 57	Facilities for critical care
HBN 00 -02	Sanitary spaces
HBN 00 – 07	Resilience planning for the healthcare estate
HBN 07 – 01	Satellite dialysis units
HBN 07 – 02	Main renal units
HBN 09 – 02	Maternity care facilities
HBN 14 – 01	Pharmacy and radiopharmacy
HFN 05	Design against crime: a strategic approach to hospital planning (now archived)
NHS Estates Improving the Patient Experience	Friendly healthcare environments for children and young people
NHS Estates Improving the Patient Experience	Welcoming Entrances and reception areas
NHS Estates Improving the Patient Experience	The Art of Good Health : Using visual arts in healthcare
NHS Estates Improving the Patient Experience	The Art of Good Health : A practical guide

Table 3 - NHS Guidance Documentation

5.1.4 **Additional Guidance**

5.1.4.1 Further to the requirement noted in Section 2.2, that the Contractor shall comply with all Law and Consents, and the requirements in relation to NHS Mandatory Documentation and NHS Guidance Documentation above, the Contractor shall also comply with the standards and documents listed below.

a) Health and Safety Legislation, including Construction (Design and Management) Regulations 2007;

b) The Technical Standards complying with the Building Standards (Scotland) Regulations 1990 as amended by all subsequent Amendment Regulations;

c) Disability Discrimination Act 1995;

d) Current British Standards, European Standards, and Codes of Practice, as appropriate;

e) Strathclyde Fire Brigade and the Glasgow City Council's Fire Officer requirements;

f) The Board's Approved Codes of Practice, Procedure and Policy documents as listed in Appendix G;

g) Control of Substances Hazardous to Health;

h) Health Department Letters (or Management Executive Letters) as appropriate published by SEHD;

i) NHS QIS (Quality Improvement Scotland) 2003;

j) NHS Model Engineering Specifications;

k) The Building (Scotland) Act 2003;

l) The Building (Scotland) Regulations 2004;

m) Requirements of the utilities companies;

n) Building Research Establishment Digest Recommendations;

o) Local Bye-Law and Regulations;

p) Scottish Centre for Infection and Environmental Health guidance / recommendations;

q) All other bodies and authorities having jurisdiction;

r) Secure by Design;

s) The Ionising Radiations Regulations 1999 (IRR99);

t) The Radioactive Substances Act (1993);

u) Medical and Dental Guidance Notes: A good practice guide on all aspects of ionising radiation protection in the clinical environment, Institute of Physics and Engineering (IPEM), York, 2002;

v) Various related to the additional security required re use of radioactive materials e.g. IRR99, RSA93, NHS Security Management guidance note 001/2004;

w) Guidelines for the use of PET-CT in Children (UK PET-CT Advisory Board), British Nuclear Medicine Society (BNMS), London, 2008;

Healthcare interpretation of IEE Guidance Note 7 (Chapter 10) and IEC 60364-7-710 for Electrical Installations in Medical Locations. Annex to MEIGaN, Leeds, June 2005;

x) Releasing Time To Care (RTTC): The Productive Ward (NHS Innovations, 2008);

z) Delivering Quality & Value, Institute for Modernisation & Improvement;

aa) The Internal Environment: Evaluation of the King's Fund, Enhancing the Healing Environment Programme (NHS Estates, 2004);

bb) Lighting and colour for hospital design, Dalke et. Al. (NHS Estates, 2004);

cc) The role of hospital design in the recruitment, retention and performance of NHS nurses in England, CABE, July 2004;

dd) Notes for Guidance on the Clinical Administration of Radiopharmaceuticals and Use of Sealed Radioactive Sources, Administration of Radioactive Substances Advisory Committee (ARSAC);

ee) Provision of Paediatric Radionuclide Imaging Services, British Nuclear Medicine Society (BNMS), London, 2003;

ff) Published papers on operational radiation safety e.g. Zanzonico P et al, Operational Radiation Safety for PET-CT, SPECT-CT and cyclotron facilities. Health Physics 2008;

gg) Standards for Intensive Care Units, A Joint Document for the Intensive Care Society and the Intercollegiate Board for Training in Intensive Care Medicine, May 2006;

hh) Leather P, Pyrgas M, Beale D and Lawrence C. Windows in the Workplace: Sunlight, View and Occupational Stress. Environment and Behaviour 1998; 30: 739 – 762;

ii) Leslie RP. Capturing the Daylight Dividend in Buildings: Why and How? Building and Environment 2003; 38: 381 – 385;

jj) Heerwagen J. Green Buildings, Organizational Success and Occupant Productivity. Building Research and Information 2000; 28: 353 – 367;

kk) National Overview – Adult Renal Services (March, 2003) NHS Quality Improvements Scotland;

ll) Adult Renal Services (Feb, 2002) Clinical Standards Board for Scotland;

mm) Treatments of Adults & Children with Renal Failure – Standards & Audit Measures, 3rd Edition, Renal Association (August, 2002);

In addition the renal COS notes that water treatment should reach a minimum of the following standards:

nn) The higher European Pharmacolela (EP) XV1 standard :'Water for diluting concentrated haemodialysis solutions';

oo) ISO 13959: 'Water for haemodialysis and related therapies' or
AAMI (Association for the Advancement of Medical Instrumentation) standards; and

pp) European Renal Association Best Practice Guidance – 4th Edition 2007. NB New guidelines are due in 2009 and should be considered at that time.

5.1.4.2 The Contractor shall provide to the Board at Completion a certificate confirming that the Works comply with the requirements of NHS Scotland Firecode.

5.1.4.3 The Contractor shall provide all fixed and portable fire fighting equipment to comply with statutory requirements and the requirements and recommendations of NHS Scotland Firecode.

5.1.4.4 The Contractor shall ensure that the Works comply with the relevant requirements of Building Better Healthcare Volume 3 (published by NHS Estates); except insofar as there are NHS Scotland publications, which shall take precedence over the respective elements of Building Better Healthcare.

5.2 **Hierarchy of Standards**

5.2.1 Where there is any conflict between two or more documents, the more onerous standard shall be complied with by the Contractor, at no additional cost to the Board.

5.2.2 NHS Scotland standards shall take precedence over equivalent NHS England & Wales standards unless the NHS England & Wales standard is specifically identified in *Table 2 or Table 3*.

5.2.3 In certain instances, NHS Publications include a number of options or alternative solutions. Where the Board has defined their preference in *Table 2, Table 3* or in these Employer's Requirements the Contractor shall adopt these preferences as a mandatory requirement. As is noted in 5.1.1.2 and 5.1.1.3, the Contractor shall identify their interpretation and choice (of any options within documents) in NHS Publications during the bid period (to which the Board will review and respond) with compliance statements required in their bid return.

5.2.4 While the Board has placed a clear obligation on the Contractor in relation to NHS Publications, it also wishes to acknowledge that in certain cases the subject matter, guidance and advice included therein has been further developed and improved since the date of publication. While applying the foregoing as a base position, the Board does not wish to limit the use of current best practice or innovation in relation to the adoption of design standards. Consequently, the Board therefore wishes the Contractor to actively engage the Board in an on-going dialogue during the design process in order for the Board to review and agree to any proposed alternatives.

5.2.5 The Board considers NHS Publications reflect minimum standards and any alternatives proposed by the Contractor shall provide an equivalent or enhanced level of service and quality.

5.2.6 Further to the statements above in relation to NHS Publications, it should be noted that the Schedules of Accommodation (SoA) in Appendix C take precedence with regard to room sizes. The room sizes therein must be provided by the Contractor as a minimum requirement.

5.2.7 Further to the statements above in relation to NHS Publications, the following hierarchy of other design related documents shall apply (in order of precedence):

a. 1:50 drawings;

b. Room Data Sheets; and

c. Equipment Lists.

5.3 **Life Expectancies & Lifecycle Requirements**

5.3.1 The buildings, including building services components, shall be designed with materials, components and techniques that are readily available, reliable, sustainable and easily maintainable in use. The Board supports buildings constructed of proven technology components, with high life expectancy, leading to minimum cost in use.

5.3.2 Good Industry Practice for a design life at Completion for the elements listed below shall as a minimum be as indicated in the table below:

Table 1 – Component Life Expectancies

Building Element	Expectancy
Structure, including substructure	70 years
Floor structure	70 years
Roof structure	70 years
Drainage and below ground civil engineering infrastructure	70 years
External walls	45 years
External openings, windows, doors and curtain walling	25 years
Roof finishes	40 years
External Wall finishes	25 years
External hard surfaces (inc roads/carparking/footpaths etc)	Not less than 20 years to first maintenance
Internal partitions including openings	30 years
Internal doors	15 years
Internal finishes	15 years
Internal fixtures and fittings	15 years
Ironmongery	15 years
Engineering plant Volume B	CIBSE Guide
Engineering services distribution systems Volume B	CIBSE Guide

5.3.3 The Contractor shall demonstrate that the theoretical design life proposed for any element will be achieved.

5.3.4 Materials and components forming part of the Works, which require maintenance and replacement within the life of the Works, shall be selected, located and fixed in such a way as to minimise future inconvenience, disruptions and to avoid temporary closure of the Works.

5.3.5 Lifecycle Costs

5.3.5.1 It is a requirement of the Bid that a detailed Life Cycle Cost Plan (LCCP) be provided for the new facilities – it is envisaged that 3no.separate LCC Plans will be required for the project;

a. Acute Adult Hospital;

b. Childrens Hospital; and

c. Laboratory Block.

NB – it is assumed that External Works and FM/Energy Centre etc buildings will be separately identified and incorporated into the Acute Adult Hospital LCCP.

5.3.5.2 It is a requirement that the LCCP's be produced in accordance with the methodology as detailed in the following documentation;

a. BS ISO 15686 – 5 2008; Building & Construction Assets – Service Life Planning – Part 5 – Life Cycle Costing; and

b. Standardized Method of Life Cycle Costing for Construction Procurement

5.3.5.3 LCCP submissions to follow the formats as detailed in the above documentation, utilising the following base criteria:

Table 2 – Life Cycle Cost Plan component elements

REF	ELEMENT	DESCRIPTION	REQUIREMENT
1.0	Design Life	n.a.	60 years
2.0	LCCP Duration	Period to be considered within LCCP (NB – excluding Construction Period)	30 and 60 years
3.0	Discount Rate	NVP rate	3.5%
4.0	Base Date	Base Date for Costs	Acute & Childrens Hospitals – 1Q2015 Laboratory Block – 1Q2012
5.0	Client On Costs	Bidders to **exclude** Client On Costs to LCCP values	n.a.
6.0	LCCP inclusions	Schedule of LCC Information and Assumptions	
6.1	LCCP Summary Sheet	Elements for inclusion in Life Cycle Cost Plan	All as detailed in Standardized Method Appendix F.3&4, with the following **exclusions:** 1.3 – Client Definable Costs 2.7 – Client Definable Costs 3.1.2 – Internal Cleaning 3.1.3 – Specialist Cleaning 3.3. – Administrative Costs 3.4 – Overhead Costs 3.5 – Taxes 3.6 – Client Definable Costs. 4.17 Occupancy Costs 5.3 – Reinstatement & Dilapidations 5.4 – Client Definable Costs

6.2	LCCP Data Sheets		Data sheets to itemise: • Component Description • Work Description • Quantity • Unit • Component Cost Rate (£) • % Allowance of Cost Rate for Replacement • % Allowance for Replacement • Replacement Factor • Life Expectancy of Component • Number of Replacements • Cost per Replacement (£) • Total Cost of Replacement (£)
			All above elements to be provided in BCIS Elemental format
6.3	FM Data Sheets (Hard FM only)	Bidders to allow for the following FM Services: • Minor replacements, repairs & maintenance costs • Unscheduled repairs, replacement & maintenance costs • Grounds Maintenance	Data sheets to itemise: • Management Costs • Staff/Contracted Costs • Materials • Equipment Bidders to **exclude** Client On Costs to FM Services values

5.3.3.4 Although the Contractor will not be involved in the provision of FM Services, the proposed Design will impinge on the Boards operation of the facilities, and to this end the evaluation of the Bidders overall submission will take into account proposals to minimise the potential operating costs;

5.3.3.5 Bidders should therefore indicate where measures in relation to the following criteria have been utilised

a. ‘Spend to Save’ specification enhancement;

b. Design detailing;

c. Controls;

d. Standardisation; and

e. Modular construction.

5.3.3.6 All Innovation & Sustainability initiatives proposed by the Bidder, should be supported by a full Lifecycle Cost Plan as detailed above, and include;

a. Items as detailed in Section 6.1/2 – of the above LCC table;

b. Projected Energy & Carbon savings;

c. Payback period; and

d. Items as detailed in Section 6.1/3 – FM Data Sheets of the above LCC table.

5.3.3.7 The Bidders attention is drawn to the BREAAM LCC requirements, which need to be encompassed as part of the overall LCCP submission – all as detailed in Appendix U.

5.3.3.8 In connection with the above, and for bid comparison purposes, Energy consumption/savings calculations should utilise the following base cost and associated allowances;

a. Electrical consumption – 10p / KwH;

b. Gas consumption – 3.5p / KwH;

c. Oil consumption – 41p / litre;

d. Water consumption – £2.20 / m3;

e. Waste material disposal (bagged) – £60/ton;

f. Carbon production/reduction data to be provided to support above proposals; and

g. Payback periods to be provided.

5.4 Integration of Design

The Contractor is responsible for the integration of the various aspects and elements of the design of the Works.

5.4.1 Architectural / Structural Interface

5.4.1.1 Structural floors shall be designed to have penetrable zones co-ordinated with the modular framework for partitions and services.

5.4.1.2 Structural timber floors shall not be permitted.

5.4.1.3 Columns shall be located in-so-far, as is reasonably practical to coincide with corridor walls in order to minimise intrusion into rooms or corridors. The relationship of column ducts and walls shall permit clear internal room surfaces and not obstruct equipment or fittings.

5.4.1.4 As far as practical, the walls to vertical service shafts shall be non-load bearing and therefore maximising opportunity for future services installation, alteration and maintenance.

5.4.1.5 The elevation design shall facilitate distribution of services at the building perimeter.

5.4.2 **Integration with Engineering Services**

5.4.2.1 Internal walls, partition systems, ceiling voids and service risers shall be capable of integrating services, e.g. wiring, plumbing, medical gases and service terminals as required without detriment to the performance of any building services and other Works performance criteria such as fire resistance or acoustic properties. Services shall be co-ordinated and a satisfactory means of maintenance access shall be provided.

5.4.2.2 So far as is reasonably practicable, vertical service shafts shall not be surrounded by load bearing structural walls, to facilitate services installation and future alterations.

5.4.2.3 The Contractor shall be responsible for bunding and waterproof slab construction above theatres and in plant rooms to provide resilience and avoid flooding whilst ensuring functionality of engineering services.

5.4.3 **Manual Handling**

5.4.3.1 The Contractor, in the design of the Works, shall give due consideration to the obligations contained in the Manual Handling Regulations 1992 and ensure the appropriate allocation of space and structural capacity for the inclusion of mechanical devices, i.e. fixed and mobile hoists, robotic equipment and all FM, staff and patient lifts.

5.5 Sustainability

5.5.1 The Board has a significant asset base and, as a responsible healthcare provider and employer, it is committed to sustainability and carbon reduction in line with relevant and appropriate guidance and directives in this area. The Board has targeted an 'Excellent' BREEAM rating for the Project.

5.5.2 The specific sustainability considerations with regard to the Project and the requirements of the Contractor in this respect are detailed in Section 10.0 and Appendix M.

5.6 Control of Infection

5.6.1 Prevention and control of infection shall remain a primary consideration of the Contractor in the design and construction of the Works. The whole hospital design shall place a high priority on infection prevention and control in relation to the movement of goods and in particular the segregation as far as is reasonably practicable of clean linen, food trolleys and the removal of waste, soiled linen and empty food trolleys. The Contractor will be required to demonstrate to the satisfaction of the Board's Infection Control Team that the design and construction of the Works fully reflects and incorporates the following key infection control challenges;

a) Segregation of clean and dirty – laundry, food, healthcare waste;

b) Ventilation system – including the use of natural ventilation in relation to the affect by neighbourhood sources of environmental pollution;

c) Selection of Fixtures/fittings/flooring that are easy to clean and maintain;

d) Appropriate Isolation facilities;

e) Incorporation of appropriate workflows;

f) Handwash hygiene;

g) Wastewater and sewage/body fluid disposal;

h) Heating and lighting;

i) Water systems;

j) Food preparation.

5.6.2 The Contractor shall provide that all aspects of the Works allow the control and management of an outbreak and spread of infectious diseases in accordance with the following;

a. Infection Control in the Built Environment: Design and Planning (SHFN 30);

b. NHS Scotland HAI Scribe (Healthcare Associated Infection System for Controlling Risk In the Built Environment);

c. Scottish Infection Manual – 'Managing the Risk of HAI in NHS Scotland';

d. Guidance provided by Clinical Standards Board NHS QIS;

e. Textiles and Furniture (SHTM 87);

f. Ventilation in Healthcare Premises (SHTM 2025); and

g. The location of maintenance access to services and requirements of SHTM2023.

5.7 Design for Disability

5.7.1 The design shall comply with the requirements of the Disability Discrimination Act 1995, and take full consideration of HFN14 "Disability access", HFN20 "Access audits for primary healthcare facilities" and BS 8300:2001 “Design of buildings and their approaches to meet the needs of disabled people – code of practice”. Further guidance is provided in the NHS publication "Doubly Disabled: Equality for disabled people in the new NHS - Access to services”.

5.7.2 The Contractor shall ensure that the design and functionality of the Works meets the requirements of the Disability Discrimination Act 1995 as relevant and set standards of best practice to enable full access and use of the services and facilities available.

5.7.3 Entrances to the Works shall be clearly identified to promote ease of wayfinding and distinctive ‘landmarks’ shall be incorporated into the design particularly for the main entrances.

5.7.4 The Works’ environment, both externally and internally, shall be designed to be accessible to everyone. The journey onto the Site, from pedestrian / vehicle routes, through the main receptions, into the Works and to the desired locations shall follow a safe, logical and clear system.

5.7.5 Attention shall be paid in the design to all aspects of the physical environment relating to the accessibility of the Works as follows:

a. Access to buildings, such as level or ramped entry;

b. Emergency evacuation arrangements, in particular for the visually impaired, the disabled and the frail, such as fire refuges or alternative escape routes for people with mobility impairments;

c. The accessibility of external paths and landscaping;

d. Circulation within buildings, including their interior layout;

e. Effective lighting and signage and colour or tone contrast on doors to aid orientation;

f. Desks, laboratory benches, work surfaces and reception desks at varying or flexible heights;

g. Appropriate seating;

h. Accessible toilets; and

i. Convenient and reserved parking spaces for those who need them.

5.7.6 The Contractor shall ensure, as far as practically possible, that the Works design draws upon and endeavours to further develop improve and exceed current best practice and standards achieved in other similar projects, and incorporates full accessibility for the prospective patient groups, staff and public. This shall include aspects of both physical environment and visual and audio aids to enable full use of the Works for all groups. This philosophy of design shall be extended across all parts of the Works including access to the landscaped and external areas as well as the essential patient treatment and residential areas.

5.7.7 The Contractor shall ensure the design complies with the general accessibility ethos detailed above, whilst also addressing the detailed requirements listed elsewhere. It should be noted

that the requirements detailed are not exhaustive, and it is also recognised that specific clinical needs will determine the nature and design of Works in some areas.

In particular it is highlighted that the Works will be used by a high proportion of wheelchair users. The Contractor shall ensure that any fire evacuation procedures take full account of this.

In meeting the overarching obligations with respect to accessibility, The Contractor shall comply with the following non-exhaustive list of standards:

a. BS8300:2001 “Design of buildings and their approaches to meet the needs of disabled people – Code of practice”;

b. HFN 14 “Disability Access” and HFN20 “Access audits for primary healthcare Facilities”;

c. HFN 20 “Access audits for primary healthcare Facilities” ;and

d. HFN 21 “Car parking”.

5.7.8 BS8300:2001 is widely referred to by consultants advising on general building design in relation to the Disability Discrimination Act (1995). The Contractor shall therefore refer to this document and give full regard to its standards. It will, however be necessary to match the standards of BS8300 with others laid down in NHS guidance notes etc.

5.7.9 The Contractor shall also comply with further guidance contained in the NHS publication “Doubly Disabled: Equality for disabled people in the new NHS - Access to services”.

5.7.10 The obligations with respect to accessibility, as described in this Part 8 Section 3, are intended to reinforce the principles established within BS8300. Some, however, stand as requirements that deliberately exceed the minimum stated within BS8300. For the avoidance of doubt, specific accessibility requirements listed in this Part 8 Section 3 shall take precedence over the standards laid down in BS8300.

5.8 Equipment Requirements

5.8.1 The Equipment List is contained in Appendix F. This identifies equipment by Group (for pricing in bid returns), with location of equipment ascertained via the ADB Room Data Sheets (for all rooms) and exemplar 1:50s for those drawn at this stage. Group 1 Equipment shall be supplied and fitted by the Contractor, with Group 2 Equipment provided "free issue" to the Contractor by the Board and fitted by the Contractor. The Board are responsible for the supply and installation of Group 3 and Group 4 Equipment.

5.8.2 Notwithstanding the party who provides/supplies equipment, the Contractor shall identify and provide all necessary fixings and supports (to walls, ceilings and floors) connections and infrastructure (including supply, extraction and removal of waste) for all items of equipment listed in Appendix F.

5.8.3 The Contractor shall provide a suitable environment for each item of equipment as set out in the Room Data Sheets, this shall include accounting for temperature and ventilation requirements.

5.8.4 For the avoidance of doubt, this requirement specifically includes MEIGaN compliance and specialist service requirements by the Contractor, including for example 3-phase electrical supply, surge protection, standby power supply, ups, special water supply requirements and separation of contaminated waste.

5.8.5 For the avoidance of doubt, this requirement specifically includes the installation of renal water equipment and supplies by the Contractor to the meet the requirements of the Board.

5.8.6 Irrespective of the party responsible for the supply, installation, maintenance and replacement of each item of equipment, the Contractor shall provide Works that satisfy the following criteria:

a) allow Equipment and associated systems to be installed, commissioned, operated, maintained and replaced in accordance with:

i) Good Industry Practice;

ii) Manufacturer's instructions; and

iii) The Board's, statutory health and safety requirements.

b) Allow Equipment and associated systems to operate efficiently, effectively and in accordance with its intended function for the whole of its design life when operated in accordance with the manufacturer's requirements;

c) Take due account of the impact on the environmental conditions within the Works;

d) Take due account of the potential impact of future equipment changes through either refresh or replacement. In particular, allowance for equipment of different sizes, weights, service requirements or environmental impacts;

e) Allow the Board to provide their Clinical and Non-Clinical Services with a minimum of disruption during installation, commissioning, operation, maintenance and replacement; and

f) Provide safe and unencumbered access for maintenance and replacement of equipment during the buildings life, to include pulley hoists, barrier walkways and

landings and reinforced routes and areas as necessary to assist the safe removal and replacement.

5.8.7 The construction, structure, plant and services shall be designed to meet the specific requirements for Special Equipment and associated services. The design of the Works shall meet these requirements with regards to mechanical and electrical servicing, wall and floor loads, structural movement and deflections, the need for special (including protected) floors, wall supports, ceiling grids and other such measures to allow for the installation, maintenance and replacement of Special Equipment and associated services. Specific Special Equipment is identified in Appendix F.2. The particular interface arrangements between the Contractor and the Board with regard to the provision and fit-out of Special Equipment shall be finalised during the Competitive Dialogue process.

5.8.8 The Contractor shall not change the Group designation of any Equipment. The Equipment List issued at Appendix F.1 shall be priced and submitted in the bid return with no additions, omissions or changes unless requested in writing by the Board as an aspect of the bid period.

5.8.9 The procurement, delivery and installation of Group 2 Equipment shall be as follows:

a) The Contractor shall procure and deliver, or arrange for the delivery to Site, all Group 2 Equipment to a secure central holding area (suitable for the equipment to be stored) to be provided by the Contractor. The holding area requires to be accessible by vans, 7t trucks and articulated vehicles – with vehicle movements in the operation of dropping off or picking up from the holding area to be managed by the Contractor;

b) The off loading or up loading of any Group 2 Equipment will be attended by the Contactor who shall acknowledge receipt of every delivery and sign the relevant delivery receipts to that effect. The Contractor shall manage and carry out the conveying of all Group 2 Equipment into the holding area;

c) The Contractor shall manage the movement and delivery of all Group 2 Equipment from the holding area to the point of installation in time for installation the same day;

d) The Contractor shall prepare and maintain a log of all Group 2 Equipment delivered to Site in an electronic and paper format, providing monthly updates to the Board of the status of delivered, stored and installed Group 2 Equipment; and

e) Should the Contractor arrange for a secure central holding area off or adjacent to the Site the Contractor remains responsible for the Group 2 Equipment that has been delivered and the movement of same to the Site for installation.

5.9 Materials

5.9.1 The Contractor shall ensure that all materials incorporated into the Works shall comply with the requirements of the Construction Products Regulations 1991, and all aspects of the Employer's Requirements.

5.9.2 The Contractor shall ensure that all products and materials to be incorporated into the Works shall be new unless otherwise agreed by the Board.

5.9.3 Where materials and components are not specifically identified as complying with the Construction Products Regulations 1991, The Contractor shall ensure that they comply with the relevant British Standards and Codes of Practice.

5.9.4 The Contractor shall ensure that the whole quantity of each product and material required to complete the Works is of a consistent type, quality and overall appearance and is fit for its intended purpose. The Contractor shall ensure all products and materials are handled, stored, prepared and used or fixed strictly in accordance with the manufacturers' written instructions or recommendations and not be damaged when incorporated into the Works.

5.9.5 The Contractor shall not construct the Works utilising substances which are hazardous to health, including but not limited to substances referred to as being hazardous to health and safety in "The Control of Substances Hazardous to Health Regulations 2002".

5.9.6 The Contractor shall not specify or include products or materials that do not comply with relevant British or European Standards, Codes of Practice or which are generally known within the European Union at the time of specification to be deleterious to health and safety or to the durability of buildings and / or other structures and / or finishes and / or equipment, plant and machinery in the particular circumstances in which they are used. Such materials include but are not limited to:

a) High alumina cement in structural elements;

b) Marine aggregates or their derivatives where the chloride iron content by mass of cement exceeds the requirements of Table 4 of BS 5328: Part 1;

c) Aggregates where the drying shrinkage characteristics, when tested in accordance with BS 812: Part 120, exceed a value of 0.05%;

d) Aggregates for use in reinforced concrete which do not comply with BS 882 or with the provisions of BS 8110;

e) Water used in construction or manufacture which is not clean, fresh or free from chemical or organic impurities or does not otherwise comply with BS 3148;

f) Concrete where the total mass of the reactive alkali in the concrete mix exceeds the recommendations set out in the Concrete Society Technical Report No 30;

g) Woodwool slabs in permanent formwork to concrete or in structural elements;

h) Calcium chloride in admixtures for use in reinforced concrete or reinforced masonry construction;

i) Calcium silicate bricks incorporated within any load-bearing part of the structures, or other areas of the construction which are deemed to be load-bearing in any way;

j) Asbestos or asbestos-containing products;

k) Lead, or any material containing lead, which may be ingested, inhaled or absorbed, except where copper alloy fittings containing lead are specifically required in drinking water pipework by any statutory requirement or in architectural design features (e.g. weather flashings, radiation protection);

l) Urea formaldehyde foam, or materials which may release formaldehyde in quantities which may be hazardous with reference to the limits set from time to time by the HSE, at the time of incorporation in to the Works comprising the project;

m) Softwood used externally, except for non structural landscaping or in areas agreed with the Board (e.g. pressure treated pine decking);

n) Slipbricks;

o) Polyisocyanurate foam;

p) Polyurethane foam;

q) Extruded polystyrene other than low ozone depletion materials;

r) Other substances, which at the time of their incorporation into the project, have been designated by the Building Research Establishment and published in their Digest, as deleterious to health and safety or deleterious to the building fabric, including both substructure and superstructure, in the particular circumstances in which these substances are used;

s) Products associated with the destruction or depletion of tropical rain forest or threatened animal species;

t) Products or manufacturing processes which cause the emission of pollutants, armful radiation or ozone depleting chemicals, as identified in the Montreal Protocol;

u) Use of noxious substances including DoE “Red List” and EC “List 1” substances;

v) Materials which are generally composed of mineral fibres, either man-made or naturally occurring, which have a diameter of 3 microns or less and a length of 200 microns or less, or which contain any fibres not sealed or otherwise stabilised to ensure that fibre migration is prevented;

w) Lightweight or air-entrained concrete bricks;

x) Iberian roof slates; and

y) Fibrous boards, including MDF board, in any external construction work.

5.9.7 The Contractor shall obtain confirmation that all timbers are “Certified Wood”.

5.9.8 The Contractor shall certify at Completion that none of the materials, products or constructions listed has been used in the construction of the Works, or incorporated in them, other than where specific written consent from the Board has been obtained. The Contractor shall also notify the Board of any other material which may become designated as prohibited at any time after incorporation into the project, during the Defects Period.

5.9.9 The Contractor shall provide samples and prepare mock-ups of external cladding systems or building components as requested by and for the approval of the Board as follows;

a) Sample panel of curtain walling/external wall construction, nom 4m x 4m to include a sample window and any associated bris soleil or sun shading detail. To remain as reference sample until envelope complete;

b) All external finishes;

c) External and internal doorsets;

d) External and Internal windows and curtain walling, including all standard ironmongery;

e) Ironmongery;

f) Typical bed head arrangement for Adult and Children's Wards (could be part of mock up);

g) Nurses Station design and materials – mock up;

h) Floor, wall and ceiling finishes – samples and colour schemes indicating interior design strategy intent;

i) Light fitments;

j) Power, voice and data switches outlets etc;

k) Sanitaryware, taps outlets and IPS proposals, (part of a mock up);

l) All signage and Wayfinding proposals;

m) Lifts and other key M&E installations;

n) Wall protection and handrail systems;

o) Public art; and

p) Hard and soft landscape proposals and external works.

5.10 Energy Strategy

5.10.1 In accordance with best practice, the Contractor shall consider key design features including, but not limited to:

a) Use of passive ventilation where appropriate whilst minimizing mechanical cooling;

b) Use of heat recovery for exhaust air;

c) Use of redesigning processes and products to close the technical loop using recovered and bio-based materials;

d) Use of natural daylight into areas which require continuous illumination such as central/circulation areas;

e) Use of natural daylight through maximum use of lighting dimmer controls; and

f) Implementation of renewable energy sources – solar, wind, landfill gas, biomass and low impact hydroelectric, geothermal, low carbon heating systems and heat pumps.

5.10.2 The Contractor shall demonstrate that their proposals will effectively reduce water consumption below the average consumption data contained in SHTM 2027 for the type of accommodation being developed by the Board. The Contractor's proposals shall include estimated consumption for the Works in Litres/Bed/Day and measures that they propose allowing the Board to minimise consumption.

5.10.3 In the consideration of design for energy generation and use Bidders are requested to be aware of and consider possibilities around alignment with the "Sustainable Glasgow" initiative. The Bidders are to demonstrate such consideration and report on their findings. The contact point for Sustainable Glasgow is:

Richard Bellingham
Senior Research Fellow
Energy Policy
Fraser of Allander Institute
University of Strathclyde
[redacted]

5.10.4 The Contractor shall submit a Mandatory Variant bid providing for a Maximum Temperature provision (26degC).

5.10.5 The specific energy requirements of the Board are detailed in Section 8.0 and Appendix M.

5.11 Fire Strategy

5.11.1 Fire safety in the proposed facility shall be controlled by Building Regulation, Health Technical Memoranda Firecode, and Fire Practice Notes, subject to approval by the Board's Fire Safety Advisor.

5.11.2 The Contractor must comply with the requirements of these publications, as a minimum standard, although it is recognised that alternative solutions based on a fire engineering approach may be more appropriate to the Contractor's design. Should the Contractor pursue an alternative approach it shall be their responsibility for meeting the minimum standards set out in the publications, fully satisfying the regulatory authorities of the appropriateness of its proposals and obtaining the necessary approvals.

5.11.3 The Contractor is required to prepare a Fire Safety Strategy document, including Fire Strategy drawings to demonstrate compliance with the relevant regulations. This document shall cover all aspects of fire safety, fire fighting and building management, including compartmentation and the ventilation implications of the Building.

5.11.4 The Contractor shall be required to ensure that all premises to be occupied by the Board have been appraised prior to occupation by competent persons appointed by the Board for compliance with Firecode and all Legislation are being met and shall provide the Board with an Annual Certificate of Firecode Compliance. For the avoidance of doubt the Contractor shall provide all fixed and portable fire fighting equipment to comply with statutory requirements and those of NHS Scotland Firecode. For the avoidance of doubt the Contractor requires to accommodate all fire fighting equipment which will be located within secure lockable containers housed in the wall construction, and operated by the same key throughout the development.

5.11.5 The Contractor shall provide a fully operational fire alarm system to meet the needs of the Works.

5.11.6 The specific requirements of the Board with regard to Fire Strategy are detailed in Appendix R.

5.12 Flexibility and Adaptability

5.12.1 The Contractor shall in the design of the Works consider opportunities which present themselves for the future expansion of Clinical and Non-Clinical Services.

5.12.2 The Contractor shall ensure, as far as is practical, that the Works structure and envelope, services, partitioning, ceiling, and flooring systems are consistent with a co-ordinated methodology which facilitates future flexibility for re-planning and change in the layout of departments, rooms, services outlets and equipment. In particular, it shall be possible to install or relocate fittings, fixtures, equipment and service outlets with minimum disruption to the use of the Works.

5.12.3 The design for the Works shall take full account of, but not be limited to:

a) Changes in technology, both clinical and non-clinical (e.g. systems of care and volume of work);

b) Building structures shall be designed by the Contractor to facilitate ease of alteration to the internal layout of the building, or to its plant, services or equipment, during the lifetime of the buildings. This shall be achieved by;

i. Selecting structural forms in which future builderworks holes for building services distribution, both vertically and horizontally (including ductwork), or equipment, may be cut simply and economically, minimising the installation of secondary framing;

ii. Providing knock out panels to permit the formation of holes not exceeding 150x150mm through suspended floors, adjacent to 50% of the internal columns on all floors. These knock out panels shall be positioned close to columns distributed across all areas of each floor;

iii. Designing the floors for imposed loadings that will permit the reallocation of space within the Works, so that each area of floor is structurally capable of supporting the imposed loads of offices, wards, corridors, general storage areas or waiting areas, together with their appropriate partition walls, finishes, ceilings, services and medical Equipment;

iv. Providing removable access panels within the structure, where these are required for the installation or removal of plant, services or equipment;

v. Internal room walls to be constructed such that they can be readily removed or altered i.e. the structure is not reliant on the walls for structural stability;

vi. Designing the structure of the buildings so that any future extensions can be constructed and brought into service with minimum disruption to the operation of the Works; and

vii. Designing plant space and riser space so that a future 25% services capacity expansion can be accommodated.

5.12.4 The structure and foundations of the buildings shall be designed by the Contractor to permit the construction in the future of further accommodation by extending the buildings horizontally or constructing further new buildings adjacent to them.

5.13 Facilities Management

5.13.1 The SoA and exemplar design have taken cognisance of the operational requirements and space/location requirements of the Board. The Contractor requires to comply with as well as design the Works to support and comply with the Board Policies (contained in Appendix P).

5.13.2 The specific requirements with regard to automatic material handling equipment (robotics), and the development of the Board's requirements and design in that regard, will be addressed during the competitive dialogue process. Details with regard to automatic material handling equipment is contained in Appendix M.

5.13.3 The Board shall have personnel integrated into the project development and the Works operations in relation to familiarisation and FM operations. The Contractor shall at all times liaise and support the integration and requirements of the Board in this respect at no additional cost.

5.13.4 The Contractor is required to provide space for maintainable, replaceable building services and plant.

5.13.5 The Contractor shall ensure that plant and equipment is suitably identified in line with the NHSScotland asset management system or equal and approved system/technologies.

5.14 Design Development

5.14.1 The bid period has specific bid return requirements (detailed in Volume 3 of the ITPD) with regard to written and drawn design information. Once the Contractor is appointed, the period to Full Business Case (FBC) approval comprises design development of the Contractor's Proposals in relation to the Hospitals, concurrent with the design and construction of the Laboratories. The design development to FBC will be fully programmed and demonstrable in a priced Activity Schedule forming an aspect of the bid returns from bidders.

5.14.2 The procedure for the review of design development will be agreed with the Contractor prior to the return of bids and the commencement of the design development.

5.14.3 The Contractor shall, as a minimum requirement, provide the information detailed in Appendix K (Design Development) as an output of Stage 2 (Hospitals Detailed Design to FBC). The satisfactory production of completed Appendix K information to the Board is one of the pre-conditions to the approval to proceed to Stage 3. More information relating to Stages 2, 3 and 3A are contained in Volume 1 of the ITPD.

5.15 Extended Defects Period

5.15.1 Due to a number of factors, including double-running/transition from other hospital sites, the Board are desirous of a defects period that provides management and physical benefits to the Project. In this regard a period in excess of the 'traditional' one year defects will be sought, with particular associated requirements in relation to:

a) Training and handover to Board personnel;

b) Correction times/periods for defects;

c) Seasonal commissioning;

d) Management activities; and

e) Performance requirements.

5.15.2 Volume 1 of the ITPD details further particular Extended Defects Period (EDP) requirements of the Board and identifies that this will form an aspect of Competitive Dialogue with bidders under the Commercial workstream.

5.16 Critical Failures

5.16.1 The Board require that the Works have inherent aspects of resilience to critical failures and mitigate operational interruptions.

5.16.2 In this regard, the Board have identified particular considerations and requirements that the Contractor shall adopt and develop as an aspect of bid return and design development. In addition to the resilience requirements of NHS Publications and the design requirements stated elsewhere in the Employer's Requirements, specific areas that the Board have prepared as exemplary are identified in Appendix X (Critical Failures).

5.16.3 The Contractor is required to comply with the provisions of Appendix X in their design, as well as provide for a developed strategy in relation to mitigation of critical failures in their bid return.

Section 6.0 Construction Phase Requirements

6.1 Site Logistics, Welfare and Board Accommodation

6.1.1 The Contractor is responsible for the provision of all temporary site accommodation/welfare and associated requirements, including the provision of car parking for site operatives during the design and construction stages. All such accommodation requires to be metered to provide readings of all utilities usage separately at any time.

6.1.2 No Contractor staff or personnel (including any sub-contractors, suppliers, supply chain members or other personnel providing any goods or services to the Contractor) are allowed to park on the Hospital Campus (except where attending as a patient or visiting/assisting a patient) during the Works.

6.1.3 The Board require the Contractor to provide dedicated site accommodation for the exclusive use of the Board and its representatives. This requires to be in the immediate environs of the Contractor accommodation on/adjacent to the Site to support joint working and meetings, but must facilitate segregation such that the Board area has a dedicated access for their use.

6.1.4 The Board require dedicated fully serviced accommodation including:

a) an open plan area with workstations, sockets and IT + telecoms connections for 10 persons;

b) an open plan area with workstations, sockets and IT + telecoms connections for 20 persons;

c) cellular offices with workstations, sockets and IT + telecoms connections for 5 persons;

d) a meeting room to accommodate 15 persons, serviced with sockets and IT + telecoms connections;

e) a suitably serviced room to accommodate a 1GB router;

f) secure wireless connectivity;

g) male, female and disabled toilet facilities;

h) a kitchen area with seating for 10 persons; and

i) adjacent dedicated parking for 30 cars.

6.1.5 The Contractor accommodation adjacent but separate from the Board accommodation will provide shared meeting rooms for 30, 20 and 10 persons separately as a minimum requirement.

6.1.6 The provision of site welfare and accommodation will form an aspect of Competitive Dialogue with the Board under the Logistics workstream. This workstream will also consider other logistics issues such as deliveries to site, site traffic and storage provision. The specific logistics, requirements, constraints and parameters of these aspects of the Project will be discussed and considered in detail to allow the generation of relevant information and potential solutions by bidders for the Board to consider and discuss. This will include proposals for the location of welfare, storage and parking solutions as well as layouts for site accommodation and welfare.

6.1.7 Further, specific requirements of the Planners to be met by the Contractor are identified in the Outline Planning document in Appendix D.1.

6.1.8 The Contractor shall be responsible for the cost provision and maintenance of all site signs and hoardings during the construction phase of the works. The requirements of NHS Scotland signage guidelines will require to be met by the Contractor, for the avoidance of doubt the key requirements are as follows;

a) Principal signage required at 3 no.key locations around the site as NHS Scotland signage guidelines;

b) Principal signage size will be no less that 6 x 4 metres;

c) NHS Greater Glasgow and Clyde identity prominently displayed (no less that 350mm in height) on hoardings enclosing entirety of site;

d) Graphics should be made from vinyl or other suitably durable material; and

e) All hoardings must be 2400mm high solid panels (metal or timber) with viewing panels painted white and maintained in good condition, free from graffiti and posters at all times.

6.1.9 All signage to include space for signage boards provided by the Board project manager for display and use – particular numbers and sizing of boards in this regard to be clarified to bidders by the Board.

6.2 Site Preparation Works

6.2.1 The Contractor shall be responsible for identifying and undertaking all preparation works necessary in order to make the Site suitable for the development of the Works. These works shall be undertaken prior to commencement of, or integrated with, the Stage 1 and Stage 3 activities.

6.2.2 For the avoidance of doubt, this obligation covers but is not necessarily limited to:

a) The identification of all protected trees to be removed from the Site by virtue of their condition and / or position in relation to the proposed Works. The Contractor shall be responsible for seeking the approval of Glasgow City Council for any such removal proposals, and the proposed mitigation / replacement strategy, in accordance with the conditions of Glasgow City Council's requirements and the associated Local Plan;

b) The identification and implementation of protective measures required to remaining trees, including their root systems, in accordance with BS 5837:2005, "Guide for trees in relation to construction";

c) In accordance with the Wildlife & Countryside Act 1981, any tree felling and shrub clearance shall be carried out outside the bird breeding season (March to August). Contractors shall take due cognisance of this requirement in any work programming. Where this is not possible a qualified ecologist shall be appointed to examine all potential breeding sites before any clearance takes place. If occupied nests are found, clearance and felling works shall cease until the nest is no longer in use. The contractor shall formally confirm to the Planning Authority in writing if clearance is in order following the ecologist's inspection;

d) Japanese Knotweed (JK) - Areas of the site have been the subject of contamination by Japanese Knotweed. The Board have embarked on a programme of eradication, details of which will be made available to the Contractor. The Contractor shall be

required to dig up any JK plant material and transport to a separately identified bunded area on the site (to be formed by the Contractor) where the JK shall be treated by the Board. The Contractor shall provide wheel washing provision for the vehicles utilised in the transportation and removal of JK (including Board vehicles involved in ultimate removal from the site);

e) The identification, decommissioning, removal and / or protection / relocation of live (and used), live (and redundant) or redundant (and disconnected) buried services crossing the Site;

f) The identification and removal of old foundations, drainage runs, basement structures and other below ground obstructions present following demolition of previous structures occupying the Site that are not removed by the Board (e.g. some steam duct lines);

g) Upon the finding of any medical waste or other contaminants on the site the Contractor shall advise the Board of such discovery for discussion and agreement of the necessary removal and/or protection steps to be taken; and

h) Diversion of the culverts.

6.2.3 Where relevant, the Contractor shall carry out all site preparation works (if necessary) in accordance with BS 6187:2000 “Code of Practice for Demolition” and the following:

a) Issue a method statement identifying the scope and methodology for undertaking the enabling works (if any), for approval by the Board in accordance with (TBC);

b) Break up and remove offsite all foundations, temporary accommodation, and other below ground and surface obstructions in accordance with, but not limited to, BS5528 “Demolition in open spaces”;

c) Decommission and / or break up and remove all redundant underground structures, chambers and redundant surface water and foul water drains, telecommunications, electric cables, gas mains, water mains and ducts within the Site. For the avoidance of doubt, this obligations includes for making safe all redundant works left in-situ, and sealing of voids, where left, against vermin;

d) Protect remaining services against damage or disruption; and

e) Minimise vibration and noise produced by the demolition works, and agree appropriate limits for such with the Board and neighbours.

6.3 Workmanship, Construction Accuracy & Tolerances

6.3.1 The Contractor shall ensure that general workmanship conforms to current revisions of BS 8000: – “Workmanship on Building Sites”, which covers typical building construction activities. Where specialist design proposals require construction activities outside the scope of this document, The Contractor shall propose specific quality procedures relating to these activities based on Good Industry Practice current at the time, as a minimum.

6.3.2 The buildings and the external works shall be designed and set out by The Contractor in accordance with BS 5606:1990 “Guide to Accuracy in Building”.

6.3.3 In some situations the tolerances identified in BS 5606 may not be appropriate for the particular elements or combination of elements in the Works. Where special levels of accuracy are required in relation to The Contractor’s proposals these shall be stated by The Contractor. The Contractor shall consider the recommended procedure set out in Figure 8, Section 4, Appendix B, of BS 5606.

6.3.4 The Contractor shall identify critical dimensions and setting out points on all its drawn information.

6.3.5 The Schedule of Accommodation contained in Appendix C of the Employers Requirements details the number and net floor area (as defined in paragraph 2 below) of the all relevant rooms or spaces in the Works, and the Gross Floor Area (as defined in paragraph 2 below) of the departments within The Works.

6.3.6 The actual floor area (as constructed) of a room or space may vary by up to 2% less or greater than the net floor area of the relevant room or space recorded on the Schedule of Accommodation (which actual floor area shall be measured on the same basis as that referred to in the definition of net floor area in paragraph 2 below) always provided that the proportion of the room remains generally unchanged. However the Contractor should note that the Single Bedrooms (as constructed) are required as a minimum to comply with the Schedule of Accommodation space requirements.

6.3.7 The net floor areas of rooms and spaces/departments and the other areas shown in the Schedule of Accommodation shall only be amended insofar as an Approved Project Managers Change Instruction varies such areas.

6.3.8 The Contractor will remain entirely responsible for procuring that the net floor areas of rooms and spaces/departments as shown in the Schedule of Accommodation applicable to the Works are capable of being achieved within the total gross floor area of the Works specified in such Schedule of Accommodation. The overall as built net floor area of the Works shall be not less than the total net floor area shown in the Schedule of Accommodation by more than1%.

6.3.9 The net floor areas of the individual rooms and spaces listed in this Schedules of Accommodation shall be calculated using a manually operated electronic measurement computer programme from a Computer Aided Design (CAD) system.

6.3.10 The number and identification of rooms listed on a department by department basis in the Schedule of Accommodation are as noted and identified on the 1:200 Departmental Layout plans identified in Appendix I.

6.3.11 For the duration of the Works the Contractor shall;

a) maintain computerised electronic versions of the Schedule of Accommodation and shall regularly update the areas shown in the Schedule of Accommodation from time to time in order to, inter alia, properly record the net floor areas and gross floor areas stated in all items of Design Development;

b) Afford the Board's Representative and Project Manager an opportunity to access and view such computerised Schedule of Accommodation at any time during normal working hours; and

c) As soon as reasonably practicable following finalisation of the 1:50 scale Room Layout Drawings, shall prepare and issue to the Board (in hard copy and electronic format) the final Schedule of Accommodation for the Works.

6.3.12 In connection with the above the following definitions apply;

a) Net floor area

In relation to a room the area bounded by the internal face of the walls or partitions enclosing the room. Or in relation to the space the area bounded by the internal face of

the walls or partitions and boundary(s) to any adjoining space(s). This area shall be measured elctronically from the approved plans that relate to the room or space. The net floor area is measured with deductions for:

i) column encasures

ii) pipe boxing

iii) service zones

b) for the avoidance of doubt the actual floor area may not be the net floor area of the room or space. The net floor area shall include the area of furniture, fittings and equipment within the room or space;

c) The net floor area for the department will be the sum of the individual net floor areas for the relevant rooms;

d) Gross floor area

Gross Departmental Area means the area bounded by the internal face of the external walls, centre line of partitions or boundary to adjoining departmental and/or communication space(s) that enclose that department. This area shall be measured electronically from the 1:200 scale Department Layout Plan that relates to the department. The Gross floor area shall include all elements of construction, spaces or rooms and circulation, but exclude:

i. service ducts

ii. lift shafts or other communication spaces contained within the boundary of the department.

e) Other areas means all other areas not included in a department, the balance of all service ducts, lift shafts, communication spaces (not included in department areas), corridors, plant rooms and the like measured electronically on the same basis as a Department from the 1:200 scale Department Layouts. The department areas are identified in Appendix I;

f) In relation to the Works, the Gross floor area is the sum of items d) and e) above; and

g) The departmental areas are identified in Appendix C.

6.3.13 Control of Noise & Dust

6.3.13.1 The attention of The Contractor is drawn to the provisions of Section 60 of the Control of Pollution Act 1974, with reference to the control of noise and dust in relation to any construction works. Where such works are adjacent to occupied property, The Contractor shall ascertain from the relevant authorities what requirements or restrictions, if any, shall apply, particularly in relation to Aspergillus. The restrictions may relate to the type of plant to be used, siting of plant, methods of working to be adopted, the hours of work permissible and may, in addition, impose a maximum noise level that must not be exceeded.

6.3.13.2 The Contractor shall make applications as early as possible to the utility company for the relevant connections in order to avoid the use of site generators.

6.3.14 The Contractor shall fit compressors, percussion tools and vehicles with effective silencers of a type recommended by the manufactures of the compressors, tools or vehicles but in any event to the requirements of BS 5228: Part 1: 1997 in accordance with Good Industry Practice.

6.3.15 Any equipment of a semi-permanent nature used by the Contractor, which produces noise on a regular basis, shall be positioned to cause the minimum disturbance to adjacent areas in agreement with the relevant authorities. The Contractor shall take all reasonable measures throughout the course of the Works to prevent the egress of water, dust, debris or any microbiological contamination out of the Site and into adjacent buildings. In particular, the Contractor shall establish any specific requirements for the control of dust identified.

6.3.16 The Contractor must comply with the specific planning requirements with regard to the control of noise and dust.

6.3.17 Continuity of Existing Services

6.3.18 The Contractor shall plan and execute the Works to ensure the Works activities do not affect the operational continuity of the Hospital Campus and the immediate neighbours to the Site.

6.3.19 The Contractor shall ensure that all reasonable safeguards are incorporated to ensure continuity of utility supplies to the Hospital Campus and adjacent users of the Site in-so-far as they may be affected by the Works. For the avoidance of doubt, utility supplies include, but are not limited to, gas, medical gases and air, electricity, water, sewerage and communications services.

6.4 Live Hospital Site

6.4.1 The Hospital Campus is a live hospital site, and as such will place restrictions on the Contractor in the construction of the Works.

6.4.2 As is noted in Section 6.1, above, logistics of the Site will form a workstream under the Competitive Dialogue to take place between the Board and the Contractor and this will extend to the consideration, discussion and agreement in regard to particular constraints, routes, timings and the like that will and will not be possible in the carrying out of the Works due to the 'live' nature of the environment.

6.4.3 Specific site constraints and access type requirements of the Hospital Campus and the Site have been considered in advance by the Board. These are contained in Appendix A and identify, amongst other issues, 'blue light' routes, FM delivery points and roadways that require to be unobstructed by the Contractor 24hours per day, every day.

6.4.4 The use of tower cranes on site by the Contractor may be restricted by the Board, Planners and the CAA. The Contractor is required to establish any relevant constraints and shall be responsible for implementation of craneage as permitted. This will include no oversailing of areas out with the Site and shall require the Contractor to demonstrate his management proposals in this regard, including modelling of swing-arcs and the like. Specific CAA requirement for aircraft warning lights are to be installed by the Contractor with regard to temporary and permanent structures. This will extend to, but may not be limited to, tower cranes, the flue to the new energy centre, other flues and chimneys to the Works;

6.4.5 In addition to the physical logistics and constraints in respect of the live hospital environment, the Contractor shall require to observe and comply fully with specific Board Policies for the duration of the Works when on the Hospital Campus or Site. The relevant Board Policies are listed in Appendix P.

6.4.6 The Contractor will require to carry out dilapidation surveys prior to the commencement of the Works, during the Works and at the completion of the Works – the extent, format and location of such to be agreed with the Board. Hard and electronic copies of all dilapidation surveys to be provided to the Board by the Contractor.

6.4.7 An aspect of the surveys to be carried out by the Contractor prior to the commencement of the Works is a full photographic survey of the boundary of the site, adjacent buildings, main roadways and approach roadways. Hard and electronic copies of all photo surveys to be provided to the Board by the Contractor.

6.5 Standardisation and Prefabrication (incl modular and off-site)

6.5.1 In order to take advantage of the repetitive nature of construction, maximise productivity and efficiency and minimise construction periods and waste, consideration shall be given to off-site prefabrication. It shall specifically be applied to repetitive elements e.g., sanitary assemblies, bathrooms or complex equipment such as plant assemblies.

6.5.2 The Contractor shall where reasonably practicable use standardised and / or pre-fabricated components and elements of construction which improve product quality, guarantee consistency of performance, optimise maintenance, and provide for reasonable flexibility for future changes, ease of replacement and value for money.

6.5.3 The use of standardised / prefabricated elements and building components to achieve good quality control, ease and speed of installation and flexibility for future use are welcomed. Their use shall not constrict the Board achieving clinical functionality and offer value for money. Items which may be considered include, bathroom pods, bedroom pods and other repetitive elements.

6.6 Room Mock-ups

6.6.1 The Contractor shall construct exemplar room mock-ups during the design development stage of the Works (Stage 2) for the hospitals. This will allow the Board's Representative to witness the quality standards of workmanship according to Good Industry Practice. Exemplar typical room mock-ups will be constructed for the rooms listed below in order to demonstrate important or unusual design elements of rooms i.e. integral bespoke furniture.

6.6.2 The Contractor shall provide mock-ups of the following rooms for use in the design development and approval process:

a) Single bedroom (standard) with en-suite (adult hospital);

b) Single bedroom with pull down bed for parents (children's hospital);

c) Single bed space (Critical Care) including all services and screening; and

d) Any modular accommodation proposed by the Contractor.

6.6.3 During the construction phase of the Works (Stage 3), the Contractor shall prepare a number of exemplar rooms as part of the Quality Control process, this is in addition to or a development of the mock ups noted above. The Contractor shall provide exemplar rooms of the following rooms:

a) Generic treatment room;

b) Single bedroom (standard) with en-suite;

c) Standard Outpatient Consulting Room;

d) Theatre suite;

e) Renal dialysis station and example of renal media panel;

f) Staff base; and

g) Reception point/counter.

6.6.4 These will establish minimum quality standards for the main areas and shall include main building services elements including lighting, heating, staff call, fire alarms, patient entertainment systems and all power and data accessories. This shall, where appropriate, include 3D computer illustrations.

6.6.5 The exemplar rooms to be prepared in the construction phase of the Works (Stage 3) shall portray doors, windows and the principal fitments and furniture. They shall allow definition of floors and walls, reflect the ceiling arrangements and identify the engineering services terminals. These shall be provided in a timely manner, to ensure they add value to the design development and approval process. The Contractor shall agree the content of and construct the exemplar mock-up rooms to a timetable to be agreed with the Board.

6.7 Witnessing and Testing

6.7.1 Witnessing and testing duties will be carried out by the Supervisor, all as detailed in relevant Clauses of the current NEC3 Engineering and Construction Contract, namely;

TITLE	DESCRIPTION	CLAUSE REFERENCE(S)	SUPERVISOR and CONTRACTOR DUTIES
Section 1	General	10.1; 11.2(6); 13.1; 13.3; 13.6; 14.1; 14.2; 14.4	10.1 – to act as stated in the contract and in a spirit of mutual trust and co-operation. 13.1 – to communicate in a form which can be read, copied and recorded. 13.3 – to reply to a communication within the period for reply 13.6 – to issue certificates to the Project Manager and Contractor 14.1 – Contractors duty to provide the works and be responsible for design. 14.2 – to notify the Contractor before delegating any actions or cancelling any delegation. 14.4 – replacement of Supervisor.
Section 2	Contractors Main Responsibilities	27.2; 27.3	Contractor's duties in relation to site access/action on legitimate instructions
Section 3	Time	n.a.	
Section 4	Testing and Defects	40.3; 40.5; 41.1; 42.1; 42.2; 43.1; 43.3	40.3 – to notify the Contractor of his tests and inspections before they start and afterwards of the results. 40,5 – to do tests and inspections without causing unnecessary delay to work or payment. 41.1 – to notify the Contractor of the results of the test or inspection on Plant and Materials required by the Works Information to be tested or inspected before delivery. 42.1 – instruct the Contractor to search for a Defect and to give reasons for searches which are instructed. 42.2 – to notify the Contractor of defects found before the Defects Date. 43.1 Contractor duty to correct Defects whether notified by Supervisor or not.

			43.3 – to issue the Defects Certificate at the later of the Defects Date and the last Defect Correction Period.
TITLE	**DESCRIPTION**	**CLAUSE REFERENCE(S)**	**SUPERVISOR and CONTRACTOR DUTIES**
Section 5	Payments	50.1	Project Manager duty in relation to assessing amounts due.
Section 6	Compensation Events	60.1(6)(8)(10)(11); 61.1	Actions/inactions of Supervisor in connection with Compensation Events.
Section 7	Title	70.1; 71.1	70.1 – Supervisor signing for marked Plant and Materials outside Works Area. 71.1 – Contractor action to allow Supervisor signing for marked Plant and Materials outside Works Area.
	Dispute Resolution	W1.3(5); W2.3(4)	Actions/inactions of Supervisor in connection with dispute Resolution Procedure.

6.7.2 It is envisaged that the Supervisor role will be carried out by a number of delegated parties – parties will be delegated by named Supervisor all as Clause 14.2, and are likely to comprise the following;

a) Civil & Structural Engineering;

b) Mechanical & Electrical Services;

c) Board Personnel (FM Services); and

d) Civil/M&E/Fabric Clerks of Works

6.7.3 In relation to the above duties as detailed under Section 4 – Testing and Defects, the Supervisor will carry out the following functions;

a) Design Compliance Check

i) Review the Design Data and detailed design information for general compliance with the terms of the Contract;

b) Procedure Review

i) review the quality assurance procedures proposed by the Contractor before work begins on the Laboratory and Hospital sites and review the operation of the procedures at regular intervals during The Works;

ii) regularly check to see whether the procedures employed by the Contractor are generally in accordance with the terms of the Contract; and

iii) review the proposed procedures and programmes for testing, commissioning and hand-over of The Works.

c) Construction Review

To the extent necessary to carry out the services referred to in Section 4 of the NEC3 Contract:-

i) enter the Laboratory and Hospital sites to monitor The Works to view the general state and progress of the Works to review overall workmanship, samples of goods and materials used or about to be used in The Works and to ascertain generally that the terms of the Contract have been and are being complied with by the Contractor;

ii) the frequency and timing of the Supervisor's visits are dependent on the progress of construction on the Laboratory and Hospital sites;

iii) regularly check to see whether the Contractor's work is being undertaken in accordance with Method Statements, Works Information and in a workmanlike manner;

iv) witness the testing, review and consider the suitability of all M & E and Building Management Systems, test results and certificates and other procedures within the Contractor's commissioning activities (all test results and certificates and other relevant commissioning and snagging paperwork to be collated by Independent Commissioning Engineer and provided to the Supervisor). In the event that a test carried out by the Contractor does not satisfy the terms of the Contract, check to see whether suitable remedial actions have been implemented and satisfactory results have been obtained on any re-tests;

v) generally inspect rectification works which have previously prevented the Supervisor from issuing a Defects Certificate; and

vi) undertake a visual inspection as appropriate of The Works before hand-over, to see whether the appearance is generally acceptable and in accordance with the terms of the Contract.

d) Reports

i) Report on the status of The Works following each site visit (and at any other time as appropriate) identifying any work that is non-compliant with the Contract; and

ii) Produce a weekly report following each site visit to ensure that the Employer is kept fully and properly informed on all aspects of the Works.

e) Familiarisation with Other Project Documents

i) The Supervisor shall familiarise itself with the Design Data and the Project Documents to the extent necessary to carry out the Supervisor role as provided for in accordance with the terms of the Contract;

f) Familiarisation with Quality Manuals

i) The Supervisor shall familiarise itself with and understand the Quality Manuals for the design and construction of the Project as set out in the Contract;

g) Monitoring and Inspection Procedure

i) The Supervisor and the Contractor shall agree an ongoing monitoring and inspection procedure, with reference to the Contract's key construction and

commissioning activities and the completed Works, and shall operate the same so as to ensure the efficient monitoring of construction and the efficient operation of activities;

h) Certification

i) The Contractor shall give the Supervisor (and Project Manager) sufficient notice in accordance with the Contract, of the date (the Completion Date") when it anticipates that Completion in respect of any Project Phase will be achieved;

ii) The Supervisor shall issue the relevant Defects Completion Certificate(s) in accordance with Clause 43.3 of the Contract; and

iii) As soon as practicable following the issue by the Project Manager of the Completion Certificate in respect of the final Project Phase to be completed in accordance with the Construction Programme, the Supervisor shall (provided that the Contractor has complied with its obligations to remedy any works listed in the Defects List) issue a final Defects Certificate.;

i) Snagging Items

i) The Contractor shall produce a Snagging Protocol detailing the process and individual party inputs, to cover the Phases of the Works. It is expected that this Protocol will be developed in conjunction with all interested parties e.g.:

- Board Representatives/Users/FM Team
- Supervisor
- Independent Commissioning Engineer
- The Contractor

and be provided at least six months prior to Phase Completion Date(s);

ii) The Contractor will provide for a computer/software based integrated snagging management system to be utilised during the snagging process, Provision to include all necessary peripheral equipment (PDA/Pens) and include for necessary training for Board Users and their advisors;

iii) The system will be managed and maintained by the Contractor, with appropriate access granted to project personnel; and

iv) Under the NEC3 Contract, there will be a "zero defects" approach to the project, and the Snagging Protocol will reflect this approach;

j) Notification of Completion of Defects

i) The Supervisor shall when requested by The Contractor attend any meetings convened about any part of the Works for the purpose of inspecting whether the Defects items applicable thereto have been remedied and/ or rectified; and

ii) The Supervisor shall issue a Defects Certificate, with copies of such notification also being issued, once all the works and other activities required in order to remedy and/or rectify Defects have been completed to the standards required by the Contract;

k) Miscellaneous

The Supervisor shall:

i) monitor the progress of the Contractor's design production;

ii) observe and monitor mock-ups, fabrication, construction and installation works on the Sites so as to satisfy itself that the Works comply with the Contract;

iii) audit the Contractor's Quality Assurance and the Contract control systems and procedures;

iv) issue Defect/Non-compliance notices and oversee the resolution of non-compliant matters;

v) review the commissioning of components of the Works in accordance with Contract/Works Information (as appropriate). The Supervisor will audit and monitor the commissioning work and report on the commissioning and testing of the Works;

vi) inspect and sign for marked up Plant & Materials outside of Works Area in accordance with Clauses 41.1/70.1/71.1; and

vii) hold regular meetings to discuss compliance and progress matters with the Employer and his Technical Advisors and the Contractor and attend meetings between the Employer and the Contractor as appropriate.

6.7.4 In order to assist the Supervisor in the performance of the above duties, the Contractor shall, as a minimum provide the following information;

a) the Accepted Programme;

b) copies of the Contractor's working programmes showing when the Contractor intends to carry out key activities whether off or on Site;

c) copies of all relevant documentation in connection with Plant & Materials outside of Works Area;

d) copies of such working drawings, schedules and specifications prepared for tender issue to the Contractor's sub-contractors as may reasonably be required by the Supervisor;

e) access to designs, drawings and documents register, technical and audit reports, consents, certificates and specifications to a level necessary to allow the Supervisor to assess compliance;

f) copies of correspondence relating to Building Control matters;

g) access to all quality control and quality assurance records, including procedures and method statements for the Project;

h) copies of all non-compliance reports generated by the Contractor and evidence of the clearance of the same;

i) copies of commissioning reports;

j) access to draft and final building/O&M manuals at the same time as the same are required to be provided to The Contractor under the Contract and otherwise as may reasonably be required by the Supervisor;

k) a copy of the health and safety plan and health and safety file and access to safety reports;

l) The Contractor's progress reports;

m) Any available completion check-lists prepared by the Contractor;

n) Change orders/requests prepared by the Contractor relating to the Works;

o) Copies of any reference or notice of intention to refer a dispute to the dispute resolution procedure in relation to the Works; and

p) The Defects List.

6.8 Commissioning and Handover

6.8.1 It is envisaged that the Contractor will appoint an Independent Commissioning Engineer to manage/programme/collate all M&E Testing and Commissioning processes, all as detailed in Appendix M, M&E3 Section 5 of the Employers Requirements

6.8.2 The Contractor will be required to provide the following in relation to the Commissioning and Handover process.

a) Final Commissioning Programme

i) A Final Commissioning Programme shall be prepared for each Phase to replace the Outline Commissioning Programme. The Final Commissioning Programme relating to the relevant Phase shall be prepared in consultation with the Board, in accordance with the requirement of the Completion Process;

b) Pre-Completion Commissioning

i) The Contractor's Pre-Completion Commissioning shall comprise the activities described as such in Table A Commissioning – Outline Commissioning Programme;

ii) The Contractor shall give written notice to the Project Manager/Supervisor and the Board's Representative of the commencement of The Contractor's Pre-Completion Commissioning in respect of each Phase when The Contractor (acting reasonably) considers that it shall commence The Contractor's Pre-Completion Commissioning in respect of the relevant Phase;

iii) The Contractor shall, at the times set out in the Final Commissioning Programme (and in relation to Manufacturer's Training, Induction Training and Building Familiarisation, when the Board Employees are made available for training by the Board pursuant to the Manufacturer's Training Programme, Staff Familiarisation Training Programme, Induction Programme and/or Staff Training Programme, as appropriate) undertake and complete The Contractor's Pre-Completion Commissioning in respect of the relevant Phase;

iv) The Board's Commissioning shall comprise the activities identified as such in Table A Commissioning – Outline Commissioning Programme;

v) The Contractor shall give written notice to the Board's Representative of the date upon which the Board shall be entitled to commence the Board's Commissioning in respect of each Phase, such notice to be given at least 1 month prior to the date when The Contractor (acting reasonably) considers that the Board should commence the Board's Commissioning in accordance with the Final Commissioning Programme; and

vi) The Board shall undertake and complete the Board's Commissioning for the relevant Phase, within the time period permitted within the Final Commissioning Programme, the Manufacturer's Training Programme, Staff Familiarisation Training Programme, the Induction Programme and/or Staff Training Programme (as appropriate) and shall comply with the Contractor's Site Rules and shall not cause any damage to the Works and/or Facilities or delay to the Works, in the carrying out of such activities;

c) Completion

i) The Contractor shall, no later than two months prior to the date that it anticipates (acting reasonably) a Phase will achieve the Completion Date, notify the Supervisor and the Board's Representative of such anticipated completion;

e) Post Completion Commissioning

i) The Contractor's Post Completion Commissioning shall comprise the activities identified as such in Table A Commissioning – Outline Commissioning Programme;

ii) The Contractor shall undertake and complete the Contractor's Post Completion Commissioning for the relevant Phase as follows:

- in relation to staff training, when Board Employees are made available to The Contractor for training in accordance with the Training Release Schedule, Induction Programme, Staff Familiarisation Programme and/or Staff Training Programme (as appropriate);

- in relation to clinical cleans, in accordance with the Final Commissioning Programme;

- The Board's Post Completion Commissioning shall comprise the activities identified as such in Table A Commissioning – Outline Commissioning Programme; and

- The Board shall undertake and complete the Board's Post-Completion Commissioning for the relevant Phase in accordance with the Final Commissioning Programme, Training Release Schedule, Induction Programme, Staff Familiarisation Programme and/or Staff Training Programme (as appropriate) and shall not cause damage to the Facilities in the carrying out of such activities.

e) Equipment and Training

i) The Contractor shall not clean, or move to enable general cleaning, items of equipment so identified by the Board unless in agreement with the Board's Representative. This shall include but not be limited to:

- physiological monitoring equipment;

- patient medical equipment when in use (e.g. respirators, air tanks, infusion pumps);

- department based computers, visual display units and radiographic equipment or machine consoles including anything bearing radiation or hazard Warning signs; and

- equipment that is plugged in for re-charging; and

ii) The Board shall ensure that any equipment of the Board that is transferred from an existing site is cleaned and disinfected prior to being transferred to the Facility.

OUTLINE COMMISSIONING PROGRAMME

Table A: Commissioning

Area comprised within a Phase	**Pre Completion Commissioning**		**Post Completion Commissioning**	
	The Contractor's Pre-Completion Commissioning	**Board Commissioning**	**The Contractor's Post Completion Commissioning**	**Board Post Completion Commissioning**
Rooms/areas which only contain the Contractor's equipment and movable equipment to be installed/commissioned by the Contractor in accordance with Appendix F (*Equipment*)	The Contractor to install Board Specialist Equipment as required in accordance with Appendix F2 (*Equipment*) The Contractor to commission and test equipment as required in accordance with Appendix F (*Equipment*) The Contractor to carry out Handover clean The Contractor to carry out Staff Familiarisation Training when Board Employees are made available to The Contractor by the Board for training, in accordance with the Staff Familiarisation Training Programme, Manufacturer's Training Programme,	Board to make available Board Employees for training in accordance with the Staff Familiarisation Training Programme, Manufacturer's Training Programme, Induction Programme and/or Staff Training Programme. The Board shall witness such testing as required by Approved Persons e.g.: • medical gas testing including provision of gas for such testing purposes • Clinical Cleaning in accordance with The Board's obligations as set out in the Completion Criteria of The Supervisor Contract.	The Contractor to train Board Employees made available for training pursuant to the Training Release Schedule, Induction Programme, Staff Familiarisation Training Programme and/or Staff Training Programme The Contractor to carry out Clinical Clean in accordance with the Commissioning Programme Clinical Clean of Board Equipment	Board to install, commission and test equipment as required pursuant to Appendix F (*Equipment*) and the Commissioning Programme Board to make available Board Employees for training in accordance with the Training Release Schedule, Induction Programme, Staff Familiarisation Training Programme and/or Staff Training Programme Board decant of patients to be carried out in accordance with the Commissioning Programme

Area comprised within a Phase	Pre Completion Commissioning		Post Completion Commissioning	
	The Contractor's Pre-Completion Commissioning	**Board Commissioning**	**The Contractor's Post Completion Commissioning**	**Board Post Completion Commissioning**
	Induction Programme and/or Staff Training Programme			
Rooms/areas which contain items of fixed equipment which are installed/commissioned by the Contractor and items of fixed equipment which are installed/commissioned by the Board in accordance with Appendix F (Equipment)	The Contractor fixed equipment installed, connected, commissioned and tested in accordance with Appendix F (Equipment) and the Commissioning Programme The Contractor to carry out Handover clean Completion of Works after Board Equipment installation The Contractor to insure Equipment in accordance with Appendix F (Equipment) The Contractor to carry out Staff Familiarisation Training when Transferring Board Employees are made	Board Specialist Equipment and fixed equipment installed, connected, commissioned and tested in accordance with Appendix F (Equipment) and the Commissioning Programme Board fixed equipment protected/mothballed until after the Phase Completion Date for the relevant Phase Board to protect and maintain the Board Equipment placed, and / or installed. Board to make available Board Employees for training in accordance with the Staff Familiarisation Training Programme, Manufacturer's Training Programme, Induction Programme and/or Staff	The Contractor to train Board Employees made available for training pursuant to the Training Release Schedule, Induction Programme, Staff Familiarisation Training Programme and/or Staff Training Programme The Contractor to carry out Clinical Clean in accordance with the Commissioning Programme Clinical Clean of Board equipment	Board to install, commission and test equipment as required pursuant to Appendix F (Equipment) and the Commissioning Programme Board to make available Board Employees for training in accordance with the Training Release Schedule, Induction Programme, Staff Familiarisation Training Programme and/or Staff Training Programme Board decant of patients to be carried out in accordance with the Commissioning Programme

Area comprised within a Phase	Pre Completion Commissioning		Post Completion Commissioning	
	The Contractor's Pre-Completion Commissioning	**Board Commissioning**	**The Contractor's Post Completion Commissioning**	**Board Post Completion Commissioning**
	available to The Contractor by the Board for training, in accordance with the Staff Familiarisation Training Programme, Manufacturer's Training Programme, Induction Programme and/or Staff Training Programme	Training Programme. The Board shall witness such testing as required by Approved Persons e.g.: • Medical gas testing including provision of gas for such testing purposes • Clinical Cleaning in accordance with The Board's obligations as set out in the Completion Criteria of The Supervisor Contract.		
ICT Board are responsible for installing hardware (server, PCs printers etc) and the Contractor responsible for infrastructure (containment, cabling, computer rooms etc)	The Contractor infrastructure installed, commissioned and tested in accordance with Employers Requirements (*ICT*)	Board hardware installed, commissioned and tested (Network, servers, critical clinical workstations) in accordance with Employers Requirements (*ICT*) and the Commissioning Programme	The Contractor to train Board Employees made available for training pursuant to the Training Release Schedule, Induction Programme, Staff Familiarisation Training Programme and/or Staff Training Programme The Contractor to carry out Clinical Clean in accordance with the Commissioning Programme	Board hardware installed, commissioned and tested in accordance with Employers Requirements (*ICT*) and in accordance with the Commissioning Programme Board to make available Board Employees for training in accordance with the Training Release Schedule, Induction Programme, Staff Familiarisation Training Programme and/or Staff Training Programme

OUTLINE COMMISSIONING PROGRAMME

Completion Process

A. Final Commissioning Programme

A.1 The Final Commissioning Programme shall be in accordance with the Outline Commissioning Programme and shall impose no greater or more onerous obligation on the Board or the Contractor than those set out in the Outline Commissioning Programme, unless otherwise agreed. The Final Commissioning Programme shall be developed by the Contractor in conjunction with and having consulted:

1.1.1 the Contractor;
1.1.2 the Board;
1.1.3 the Supervisor; and
1.1.4 the Board's FM Team.

A.2 The draft Final Commissioning Programme shall contain, amongst other things, full details of the following (including timing and sequence of events) for each Phase:

1.1.5 Contractor's Pre Completion Commissioning;
1.1.6 Board's Commissioning;
1.1.7 Contractor's Post Completion Commissioning;
1.1.8 the Board's Post Completion Commissioning; and
1.1.9 the Supervisor's Completion Criteria applicable to the relevant Phase.

A.3 The Contractor shall provide the Board with a draft of the Final Commissioning Programme relating to each Phase not less than 12 months prior to the anticipated Phase Completion Date.

A.4 If the Board has any comments on the draft Final Commissioning Programme, it shall issue comments on the draft Final Commissioning Programme to The Contractor on receipt of the draft Final Commissioning Programme by the Board from The Contractor, pursuant to paragraph 1.3 of this section (Outline Commissioning Programme).

A.5 If the Board raises comments on the draft Final Commissioning Programme in accordance with paragraph 1.4 of this section (Outline Commissioning Programme), the parties shall meet in good faith to discuss the terms of the Final Commissioning Programme), in order to agree the terms of the Final Commissioning Programme.

A.6 If the parties cannot agree the content of the Final Commissioning Programme, the matter shall be referred for determination in accordance with the Dispute Resolution Procedure.

A.7 Where any amendments to the scope and/or timing of the Board's Commissioning and/or the Board's Post Completion Commissioning are agreed or determined pursuant to paragraph 1.5 and/or 1.6 of this section (Outline Commissioning Programme) such change shall be treated as a Compensation Event.

OUTLINE COMMISSIONING PROGRAMME

Staff Familiarisation Training

B. Manufacturers' Training

B.1 The Contractor shall provide Technical Manufacturer's Training to such numbers of Board Employees as is agreed between the parties as being appropriate to allow for a cascade training regime, in accordance with the Manufacturer's Training Programme, which shall be submitted for agreement with the Board 4 months prior to a Phase Completion Date. The training shall be carried out prior to each Phase Completion Date, in accordance with the durations per system required pursuant to Table 1 (Outline Commissioning Programme), and in accordance with the Manufacturer's Training Programme. The Contractor shall only be responsible for those Board Employees directly trained by it. Systems requiring such manufacturer's training and thus more direct staff exposure to the manufacturer, are listed (but are not limited to those set out in) in Table 1 (Outline Commissioning Programme). The Board shall make available the relevant staff for training in accordance with the Manufacturer's Training Programme.

C. Building Familiarisation Training

C.1 Building Familiarisation Training shall be provided to each Board Employee by The Contractor to provide staff with general building and Site Familiarisation, general Site orientation and Building Health and Safety Induction. This shall be organised in small groups for half a day so that the impact on the existing sites is minimised, and subject to paragraph 2.2 below, shall comprise part of The Contractor's Post Completion Commissioning "Building Familiarisation"). The Building Familiarisation shall be programmed on a training plan, prepared by The Contractor and agreed with the Board not less than 40 Business Days of the anticipated Phase Actual Completion Date.

C.2 Board Employees at each Phase Completion Date shall receive this training leading up to their transfer, in a time period agreed with the Board and shall comprise part of the Contractor's Pre Completion Commissioning.

C.3 The Board shall make available the relevant staff for training in accordance with the Staff Familiarisation Training Programme.

D. Department Induction

D.1 Board Employees shall receive a department induction prior to the Relevant Service Transfer Date. This training (comprising two half days) shall be provided by the Contractor at the existing sites. Should the Board require this to be undertaken off site the costs associated with this shall be borne by the Board. This training shall cover department operational procedures and risk assessments.

D.2 The Induction Training shall be programmed and set out in a Training Plan with the Board Employees receiving the training in the period leading up to the Relevant Service Transfer Date. The Training Plan shall take into account the Board's responsibility for delivering the Services at the existing sites and shall therefore be designed to limit the impact on operational delivery and shall be prepared by The Contractor and agreed by the Board not less than 12 months prior to the anticipated Phase Completion Date.

D.3 The Board shall make available the relevant staff for training in accordance with the Induction Programme.

Table 1: Systems requiring staff direct manufacturers' training (to familiarise Transferring Board Employees with new plant and equipment)

Systems	CarPark Operative	Switchboard Operator	Receptionist	Helpdesk Operative	Security Officer	Porters	SoftFM Managers	SoftFM Supervisors	Energy Manager	HardFM Managers	HardFM Supervisors	Technicians	Electrical Craftspersons	Mechanical Craftspersons	Building Craftspersons	Maintenance Assistants	Administrators
Access Control	1				1		1	1									
CCTV (Operator)	1				1		1	1									
CCTV (Maintenance)										1	1	1	1				
Other Alarms	1	1	1	1	1												
Switchboard System		2	2	2													
Helpdesk System (Front Line process)		2	2	2													
Helpdesk System (Workload & record keeping process)							2	2		2	2						
Helpdesk System (Task Management & Feedback))						1	1	1		1	1	1	1	1	1	1	
Passenger Lift Evacuation (Competent Person)										1	1	1	1	1		1	
Passenger Lift Evacuation (SOP)	½	½	½	½						½	½	½	½	½	½	½	
Computer Aided Facilities Management System		2		2			2	2		2	2	2	2	2	2	2	
Asset Management System							2	2	2	2	2						
MiCAD									2	2	2	1	1	1	1		
Training in construction & operation of PPM									2	2	1	1	1	½	½	½	

Scheduling																	
AHU									1	1	1	1	1	1			
Airtube (Operator)						½	1	1			1	1	1	1			
Airtube (Maintenance)										1	1	1	1	1			
Systems	**CarPark Operative**	**Switchboard Operator**	**Receptionist**	**Helpdesk Operative**	**Security Officer**	**Porters**	**SoftFM Managers**	**SoftFM Supervisors**	**Energy Manager**	**HardFM Managers**	**HardFM Supervisors**	**Technicians**	**Electrical Craftspersons**	**Mechanical Craftspersons**	**Building Craftspersons**	**Maintenance Assistants**	**Administrators**
Auto Doors/Barriers										½	½	½	½	½	½		
BMS									2	2	2	2	2	2			
BMS Access Control (Operator)	1				1		1	1		1	1						
BMS Access Control (Maintenance)										2	2	2	2	2			
BMS Technology maintenance/trouble shooting									3	3	3	3	3				
BMS Technology Input/output Alarms & Scheduling									2	2	2	2	2				
BMS Technology - Report writing									2	2	2						
BMS Energy Management & metering functions									3	3	3	1	1	1			
Boilers MTHW									1	1	1	1	1	1			
Chillers/Local DX Units									1	1	1	1	1	1			

CHP									1	1	1	1	1	1			
Fire Systems	1	1	1	1	1					2	2	2	2	2	2		2
Generators									½	1	1	1	1	1			
Systems	**CarPark Operative**	**Switchboard Operator**	**Receptionist**	**Helpdesk Operative**	**Security Officer**	**Porters**	**SoftFM Managers**	**SoftFM Supervisors**	**Energy Manager**	**HardFM Managers**	**HardFM Supervisors**	**Technicians**	**Electrical Craftspersons**	**Mechanical Craftspersons**	**Building Craftspersons**	**Maintenance Assistants**	**Administrators**
Refrigeration									1	1	1	1	1	1			
Security Systems (Operational)	1			1	1		1	1		1	1						
Security Systems (Maintenance)										1	1	1	1				
Renewable Energy resources – where provided				1		1			3	3	3	3	3	3	1	1	
Decontamination – RO Plant operation & maintenance.				1		1			1	1	1	1	1	1	1		
Sterilisers/Washer Disinfectors										1	1	1		1			
Switchgear HV											1	1					
HV infrastructure and operation											1	1					
Switchgear LV										1	1	1	1				
LV infrastructure and operation										1	1	1	1				

UPS/Battery Cubicles										½	½	½	½				
MGPS infrastructure and operation										1	1	1		1			
Robotics							1			1	1	1	1				
Nurse Call											1	1	1				

6.8.3 Handover Procedures

6.8.3.1 The Contractor's Commissioning Programmes to include for sign off of relevant Testing and Commissioning elements by other parties, e.g.:

a) Board Approved Parties

i) Fire Officer;

ii) Control of Infection Officer;

iii) Radiation Protection Officer; and

iv) Medical Gases Officer;

b) Supervisor; and

c) Independent Commissioning Engineer

6.8.3.2 It will be the Contractors responsibility to programme the above sign off requirements to ensure relevant Completion Date achieved.

6.8.3.3 In connection with the above, the Supervisor will expect the Contractor to provide the following documentation in connection with Handover/Completion;

6.8.4 General

6.8.4.1 General Requirements

The Contractor shall provide such labour, materials, stores, test equipment, tools, instruments, apparatus and assistance as are reasonably required for the purpose of the inspection by the Supervisor and shall be responsible for the provision of such electricity, fuel, water and other consumables and materials as may be reasonably required for the same. Invitations shall be furnished to the Board, its Project Manager and the Supervisor to witness such works inspections, testing and commissioning activities as the Board deems necessary. Adequate notice of testing shall be given.

6.8.4.2 The Contractor shall ensure that major items of plant shall be tested at the works for both performance and safety prior to dispatch. Major items of plant shall include, but not be limited to, the following: boiler plant, generators, chillers/refrigeration machinery, large pumps, HV/MV switchgear, large pressure vessels etc. The Contractor shall arrange to witness all factory testing and shall furnish the Board, its Project Manager and the Supervisor with the opportunity to witness all factory testing, and sign off marked items of Plant and Materials. The Board, its Technical Advisors and the Supervisor shall be given at least fourteen days notice of such testing.

6.8.5 Works inspection, testing and acceptance activities

6.8.5.1 Completion Criteria

6.8.5.2 The Contractor shall demonstrate that the following criteria have been achieved:

6.8.5.3 The building is structurally complete, all external fabric is complete and internally all the finishes are complete in accordance with the ADB Room Data Sheets;

6.8.5.4 All incoming Utilities including all associated back up systems is tested, commissioned and operational;

6.8.5.5 The Mechanical and Electrical plant and systems operate satisfactorily in accordance with the specified design criteria, and the ADB Room Data Sheet;

6.8.5.6 The Building Management System is complete, tested, commissioned and operational;

6.8.5.7 All furniture and equipment shown on the Loaded Room Layout drawings (as supplemented by Appendix F (Equipment) have been installed (and commissioned if appropriate);

6.8.5.8 The Board has been supplied with keys, access codes, swipe cards and other access devices for access to and within the Works;

6.8.5.9 Safe access and egress to and within the relevant Laboratory and Hospital sites has been established;

6.8.5.10 The relevant Laboratory and Hospital sites shall be free from all surplus materials, plant and equipment that could materially affect the completion of the Tests on Completion and shall comply with the standards and requirements of Section 3;

6.8.5.11 All internal and external drainage systems are installed and are operational;

6.8.5.12 External works as appropriate have been completed and are available for use by the Board;

6.8.5.13 All hard-landscaped external works, including roads, car parks, pavements and boundary walls/fences are complete and available for use by the Board;

6.8.5.14 Lift and Escalator systems are complete, commissioned and operational;

6.8.5.15 All building directional departmental, general information and room numbering signage as indicated within Employers Requirements/the Contractor Proposals and/or Reviewable Design Data and necessary to all the operational Services to commence has been provided and installed. This includes both internal and external signage;

6.8.5.16 The Fire Management Strategy has been finalised, The Contractor to complete and submit fire safety risk assessment in accordance with the Fire (Scotland) Act 2005;

6.8.5.17 The Fire Detection, Alarm and Suppression Systems are complete, tested commissioned and operational

6.8.5.18 All External Lighting is installed, tested, commissioned and operational;

6.8.5.19 All IT and Communication Systems are complete, tested, commissioned and operational;

6.8.5.20 All Security and Surveillance Systems, Access Controls and Call Alarms are complete, tested, commissioned, operational and available for use by the Board;

6.8.5.21 Acoustic Testing has been completed to prove compliance with the Employers Requirements and the Contractor Proposals;

6.8.5.22 The medical gas and vacuum system is complete, tested, commissioned and witnessed by NHS Greater Glasgow and Clyde's Chief Pharmacist and Medical Gases Approved Person;

6.8.5.23 A proving and training period for the Board has been offered by the Contractor, and subject to the Board making themselves available within agreed timescales, this training has been completed;

6.8.5.24 A proving and training period for the Service Provider has been completed;

6.8.5.25 The Contractor has provided all documentation to the Supervisor in accordance with the Supervisor's Contract and Section 4; and

6.8.5.26 A draft hard copy and electronic format of the relevant As Built Specification Documents, Operational & Maintenance Manuals and Health & Safety Files for the Facilities (containing, as a minimum, all the testing and commissioning information so far as it is reasonably practicable) have been issued by the Building Contractor.

6.8.6 Clinically clean

6.8.6.1 On completion of the Works, The Contractor shall provide the Facilities as "clinically clean" in accordance with NHS Scotland National Cleaning Services Specification and to the satisfaction of the NHS Greater Glasgow and Clyde's Control of Infection Officer.

6.8.7 Testing and commissioning documentation

6.8.7.1 All documentation associated with the Tests on Completion shall be collected and collated by the Contractor/Independent Commissioning Engineer and shall be presented as a bound, indexed document to the Board. The following list is indicative of the test documentation expected to be provided:

Test Documentation
Building Warrant Completion Certificates
Evidence that all Conditions attached to the detailed Planning Consent have been discharged to the satisfaction of the Local Authority.
Roads Construction Consents
Design Warrants
Flushing Cleaning and Chlorination test certificates
Boiler Plant Manufacturers Factory Test and Commissioning Sheets in accordance with CIBSE Commissioning Code B, including all steam systems
Ductwork Systems pressure test and volume flow rate Certificates
Laundry Equipment Commissioning Certificate
Kitchen Equipment Commissioning Certificate
Electrical Installation Completion and Inspection Certificates in accordance with BS 7671 and

Test Documentation
NICEIC requirements
Robotics Equipment Commissioning Certificate
Lighting and Power Certificate of Test
Fire and Intruder Alarms Commissioning Certificates, including intruder detection and alarm, access control system(s)
General Electrical Earth Loop and Insulation Resistance Test Sheets
Testing of all hot water service thermostatic mixing valves (TMV's) in accordance with BS6700 and tests to comply with HSE Document L8 and HGN 'Safe Hot Water and Surface Temperatures
Emergency Lighting Completion and Test Certificates
Certificate of Compliance/Testing of Radiation protection
Security Systems Commissioning Certificates
Certificate of Soundness Testing of Gas Installation
Gas Pipework Pressure Test and Purge Certificates
Medical Gas Pipework Pressure Test and Purge/Commissioning Certificates
Fire Suppression System Certificates (in accordance with BS6266 and tests to comply with CIBSE Guidance E)
Fire Alarm Sound Record Sheets
Lighting Calculation Sheets and Lux Level Test Results (Internal & External)
Machine (Generator/UPS/CHP etc) Specialist Commissioning and Factory Test Sheets
Acoustic Test sheets (in accordance with BS 5821)
Lift Commissioning in accordance with BS EN 81 and Factory Test Sheets
Lightning Protection Risk Analysis and Test/Commissioning Sheets
Boiler Plant Manufacturers Factory Test and Commissioning Sheets in accordance with CIBSE Commissioning Code B
Works pressure test certificates for all pressure vessels
Mechanical Pipework Systems Pressure Tests
A/C Equipment Performance Tests
Condensate Clearance Tests for A/C Equipment
BMS/EMS Tests/Commissioning Records in accordance with CIBSE Commissioning Code C
Air Distribution Systems in accordance with CIBSE Commissioning Code A
Water Systems (heating & domestic water) in accordance with CIBSE Commissioning Code W
Legionellae Testing (to include an organic check on the incoming mains) within tolerances given in HSE ACOP test sheets
Domestic water systems bacteriological quality test sheets
Rainwater harvesting systems test and completion and bacteriological quality test sheets
Plant (Calorific, Treatment etc.) Specialist Commissioning and Factory Test Sheets
Nurse Call Test Certificate
Disabled Toilet Alarm Test Certificate
Fire Alarm Test Certificate
CCTV and Access Control Test Certificate
TV Aerial Certificate
Patient Entertainment System Certificate
Telephone Cabling Test Certificate
ICT Cabling Test Certificate
Induction Loop Test Certificate
Pipeline Pressure and flowrate Test Certificates including drainage and all steam systems
Steam boiler/generator test factory test and commissioning certificates in accordance with

Test Documentation
CIBSE Commissioning Code B
Ground Source Heating installation pressure and Test Certificates
Chiller factory test and commissioning certificates in accordance with CIBSE Commissioning Code R
Chemical clean and inhibitor dosing certification to heating/chilled water systems
Ductwork physical and bactericidal cleaning certification

Section 7.0 Architectural Requirements

7.1 Masterplan

7.1.1 The Masterplan for the New South Glasgow Hospitals has been developed in consultation with various stakeholders, including User Groups, Architecture + Design Scotland, the Carbon Trust, Strathclyde Passenger Transport, Civil Aviation Authority (CAA) and Glasgow City Council Planning Department. The aims of the Masterplan are to achieve a clarity of spaces and routes within the existing Southern General Hospital Site.

7.1.2 The proposed Masterplan design seeks to improve the entrances to the site, traffic flows around the site and enable all visitors to the new hospitals to orientate themselves quickly with the campus. A new main boulevard entrance will be created from Govan Road, which will border the new Laboratory, FM & Mortuary and Energy Centre Site. However, the traffic flows have been separated and all service access to this area will be off Hardgate Road. Public Access and drop off via private car become immediately clear on the approach to the building and the traffic flows allow drop off adjacent to the relevant entrances and then onwards to the respective car parking zones. A new transport 'hub' located centrally on the site provides direct and sheltered access to the new hospital entrance. This hub will allow 'Fastlink', taxi and private car drop off within immediate walking distance to the entrances. Public Bus routes will remain on the existing road network with additional bus stops being provided at key entrances.

7.1.3 Blue Light traffic routes into and within the site are clearly identified and provide the quickest access points from whichever direction the ambulance approach.

7.1.4 Upgrading and Replacement of car parking provision has located 4 new major car parks strategically around the site:

a) Adult Hospital x 2nr;

b) Children's Hospital; and

c) A&E Entrance

7.1.5 Pedestrians and cycle routes through the site and the interaction with the building have been developed to provide clear designated routes to the new main hospital and surround buildings, while the punctuation of the site with pockets of landscaped spaces supplement the main park area situated immediately in front of the new main hospital entrance. The 'green space' within the campus is designed to provide a functional retreat for patients, visitors and staff.

7.1.6 As the final design develops within the parameters of the Masterplan, there is a requirement to update the Development Control Plan for the entire Southern General Site to identify future uses, expansion and redevelopment.

7.1.7 The Masterplan presents the Board's vision of the New South Glasgow Hospitals on the Southern General Hospital Site and requires to be followed and implemented by the Contractor.

7.2 Exemplar Design

7.2.1 The exemplar design has been developed in consultation with the Board and User Groups. The exemplar design is intended to reflect these discussions and provide an advanced level of briefing that will enable the Contractor's response at the end of the bid period to be more advanced in terms of understanding of the Board's and User's functional, clinical and quality requirements. As well as reflecting the requirements of the Clinical Brief the design exemplar is also intended to represent a design quality benchmark against which the Contractor's proposals will be measured. The exemplar demonstrates the aspirations of the Board in terms of the graphical and technical representations of the Contractors.

7.2.2 Whilst the exemplar design has not been developed with the intention of constricting the Contractor's proposals to a particular solution nor has it been developed in order to stifle innovation or creativity, it should be noted that the functional relationships indicated in the exemplar does represent the culmination of a process of detailed consultation with the Board and Users to determine their requirements and as such it is not expected that the Contractor will require to revisit the functional relationships or design principles as set out in the following exemplar information;

a) 1:500 departmental relationship drawings for all levels of each building indicating functional relationships, entrances and main circulation routes (Appendix H);

b) 1:200 departmental drawings for 7 no. key departments in the Adult's Hospital and 4no. key departments in the Children's Hospital indicating room adjacencies, circulation layouts, corridor widths, entrances and links to other departments/facilities. (Appendix I);

c) 1:50 Room Layout Drawings indicating clinical functionality, room size and shape and compliance with ergonomic data. (Appendix J); and

d) ADB Room Data Sheets (Appendix E).

7.2.3 Described in more detail below are the key features of the exemplar design which will require particular consideration by the Contractor;

a) Adult and Children's Hospital Identity;

b) Podium;

c) Ward Tower;

d) Main Entrance; and

e) Atrium including retail space;

Adult and Children's Hospital Identity

7.2.4 The exemplar proposes a single overall building footprint subdivided into the Adult and Children's facilities, creating two distinct but adjoining hospitals. This is in acknowledgement of the benefit to be exploited through the co-location of the Adult and Children's Hospitals, a great deal of consideration has been given to identifying these in the brief and in the design of the two hospitals.

7.2.5 It is important to stress that the Children's Hospital will operate as a hospital in its own right with its own clinical staff and management, with some shared facilities. It is therefore a requirement of the brief for the Children's Hospital not only that there should be an appropriate degree of clinical and patient separation between the two hospitals but also that the distinct identity of the Children's hospital shall be maintained both externally and within the patient and public areas. This requirement is expressly reflected in the exemplar design which indicates two separate entrances for the Adult's and Children's Hospital.

Building Typologies

Podium

7.2.6 A significant proportion of the overall building footprint is dedicated to integrated acute facilities which will be housed in the 3 storey podium. The podium will house such departments as Operating Theatres, Radiology, Critical Care and Outpatients Departments. The key drivers behind the location of departments are the necessities of co-location for functionality along with appropriate public/private zoning of the facilities. For example Outpatients and Accident Emergency Departments are located on the ground floor towards the external boundary of the footprint to ensure an appropriate level of public accessibility is achieved while the core of the footprint is reserved for private treatment and diagnostic areas such as Radiology.

7.2.7 Departments located in the podium;

a) NSGH Main Entrance and Discharge Lounge;

b) NSGH Emergency Department;

c) NSGH Rehabilitation;

d) NSGH Radiology;

e) NSGH Acute Assessment;

f) NSGH Critical Care;

g) NCH Main Entrance;

h) NCH Emergency Department;

i) NCH Rehabilitation;

j) NCH Radiology;

k) NCH OPD;

l) NCH Cardiology;

m) NCH Inpatient Wards;

n) NCH DCFP;

o) Operating Theatres;

p) Endoscopy;

q) Aseptic Suite;

r) Renal Dialysis;

s) Nuclear Medicine;

t) Medical Physics;

u) Dining Area;

v) Retail and Café; and

w) Pharmacy.

Ward Tower

7.2.8 Located above part of the footprint of the podium will be the 13 storey 4-wing ward tower providing single bedroom ward accommodation across a range of departments including Renal, Vascular, Haemato-Oncolgy etc. In total the facility includes the provision of 1,109 adult and 240 children's beds. While not all bed spaces noted will be accommodated in the ward towers, the ward tower typology was developed as being the most appropriate and achievable method by which these bed numbers could be accommodated. The towers are positioned and orientated to provide best use of views across the site, provide appropriate levels of natural light and to achieve patient privacy by preventing overlooking from other ward accommodation.

7.2.9 Tower Wards include;

a) Generic wards;

b) Haemo-oncology wards;

c) Vascular wards;

d) Renal wards;

e) Dermatology; and

f) Stroke;

Main Entrance

7.2.10 There are 6 staff/patient/visitor entrances on the ground floor;

a) NSGH Main Entrance;

b) NCH Main Entrance;

c) NSGH 24 Hour/Staff Entrance;

d) NCH 24 Hour/Staff Entrance;

e) NSGH Acute Assessment Entrance; and

f) NSGH / NCH Emergency Department Entrance

7.2.11 At each of the above entrances a robust glazed canopy will require to be incorporated in order to provide shelter from the elements for staff, visitors and patients and to assist in the prevention of wet contamination of flooring within the building. Entrance canopies will require to be sized appropriately to accommodate ambulances as necessary. A methodology for the maintenance and cleaning of the canopies will also be required.

7.2.12 The ambulance entrance of the Emergency Department (ED) will be expected to have the ability to be converted into an external decontamination facility. This would include the requirement to incorporate roller screens as part of the ambulance canopy and multiple water mixer points to allow shower attachments. The area will also require the ability to isolate drained water under decontamination procedures.

7.2.13 The main entrances to the Adult's and Children's Hospitals will be expected to have a light, spacious and welcoming atmosphere and the main entrance shall be immediately apparent to all users. The main entrances for the Adult's and Children's Hospitals should reflect in form, scale, space and use of materials the aspirations and design quality promoted by the Board resulting in a meaningful expression of the Board's intent for the facility; that is to deliver first class healthcare to the local population and provide a focal point for community activities and education welfare. The entrances should demonstrate the required benchmark of architectural design quality while at the same time incorporating practical considerations, for example the provision of appropriate shelter and adequate accessibility of entrances.

7.2.14 The façade of the main entrances should be fully glazed for the full height and width of the entrance area including automatic sliding entrance doors to allow views in and out of the main entrance and reception. It is important that large glazed areas such as this should be clearly identified as such for safety purposes and must be safety glass. Solar shading devices should be incorporated as necessary to achieve the Board's stated Sustainability and Energy Targets. The size and numbers of automatic entrance doors should be sufficient for the expected number of users to pass comfortably and safely through them. A glazed canopy should be incorporated in order to provide shelter across the full width of the entrance at a height that provides appropriate shelter while also coordinating as required with the façade design. The structure and glass forming the canopy shall be robust and shall incorporate all appropriate standards of security, and where reasonably practicable, limit the potential for exposure to crime and vandalism.

7.2.15 Entrance lobbies should be provided as Section 7.5.2 including the requirement for a minimum of 6 metres of barrier matting to prevent the ingress of dirt and wet contamination to flooring. Any lobby enclosure provided requires to be fully glazed to allow users to proceed safely and confidently.

7.2.16 Once inside the building the reception areas and information points are key to orientation. The tone of a building is set by the entrance and reception to the building, therefore the Contractor's design should achieve a balance of openness with patient confidentiality and staff safety, resulting in reception areas skillfully combining a friendly welcome with low-key oversight of public areas. The expected quality of the main entrance spaces should be akin to a large hotel foyer, this expectation should be reflected in the choice of quality robust materials for flooring, walls, ceilings, balustrades etc. The quality of the space should also be enhanced by interesting shapes and forms, lighting techniques and the incorporation of art.

7.2.17 The reception area and main entrance generally will be busy places, both in terms of footfall and hours worked. Materials, finishes and furnishing therefore need to be robust, as well as attractive. The Contractor's design should cater for well selected, fit for purpose furnishings which will complement a clear approach to design. One such component of the main entrance design is the flooring, it is vitally important that the floor finish in the main entrance area should combine robustness and attractiveness with slip resistance. A material such as natural stone/ceramic tiles which have a high micro-surface roughness should be used.

7.2.18 One of the most important features of the reception area is the reception desk which should be close to the entrance and should be an open well lit counter/desk with a feature or identifying sign at high level. The reception counter requires to reflect and enhance the quality of the surroundings in terms of form, quality of materials and lighting.

7.2.19 In order to provide staff, patients and visitors with access to information especially at the key points of entry to the Building it is the Board's intention that Contractor's should incorporate electronic information points utilising touch-screen technology in addition to the manned reception points and stations and the PA system. These information points should present information (in a variety of languages) on the hospital for orientation and wayfinding purposes along with information in relation to the public transport hub which should be adjacent to the main entrance giving real time information on bus/fastlink timetables. The Contractor will be required to provide a clear strategy for the provision of these information points.

7.2.20 The main entrance requires to incorporate well planned waiting rooms which can help to relax patients, thereby reducing fear and increasing confidence. Upholstered seating set out in the style of a hotel foyer with spacious waiting should be the goal, these areas allow patients, carers and visitors to relax, chat, wander or simply enjoy the space and any views afforded. This is especially valuable where the patient may be accompanied by friends or relations.

A Changing Places facility which combines a toilet, shower and changing room for use by people with complex and multiple disabilities will require to be located at the Adult and Children's entrances. The space should be provided in accordance with the requirements of BS8300:2009 item 27 and should incorporate an adjustable changing table and fixed track hoist system.

7.2.21 A requirement throughout the hospital especially within entrance areas shall be to incorporate appropriate standards of security, and where reasonably practicable, limit the potential for exposure to crime and vandalism. Guidance is provided in HFN05 -"Design against crime-a strategic approach to hospital planning".

7.2.22 Atrium including retail space

a) The exemplar indicates a linear atrium linking the main entrances of the Adult's and Children's Hospitals. This concourse performs a number of different functions;

b) Provide a link between Adult and Children's Hospitals;

c) Provide clear horizontal and vertical links to all areas of the hospital facilities with the incorporation of stairs, lifts and escalators as necessary;

d) Provide a clear route for patients, staff and visitors to frequently attended departments such as the outpatient's department;

e) Provide access to pharmacy;

f) Provide access to retail facilities such as the cafeteria to allow users to purchase drinks, food and to consume them in a pleasant and relaxing environment;

g) Continue the quality of the main entrance spaces which will be reflected in the choice of quality robust materials for flooring, walls, ceilings, balustrades etc; and

h) Provide opportunities to incorporate art, lighting techniques and tv/video display screens to enhance the quality of the space and provide a welcome distraction.

7.2.23 The multi-level linear atrium space will be formed between the outpatient department and the remainder of the departments contained in the podium such as day surgery and radiology. The atrium will contain link bridges, escalators, lifts and stairs providing all vertical and horizontal communication links across the void space providing the necessary connections between departments. The lifts should be fully glazed to all sides providing views over the atrium space for the purposes of orientation. A high level of finish will be expected for all stairs and balustrades, any handrail, barrier or guarding to stairs or corridor links should be glazed to allow views for children and those in wheelchairs. The roof to the atrium should be fully glazed to provide a light, bright welcoming environment. Solar shading devices should be incorporated as necessary to achieve the Board's stated Sustainability and Energy Targets. The atrium will also provide fully glazed areas of façade to courtyards where available, to allow users views out to external landscaped courtyard spaces. The expected quality of the atrium concourse space should be akin to a high quality shopping mall and continue the quality of the main entrance. This should be reflected in the choice of quality robust materials for flooring, walls, ceilings, balustrades etc. The quality of the space should also be enhanced by interesting shapes and forms, lighting techniques and the incorporation of art.

7.2.24 The form of the atrium shall clearly express the individuality and special nature of parts of the Works including the retail facilities, yet the parts should harmonise with the facilities as a whole. The Contractor should give particular consideration to the architectural composition and expression of the form within the atrium which should reflect an identifiably distinct character for the Adult Acute and Children's Hospital as befits the nature of the patient groups.

7.2.25 The atrium also provides opportunities for retail facilities including pharmacy and cafeteria facilities, these areas should be clearly expressed.

Helipad

7.2.26 The Contractor will require to provide a rooftop Helipad and the associated services, access requirements and safety facilities in full compliance with the following guidance;

a) HBN 15-03 – Hospital Helipads;

b) British Helicopter Advisory Board – Helicopter Site Keepers Guidance Document; and

c) Structural Design Criteria - ICAO Heliport Manual

7.2.27 The Helipad will also require to be provided in line with all requirements of Glasgow City Council Planning Department including the following requirement;

a) A detailed noise and environmental assessment regarding the relocation of the heliport landing area shall be submitted to the Planning Authority for its written approval prior to its siting and operation. The Contractor requires to consult the Director of Land and Environmental Services, Public Health Unit concerning the methodology and approach to any assessment.

7.2.28 It is understood that this type of Helipad does not require to be licensed by the CAA (Civil Aviation Authority), however due to the congested nature of the surrounding area the Helipad operator will require a Rule 5 permission from the CAA and therefore the Contractor must consult the Operator and Board to ensure compliance.

7.2.29 The Helipad Operator(s) and Board will require to be consulted on the type of helicopters that will be expected (including size and weights). However as general guidance for the size of Helipad required a rectangle with sides at least 25 m long (or a circle at least 35.4 m in diameter) will be a minimum requirement to accommodate all helicopter types likely to make use of the facility.

7.3 Ceilings Heights & Voids

7.3.1 The floor to ceiling heights, or to services level where there are no ceilings, shall be designed to accommodate the nature and use of the accommodation, but as a minimum shall be at least 2700mm irrespective of location. The ADB room data sheets define ceiling heights on a room by room basis.

7.3.2 All circulation and communication spaces shall have a minimum ceiling height of 2700mm;

Room Type	Department	Minimum Ceiling Height
All Corridors	Wards	2700mm
Lift Lobbies	All Departments	2700mm

7.3.3 Certain special types of room should be 3000mm or above in height to suit their medical or equipment needs;

Room Type	Department	Minimum Ceiling Height
All Operating Theatres	All Departments	3000mm Where Laminar Flow curtains are present – 2100mm required to u/side of curtain from ffl.
Radiology and scanning Rooms (CT and MRI)	Radiology	3000mm
Endoscopy Rooms	Endoscopy	3000mm
Therapy Room	Rehabilitation	4500mm

7.3.4 Additionally there are a number of departments where all ceiling heights should be as a minimum 3000mm – including all main communication and interdepartmental circulation routes;

Department	Minimum Ceiling Height
Operating Theatres	3000mm
Critical Care	3000mm
Imaging	3000mm
Rehabilitation	3000mm

7.3.5 The following criteria require to be incorporated in the Contractor's Proposals:-

a) Areas such as circulation spaces, patient corridors, waiting areas, reception areas, entrance areas and atria should be given particular consideration in terms of ceiling form, material and with particular regard to maximising the height of ceilings to offer a light, spacious and welcoming character. For the avoidance of doubt a suspended ceiling tiled solution throughout will not be acceptable in these areas. Where higher ceilings are present a maintenance strategy will require to be clearly demonstrated;

b) An appropriate and safe void allowance above all ceilings shall be provided, including appropriate and safe points of access for maintenance of services. The void allowed shall be adequate for the full co-ordination and installation of engineering, cabling (including IT)

and other services. Co-ordination with the electrical, mechanical and communication services shall be an inherent part of the ceiling and building design. A full and appropriate strategy for the coordination of services requires to be clearly demonstrated to the Board through the use of 3D Modelling techniques;

c) It is imperative that the Contractor shall demonstrate their solution to the above requirement to the satisfaction of the Board by providing a clear and identifiable strategy for the installation of these services , providing satisfactorily accurate sizing and positioning for ducts , cable trays etc, including access points in plan and section to confirm compliance with this key Board requirement. As part of this requirement a clearly identifiable zoning strategy will require to be demonstrated by the Contractor regarding the location of access points to ceilings or roof voids;

d) The Contractor shall also ensure that the ceiling voids are designed to accommodate the specific requirements of the fire strategy for the Facilities -and in particular, the provision of cavity fire-barriers within compartments;

e) Services access through all Category 1 ceilings will not be acceptable (ceiling categories will be as defined in the ADB Room Data Sheets). For these areas the ceiling services should be capable of being accessed from an adjoining activity space. For the avoidance of doubt services should not be accessed from below (i.e. through the ceiling) in these areas. The following list of areas is indicative only and not exhaustive;

i) Aseptic suite;

ii) Decontamination unit;

iii) Operating theatres;

iv) Anaesthetic rooms;

v) Plaster room;

vi) Post operative recovery; and

vii) Preparation;

f) Ceiling or roof voids must not be accessible to patients or visitors. Access will be by Maintenance personnel only;

g) Modular ceilings are not acceptable in the operating theatre but may be required in associated areas for maintenance purposes. The ceiling in the operating theatre should also be able to withstand regular washing and have a completely sealed finish to maintain microbiological standards in compliance with SHTM, SHPN, HBN guidance;

h) If an acoustically absorbent ceiling is considered in any location it is essential that this does not present an infection hazard in compliance with SHTM, SHPN, HBN guidance;

i) Designated access points shall be fitted with a self-contained Ramsey-style ladder or similar where appropriate to facilitate access for maintenance purposes – this should be clearly demonstrated in the Contractor’s approach to access and maintenance;

j) Demountable suspended ceilings shall be readily demountable without suffering undue damage and shall be capable of being easily cleaned;

k) Ceilings will be constructed in a proprietary suspended plaster board system in areas demanding specific hygiene criteria as defined in the ADB Room Data Sheets;

l) Ceiling mounted booms required for patient support and monitoring systems in theatres, treatment or x-ray rooms shall be co-ordinated with the ceiling layouts. E.g. Background fixings within ceiling void. Access to check and maintain fixings to all structurally mounted equipment requires to be provided by the Contractor in a clearly demonstrated strategy;

m) In line with the requirements of HAI Scribe coving will be required at the junction of wall and ceilings within all theatre suites and endoscopy rooms;

n) A minimum of 2100mm clearance is required under any suspended fixtures e.g. Signage;

o) The protrusion of light fittings, radiant panels or any other fittings will not be accepted in clinical areas;

p) Consideration may be given to making use of the ceilings to provide additional natural light by way of roof-lights. However, careful consideration should be given to the implications of incorporating these, e.g. rain noise, and to how they will be cleaned;

q) Emergency egress from roof void areas into patient areas is not acceptable (this includes any garden areas internal to the facility);

r) Suitable service maintenance walkways, incorporating handrails, shall be provided within roof voids with access hatches where walkways pass through fire barriers. Services require to be entirely clear of this walkway;

s) Floor to ceiling heights must be carefully considered in relation to the overall height restriction placed on the building by the granted Outline Planning Consent; Additionally floor levels are required to tie in with adjacent building levels where clearly required e.g. Neonatal;

t) Where Laminar flow canopies are present, a height of 2100mm will be required from finished floor level to the underside of canopy curtain for headroom; and

u) Washable ceilings are required in all clinical areas.

7.4 **Corridor Widths**

7.4.1 The table below identifies the Board's minimum requirements for corridor widths on a departmental basis with which the Contractor must comply;

Corridor Type	Department	Minimum Corridor Width (clear between handrails)
Hospital Street	Communication	Requirements for Means of Escape will dictate width – however minimum of 3000mm required
General Traffic – Staff Only	All Departments	1500mm
General Traffic – Patient Areas	All Departments	1800mm – two independent wheelchair users to pass
Patient Bed/Trolley Traffic	Wards	2150mm – straight movement with passing places width 3330
Patient Bed/Trolley Traffic	Theatres/Endoscopy	2960mm – two beds to pass regularly
FM Tunnel	Links buildings	8000mm - to be developed with robotics design and requirement.

7.4.2 Corridor widths shall be as required by the nature and use of the accommodation. Minimum widths shall apply along the whole length of the corridor. Main interdepartmental corridors in areas that patients may travel in beds shall be of sufficient width to allow two beds, with any attached equipment, to pass. Departmental corridors shall have passing places and all corridor widths shall be subject to specific agreement with the Board.

7.4.3 The following criteria require to be incorporated in Contractor's proposals:-

a) the utilisation of corridor widths and profiles is an integral element of the Clinical Brief and requires to be addressed in design solutions. This may be achieved through the use of informal seating areas and the like, whilst avoiding areas where patients may be obscured from staff view where possible;

b) corridors in patient areas shall not be less than 1800mm (clear between handrails or other protrusions), with corner protection to be provided and handrails to both sides, where appropriate as defined in Section 7.16 - Protection;

c) wherever possible reduce lengths of circulation routes and provide open areas and stopping/resting points along the length of travel;

d) avoid isolated columns in open plan areas or on circulation routes where practicable; and

e) avoid dead ends to circulation routes, particularly in patient areas;

7.5 **Doors**

7.5.1 Door widths shall be identified in the relevant ADB Room Data Sheet and Schedule of minimum door widths below (in the eventuality of a conflict between the RDS and Schedule below the wider provision will apply).

Room Type	Department	Minimum Coordinating width of Door
Ensuites	All Departments	1980 mm
Recovery	Operating Theatre	1900mm
Corridors	All Departments	1900mm in corridors greater than 1800mm wide i.e. Corridors with patient access
Operating Theatre	Operating Theatre	1900mm
Endoscopy Room	Endoscopy	1900mm
Assisted Bathrooms	All Departments	1500mm
Patient Bedrooms	All Departments	1500mm
Treatment Rooms	All Departments	1500mm
DSR	All Departments	1500mm
Disposal Hold	All Departments	1500mm
Equipment Store	All Departments	1500mm
MRI Room	Imaging	1450mm (refer to HBN 06)
Interview/Sitting Rooms	All Departments	1000mm
Consult/Exam Rooms	All Departments	1100mm
Clean/Dirty Utility	All Departments	1000mm
Offices	All Departments	1000mm
Seminar Rooms	All Departments	1000mm
General Stores	All Departments	1000mm
Staff Rest Rooms	All Departments	1000mm
Staff WC	All Departments	1000mm
Patient WC	All Departments	1100mm

7.5.2 For the avoidance of doubt, the minimum coordinating width indicated above is as defined in SHTM.

7.5.3 Notwithstanding the above, the Contractor shall be responsible for establishing, through detailed consultation with the Board, additional specific requirements for door widths in all areas of the Works. Consideration shall be given to providing sufficient door width in areas where the Board's operations rely on the use of larger items of Equipment such as waste containers and regeneration trolleys.

7.5.4 Door widths and door configuration shall be provided to allow for the delivery and removal of Equipment to each area. The Contractor shall require to demonstrate replacement planning for

major items of kit including navigation routes through corridor and other doors (e.g. replacement Imaging equipment). In this respect the Contractor shall ensure that the relevant corridor and door opening widths can accommodate the replacement of plant and materials along designated routes (identified by the Contractor). This to allow the passage of new/replacement Equipment and Specialist equipment without the need for the removal of any doors, door operating gear/equipment or handrails/protection.

7.5.5 The following criteria require to be incorporated in the Contractor's proposals:-

a) doors from the single bedrooms to en-suites in all ward accommodation should comply with the requirements of both HBN 04-01 Adult Inpatient facilities and HBN 00-02 Sanitary Spaces. The double door to the shower room should consist of a sliding/folding door and a hinged door. The sliding/folding door provides staff and unassisted patient access. Both doors need to be fully open for assisted use of the facilities. The sliding/folding door should be designed to release from the overhead track in order to provide mobile hoist access to the room and transfer to one side of the toilet. The hinged door should be able to open unhindered. To maximise the free space in the bedroom, consideration should be given to making this a folding door;

b) doors will require to accommodate overhead tracks (including supporting structures as necessary) for patient hoists in all bedrooms, with patient hoists to be installed in six bedrooms per ward generally and all bedrooms in elderly wards as well as in one room per OPD cluster in the Children's hospital;

c) all main entrance doors shall be automatically operated with break-out facility in the event of fire and have an effective draught lobby;

d) internal door leaves to all areas shall be of solid core construction, reinforced with damage protection plates; They must be resistant to all damage which would be reasonably expected for the building use. In line with BS8300 requirements the Board would expect that as a minimum all doors where there will reasonably expected to be wheelchair access – 400mm high kickplates will be provided. Refer to Section 7.16 - Protection for further details;

e) doors to some rooms shall be of a security rated construction, particularly areas where medical drugs are likely to be stored as indicated in ADB Room Data Sheets;

f) all door frames must be of solid or metal construction, and must be securely fixed in to the adjoining construction;

g) all doors to bedded areas shall be minimum width of one-and-a-half size openings to allow access for hospital beds, with double width doors required in ward area corridors. In addition to the requirements of the Disability Discrimination Act, careful consideration needs to be given as to the clear opening size of doors due to the need to transport patients and items through. Patients may be supervised, with an individual on either side of them (some patients may be evacuated in their bed to a place of safety, therefore pinch-points at rooms and corridors need to be avoided);

h) doors shall incorporate vision panels as per the ADB Room Data Sheets, to permit staff observation; of these, some will require integral blinds to obscure the vision panel for privacy reasons, this will also be indicated in ADB Room Data Sheets. Integral blinds to the vision panel are to be operable only from the inside of the room where a member of staff will

be constantly present, where a member of staff will not be constantly present (bedrooms for example) the integral blind should be operable form both inside and outside the room. Integral blinds in door vision panels require to be vistamatic type (horizontal blinds are not acceptable);

i) doors should have low-level viewing panels to ensure that a baby, toddler or young children or those in wheelchairs can see and be seen from either side of the door. Where a door has a single viewing panel, the minimum zone of visibility should be between 500 mm and 1500 mm from the floor. If a door requires an intermediate horizontal section for strength or to accommodate door furniture, the door should have two viewing panels, one accommodating a zone of visibility between 500 mm and 800 mm from the floor and the other accommodating a zone of visibility between 1150 mm and 1500 mm from the floor. Doors requiring vision panels are indicated in the ADB Room Data Sheets;

j) all doors to patient bedrooms, en-suites and bathrooms shall be fitted with a break-out (anti-barricade) facility which may be achieved by a combination of outward opening doors and ironmongery solutions. The Contractor will be expected to comply with anti-ligature/anti-barricade requirements in the Children's DCFP;

k) fire doors fitted with door closers are heavy and awkward to open and hamper easy circulation. All fire doors on circulation routes, and those not needing to be closed for security reasons, should be fitted with electromagnetic stays or swing-free door closers, which will close in the event of a fire alarm and be linked to the BMS to close at night. Door holds and door closers utilised in any location must not de-rate the fire rating of the door set to below that require for the location;

l) all bedroom doors which shall have free swing door closers (as HBN 00-04);

m) swipe card access and video plus audio door access will be required at the entrances to all departments, at links between departments to provide the necessary segregation, at all ward entrances, access points to staff only areas and access to FM/back of house areas;

n) all interview and consulting room doors to have a suitable level of acoustic performance to achieve the dB rating required by the ADB Room Data Sheets. Also refer to Section 7.8 – Acoustics. No air transfer grilles shall be permitted in these particular rooms and must comply with all requirements of the ADB Room Data Sheets;

o) the requirements for Radiofrequency shielding to doors within Radiology department shall be based on the requirements of the MRI scanner supplied and the siting of the device within the room and wider environment. Door leafs will typically incorporate copper or aluminium sheet materials and special details such as compressible brass finger strips at the head, sill and door jambs to maintain the continuity of the Rf cage electrical conductive construction. For the avoidance of doubt however it is required that the Contractor must seek advice from and agreement with the Board and the Board's Radiation Protection Adviser in this matter;

p) door closers to shielded doors require to be agreed with the Board and the Board's Radiation Protection Adviser;

q) all Radiology, Imaging and Nuclear Medicine x-ray rooms require lead lined doors as do all Theatres, dental (Children's hospital) and areas of A&E. The requirements for radiation protection shall be based on the designation and nature of the area, size of the room,

location of the door in relation to equipment and other risk factors. For the avoidance of doubt it is required that the Contractor must seek advice from and agreement with the Board and the Board's Radiation Protection Adviser in this matter;

r) doors must be fire resistant in line with fire regulations but, where connected to the fire and security alarm systems, must fail closed. Any alarm system linked to doors must not be compromised by even a short term power loss or surge;

s) doors to Theatres and Recovery areas require to open automatically upon activation of a push pad (not switch). Push pads to be sited to the left and right of both approaches to the door (i.e. 4 pads per door set). It should be possible to stand automatic doors in the opening position;

t) signs on or adjacent to all doors should be at a height of 800–1500 mm and tactile so that they can be easily read by touch;

u) external doors to non-public access areas should be metal-faced, solid timber core construction, other than louvred doors to plant areas, where ventilation is required;

v) any locked fire exit doors must have the capability of release on the activation of the fire alarm, or a local release facility of a type not likely to tempt patients to misuse it in line with Building Control requirements;

w) in the Children's Hospital doors to rooms that should not be entered by young children must be fitted with high-level latches. Where rooms require privacy, the doors should be fitted with 'free-to-escape' emergency release. In this case thumb-turn locks are not appropriate as young children can easily tamper with them, which could then cause panic in an emergency;

x) all external main entrances require to fitted with automatic sliding doors which protect both ends of a draught lobby. The entrance, doors and draft lobby must be designed to ensure that all normal hospital traffic can safely enter the building without compromising the inner environment (temperature and cleanliness, etc) or security of the building, throughout all weather conditions all in full compliance with HBN 00-04. For the avoidance of doubt all main entrances should allow for bed access/egress with a minimum clear width of 1740mm and doors should open automatically in the event of fire or power failure in line with the requirements of the Technical Standards requirements;

y) all fixings to ironmongery, fixtures and fittings in the Children's Hospital must be either securely concealed or be of a tamper-proof form (e.g. non-return screws);

z) the Contractor shall provide ironmongery which shall compliment the overall quality of the interior design concept. The Contractor shall ensure ironmongery is of robust construction suitable for its specific purpose and usage characteristics and in accordance with the Room Data Sheets. For ease of use by elderly or disabled persons the Contractor shall ensure handles are colour contrasted with the door background colour and of easy grip design. For ironmongery requirements refer to Section 7.11.1 Ironmongery;

aa) in 'back of house' areas such as catering, mortuary and all FM areas doors should be wide enough for trolleys and equipment to pass through easily and will need additional protection at heights related to equipment likely to cause damage. Any external doors to catering areas will require to be pest and insect-proof. All doors in food handling areas should have vision panels. Some doors may require security devices to allow access for designated staff only. For economy of space, chilled food stores and cold rooms may be fitted with sliding doors; flush thresholds are required to facilitate the passage of trolleys. Automatic cold air curtains should be fitted to maintain the temperature when the door of chilled food stores and cold rooms is open;

bb) Consideration should be given to providing doors within the children's hospital of different shaped vision panels, ironmongery and colours to provide a less clinical feel; and

cc) all doors within circulation and communication routes require to provide as large as practicable an effective clear opening width to allow the free movement of all forms of traffic. For the avoidance of doubt, the effective clear opening width for a swing door is the available width measured at 90degrees to the plan of the doorway clear of all obstructions (such as protruding ironmongery) when the door is opened through 90degrees or more. In all main circulation and communication routes (corridors over 1800mm) doors should comprise door leafs which are floor to ceiling heights with no overpanels. At these locations any door nib should be of a transparent nature in order to provide for maximum visibility to the corridor beyond.

7.5.6 Additionally, the Contractor requires to comply with the following:-

a) ensure that door edges do not present a hazard to visually impaired people when in hold open position. Contrasting texture flooring should be considered to guide people into the line of doors, as an integral part of the way-finding strategy;

b) light pressure delay check door closers should be provided to self-closing doors;

c) colour contrasted easy grip lever furniture and ironmongery;

d) any fully glazed doors or associated screens to have additional visual identification, for example applied manifestations;

e) level access to all doors, including escape doors;

f) generally, intermediate doors across main circulation routes should be held open on electro-magnetic devices linked to the fire and security alarm systems and designed to fail closed in an emergency or power failure.

7.5.7 Door Security

7.5.7.1 Door security requirements shall be identified in the relevant ADB Room Data Sheet, however the following criteria will require to be met by the Contractor;

a) access doors to patient areas will require to be alarmed and linked to a suitable alarm system capable of being monitored by the duty room or ward manager. This is vital within the Children's Hospital where all entrance/exit doors will require door control systems to prevent unwarranted access/accidental egress. They must be controlled externally with close proximity cards and internally by a press-to-release switch at a high-level. They will also be operated from a communications base, coupled with an audio-speech facility between the entry door and the communications base for identification purposes. Door control systems must be capable of manual or automatic release on initiation of the fire alarm system;

b) security measures are also needed to control unauthorised access to all departments through the use of swipe card and video entry systems. It is recommended that access through the main entrance to all areas be controlled by use of an entry-phone or intercom system with CCTV, linked to the reception/clerical office and communications base. Programmable close proximity card or similar systems must be fitted to changing room doors and used broadly across all departments. Ideally the programmable system should grant different patterns of access to suit the needs and privileges of authorised staff and visitors. The security measures chosen should not inhibit emergency escape from the above areas or access by the staff at any time;

c) all doors must be master-keyed / carded, with allowance for a suitable quantity of sub-master suites to facilitate the security zoning arrangements within the building such that each department, ward and service area can be locked down separately and with a master key. All doors throughout the building to have the same lock to allow a single key to be used by all staff. Spare cylinder and key sets to be maintained by the Contractor to allow ease of replacement. Secure and 'staff only' areas are to be controlled by proximity card readers linked to electrical locking devices in the doors. The proximity cards are to be contained within the staff I.D. badges. Contractor to provide facility to enable alterations to cards. Twelve thousand cards and lanyards are required to be provided by the Contractor;

d) there will be a decontamination entrance leading from the ambulance bay into A&E, which can act as a decontamination "airlock" with internal drainage and integral showering facilities with a "dirty" end onto the ambulance entrance and a "clean" end into the department. This area should have piped oxygen and suction to be able to manage the rare situation of a contaminated patient requiring resuscitative measures. This area requires to have audio/intercom communication with the adjacent hospital area to allow communication between staff;

e) the A&E will have secure entry and exit points which can be locked if required. Electric swing doors will be configured to open automatically if approached by a patient trolley. All other access will be by proximity card access by staff members; and

f) the A&E will have facilities for the management of high security patients, access to the treatment area for patient transfers of this type to have a discrete external door, security rated and access controlled as agreed with the Board and Strathclyde Police.

7.5.8 Draft Lobbies

7.5.8.1 All main entrances will require a draft lobby, the enclosure to the lobby requires to be fully glazed to enable users to proceed safely and confidently.

7.5.8.2 The lobby area should have absorbent and dirt-retaining flooring, over a sufficiently large area, to minimise damp and dirt being taken into the hospital to further minimise the risk of slip accidents. Mats must be able to be uplifted and removed from matwells for cleaning. For details of these requirements refer to floor finishes section – Section 7.9.2. Further, draft lobbies require to have air curtains and consider further energy efficient design features.

7.5.8.3 The size and shape of the lobby should also:

a) allow the smooth flow of users into and out of the building;

b) allow for the fact that users may congregate there;

c) ensure that by the time the second doors are reached, the first are closed;

d) provide a “modifying” environment between the outside and inside of the hospital; and

e) if other facilities are provided within the draught lobby, such as seats and payphones, they should not obstruct the passage of users.

7.6 **Windows**

7.6.1 Bedroom windows shall be sized and positioned so that patients can view through the window from their bed while sitting up, from a seated position and when standing. In the Children’s Hospital windows must have a low-level sill, a maximum of 600 mm high, to enable small children to see outside from their bed or cot. Blinds, controlled from within the room, are required for all internal glazed screens and windows to ensure privacy and also give protection from glare and solar gain.

7.6.2 The Contractor shall ensure that appropriate solar glazing and/or solar shading is incorporated on windows on typically East, West and South facing elevations. The Board will expect the Contractor to implement solar glazing/shading strategies as part of the overall solar heat gain and ventilation strategies. Further to this the Contractor will require to clearly demonstrate compliance with the environmental/energy targets as defined in Appendix M.

7.6.3 Natural light shall be provided in public spaces and in occupied private and staff spaces within the Facilities as far as is practical. Natural and artificial light sources should be designed to avoid or minimise glare.

7.6.4 Where possible all windows shall be designed by the Contractor to be cleaned externally and internally from the inside, unless otherwise agreed by the Board. The Contractor shall ensure no portions of windows, either fixed or opening should come below the level of worktops or desks except in in-patient areas where bedrooms and day dining rooms cills may be lowered to facilitate better external views. Locking devices to enable the windows to be released for cleaning purposes shall be by key or other device such that they cannot be released by unauthorised persons.

7.6.5 The following criteria require to be incorporated in the Contractor's Proposals:-

a) windows must combine security with good natural light and ventilation;

b) window frames to be of a robust and secure construction;

c) provision of external window cleaning system to ward tower, podium and all other windows;

d) all windows (in a naturally ventilated building solution) to have robustly controlled, limited openings to a maximum of 100mm clear opening (as per ADB Room Data Sheets and SHPN 03) with a robust, secure method of restricting the extent of opening;

e) all windows (in a naturally ventilated building solution) should be capable of opening in order to meet the desire to naturally ventilate the building as far as is practicable. This is required to address seasonal changes, where external temperatures may dictate that it is not desirable to open windows to achieve ventilation. The opening operation of all windows also needs to balance the desire to open windows against compromise of the security of the building envelope. The Contractor must submit full details of the proposed trickle vent with their bid, consideration should also be given to the effects of opening windows at height in the tower;

f) there may also be reduced air flow within the building as, for security reasons, some windows may not open extensively. With this in mind, it is essential that the ventilation and temperature control systems are of a high standard. The use of passive methods is encouraged;

g) as part of any passive, natural ventilation scheme dependant on the opening of windows, The Contractor shall demonstrate through thermal simulation (IES, TAS or equivalent) the optimum window opening arrangement has been selected to optimise thermal comfort with due consideration to any restrictions on openings;

h) the Contractor shall consider use of integral blinds to windows as part of the overall external shading strategy for the building along with meeting the specific requirements of the room as indicated in the ADB Room Data Sheets. The use of Integral blinds is considered to be advantageous in the area of Infection Control offering a practical solution to a range of cleaning issues. The Contractor must demonstrate maintenance and replacement methodologies for any proposed integral blinds (to windows or screens) and include robust gear and switching/movement controls;

i) in the critical care department windows in the single bedroom should be sealed. This is essential to maintain mechanical cooling and positive/negative airflow;

j) in the critical care department integral window blinds must be installed that can provide 'black-out' which is essential for ultrasound examinations and other imaging procedures;

k) proposals for the external solar shading of the building should be considered in the context of the overall design and, only if necessary, should consideration be given to solar glazing to south elevations. No reliance on the fitting of internal blinds can be used when evaluating reduction in solar gains;

l) where any windows require external security shutters, these shall be electrically operated and fully concealed;

m) window ironmongery in the shall be anti-ligature in the Children's DCFP;

n) windows that open onto courtyards where children play may constitute a hazard. Raised planting, for example, beneath them can prevent children sustaining injuries while running. In areas where children and young adults will be present Centre-pivot windows are to be avoided. Windows should preferably be of the sash-type with restrictors;

o) In areas where children and young adults will be present child-resistant locks should be fitted to all windows;

p) cords on window blinds or curtains should be kept short and out of reach of young children;

q) in order to promote good observation and communication between staff and patients in single bedroom ward areas large internal glazed screens between bedrooms and corridors should be incorporated. This will enable staff to observe patients and equally importantly, patients to see staff. However, patients should have the means to obscure windows where required through the use of integral blinds to provide privacy when required;

r) it should be possible for cleaners to gain easy access to the inside and outside of windows. A cleaning and access strategy for all windows and curtain walling requires to be provided by the Contractor, with all necessary equipment and access included in the Contractor's Proposals;

s) selection of the type of glass is crucial for the effective control of security, and for thermal and solar glare control and should be selected in conjunction with the overall consideration of environmental modelling of the Works. Colour rendering – for diagnosis of patients should also be considered in the choice of glass type for windows and screens. The robustness of all glazing must be appropriate to the functionality, relative to safety and resistance to damage;

t) the Contractor shall ensure that all handles or control gear shall be placed at levels which enables them to be operated by staff without the use of loose poles, and which do not conflict with the location of the adjoining construction elements, including blinds and curtains. Where windows are placed over worktops or desks, or where the operation as described above is not achievable, mechanical or electrical means of opening shall be provided by the Contractor with controls located in a suitable position within the room concerned;

u) the Contractor will be expected to use toughened glass in all locations (windows, doors, balconies, balustrades etc) except areas which are vulnerable to vandals or intruders at ground floor locations. As toughened glass is inherently strong and when damaged breaks into small pieces this is deemed to be less dangerous in terms of falling shards of glass or risk to vulnerable patients at risk of self harm. Laminated glass at ground floor level only will provide greater security. Laminated glass when broken will remain in place with numerous cracks, but the fragments are held together and do not separate therefore no hole left in the window for an intruder to get in through for example; and

v) One way screens/viewing panels should be incorporated as identified in the ADB Room Data Sheets.

7.7 **Building Envelope**

Facade

7.7.1 The Board would confirm that a variety of building envelope solutions will be considered in response to the following diverse challenges;

a) Energy usage;

b) Environmental considerations i.e. Odour from the nearby sewage works;

c) Ventilation and overheating;

d) Infection Control;

e) Acoustics;

f) Natural Light;

g) Cleaning and maintenance; and

h) Solar Control strategy

7.7.2 The envelope solutions which will be considered as acceptable to the Board include:

a) a partially sealed air conditioned building working in tandem with natural ventilation;

b) mechanically ventilated building working in tandem with natural ventilation;

c) double skin facade solution.; and

d) a sealed building where a maximum temperature solution is provided.

7.7.3 The envelope solution(s) proposed by the Contractor will require to be fully developed and modelled clearly indicating compliance with the Board's stated Sustainability and Energy Targets. It is not envisaged that a fully air conditioned solution alone will be capable of meeting the stated targets, however if this option is proposed, as above, a the Contractor will require to provide to the satisfaction of the Board a fully developed and modelled solution clearly indicating compliance with the Board's stated Sustainability and Energy Targets.

7.7.4 The Contractor shall also ensure that the external envelope shall incorporate provisions for its cleaning and maintenance. The Contractor shall ensure that the external hard and soft landscaping around the buildings shall allow access for the appropriate cleaning system, whether by ladders, mobile platforms or cleaning cradles attached to the building structure. Appropriate provisions shall be incorporated by the Contractor to allow the safe use of ladders. The external skin of the building shall be designed by the Contractor to accommodate the point load access of ladders and operatives, where the cleaning and maintenance system uses this method.

7.7.5 The following criteria require to be incorporated in the Contractor's proposals:-

a) external finishes shall be durable and easily cleaned, with finishes which may be vulnerable to abuse / vandalism (including graffiti) to be avoided;

b) anti-climbing measures shall be carefully considered, specifically in relation to any external wall-fixed rainwater goods and solar shading;

c) protection / avoidance from vehicular impact at drop-off, delivery points and the like is required; and

d) external detailing to avoid;

i) nesting or perching sites for birds and other wildlife;

ii) Unsightly weather staining of facades; and

e) Method of cleaning and maintaining façade

7.7.6 The Contractor shall design the building envelope to prevent rainwater entry into the building structure and the internal accommodation. Where water penetrates cladding elements, as part of the functional design and construction techniques, the Contractor shall ensure it is controlled and drained externally.

7.7.7 The Contractor shall ensure that all building elements and retaining structures shall incorporate appropriate means to resist the passage of dampness, both into the building structure and fabric, and into the accommodation, including the resistance to any hydrostatic pressure. The Contractor shall ensure that all such construction shall be in accordance with the requirements of the Building (Scotland) Regulations 2004, BS 8102 and Code of Practice CP 102 for Protection of Structures against Water from the Ground.

7.7.8 The Contractor shall ensure that the buildings are constructed and the design is detailed to limit air infiltration to minimum levels to reduce energy consumption and improve internal environmental conditions.

7.7.9 Performance demonstration tests for all roof and wall elements shall be carried out by the Contractor in accordance with the following:

a) BS 5368, Part 2: 1986 (EN86) Resistance to Water Penetration;

b) BS 5368, Part 3: 1986 (EN77) Wind resistance; and

c) BS 5368, Part 4: 1986 (EN86) Test Report Format.

Roof

7.7.10 The roof construction shall be fully weatherproofed, designed for minimum maintenance and suitably braced and held down to resist the influence of gusting winds appropriate to their locations. All penetrations through the roof membrane or cladding shall be suitably sealed to prevent the ingress of water. The roof shall be laid to falls appropriate to the adopted membrane or cladding and shall include sufficient provision of guttering and down pipes to adequately discharge rainwater to the underground drainage regime.

7.7.11 As part of the Board's sustainability requirements a strategy for rainwater harvesting should be considered by the Contractor. Where rainwater harvesting is incorporated, full risk analysis shall be carried out and tabled for consideration, all actions shall be taken to mitigate risks to infection control requirements. Rainwater harvesting is likely to be restricted to use in areas of the FM, Energy and Laboratory buildings.

7.7.12 The Contractor shall also ensure that all roofs shall incorporate provisions for cleaning and maintenance. Appropriate provisions shall be incorporated by the Contractor to allow the safe use of ladders, guardrails, walkways, access solutions and fall protection solutions in line with all Health and Safety Guidelines to prevent fall from height. This is a fundamental aspect of the roof design and a clear strategy detailing access provision will require to be demonstrated by the Contractor as part of the overall roof design.

7.8 Acoustics

7.8.1 The Contractor shall endeavour to minimise and mask ambient noise sufficiently to preserve patient privacy, confidentiality and maintain a calming atmosphere in public and patient areas.

7.8.2 Audiology booths require to be provided to the necessary acoustic and other standards.

7.8.3 The specific requirements of the Board with regard to Acoustics are contained in Appendix S.

7.9 Finishes

General Finishes

7.9.1 All wall finishes and backgrounds shall be selected and installed in accordance with SHTMs and appropriate British and European Harmonised Standard Specifications, Codes of Practice and ADB Room Data Sheets.

7.9.2 Areas of the Facilities that are subject to potential damage from trolleys, vehicles, beds or other similar traffic shall have adequate protection to comply with as a minimum SHTM 69 and in line with the specific requirements of Section 7.16.

7.9.3 The detail design and finished quality standards of certain specific finishes will be subject to the construction of mock-ups during the design and construction stages. These will form the benchmark for quality control of Site operations.

7.9.4 The use of colour patterning, motifs and texture should be considered by the Contractor in appropriate areas throughout the buildings as an integral part of the wayfinding strategy.

7.9.5 The following criteria require to be incorporated in the Contractor's proposals for all areas:-

a) internal finishes shall be durable and easily cleaned;

b) internal wall surfaces shall be resistant to damage appropriate to the location. Certain areas will necessitate severe duty partitions in accordance with BS 5234 Part 2:1992 (or equivalent), with wall protection. Severe duty partitions will be required in major circulation and heavy industrial areas such as FM;

c) wall finishes must be in accordance with the relevant SHTMs, HTMs HBNs, Design Guides, the Scottish Building Standards, and ADB Room Data Sheets and should also be appropriate to the activity space that they serve, in terms of: imperviousness; hygiene; joints; smoothness; moisture resistance; resistance to cracking; and resistance to abrasion;

d) internal partitions finishes shall also be as required by the nature and use of the accommodation and shall incorporate radiation protection requirements, sound reduction, fire resistance, humidity, biological attack and duty as identified by relevant HBN, SHTMs and appropriate British and European Harmonised Standard Specifications, Codes of Practice and ADB Room Data Sheets and as identified elsewhere in this document;

e) all wall finishes in clinical areas in the Children's Hospital must be durable and able to withstand wet cleaning and the accidental impact of trolleys and heavy mobile equipment. Especially vulnerable points must have additional protection. Smooth paint surfaces are the easiest for cleaning, for example eggshell or vinyl silk emulsion;

f) all wall finishes in clinical areas in the Adult's Hospital should be durable and able to withstand wet cleaning and the accidental impact of trolleys and mobile equipment. Especially vulnerable points should have additional protection. Smooth paint surfaces are the easiest for cleaning – eggshell or vinyl silk emulsion. A matte finish is not acceptable;

g) as the use of ceramic wall tiles is not acceptable in terms of Infection Control, impervious wall cladding is required in shower areas and as splash backs in kitchens, toilets, cleaner rooms etc;

h) The infection control team must be consulted and involved with material specification and detailing;

i) columns should be located, insofar as is reasonably practical, to coincide with corridor walls in order to minimise intrusion into rooms or corridors. Columns or ducts must not protrude into corridors so that they reduce the required minimum width; and

j) external walls and internal partitions shall be provided with movement control joints, appropriate to their material, method of construction and anticipated movement. Where movement joints are required these are to be identified on the layout drawings, these will not be acceptable within rooms or in clinical areas.

7.9.6 Additional specific finishes requirements that must be met by the Contractor's Proposals are identified below;

a) all Radiology, Imaging and Nuclear Medicine x-ray rooms require lead lined partitions and doors as do all Theatres, dental (Children's hospital) and areas of A&E. The requirements for radiation protection shall be based on the designation and nature of the area, size of the room, location of the door in relation to equipment and other risk factors. For the avoidance of doubt it is required that the Contractor must seek advice from and agreement with the Board and the Board's Radiation Protection Adviser in this matter;

b) the requirements for radiofrequency shielding to walls and doors in the Radiology department shall be based on the requirements of the MRI scanner supplied and the siting of the device within the room and wider environment. Walls and door leafs will typically incorporate copper or aluminium sheet materials and special details. For the avoidance of doubt however it is required that the Contractor must seek advice from and agreement with the Board and the Board's Radiation Protection Adviser in this matter, however full floor to ceiling protection should be included in all patient treatment areas (as well as full protection to all doors leading to or from treatment areas) in Radiology, Imaging and Nuclear Medicine x-ray rooms as well as all Theatres, dental (Children's hospital) and areas of A&E;

c) all Theatres throughout the facility should have no reflective surfaces or bright door handles as laser surgery may be undertaken;

d) where interventional procedures are considered, or will be undertaken in any room within the Radiology Department, the room finishes should conform to operating theatre standards. Ceilings should be continuous and impermeable. The provision of specialist paint finishes for ceilings and walls is expected and will be identified on ADB Room Data Sheets;

e) in all cases in the Radiology Department, overlapped sealed joints should be used over architraves and skirtings. Floors should be finished with non-electrostatic vinyl sheeting in order to avoid electrostatic discharges that may affect the function of the MRI and associated equipment;

f) wall and ceiling finishes in operating theatres should be impervious, durable and able to withstand wet cleaning and the accidental impact of trolleys and heavy mobile equipment. Especially vulnerable points should have additional protection. Protection measures should be considered at the initial design stage to prevent the need for regular maintenance which

would require the unit to be closed for long periods. The provision of specialist paint finishes for ceilings and walls is expected;

g) in the mortuary the floor of the body handling and post mortem area must be very hardwearing, non-slip, and impervious to water and disinfectant. The floor should be self-draining towards gullies to allow for drainage after cleansing. Walls should be capable of withstanding regular washing or hosing down, and should meet the raised junction with the floor at a waterproof joint. Ceilings should be capable of withstanding frequent washing down; and

h) IPS solutions shall be required in all toilet areas and areas where wet/sink provision is required (e.g. utility rooms). The use of flexible hose connections is prohibited.

Flooring

7.9.7 The Contractor shall ensure all level and inclined flooring shall meet the following minimum slip resistance requirements:

a) "Rz surface micro-roughness of 20 µm*;* and

b) "Slip resistance pendulum value of 36 (when either dry or contaminated)

7.9.8 The choice of flooring for areas, which may foreseeably become wet or contaminated, needs careful consideration. An anti-slip floor may be an effective control in some areas, such as kitchens, bathrooms, WCs and shower rooms. The choice of flooring will be influenced by the likelihood of the floor becoming contaminated and other factors such as the use of, and levels of, pedestrian traffic in the area. Effective cleaning will be important in maintaining the performance of anti-slip floors, however, it is important to establish with suppliers and cleaning staff that anti-slip flooring can be cleaned to appropriate hygiene standards. In certain areas such as operating theatres, where hygiene is paramount, this is especially important.

7.9.9 The flooring is just one, albeit important element, in the slip potential model and in areas where contamination occurs only occasionally, it may be more appropriate to control the risk through enhanced cleaning and management regimes. Therefore the Contractor requires to comply with the following;

a) the Contractor will require to demonstrate that a Risk assessment has been carried out in accordance with SHTM guidance. This assessment will require to be conducted in conjunction with the Board since as noted above, cleaning and management issues are factors in the assessment;

b) the Contractor shall, in order to complete a thorough risk assessment, procure test results in the "installed" condition which are independently verified by the Health and Safety Laboratory, Buxton, Derbyshire or approved equivalent. The method of testing shall be performed using a pendulum-coefficient of friction instrument with "Four-S" rubber, in accordance with approved HSE test methodology. For the avoidance of doubt, the obligation to follow the pendulum-coefficient of friction methodology is a specific obligation and is derived from the HSE, which only recognises this type of test;

c) the Contractor shall also ensure adoption of similarly robust test methodology for other areas including stair treads and nosings;

d) the Contractor shall ensure that all entrances to the Facilities incorporate appropriate floor matting designed to remove contaminants including water, dirt and leaves from footwear, trolley wheels etc. Barrier matting is most effectively deployed in conjunction with other controls including effective or enclosed canopies and heating, in particular underfloor heating and ventilation or a water evaporation system such as a hot air curtain; and

e) the Contractor shall be identify a strategy proposal at each entrance for agreement by the Board. The matting must extend a minimum distance of 6 metres along the route of travel within the building in line with NHS Scotland Safety Action Notice SAN (SC)05/08. For the avoidance of doubt the Contractor shall comply with all of the recommendations provided in SHS Safety Action Notice SAN (SC)05/08;

7.9.10 The following criteria requires to be incorporated in the Contractor's proposals:-

a) floor finishes must be in accordance with the relevant SHTMs, HTMs, HBNs, Design Guides, and the Scottish Building Standards, and should be appropriate to the activity space they serve in terms of imperviousness; hygiene; joints; smoothness; anti-static; slip resistance; absorption of liquids; radius of ignition. Areas with special requirements such as Operating Theatres and ancillary accommodation require particular consideration;

b) care must be taken in the selection of the appropriate soft floor coverings, for the avoidance of doubt carpeting or soft flooring will not be acceptable in any clinical areas;

c) in all areas the floor material should be coved to form the skirting (minimum of 100mm) to avoid angles and corners where microbial colonisation can occur. All coving must have a proprietary cap strip to the upstand. This detail will allow easy cleaning of the floor finish. In areas where frequent wet cleaning methods are employed, the flooring material should be unaffected by germicidal cleaning solutions, the skirting material used should be integral with, and have properties similar to, the floor finish;

d) vinyl, linoleum or rubber are examples of slip-resistant flooring and should have welded joints. The flooring should be at least 2.5mm thick;

e) all joints between sheet floor finishes and between cove skirtings are to be hot seam welded with care taken particularly at doorways (all welded joints and set in coves, no open joints or sit on cove);

f) loose laid barrier matting is not permitted;

g) visually contrasting texture flooring surfaces should be utilised, wherever appropriate, as an integral part of the way-finding strategy;

h) zero profiles are required at external access points, including access routes to any garden/courtyard areas;

i) smooth vinyl/linoleum coverings shall not be permitted in areas susceptible to wetting and where it is not reasonably practicable to keep them dry such as all WC's , En-suites, Clean/Dirty Utility Rooms, Cleaners Rooms, Assisted Bathrooms , kitchens etc;

j) early cognisance should be taken in the positioning of construction joints in flooring bases to avoid seams in floor finishes in the centre of rooms or circulation areas, joints in these areas will not be acceptable;

k) continuous flooring to be provided as far as is reasonably practicable, with no patching and utilising welded joints and set-in coves;

l) where movement joints are required these are to be identified on the layout drawings and will not be acceptable within rooms or in clinical areas. Movement joints must by flush with the surrounding floor finish;

m) the continuity and integrity of surfaces is important in all areas and particularly in wet and more clinically sensitive locations. Surfaces should be easily cleaned and finished to avoid potential dirt trapping points;

n) in wet areas such as shower rooms with level access floors it is important to avoid tripping hazards such as floor gulley surrounds and lippings to contain water;

o) floor gulleys, gratings and associated finishes should be integrated within the overall floor build up in accordance with relevant manufacturer's recommendations and to achieve tight and continuous sealing to minimise potential for dirt traps;

p) vinyl, linoleum or rubber flooring is tolerant of small movements in the structural floor. The floor screed therefore should be perfectly smooth, crack-free and stable. Adhesives should be powerful enough to resist the formation of "waves" in the floor finish that can result when heavy equipment is moved;

q) sufficient time should be allowed for the adhesive to set prior to use. Thresholds at doorways between adjacent rooms require particular attention because they are points of stress in the floor finish;

r) in theatres with laminar flow ventilation, the floor area enclosed by the hood should be marked with lines or a contrasting coloured area of flooring;

s) in the mortuary area it is important that the floor covering is chosen can be effectively cleaned, maintained and, where necessary, repaired. Vinyl anti-slip floor is often difficult to keep clean (due to grit type surface) and its iron-based particles produce stains, particularly visible on light-coloured flooring. A slip resistant resin flooring will require to be provided;

t) sprung flooring is required in gym and other relevant areas; and

u) waterproof finishes are required in bunding to theatre plant rooms, energy centre plant rooms and other plant areas where resilience is required to prevent water damage to areas below.

7.10 Interior Design

7.10.1 The interior environment is fundamentally important in achieving a non-institutional and therapeutic environment. The Contractor should focus on creating the highest quality spatial environments, which respond to the Boards ethos and operational needs. The interior design should be developed in conjunction with the master plan and architectural solution, producing a fully coordinated and complimentary scheme.

7.10.2 The aim should be to create progressive environments which respond sympathetically to their setting, whilst creating the opportunity to develop contemporary methods of working practices, including the development of large scale dynamic public spaces. The design should respond to client and user needs, whilst emphasising quality of materials, light and space.

7.10.3 The Contractor should seek to exploit the sensory elements of design to provide both information and stimulus. It is a physiological fact that the majority of information that we receive is visual. For sighted people, promoting the sensory aspects of design adds depth and meaning to the environment whereas for visually impaired people whose ability to access significant amounts of information is substantially limited, this design approach is fundamental to understanding the environment and operating independently within it. Because most visually impaired people have some sight, the use of colour to create contrast between critical surfaces and key design features is perhaps the most powerful way of accurately describing the immediate environment.

7.10.4 The use of tactile information should also be clearly developed in the Contractors approach, to all lift signage and door signage. Audible information, including the range of sounds created by contact with different surfaces can be extremely useful and the senses of both sound and touch affect the aesthetic experience of the environment.

7.10.5 The Contractor should demonstrate colour differentiation in surfaces. Visually impaired people are generally less confident at differentiating colours that fully sighted people, but if the colour difference is above a certain threshold value their confidence improves significantly.

7.10.6 The Contractor should indicate an understanding of the principle that the nature of the light source can significantly affect the way we perceive colour contrasts that are applied to the critical surfaces of an interior. Ceilings, walls, doors and floors are all critical surfaces that should be sufficiently differentiated from each other. Navigation through a building is much easier if these large areas re differentiated sufficiently by colour or material.

7.10.7 The Works shall contain a mixture of public, semi-public, and restricted areas which should be designed and articulated to create a hierarchy of spaces, clearly identified and linked.

7.10.8 In addition to the general and special considerations consistent with good Healthcare design, designers and planners will need to recognise:

a) the need to combine the individual specialist requirements for the care of patients with an environment that is a good for staff and welcoming to visitors;

b) The Board's requirement for the Works to meet high standards of quality, efficiency, and cleanliness;

c) the requirements of the staff for an attractive and pleasant environment to work in; and

d) The Board's requirements to ensure designs recognise environmental and ecological issues;

e) For reasons of infection control soft furnishings must be covered in an impervious material within all clinical and associated areas;

f) The interior design represents a challenging opportunity to provide an interior environment appropriate for a friendly and important public building of this type; and

g) To develop this to an agreed solution it is anticipated that extensive consultation will take place with user groups to ensure that the final outcome is projected to be responsive to the specific requirements of each element of the building;

7.10.9 It is important that the interior environment should be welcoming, comfortable, and enjoyable for patients, thereby limiting the institutional atmosphere typical of many healthcare Facilities. Users should be provided with external views and views to landscaped courtyards, corridors with break out spaces providing glimpses out of the building should also be incorporated to give users orientation.

7.10.10 The scale and diversity of patient facilities to be provided means that it will be extremely important to create individual identities to key areas within the overall building design. This will not only help patients identify and orientate themselves within the facility but will also help foster a sense of ownership among staff and a community spirit within individual elements of the building. A distinct identity should be immediately apparent in the Children's Hospital which will require through the use of colour, shape and motifs to provide interest and distraction for patients, parents and visitors alike. This will require to be reflected in all aspects of the design including flooring, wall finish, doors and ceilings. The importance of play for children, and the unique role of the hospital play specialist are described in 'Friendly healthcare environments for children and young people' (NHS Estates, 2003, pp 37–38).

7.10.11 Play specialists should be included when designing the New Children's Hospital as spaces for play are an essential requirement in all patient areas and present a unique opportunity for designers to provide creative and stimulating environments for young patients. This and the use of varied colours, murals, cartoons, varied flooring and the like are of extreme importance in the design of the children's areas and will be an important aspect for bid return and consideration.

7.10.12 The use of colour will help to differentiate the separate functions which share a common structure, and the use of symbols, graphic devices, furnishings, fabrics and accessories when thoughtfully co-ordinated will provide comfortable, yet clearly identifiable, internal environments for patients and staff alike. Any approach to this area of design must be developed carefully within the exacting requirements of procurement and to ensure an easily maintained solution.

7.10.13 It is possible that the Board shall invite external patient support groups and family groups to assist in interior design solutions and activities. The Contractor shall require being aware of such, and engaging with such groups during design development and construction. Such groups shall have an ongoing role within the Works and shall be desirous of incorporating exhibitions and artwork/contributions in the Works. The Contractor shall require supporting such an interface and allowing works to be displayed on wall finishes and the like. The Contractor's Proposals shall reflect such interfacing and engagement.

7.10.14 The Contractor shall develop an interior design strategy to cover all areas of the Works. The interior design proposals shall promote the ideals of the Identikit guidelines.

7.10.15 Proposals shall be presented by the Contractor in room-by-room schedules with samples of finishes, colours, lighting fittings, materials as appropriate, and signage, supplemented by colour sketches or coloured computer images for agreement with the Board, in time to allow for consultation with the users, and for incorporating feedback into the final scheme.

7.10.16 It is expected that the Contractor will provide Interior 3D perspectives and an Interior Colour Strategy Report detailing the following – this is not an exhaustive list;

a) Internal Views of Atriums, entrances and key high profile public areas;

b) Views of Hospital street/Mall including retail area;

c) View of receptions and waiting areas;

d) Ward areas and bedrooms; and

e) Theatres.

7.10.17 The above information should indicate the following information;

a) Architectural vision – space, height, form, composition, scale, character and use of materials;

b) Finish type, colour;

c) Overall colour strategy;

d) Incorporation of Art; and

e) Wayfinding Strategy including images

7.10.18 Where the Contractor includes internal planting displays, associated irrigation and atmospheric controls shall be provided. The Contractor shall ensure that the building design and services allows for an appropriate level of light to ensure the growth and survival or any interior planting within their design.

7.11 Architectural Hardware

Ironmongery.

7.11.1 The following criteria require to be incorporated in Contractor's proposals:-

a) the locking system shall be fully suited across the Works and shall interface with swipe card / other entry systems where provided. Particular requirements with respect to electronic door access / security requirements are contained in Section 8.3.14;

b) ironmongery, fixtures and fittings in the Children's DCPF shall be anti-ligature and anti-barricade;

c) all fixings to ironmongery, fixtures and fittings (in patient areas) must be either securely concealed or be of a tamper-proof form (e.g. non-return screws);

d) where indicated in the ADB Room Data Sheets mirrors to be shatterproof glass, with concealed fixings;

e) all joints between flush fitting components and adjoining surfaces to be as tight as practicable; and

f) all fire fighting equipment to be located within secure lockable containers housed in the wall construction, and operated by the same key throughout the development (all fire fighting equipment to be supplied by the Contractor);

g) in the interest of children's safety door handles to the kitchens should be located at a high level to prevent unauthorised access;

h) the Contractor shall provide ironmongery which shall compliment the overall quality of the interior design concept;

i) the Contractor shall ensure ironmongery is of robust construction suitable for its specific purpose and usage characteristics and in accordance with the ADB Room Data Sheets. For ease of use by elderly or disabled persons the Contractor shall ensure handles are colour contrasted with the door background colour and of easy grip design; and

j) samples of all the ironmongery products shall be prepared in accordance with section 5.9. Details of lock suiting will be submitted by the Contractor to the Board to allow adequate time for discussion and amendment if necessary before the fittings are required for installation in the buildings.

Blinds & Curtains

7.11.2 The following criteria will require to be incorporated in the Contractor's proposals;-

a) the Contractor shall provide all fixings for blinds and curtains including integral blinds;

b) all blinds, curtains and associated fixings shall be Class 0 rated;

c) the Contractor shall ensure that materials for blinds and curtains (including any cubicle curtains) shall also comply with the requirements of the Board's Control of Infection Officer for cleaning, washing and maintenance, and comply with SHFN 30 and SHTM 87, and specific Safety Action Notes. For reasons of infection control curtains must be able to withstand washing processes at disinfection temperatures;

d) the Contractor shall provide integral blinds to windows, curtain walling and internal screens;

e) The locations and fixings for both blinds and curtain tracks and cubicle curtains shall be co-ordinated by the Contractor with the window and internal window sill design from the outset of the building design development and the fixings shall be designed by the Contractor to take the proposed maximum loadings possible for the tracks concerned and shall be non-weight bearing from an anti-ligature perspective in the Children's DCFP. For the avoidance of doubt all curtains, blinds, accessories including fixings are to be provided by the Contractor;

f) Curtain tracks shall be designed by the Contractor to overlap the window openings so that they do not allow light to pass into the room when drawn. Controls for blinds and curtains shall be co-ordinated by the Contractor with the window design and its opening gear, including any operating handles, levers or stays that may be required and shall be located conveniently for staff or patients to operate as appropriate;

g) The Contractor shall fix bed and cubicle curtain tracks at the height recommended in the relevant guidance and The Contractor shall ensure bed curtain tracks are co-ordinated with other service outlets and the window positions, where applicable. An adequate ventilation gap must be provided by the Contractor at the curtain head; and

h) All Single bedrooms should have glass partitions for observation purposes, complete with integral venetian blinds for privacy.

7.12 Staircases, Ramps, Balustrades, Walkways, Escalators & Lifts

Staircases and Ramps

7.12.1 Where staircases, ramps, balustrades, walkways and lifts are provided in addition to those required to satisfy means of escape criteria, these shall be designed to relate to the anticipated capacity of use and clearly designated for public, staff or service circulation.

7.12.2 For the avoidance of doubt, the Contractor requires to ensure that for all stairs the requirements of HBN 00-04 and Technical Standards are achieved. This includes the following key criteria;

a) the maximum number of risers between landings for a flight of internal stairs should be 12-14;

b) risers and goings uniform, riser height should be 150-170mm, going minimum of 280mm, 300mm preferred;

c) for steps not adjacent to a wall, a barrier, with a minimum height of 100mm above the level of the treads should be provided for safety reasons. This requirement should be developed in conjunction with the design of the stair / balustrade to viewed as a cohesive whole;

d) open areas on the underside of stairs should be avoided to eliminate the possibility of anyone walking into the overhang created;

e) to indicate that there are descending steps ahead, a hazard-warning zone should be provided on each landing. The zone should use a floor finish that contrasts visually with the general floor finish, but has the same slip resistance. The warning zone should be at least 400 mm from the nosing and a minimum of 800 mm deep and 1200 mm wide;

f) capable of achieving mattress evacuation; and

g) where ramps are provided in addition to those required to satisfy means of escape criteria these shall be suitable for independent and / or assisted wheelchair users, trolleys and ambulant disabled people. Ramps, however will not be considered appropriate for any significant changes in level.

7.12.3 The atrium will contain link bridges, escalators, lifts and stairs providing all vertical and horizontal communication links across the void space providing the necessary connections between departments. A high level of finish will be expected for all stairs and balustrades, any handrail, barrier or guarding to stairs or corridor links should be glazed to allow views for children and those in wheelchairs.

Lifts and Escalators

7.12.4 For the avoidance of doubt, the Contractor requires to ensure that for all lifts the requirements of HBN 00-04 and HTM 2024 are achieved. This includes the following key criteria;

7.12.5 The number, type, size and speed of lifts should be determined from a traffic analysis specific to the proposed facility, and should allow adequate flexibility of the lift solution to accommodate future changes. However as a guide the following dimensional requirements will be achieved;

Lift Type	Minimum Sizes
All lifts	1100mm (wide) x 1400mm (deep)
Small General Traffic	1600mm (wide) x 1400mm (deep)
Large General Traffic	2000mm (wide) x 1400mm (deep)
Patient Trolley/Stretcher Movement	1400mm (wide) x 2400mm (deep)
Bed Movement Lifts	1800mm (wide) x 2700mm (deep)

7.12.6 Handrails should be provided on both side and rear walls of lift cars to be used for general traffic, this includes where stretcher/trolley lifts are to be used for general traffic. The minimum dimensions noted in the table above will require to be provided clear of handrails.

7.12.7 In order to segregate traffic, for operational and infection control reasons, it is not anticipated that lifts for bed movement will be used for general traffic.

7.12.8 Dedicated vertical lift facilities will be required as part of the installation of the overall Automated Material Transfer System as outlined in Appendix M. A clear strategy for the incorporation of these systems will require to be provided by the Contractor in consultation with the Board. The use of public and personnel lifts by automated systems is not acceptable.

7.12.9 Lift doors for general traffic should provide a clear opening width of 1100mm and height of 2000mm. Lift doors for movement of patient trolleys/stretchers and beds should provide a minimum clear opening width of 1370mm and a height of 2100mm.

7.12.10 Additionally the following criteria should be met:

a) the lifts within the atrium should be fully glazed to all sides providing views over the atrium space for the purposes of orientation;

b) a protected lobby should be provided where a lift does not open off a hospital street;

c) wall-wash lighting, uplighting or perimeter lighting should be utilised in the lift car rather than direct downlighting to avoid dazzling patients being transported on beds, trolleys or stretchers;

d) a visually contrasting floor surface measuring at least 1500 x 1500mm should be provided outside the lift door area;

e) lifts, where provided, are to be suitable for disabled wheelchair persons and visually impaired, with tactile controls and audible warnings; and

f) the use of escalators within the atrium space to access the upper level of Outpatients department is considered as desirable. All aspects of the Escalator design should be designed to the requirements of BS EN 115-1:2008.

7.13 **Landscape Design**

General Design Approach & Aspiration

7.13.1 In accordance with the principles of 'Designing Places – A Policy Statement for Scotland' (Scottish Executive 2001) the site layout and landscape design shall create external spaces that are distinctive, safe and pleasant, easy to get to and move around, welcoming, adaptable and resource efficient.

Existing Site

7.13.2 The existing hospital campus generally presents a poor quality environment for visitors, patients and staff.

7.13.3 It is dominated by large expanses of blacktop roadway and vehicles, disparate and scattered buildings, open yards, service bays and large flat areas of featureless and exposed open space. The site does include a number of mature trees which are subject to a Tree Preservation Order (TPO). The majority of these are to the eastern side of the campus, visible from the approach to the Clyde Tunnel, away from the principal area of the proposed new hospital development. The few mature trees remaining on the proposed site of the new hospital will need to be removed to facilitate the required building footprint and infrastructure.

Landscape Masterplan

7.13.4 The masterplan prepared for the development of the Southern General Hospital seeks to address many of the negative landscape issues currently affecting the campus and to provide the framework for the development of a high quality, coherent, well organised and welcoming external environment to enhance the experience of staff and patients alike. This includes the provision of a major new access from Govan Road together with a significant rationalisation of internal roads and paths to provide clear and direct approaches to the proposed new hospital and improved links throughout the campus with its hinterland. The proposed layout attempts to integrate private vehicular access, public transport and the new Fastlink route with pedestrian and cycle circulation to provide a vibrant but coherent new public realm within the heart of the Campus. In particular, the masterplan sets out the framework for the creation of high quality public realm and street frontages to the entrances associated with the proposed hospital within a strong landscape framework of formal avenue and informal tree planting. This is essential to create both a high quality setting and to provide the human scale necessary to offset any negative influence from the visual dominance of the size and physical mass of the building envisaged.

7.13.5 In particular the masterplan creates a large, central open space within the heart of the campus to be developed as a park for the use of patients, visitors and staff alike. This is intended as a multi functional space providing for social interaction and relaxation as well as opportunities for informal exercise with marked walking routes and a trim trail. The Contractor is to also to include works of art and sculptures in this area.

Hard Landscape - General

7.13.6 Areas of landscape and public realm shall demonstrate a high quality of detailed design, utilising high hard quality sustainable and durable materials to achieve design life noted in Section 5.3 The choice of materials shall reflect both the quality and importance of the proposed new building as well as the aspirations in the masterplan to create, a people friendly external environment. The contractor's attention is drawn to the need to ensure long term sustainability and the requirement to achieve the BREEAM Healthcare "excellent" rating. In this regard due reference shall be paid to the BRE "Green Guide to Specification" to maximise the use of materials and specifications achieving an A rating or better as far as is practicable with regard to other technical and specification requirements in terms of adoption and compliance with standards and legislation noted elsewhere.

7.13.7 The masterplan envisages a hierarchy of spaces and circulation and consequently surface treatments and materials shall vary accordingly.

7.13.8 The minimum standard for a pedestrian footpath within the site shall be asphalt with pre-cast concrete flat-top pin kerb edges to GCC Roads Department adoptable standards as identified in Section 9.0. At the top end of the hierarchy in the spaces associated with the frontage of the building and the main entrances, high quality modular or unit paving shall be used that shall feature clean, crisp detailing and edging together with striking and vibrant paving patterns and designs commensurate with the very best of 21st Century urban design.

7.13.9 The contractor will be expected to demonstrate a clear gradation of hierarchy within their design and choice of materials, between these two in terms of intermediate public spaces and major footpath routes around the site and within the new public park.

7.13.10 Design of all hard landscape in terms of accessibility, surfaces and gradients shall conform to or exceed BS8300 as well as to maximise long-term sustainability and BREEAM Healthcare scores.

7.13.11 Hard landscape materials, specification and laying shall conform to the following minimum standards, where relevant.

a) BS 7533 (all relevant sections pertaining to the materials chosen);

b) BS EN 1342 (Setts of Natural Stone – Requirements and Test Methods);

c) BS EN 1341 (Natural Stone – Requirements and Test Methods); and

d) BS EN 1339 (Concrete flags – Requirements and Test Methods).

7.13.12 Maintenance of hard landscape areas shall be in accordance with BS 7370 – 2. The contractor shall develop and submit a fully detailed maintenance schedule for all areas of hard landscape and associated street furniture and play equipment.

7.13.13 New access roads and vehicular circulation routes shall be designed and constructed in accordance with current highway design standards and to Glasgow City Council Roads Department, adoptable standards to the extent identified in Section 9.0. This to include all road markings to all roads, cyclepaths and car parks (incl car parking bays/spaces and drop-off points, ambulance areas and the like) and all road signage. Raised kerbs to bus drop-off/stops to be included.

7.13.14 The detailed design of vehicular roads shall incorporate appropriate traffic calming and speed control measures to reduce vehicle speeds and contribute to a pedestrian friendly environment. Consideration requires to be given to the transport of patients (particularly spinal patients) in the design of traffic calming methods. Along the hospital frontage at drop-off points and where large numbers of patients and visitors will be expected to congregate and enter the building, a change in surface material for the carriageway shall be utilised that provides the appropriate visual signals for both pedestrians and vehicle users alike and is commensurate with the high quality paving design and external environment required for the building frontages.

7.13.15 Pedestrian crossing points shall be provided at frequent intervals as indicated on the masterplan. These shall be formed at footpath rather than at road level in order to both achieve BREEAM points as well as to provide a traffic calming measure.

7.13.16 Roundabouts and important junctions shall be landscaped distinctively to provide a clear visual orientation point within the site and to reduce the apparent expanse of road and hard standing in these areas. Where possible public art or sculpture shall be incorporated in the roundabout designs to reinforce their distinctiveness.

Cycle Access

7.13.17 The design shall include improvements and modifications to the existing cycle access points, as well as creating new cycle access at appropriate locations to the site as indicated on the masterplan. New or modified cycle access shall be off-road and shared with pedestrian traffic as far as possible. In this regard, cycle paths shall be a minimum of 3 metres wide in order to comply with current guidance from Sustrans and to gain BREEAM Healthcare points. Where cycle lanes are provided either as separate routes or on roadways, the minimum dimensions and layout shall be in accordance with the above noted guidance and to the minimum required in BREEAM Healthcare.

Cycle Shelters

7.13.18 Cycle shelters shall be provided in the numbers required to achieve BREEAM Healthcare points. Cycle shelters shall provide secure and sheltered space for the parking of bicycles and shall be in a secure and visible location. Cycle storage areas shall be located adjacent to or as near as possible to building entrances to ensure direct safe and easy access/egress. Cycle shelter areas and their approach paths shall be lit to adoptable street lighting standards and shall be capable of being overseen by CCTV both day and night. Consideration of cycle stacking systems should be pursued by bidders and proposed to the Board.

Courtyards

7.13.19 The design of the new hospital building envisages the creation of a number of external courtyards for use by staff, visitors and patients. The courtyards shall be designed to provide a variety of purposes including opportunities for meeting and social interaction as well as quiet reflection and privacy. Where appropriate, courtyards and external spaces within the building shall have a practical and or therapeutic purpose, for example the incorporation of steps and ramps to assist with physiotherapy, as well as simply providing a view of plants, green space and natural light within the interior of the building.

7.13.20 In order to comply with BS8300 and the principle of free access, the finished paving level at building entrances shall be the same as the adjacent internal floor level. The building design in this location shall utilise a raised, DPC detail in order to ensure finished levels within the courtyards are visually unobtrusive. A solution which creates a series of humps or rises and falls between doorways opening out into courtyard areas will not be acceptable.

7.13.21 The internal layout design of the courtyard shall allow for any requirements for maintenance access to the building edges.

7.13.22 The courtyard paving shall be formed from high quality modular and unit paving with detailing commensurate with scale of courtyard in question. Path widths and circulation spaces shall be in accordance with minimum standards set out in BS8300 and BREEAM Healthcare, whichever is the greater. Courtyards shall include high quality planting design that incorporates the opportunity to introduce a variety of domestic/garden scale plant material including a mixture of evergreen, deciduous and herbaceous material together with bulb planting. The extent and type of plant material shall reflect the nature and function of the courtyard in question. Courtyards shall include a variety of seating opportunities to ensure that there is provision for both quiet and private contemplation and social interaction for group discussion. All courtyards shall be provided with litter bins and low level external lighting. Seating shall be in a variety of forms but as a minimum at least half the seating provided shall include backrests and arm supports. The design of the courtyards shall not restrict seating opportunities to purpose made bench or seat provision only and seating opportunities and areas of social interaction shall be incorporated into the overall courtyard design, utilising a variety of means including low walls and edgings at seat height.

7.13.23 The courtyard design shall include wherever possible the provision of tree planting in order to provide some height and to offset the potentially oppressive effect of the courtyards being surrounded by tall walls on four sides. The courtyard designs shall also incorporate some undulations and changes in level and provide visual relief from the prospect of a flat plain. In detail, courtyard designs will be expected to provide both open and intimate enclosed spaces within their overall layout.

7.13.24 The detailed design and specification of the courtyards shall provide a variety of visually distinct spaces in order that they can contribute to the wayfinding strategy and orientation round the building for patients, visitors and staff.

7.13.25 Notwithstanding the above requirements, courtyard design shall provide low maintenance external space.

Children's Play Areas and Play Equipment

7.13.26 The masterplan envisages the creation of a children's play area adjacent to the main entrance to the Children's Hospital. The purpose of this provision is both to provide a relaxed and welcoming child friendly entrance whilst at the same time actively making safe provision for children's play, whether children are outpatients or visitors to the hospital.

7.13.27 All children's play equipment shall conform to the relevant parts of BS EN 1176 and be expected to provide a design life with regular maintenance of 25 years. The contractor shall offer a range of equipment that provides the best manufacturer's warranty available and for which the supply of spare parts in guaranteed for the anticipated design life of the equipment.

7.13.28 All play equipment shall be installed with an appropriate safety impact absorbing surface suitable for the equipment in question. All safety surfacing shall be of a 'wet pour' or other continuous type surfacing system rather than tiles or loose-fill materials such as bark or sand. The final choice shall be influenced by the materials' longevity and lifecycle costs.

7.13.29 Play areas shall include a mix of equipment suitable for a broad range of ages and abilities appropriate to the context of the Children's Hospital (from toddlers through to young teenagers) and include a degree of open or free space. Seating opportunities for casual supervision by parents and carers shall be maximised and include a sufficient quantity of litter bins. Seating may be varied but must include at least 50% with back support. Provision of equipment for young children and toddlers shall include coloured boundary fencing with non-slam self closing gates.

7.13.30 The provision of an area of the play zone to be under the neo-natal link, thereby providing for an outdoor visit or play space usable in wet or inclement weather, is to be developed by the Contractor and included in the design.

Street Furniture - General

7.13.31 Street furniture shall be robust, practical and fit for purpose whilst at the same time being of a contemporary high quality design. The specification of different materials shall pay regard to both cost and long term sustainability. Any timber utilised shall be from a sustainable source and be FSC Certified Timber, where it is not of the type that is inheritantly long lasting in external or wet conditions shall be preserved, treated with a minimum 15 year lifetime guarantee or better. Street furniture items shall form a key component of the external landscape design, especially in the public realm, at entrance areas surrounding the building and within the parkland. The contractor shall provide a well considered and coherent design that presents a suite of complimentary elements that are integrated into the overall public realm and landscape design. All mild steel components and fittings shall be galvanised to and polyester powder coated or otherwise factory painted and supplied with a minimum warranty of 15 years or better prior to any retouching or painting being required.

7.13.32 All street/external furniture requires to be securely fixed to the ground.

7.13.33 Bus stops and shelters require to be installed as necessary to comply with the relevant Planning and Travel Plan requirements;

7.13.34 Covered architectural pedestrian walkways are to be provided between the Fastlink drop off area and the adjacent entrance to the new hospital as illustrated on the masterplan drawings;

Litter Bins

7.13.35 All litter bins shall be of the type which includes a front facing door or hatch that allows the internal bin or receptacle to be removed and emptied easily

Seating

7.13.36 It is anticipated that a wide variety of seating and seating opportunities shall be incorporated into the final design. The majority of this will be purpose made seating or seat items however the contractor is also expected to incorporate into the design opportunities for seating within the landscape in the form of low walls, steps and grass mounds.

7.13.37 Where formal seating is provided at least 50% of this shall include backrests and armrests. Seating shall be designed and located as a key element of the overall landscape design. Seating and benches placed seemingly at random will not be acceptable. The contractor shall ensure that adequate seating and rest points are provided at regular intervals along pathways and walking routes.

7.13.38 All seating must be securely fixed to the ground.

7.14 Soft Landscaping Requirements

General Design Approach

7.14.1 In accordance with the principles of 'Designing Places – A Policy Statement for Scotland' (Scottish Executive 2001) the planting and soft landscape design shall contribute towards the creation of external spaces that are distinctive, safe and pleasant, easy to get to and move around, welcoming, adaptable and resource efficient.

7.14.2 The landscape of the existing campus is largely flat, featureless and unwelcoming. In accordance with the masterplan the new planting design shall include substantial tree planting to:

a) provide immediate and long term landscape structure and impact within the campus grounds;

b) create a distinctive and appropriate landscape setting for the new hospital complex;

c) mitigate against the visual impact of the buildings, roads, car parking and hardstanding across the site and provide human scale; and

d) mark progression along key routes and lend identity to the different spaces that will be created.

It is required that semi mature and larger nursery stock trees are utilised along principal avenues, paths and thoroughfares to achieve this requirement.

7.14.3 The detail planting design and specification shall provide an appropriate mixture of seasonal variety, height and colour for all year round interest. It shall provide both immediate impact and medium to long term growth and be capable of delivering a high quality landscape that will develop and mature over the medium to long term. The detail design layout and choice of plant material shall be appropriate to the immediate context, such as public realm, pathways and circulation zones, private/quiet space, spaces for adults, children, visitors and patients, whilst paying due regard to environmental and climate factors. The planting design shall help to provide shelter and shade as well as assisting users to orientate and locate themselves. The planting and landscape design should be developed to reinforce wayfinding strategies through the creation of readily identifiable and distinguishable spaces.

Retention & Protection of Existing Trees

7.14.4 As far as possible, the campus layout shall maximise the retention of existing mature trees on site and incorporate them into the overall layout and landscape design. In accordance with planning conditions and best practice, all trees to be retained in the medium to long term shall be protected in accordance with BS 5837:2005, the exact method to be agreed with the Planning Authority.

Felling of Existing Trees & Vegetation Clearance

7.14.5 In accordance with the Wildlife & Countryside Act 1981, any tree felling and shrub clearance shall be carried out outside the bird breeding season (March to August). Contractors shall take due cognisance of this requirement in any work programming. Where this is not possible a qualified ecologist shall be appointed to examine all potential breeding sites before any clearance takes

place. If occupied nests are found, clearance and felling works shall cease until the nest is no longer in use. The contractor shall formally confirm to the Planning Authority in writing if clearance is in order following the ecologist's inspection. A qualified Ecologist shall be as defined in BREEAM Healthcare.

7.14.6 Where any tree work is undertaken this shall conform to BS 3998 "Recommendations of Tree Works and current HSE/AFAG safety leaflets

CAA Restrictions

7.14.7 The site lies approximately 3 km from Glasgow Airport, well within it's 13km 'safeguard circle' and therefore detailed consultation with the CAA will be required to develop proposals that minimise any increased risk of birdstrike. The landscape and planting design shall form an integral part of the 'Bird Hazard Management Plan' which is required for submission to the Planning Authority. The Contractor shall comply with the CAA publications CAP 772 – 'Birdstrike Risk Management for Aerodromes' and Advice Note 3 – 'Potential Bird Hazards from Amenity Landscaping and Building Design'. It is likely that adherence to this guidance will impact on the specification of plant material and contractors are therefore required to consult early with the CAA to establish their requirements. Approval by the CAA of the detailed landscape proposals will be required to clear the Planning Conditions relating to the detailed landscape design.

Landscape Design and SUDs integration

7.14.8 Landscape design associated with SUDS shall comply with CAA Advice Note No.6 – 'Potential Bird Hazards from SUDS'. Any surface water features associated with a SUDS design for the site shall be fully integrated with the landscape design, as opposed to simply 'landscaped'.

7.14.9 The SUDS solution of the Contractor shall actively consider underground storage tanks which shall consider the use of the water for grey purposes on the site where possible.

Biodiversity

7.14.10 The detailed landscape and planting design shall be developed in accordance with the 'Biodiversity Action Plan' submitted to the Planning Authority as part of the Masterplan.

7.14.11 It is a Planning Requirement that the new landscape framework for the campus will link areas of established green networks within and beyond the site, SUDS proposals and movement networks (roads, footpaths and cycle paths) to habitat retention and creation, minimising the impact of the development on wildlife and vegetation. Contractors will require to reconcile the requirements of the Planning Authority with the restrictions that may be required by the CAA as noted above, together with maintenance regimes on site in the detailed landscape and planting design. Contractors will be required to undertake a detailed habitat assessment using a qualified ecologist to establish the baseline situation at the start of the contract to inform the detailed landscape design development.

BREEAM

7.14.12 The Contractor shall maximise BREEAM Healthcare points available through the landscape and external works as a key element of their designs. In conjunction with 'Biodiversity' above, a qualified ecologist will be required to undertake a habitat survey to establish the baseline situation at the start of the contract to inform the detailed landscape design development with a view to achieving maximum points available and contribute towards the required "excellent" rating.

Topsoil

7.14.13 Should topsoil stripped from the site be retained on site, this requires to be in a dedicated storage area, appropriately stored, protected from contamination, maintained and re-used within the final landscape works as required. The Contractor will be required to undertake a comprehensive soil analysis (BS 3882 Annex E) to determine whether there is any contamination present that would limit or otherwise restrict the use of site stripped topsoil within the final landscape works.

7.14.14 If it is determined that the material be taken off site, either on a temporary or permanent basis, this shall be agreed in writing with the Planning Authority in accordance with condition 9.

7.14.15 The soil analysis shall also determine nutrient deficiencies and the requirements for fertilizer and soil additives required to ensure the successful growth and establishment of the planting specified for the areas to which it is finally spread.

7.14.16 Imported topsoil shall be to BS3882 "multipurpose" grade or as required to suit the final choice of plant material. The use of peat shall not be permitted. All compost shall comply with PAS 100.

Topsoil Storage

7.14.17 Where imported or existing topsoil is to be stored in a single location for no more than 6 months (maximum) the height of storage mounds shall not exceed 2M. Where a period of more than 6 months is required the height of the mounds shall not exceed 1M high. Where existing topsoil is stripped and stored the soil shall be turned every 6-12 months.

7.14.18 All topsoil stored for longer than 6 months shall be re-tested to determine the degree of nutrients, fertilizer and ameliorants required immediately prior to re-spreading in its final location.

7.14.19 Topsoil depths for planting:

a) Shrub planted areas: 400mm minimum depth; and

b) Grass areas: 150 mm minimum depth;

i) General handling and contamination prevention; and

ii) Subsoil/ground preparation for landscape areas.

Plant Material

7.14.20 The specification criteria for plant material in general shall conform to either the National Plant Specification or BS 3936 and other related British Standards. The specification criteria for Semi Mature and Root-Balled Trees shall be to BS 4043.The handling, transportation, storage and establishment of plant material shall be in accordance with the Horticultural Trades Association publication 'Handling and Establishment of Landscape Plants'. Contractors will be responsible for developing a robust and technically competent specification for all the soft landscape and planting works in accordance with the best industry standards and practice.

7.14.21 The choice of plant species and provenance of plant material shall be appropriate to achieve the purpose required by the design and for the location, scale and situation in question. There is no general limitation on the type and range of plant material envisaged with the following exceptions:

a) Thorny or spiny plant material shall be avoided, especially within the body of the site within the ornamental species mixes. This type of material traps litter and debris which is then extremely difficult to clear and consequently encourages the nesting of vermin. Possible exceptions might include the use of Hawthorn or other native hedgerow plants along the site boundaries in association with structure or woodland planting, depending upon the final design layout.

b) Poisonous plants/skin irritants on contact with foliage/stems further definition required.

7.14.22 Planting densities and size at planting shall be appropriate to ensure a careful balance between immediate and short term impact and long term growth.

7.14.23 Tree planting pit/trench size and design shall be appropriate to ensure the long term establishment and future growth of all new trees. This shall include where required the use of drainage, irrigation tubes and root protection barriers adjacent to services. All semi mature trees shall be underground guyed using an approved proprietary product such as the Platipus system (or equivalent). All tree staking shall be double short stakes with cross bar.

7.14.24 All semi mature tree planting shall be provided with a 5 year establishment guarantee from the supplier(s) The defects period and contractors' liability for replacement planting shall extend to the full period of the guarantee, subject to standard industry limitations. The defect period for tree planting in general shall extend to a minimum of two growing seasons following agreed completion of the contract.

7.14.25 Extended establishment guarantees from suppliers shall be required in relation to semi-mature tree planting.

7.14.26 Any seeded areas are to be protected by secure temporary fencing (secure to the ground and securing the seeded areas from access) until such time as the seed takes.

7.14.27 Any grass adjacent to the children's play areas and entrance to the Children's Hospital to be turfed.

Maintenance

7.14.28 The contractor shall develop and submit a fully detailed management plan and maintenance schedule of the completed landscape design for approval. Maintenance shall generally conform to the relevant sections of BS 7370 and be designed to ensure the long term establishment and development of the new landscape and planting design.

7.15 Wayfinding & Signposting

External wayfinding strategy

7.15.1 The movement of people through a hospital site is one of the key factors to the successful scheme. Wayfinding considers the different aspects regarding this and creates a system which responds to the requirements of each separate situation. The Contractor should create a unique identity for the hospital by providing an integrated solution between signage, architecture, interior design, landscape and art. The solution should provide a clear strategy for patients, visitors and staff whilst also assisting people with restricted mobility, impaired vision and language difficulties.

7.15.2 The Contractor should in their wayfinding proposals consider the prominence of architectural and interior landmarks on the site as well as colour coding, imagery, sign types and fonts etc. to create a visually stimulating family of signs as well as providing a system which conforms to current legislation. The Planting and landscape design shall assist with wayfinding and route marking around the site and provide identity to the different spaces within and around the site.

7.15.3 The solution should eliminate doubt and uncertainty in a potentially anxious environment by providing information at the right points as well as architecturally designed areas of interest and comfort. The accessibility of the site will be enhanced by a successful wayfinding system.

7.15.4 It is the Board's intention that Contractor's should incorporate electronic information points utilising touch-screen technology in addition to the manned reception points and stations internal to the building and the PA system. These information points should be located externally at appropriate locations and should present information (in a variety of languages) on the hospital for orientation and wayfinding purposes along with information in relation to the public transport hub which should be adjacent to the main entrance giving real time information on bus/fastlink timetables. The Contractor will be required to provide a clear strategy for the provision of these information points.

7.15.5 The above should be integrated into a clearly defined arts programme, which from the beginning of the project develops a strategy considering the site as a whole.

7.15.6 The following criteria require to be incorporated in the Contractor's external signage proposals;

a) all signage (internal and external) to be provided by the Contractor;

b) the signs will be exposed to the elements and therefore will require to be robust, accident proof, vandal resistant and weather proof;

c) the signs will be mounted generally on grey ppc steel posts fixed to concrete bases, the signs are to be a matt aluminium finish;

d) all light units to signs should be externally located to be easily accessed and maintained;

e) overstuck lettering is not acceptable; and

f) traffic signage to be compliant with Transport Scotland guidance;

As a minimum the Board would expect the following external signage to be incorporated, signage to be a Hospital Campus (i.e. whole existing and new hospital) wide integrated solution:

Location	Function/Type	Identity Requirements
All vehicular, pedestrian, cycle entrances to the site	Facility Identification	All external signage requires to be as NHS Identikit Guidelines and as such feature the following ; • NHS Greater Glasgow & Clyde Identity incorporated. • Generally white background with NHS Scotland dark blue text in Stone Sans type face. • Colour on external signage to be NHS Scotland Dark Blue or Light Blue only. • If required to identify for example entry only for ambulances – this can be reversed to light/dark blue background with white text. • Signage size , height and text size should be appropriate to location and function • The limited incorporation of the caring device is acceptable. • Directional signage should indicate arrows and text ranged according to the direction. • All external signage will require to be clearly illuminated. • Matt Finish to all external signs. • Built up brushed stainless steel lettering or equivalent standard finish to signage will be expected to be incorporated at key areas of public prominence – entrances, receptions, atria, main circulation.
Vehicular routes through site	Building Identification	
Vehicular routes through site	Car Park Location – directional / Availability of Spaces	
Car Park entrances	Identification of Car Park entrances	
Car Park	Identification of disabled designated spaces	
Pedestrian and vehicular routes through site	Building Location - directional	
Building Entrances	Identification of Building entrances	
Building Entrances	Identification of Building	
Building Entrances	Building Directory – indicating key departments	
Vehicular routes through site	Identification of ambulance only / service only routes/entrances and helipad	
All locations	Statutory Signage	As guidance requirements

Internal wayfinding strategy

7.15.7 Design solutions shall present an integrated and comprehensive wayfinding solution that enables patients, visitors and staff to self-navigate the Facilities with ease. The wayfinding solution must comply with the DDA, meeting the needs of people with physical and/or sensory disabilities/impairments, and those with literacy difficulties. It shall add value to the internal environment and could be a component of the comprehensive arts programme.

7.15.8 Way-finding is a critical part of the building functionality, and must guide patients and visitors to their desired destination in the most efficient manner possible. It should be borne in mind that people using health buildings may be easily disorientated due to illness and / or upset; they may be in unfamiliar surroundings; they may have difficulties with sight, hearing, mobility or learning; they may not have English as their first language; or they may need information presented at a lower level because they are in a wheelchair.

7.15.9 An audit of the signage within the Facilities shall be completed with the Board prior to Completion to ensure that the signage is complete, and that no ad hoc signs are required to complete the wayfinding scheme.

7.15.10 The following criteria require to be incorporated in the Contractor's proposals:-

a) all lift and door signage should incorporate the use of braille;

b) all signage and signage fixings must be robust and vandal resistant;

c) colour contrasted or tactile variation flooring clues should be provided to main reception area to guide visually impaired people to reception desk point at 90 degrees from circulation route. Clear orientation markers/signals are required at changes in direction at all entrance routes and main entrance;

d) There is an expectation that the signage will require to incorporate additional colour and/or images in line with the overall wayfinding strategy. The Contractor will require to provide a clear demonstration of this approach, which may for example assign colour on a departmental or level by level basis or to identify and differentiate the Children's Hospital. However any colour strategy developed for signage should be within the standard colour ranges identified (including tints) within NHS Identikit Guidelines. Any adoption of images on signage as part of this strategy will require to be developed in conjunction with the Board; and

e) In order to provide staff, patients and visitors with access to information especially at the key points of entry to the Works it is required that the Contractor shall incorporate electronic information points utilising touch-screen technology in addition to the manned reception points and stations and the PA system. These information points should present information (in a variety of languages) on the hospital for orientation and wayfinding purposes along with information in relation to the public transport hub which should be adjacent to the main entrance giving real time information on bus/fastlink timetables. The Contractor will be required to provide clear proposals for the provision of these information points.

7.15.11 The Contractor is required to comply with the relevant NHS Publications in relation to signage and must include the following provision;

Location	Function/Type	Identity Requirements
Main Entrances	Facility Identification	All internal signage requires to be developed from NHS Identikit Guidelines and as such feature the following ; • NHS Greater Glasgow & Clyde Identity incorporated. • Generally white background with NHS Scotland black text in Stone Sans type face. Other background colours can be considered – within NHS Identikit colour ranges identified. • Signage size, height and text size should be appropriate to location and function. • Directional signage should indicate arrows and text ranged according to the direction. • Matt Finish to all internal signs • Monolith, ceiling fixed or wall mounted signage types are acceptable for internal signage. • Illumination should be incorporated for signage within areas of public prominence – for example main entrances, atria, key receptions etc.
Main Entrances	Building Identification	
Main Entrances	Reception Identification	
Main Entrances	Building Directory – Identifying department locations on a floor by floor basis – featuring building plan.	
Main Entrances	Department Locations - Directional	
Main Entrances	Identification of key facilities – Toilets , Stairs, Lifts etc	
External to Stairwells	Level Directory	
Inside stairwell	Stair Identification	
Lift Car	Level Directory	
Corridors	Departmental Locations - Directional	
Corridors	Identification of Exits - Directional	
Departmental Entrances	Identification of Departmental entrances	
Departmental Entrances	Departmental Directory	
Departmental Entrances	Reception Identification	
Departmental Corridors	Key Locations - Directional	
Departmental Corridors	Room Identifiers (Every Room)	Room signs to feature the following; • Signs should be adjacent to doors at a height of 800–1500 mm and tactile (Braille) so that they can be easily read by touch. • Room name • Room number • Occupant name (should be removeable)
All locations	Statutory Signage	As guidance requirements

7.16 Protection

7.16.1 The Contractor shall be required to demonstrate that their proposal provides the most effective height / location and orientation of protection that shall prevent direct impact with the building fabric.

7.16.2 The Contractor is required to comply with the relevant NHS Publications in relation to protection and must include the following provision;

Location	Protection	Handrail
All main communication routes/main corridors between departments	Heavy Duty ; Mid-height handrail and either durable material on lower part of walls, or lower height crash rail, and with splayed skirtings in main corridors. Corner protection also required.	Handrails required. Handrails should return into recessed doorways and openings, but otherwise be continuous to aid navigation.
Hospital Street / Building Entrances	Severe duty; Mid-height handrail or crash rail, lower height crash rails and splayed skirtings. Corner protection also required.	Handrails required. Handrails should return into recessed doorways and openings, but otherwise be continuous to aid navigation.
Departmental Corridors; All wards	Heavy Duty ; Mid-height handrail and either durable material on lower part of walls, or lower height crash rail, and with splayed skirtings in main corridors. Corner protection also required. Bed locators where required.	Handrails required. Handrails should return into recessed doorways and openings, but otherwise be continuous to aid navigation.
Operating Theatres	Rails may be omitted in favour of overall durable, washable finishes. In practice the greater care shown by the theatre users appears to compensate for the lower level of protection.	None required.
Workshops, storerooms etc	May be constructed of materials which are not necessarily given a decorative finish, or applied protection. These materials include brickwork, blockwork and concrete.	None required.

7.16.3 The Contractor will also be expected to provide, as a minimum the following provision;

a) where handrails and wall protectors are provided a minimum vertical clearance of 50 mm must be maintained between the handrail and wall protector and a minimum horizontal clearance behind the handrail of 75mm;

b) where the wall protector protrudes in front of the handrail, the clear width of the corridor will be to the wall protector; and

c) handrails should be easily visible, that is, contrast visually with the surface to which they are fixed, smooth and free of any abrasive elements, neither too cold nor too hot to the touch.

7.16.4 The Contractor shall undertake a detailed review of those pieces of mobile equipment both Clinical and Non-Clinical, that is expected to be used by the Board and The Contractor within the Works. This review shall include a process of risk assessment and shall be organised to determine the type and extent of protection that is required to the building fabric. This review shall be made available to the Board as requested.

7.16.5 The Contractor shall endeavour to minimise the extent of impact damage incurred by ensuring corridors are and free awkward comers / obstructions. The Contractor shall ensure that doors and lifts are of sufficient width to accommodate all forms of hospital traffic and shall, where necessary, be designed to be normally held in the open position or to automatically open where appropriate.

7.16.6 In line with health building guidance, continuous hand-rails should be fitted to both sides of all patient accessible routes and corridors. Certain proprietary handrails have also been developed as wall protection crash rails. A combination of these hand rails or some of the following forms of protection would be deemed appropriate in patient and non patient routes and corridors:

a) crash rails;

b) defensive coves; and

c) corner treatment and reinforcement.

7.16.7 Exposed services such as ducts, radiators and pipework can be badly damaged when struck by trolleys etc. The Contractor shall incorporate measures to avoid damage to these elements.

7.17 Integration of Healing Arts Strategy

7.17.1.1 Introduction

Art and Architecture is a key strand of the Board's Arts and Health Strategy. The Board recognises that good design in healthcare buildings makes a measurable difference to the experience of patients, visitors and staff.

7.17.2 As part of it's Design Action Plan, the Board are committed to the development and integration of Art and Therapeutic Design within the new developments at Southern General Hospital and this will include;

a. New Adult Acute Hospital;

b. New Children's Hospital;

c. New Laboratory Block (part of novated design); and

d. External space and general landscaped areas within the site boundary.

7.17.3 The Art strategy will be developed in the context of;

a. current Board arts strategy work already being undertaken in Glasgow as part of ASR I and the new Maternity Unit at Southern General Hospital;

b. the range of cultural, regeneration, funding partnerships already established within Greater Glasgow and Clyde; and

c. the need to ensure a local arts perspective is developed that reflects international level of quality.

7.17.4 Competitive Dialogue Stage (May - September 2009)

Bidders are asked to clearly demonstrate within their written and drawn responses how they will develop and deliver an Arts and Therapeutic Design Strategy that reflects:

a. Integrated art, specimen art, interior design and landscaping (e.g. stained glass, bespoke art, special lighting, floor designs, therapeutic colour choices, special procurement of non clinical looking furnishings, landmark way finding, gardens and sensory planting);

b. Art enabling works (e.g. electrical infrastructure, lighting, wall niches and strengthened walls and ceilings to host future art works);

c. The provision of programmable spaces (e.g. future exhibitions, performance or sculpture); and

d. Architectural elements (e.g. entrance canopy, art doors, curved walls, specially designed stairways and car parks);

7.17.5 Bidders are asked to prepare a detailed proposal of how they will provide resources and capacity to support the Board's aspirations to develop and deliver this strategy in conjunction with a wide range of stakeholders including patients, managers, clinicians and fundraisers ensuring that the Art strategy and design proposals are fit for purpose and in line with contract management/ build timelines.

7.17.6 Broad Plan for Developing and Delivering an Arts Strategy

The Arts strategy should be developed with a tiered approach based on priority areas for art and therapeutic design to be implemented on a discretionary basis reflecting levels of finance available. The table below gives an indicative format, but bidders should bring forward proposals which they feel will develop the most rewarding strategy.

Bidders are strongly recommended to have dedicated resource for the inputs below in terms of architecture, arts and technical requirements.

STAGE	TASKS	RESOURCES
Stage 0 Competitive Dialogue	Develop Art Strategy as part of bid proposals. The strategy developed by your team will form part of the evaluation process.	Identify bidder resources that will be provided during Stage 2 design and anticipated costs over the time period for stage, along with assumptions on frequency of meetings etc. The proposals should therefore ring fence money and time for Stage 2.
Stage 2 Design Development	The successful bid team will develop their strategy along with Board managers and other associated groups as noted earlier. • As a key member of the Board's Arts Development Group you will meet monthly to develop, plans and incorporate a full arts strategy into the detailed designs for the new builds. Prepare detailed costs and budgets for these works for Board consideration. • Working to the Arts Development Group will be the artists and designers who will meet weekly through design development forum to discuss concepts, plans, detailed and help prepare detailed costs.	The successful bid team will be required to take forward the strategy subject to Board involvement and work with teams to develop a workable proposal that is both achievable, realistic and affordable in the run up to FBC and approval to proceed with construction of the adult and children's hospitals. Note: costs for the arts strategy may be included within the contractors price, or funded by external Board source, or from a combination of these.
Stage 3 Construction of Adult and Childrens Hospitals	Incorporate the agreed art strategy design into the new builds	Manage the construction and full integration of the approved strategy on site by the successful bid team. Attend periodic meetings (quarterly) to review progress.
Stage 4 Commissioning	Fully commission any loose art works requiring service connections.	This would occur during post handover Board equip[ping stage, detail and input from bidders would be developed during Stage 2.

7.18 Secure by Design

7.18.1 It is important that security is effective but not visible and we would seek to avoid through good design the need for overt signs of security systems such as perimeter fencing and extensive CCTV provision.

7.18.2 The principals of 'Secure by Design' promote good practice, and encourage the adoption of design principles that reduce crime prevention as opposed to adopting 'active' preventative measures, The Contractor shall provide a report detailing compliance as far as is practicable with Secure By Design certification requirements. The Contractor should liaise with the local police in refining a strategic approach to the security of the facilities and the overriding safety of staff, patients and visitors.

7.18.3 While connections to the community are encouraged, not to the detriment of security Frequently, 'single point of access' is a strategy that is widely encouraged.

7.18.4 The following are extracts from the 'Secured by Design Principals' Document (2004):

a) Access design and escape routes;

To satisfy the requirements of individual developments, and in the interests of good urban planning, new development must provide adequate access to meet functional and recreational needs, including for example paths and inter-connecting open spaces, and access for emergency services. However multiple footpaths and points of access can make crime easier to commit by providing a choice of alternative escape routes from the scene of a crime. Careful attention to the disposition and design of access, and in some cases limiting the means of access to developments and to buildings, can assist in reducing opportunities for a crime, be it illegal entry, vandalism, crimes against the person or vehicle theft. Uncontrolled rear access ways to buildings and footpaths that are unduly secluded provide opportunities for crime with a low risk of detection and are to be strongly discouraged. It may on occasion be necessary to restrict access to a development to one main point, and it is always advisable to carefully consider the desirability and design of secondary access routes;

b) Footpaths and cycleways;

Public footpaths and cycle ways form a vital part of the communications network in both urban and rural settings. They also provide an important local or strategic recreational amenity. Their provision is strongly encouraged by current government planning guidance, but awareness is need of the potential problems that poorly located or poorly design footpaths can have. They can, for instance provide opportunities for unobserved access to the rear of buildings, means of escape for offenders and opportunities for crimes against people. Furthermore, poorly designed or sited footpaths may cause users to feel ill at ease and give rise to fear of crime, particularly after dark. This is likely to lead to reduced levels of use, which reduces the benefit to the community and will in turn exacerbate the problem. Well designed, well used and well maintained footpaths on the other hand provide fewer opportunities for crime and are likely to feel safer;

c) Relevant Secured by Design Key points:

i) Superfluous and unduly secluded access points and routes should be avoided;

ii) Access points to the rear of buildings should be controlled, for example by means of lockable gates;

iii) In terms of security, the design of the footpath of equal importance to the design of the building. The standard combined cycleway/footway should be 3m wide as a minimum and footways 2m wide as a minimum. Any shrub planting should start at the back of the verges;

iv) The position of the planting and choice of species should be such that hiding places are not created;

v) Good visibility should be maintained from either end, and along the route of footpaths and cycleways. Sharp changes in direction should be avoided;

vi) Footpaths and cycleways should not generally be routed to the rear of the buildings, but if this is unavoidable a substantial buffer should be planted between a secure boundary fence and the footpath margins, with planting designed so as to discourage intruders;

vii) Footpaths and cycleways shall be lit in built-up areas to adoptable street lighting standards except where the route is passing through woodland or and ecologically sensitive area, in which case an alternative lit route should be made available, such as a footway alongside a road; and

viii) Alternative routes to important destinations may be beneficial, although a balance has to be struck between advantages of greater choice and perceived security against the disadvantage of providing additional means of escape or of encouraging inappropriate movement of people.

Section 8.0 Building Services Requirements

8.1.1. Introduction

8.1.1.1. The Contractor shall in carrying out the Works comply with the following non-exhaustive list of Mechanical & Electrical requirements.

8.1.1.2. The Contractor shall provide an engineering system that utilises the latest technology to create a high quality working environment that will provide an efficient hospital for all patients, their families, visitors and staff. The Contractor shall ensure the services network is efficient, effective, flexible and unobtrusive to the clinical functions. The Contractor shall ensure that the system is easy to maintain and shall maximise the opportunities for flexible adaptation and extension of The Works.

8.1.1.3. The heating and cooling mediums shall be selected to ensure the most efficient systems are utilised taking into account integration of low carbon technologies and the site wide interconnectivity requirements.

8.1.1.4. Mechanical, Electrical, Public Health and Specialist services shall be designed to be an integral and co-ordinated part of the overall scheme. Services shall be clearly identified at regular intervals and at all locations where maintenance access is required.

8.1.1.5. Plant access shall be prioritised in all aspects of the building services design to minimise the requirement for the use of portable access equipment.

8.1.1.6. Permanent access equipment shall be provided by the Contractor to allow routine maintenance of all equipment within all plant rooms and associated areas where items of plant are located.

8.1.1.7. A systematic plant replacement strategy shall be provided by the Contractor, this shall detail the works required for the replacement of all major plant items and their major components.

8.1.1.8. All access equipment including lifting beams, access platforms, equipment cradles, slings, block and tackles and access ladders to allow all plant to be replaced in accordance with the strategy shall be provided by the Contractor with each item of equipment cross referenced to the plant items within the replacement strategy.

8.1.1.9. The location of engineering and utility services shall be co-ordinated with the structure and not constrain or conflict with clinical functionality.

8.1.1.10. Access to all services shall facilitate ease of maintenance which should be safe and able to be effectively undertaken. There shall be provision for space to give flexibility for future re-planning and / or re-modelling and replacement of the services.

8.1.1.11. The Board requires the buildings to be designed to achieve a very efficient level of energy and utility utilisation in accordance with the energy targets noted in Appendix M&E4 .

8.1.1.12. The Contractor shall take cognisance of all the building services implications of the requirements described in the Employers Requirements.

8.1.1.13. The power distribution systems and final circuits where required shall incorporate, IPS and UPS systems to meet the requirements of (S)HTM06-01 together with full compliance where appropriate with the MEIGaN requirements.

8.1.1.14. UPS to be provided from resilient platforms with N+1 redundancy with ability to transfer to shunt by-pass without loss of load, these shall be distributed throughout the works to ensure that reliable interruptible supplies are provided to suit the hospital operations.

8.1.1.15. Open protocol industry standard format must be used for all elements of the Electrical, Mechanical, Public Health Medical Gases, Security and Specialist systems.

8.1.1.16. All systems shall be warranted for support for an extended period and all software shall be retro compatible.

8.1.1.17. All Mechanical, Electrical, Public Health and Specialist system plant shall be designed and installed in modular arrangements incorporating plant N+1 redundancy to minimize disruption during planned maintenance.

8.1.1.18. All Mechanical, Electrical, Public Health and Specialist systems shall be designed and installed in resilient arrangements with dual distribution paths and appropriate isolation facilities to ensure that the completed installations meet all operational, maintenance, servicing together with plant replacement requirements and that local maintenance does not disrupt adjacent areas.

8.1.1.19. Where contradictory advice is apparent, the most recent guidance shall generally take precedence; unless indicated otherwise in the main compliance section of the Employer's Requirements – Volume 2.1 Section 5.1.

8.1.2. Engineering Services Interface with Building Fabric and Service Routes

8.1.2.1. The Contractor shall ensure that co-ordination of the Electrical, Mechanical and Communication services shall form an inherent part of The Works design.

8.1.2.2. Services provision, e.g. luminaires, fire alarms, security and mechanical services, shall be co-ordinated with the ceiling layout and allow simple relocation if required.

8.1.2.3. Access to services shall be provided and the services clearly identified at regular intervals and at all locations where maintenance access is required, for example at valves and electricity connection points. Access to building services shall be in accordance with SHTM 2023 "Access for Engineering Services".

8.1.2.4. It shall not be acceptable to require other services to be removed to allow access to services.

8.1.2.5. The positioning of sockets, light switches, alarm buttons and fire “break-glass” panels etc shall be consistently located throughout the hospital buildings and to specifications set out in BS8300, unless specific clinical needs take precedence.

8.1.2.6. Structural design shall ensure that structures are co-ordinated to ensure the logical and sequential installation and maintenance of services. For example the use of columns adjacent to vertical service voids shall be avoided.

8.1.2.7. All Mechanical, Electrical, Public Health and Specialist systems shall be fully co-ordinated in 3D with prefabricated plant, escalators, lifts, the building fabric and structural frame, secondary steelwork, façade systems, fit out to ensure that the completed installations meet all operational, maintenance, servicing and plant replacement requirements.

8.1.2.8. The Contractor shall provide secure utilities services connection to those services which are;

a) to be taken directly from public and other utilities; and

b) to the point of supply (inc connection) for those utilities which are to be taken from the Board.

8.1.3. Service Routes

8.1.3.1. All service voids, risers and other spaces shall allow for installation of additional services and shall provide a defined reserve of a minimum 25% of useable area through routing cross sectional area. All isolating valves and other items requiring particular access shall be positioned at convenient locations with permanent access provision and which do not impede execution of the clinical functions of the space.

8.1.3.2. The Contractor shall provide a compliance matrix indicating the level of provision of each service together with the means of calculation of the required 25% reserve capacity.

8.1.3.3. Services shall be arranged in a clearly zoned spatial hierarchy in ceiling voids, risers and plant spaces.

8.1.3.4. Generally access to services shall not be given in clinical areas, where this is unavoidable due to the requirement for local access the Contractor shall ensure that all services are co-ordinated and grouped to minimize the number of access hatches.

8.1.3.5. Ceiling void depths in Theatres shall be minimized, and in all cases be less than that required for void protection, with all power and data wired in a loop in basis to allow rewiring without the requirement to access the ceiling void, where access is required to allow periodic inspection of fixings, this shall be accommodated by the apparatus trims and via light fitting openings.

8.1.3.6. Services shall be configured to ensure local maintenance and isolation can be carried out in each room without the requirement to take other rooms out of use.

8.1.3.7. All service voids, risers, plant rooms and other service / plant spaces shall be designed to easily facilitate the future removal and replacement of building services within each space.

8.1.3.8. In order to minimise potential disruption to the Board due to maintenance of building services, The Contractor shall route services through common spaces such as corridors and avoid through routing within department areas.

8.1.3.9. All ductwork shall be provided to allow cleaning of internal surfaces and components to be undertaken in accordance with the Health and Safety Approved Code of Practice 33, and as detailed in the HVCA Document TR17 Cleanliness of Ventilation Systems.

8.1.3.10. Plant rooms shall be configured and constructed to minimize the risk of water penetrating into Critical operational areas. This is a pre-requisite of the design and the Contractor shall provide a detailed strategy document indicating the risk assessments and mitigation measures proposed e.g. water tanks not located above Critical operational areas, plant room floors constructed to prevent water seepage, tanking to be integrated in construction detailing rather than ad hoc post installation details, appropriate location of floor gulleys and sensitive routing of water and drainage pipework.

8.1.4. Server and Nodal ICT rooms

8.1.4.1. Major leak detection shall be incorporated complete with automatic zoned shut off valves.

8.1.4.2. Water proof ceilings to be provided in all Server and Nodal ICT rooms.

8.1.4.3. Resilient redundant environmental engineering services shall be provided within the Server and Nodal ICT rooms. The rooms shall be configured and located to minimise the risk of water damage from all sources with the following minimum requirements:

a) No overhead water, condensate or drainage pipework allowed within ICT rooms; and

b) No water tanks, tea points, DSR's, Cleaners rooms, toilets or showers etc. to be located directly above ICT rooms.

All ICT rooms to be clinically cleaned prior to the installation of active equipment, this deep clean shall be carried out by the Contractor's specialist cleaners to an agreed Board specification by the relevant Board Representative and a certificate issued. Special care shall be taken in advance of the deep clean with ongoing general cleaning being carried out at regular intervals to ensure that the cable termination works are carried out in accordance with the manufacturer's recommendations.

8.1.5. Engineering Flexibility and Zoning

8.1.5.1. All Mechanical, electrical, public health and specialist systems including medical gas zoning shall be configured to promote flexibility in order to enable re-modelling, re-planning and replacement to be undertaken at a future date.

8.1.5.2. All engineering services shall be zoned with isolation and safety provision for the whole of the the Works and for individual wards and departments. The Contractor shall also ensure that zoning accounts for:

a) The requirement for “dirty” / “clean” separation;

b) Solar movement; and

c) The necessity for isolation of part of the Works without affecting the entire facilities e.g. all theatre suite services including, ventilation, water, power, medical gases, lighting and controls etc. shall be capable of being independently isolated for maintenance with the remaining theatres still in service.

8.1.5.3. The Contractor shall ensure that all sections of the services distribution can be taken out of service for maintenance without interruption of the water, gas, medical gas and electrical supplies to the adjacent areas; this shall be detailed in the systematic plant replacement strategy noted in the introduction 8.1.1.

8.1.5.4. It is a pre-requisite of the design that all services to individual Theatres and other Critical operational areas can be isolated for maintenance, repair and replacement without the need to effect the ongoing operation of the other facilities.

8.1.5.5. Specifically each Theatre shall have individual air handling units and associated controls. The air handling strategy in Critical Care areas shall be developed with the design layout to minimize disruption during maintenance and each air handling unit must not serve more than one Critical Care pod. Also Air handling units in isolation facilities in Critical Care and general areas shall be configured in accordance with SHBN04.

8.1.5.6. Air handling strategy for the large recovery areas shall be developed with the design layout to minimize disruption during maintenance with the provision of interwoven duplicated systems and sectional controls.

8.1.5.7. Air handling strategy for the large decontamination areas shall be developed with the design layout to minimize disruption during maintenance with the provision of interwoven duplicated systems and sectional controls.

8.1.5.8. Air handling strategy for all large areas shall be developed with the design layout to minimize disruption during maintenance with the provision of interwoven duplicated systems and sectional controls.

8.1.5.9. No exposed pipework shall be visible in clinical areas.

8.1.5.10. Controls at nurse bases shall be co-ordinated with all alarm panels to improve aesthetics and ensure simple operation.

8.1.5.11. Patients operated environmental controls shall be provided to allow set point variation via a graduated slider with arrow type legend (rather than temperature levels); the local set point bandwidth adjustment shall be controlled from group settings at the BMS front end.

8.1.5.12. Emergency shut offs shall be provided at appropriate locations for all services.

8.1.6. Energy Targets

8.1.6.1. The buildings and building services solutions shall provide sustainable, low carbon, low energy facilities in accordance with Appendix M&E 4.

8.1.6.2. The Contractor shall comply with the requirements relating to energy targets as specified in Appendix M&E 4.

8.1.6.3. The Contractor shall provide a breakdown of how the target energy consumption shall be achieved. In particular, the Contractor shall provide details of the anticipated electrical and gas consumption of The Works.

8.1.6.4. In order to assist in meeting this target, the Contractor shall incorporate a high level of innovative building automation and equipment monitoring. The Contractor shall ensure that a central Building Management System (BMS) for The Works is in place, providing linked control and monitoring of the estate functions. Refer to Appendix M&E 5 for details.

8.1.6.5. The Contractor shall note that the Building Volume used in the calculation of Energy Consumption Performance Indicators shall be the “Heated Volume” as defined in Encode. The Contractor shall also include services within the calculation for determining the energy consumption.

8.1.6.6. The Contractor shall calculate the energy consumption for the new buildings using weather data from CIBSE Guides, and degree-day data. The Contractor shall submit all assumptions used to the Board for comment.

8.1.6.7. In order to assist in achieving the water consumption target noted in Appendix M&E 4. The Contractor shall use water saving measures including but not limited to:

a) Low Flush Toilets;

b) Automatic Sensor Taps;

c) Flush Controls to Urinal Facilities;

d) Major Leak Detection and Automatic Shutdown; and

e) Flow restrictors (if risk assessment accepted)

8.1.6.8. Consideration shall also be given to the possible use of borehole water.

8.1.7. Thermal Comfort

8.1.7.1. It is a requirement of the Contractor's Bid Submission that a maximum temperature (28 degree C) solution be considered for the whole of the Works. This will be discussed with bidders during the bid process. Such a solution would require to be produced with the following supporting information;

a) Capital Costs;

b) Lifecycle & Maintenance Costs;

c) Additional Electrical etc loadings; and

d) Projected Energy costs.

8.1.7.2. Where maximum internal summer time temperature calculations of ventilated rooms indicate that the internal temperature will exceed those limits set out in the Appendix M&E 3 for frequent periods, the Contractor shall provide means of reducing the temperature rise.

8.1.8. Air Quality

8.1.8.1. Internal

8.1.8.2. Air quality in all areas shall take account of occupancy levels, internal pollutants, heat gains, external pollutants, atmospheric conditions and shall be controlled to provide adequate comfort and fresh air levels appropriate to the functions of each department area.

8.1.8.3. Particular attention should be given to the risk of cross infection within the hospital / healthcare environment and shall be such as to minimise the spread of infection, all systems to comply with Hai-Scribe and infection control requirements.

8.1.8.4. The Contractor shall demonstrate how their proposals facilitate the control and management of an outbreak and spread of infectious diseases, and in particular shall comply with the requirements of SHTM 2025 (Ventilation in Healthcare Premises) and Hai-Scribe. In order to reduce cross-contamination, the design of The Works shall incorporate 100% fresh air supply systems only.

8.1.8.5. The Contractor's demonstration shall cover all aspects of the building, its services, spatial relationships, PPM Regime and incorporate requirements of the Board's Infection Control Team.

8.1.8.6. Consideration shall be given to the odours from the adjacent sewage works and appropriate filtration shall be included to reduce odours entering the facility.

8.1.8.7. Special consideration shall be given to the reduction of strong smells within the Children's hospital in accordance with SHPN23.

8.1.8.8. External

8.1.8.9. The Contractor shall comply with the requirements of Glasgow City Council and other Statutory Bodies regarding airborne emissions from the Site and shall undertake all studies necessary to prove that emissions and their dispersal will not have any adverse impact on the local community or staff, patients and visitors to the Site.

8.1.8.10. All works shall comply with the Clean Air Act. 1993.

8.1.8.11. The Contractor shall ensure that all Cooking Odours/Fumes are disposed off and do not cause a nuisance to the local community or staff, patients and visitors to the Site in accordance with Planning Condition 17 (see Outline Planning Conditions documents in Appendix D).

8.1.9. Vibration

8.1.9.1. The Contractor shall ensure that Building Services Plant and Equipment are suitably isolated from the building structure in order to prevent the transmission of vibration. The Contractor shall comply with the guidance on the satisfactory magnitude of building vibration with respect to human response given in BS 6472. The Contractor shall comply with the following vibration limits detailed below:

a) Plant rooms on occupied floors 0.015 m/s^2;

b) Plant rooms above and below occupied floor levels 0.050 m/s^2; and

c) Remote plant rooms 0.100 m/s^2.

8.1.9.2. All mechanical ventilation, air conditioning and electrical plant shall be suitably isolated from the structure of the building and fan units positioned in a ducted system shall be isolated from the ducting by means of flexible connections in accordance with Planning Conditions 12 (see Outline Planning Conditions documents in Appendix D).

8.1.9.3. To minimise structure borne noise or vibration lifts and/or hoists, including doors, guide rails and ancillary plant shall be suitably isolated from the structure of the building connections in accordance with Planning Conditions 13 (see Outline Planning Conditions documents in Appendix D).

8.1.9.4. The Contractor shall establish, in consultation with the Planning Authority, whether Best Practicable Means shall be employed as an approach to control noise or whether a baseline noise survey is required. If the latter is deemed necessary the procedures to be adopted shall be agreed in writing with the Planning Authority and thereafter implemented in the agreed manner. When detailed method statements for construction are available an assessment of hospital noise and vibration sensitivity should be undertaken and adequate controls put in place prior to the commencement of any construction demolition works in accordance with Planning Conditions 15(see Outline Planning Conditions documents in Appendix D).

8.1.9.5. All plant and systems shall be installed to meet the vibration requirement of the Clinical Equipment, including theatres and micro biology microscopes etc.

8.1.10. Acoustics

8.1.10.1. The Contractor shall ensure effective control of building services noise and provide a satisfactory acoustic environment in accordance with the following levels as per (S)HTM 08-01. This shall be developed with the Contractors Acoustician to ensure that a holistic approach is taken to prevent nuisance noise, as detailed in Appendix S – Acoustic Requirements.

Table 2 Criteria for internal noise from mechanical and electrical services		
Area type	**Example**	**Noise from mechanical and electrical services**
Ward areas, sleeping areas	Single-bed ward, multi-bed ward, on-call rooms, relatives' overnight stay	NR 30
Recovery	Recovery rooms	NR 35
Small office-type spaces	Private offices, treatment rooms, interview rooms, consulting rooms	NR 35
Open clinical areas	A&E	NR40
Circulation spaces	Corridors, hospital street, atria	NR40
Public areas	Waiting areas, dining, playroom	NR40
Personal hygiene (en-suite)	Toilets, showers	NR40
Personal hygiene (general access)	Toilets, showers	NR45
Small food-preparation areas	Ward kitchens	NR40
Large food-preparation areas	Main kitchens	NR 50 (NR 55 below extract hoods)
Large meeting rooms (>35 m2 floor area)	Lecture theatres, meeting rooms, seminar rooms, board rooms, classrooms	NR30
Small meeting rooms (≤35 m2 floor area)	Meeting rooms, seminar rooms, board rooms, classrooms	NR35
Operating theatres (excluding laminar flow theatres)	Operating theatres	NR40
Laminar-flow theatres	Ultra-clean theatre	NR50
Laboratories		NR 40 where laboratory has no fume cupboards NR 60 at 1 m from fume cupboard with open sash
Table 2 Criteria for internal noise from mechanical and electrical services		
Area type	**Example**	**Noise from**

		mechanical and electrical services
Utility rooms	Clean utility, dirty utility	NR40

8.1.10.2. As well as complying with the technical requirements noted within the various hospital documents, the Contractor shall develop a managed approach with all designers and the acousticians to provide a holistic solution in areas where low level noise could create potential problems e.g. courtyards, entrance halls etc.

8.1.10.3. The Contractor shall include active solutions were these are deemed appropriate e.g. provide piped music in atria, changing rooms to assist acoustic performance.

8.1.10.4. Noise from, or associated with the completed development (the building and fixed plant) shall not give rise to noise level, assessed with windows closed, within any dwelling or noise sensitive building in excess of that equivalent to Noise Rating Curve (NRC) 35 between the hours of 0700 hours and 2200 hours and Noise Rating Curve (NRC) 25 at all other times in accordance with Planning Conditions 11 (see Outline Planning Conditions documents in Appendix D). Refer to appendix M&E3 and the general acoustic requirements noted in section 7.8 - Acoustics.

8.1.11. Plant Life Cycle Costs

8.1.11.1. The Contractor shall ensure that all plant and systems are selected and configured to provide high quality, efficient, resilient, modular flexible and maintainable Building Services solution.

8.1.11.2. The Contractor shall provide evidence of plant life cycle costings including:

a) Capital Cost;

b) Energy Running Cost;

c) Maintenance Cost;

d) Replacement Cost.

8.1.11.3. Warranty costs for each of the building systems shall be benchmarked against industry standards and backed up by detailed costings in the extended warranty schedules.

Sustainability, Renewables, Low, Zero Carbon Technologies

8.1.11.4. The Contractor shall provide evidence of compliance with the Energy Target requirements as detailed in Appendix M&E4 and section 10 and shall develop the sustainability brief in conjunction with the Local Authority to ensure compliance with:

a) Building Regulations;

b) BREEAM Healthcare Excellent requirements;

c) Building Control;

d) Glasgow City Council requirements;

e) Scottish Government Planning Policies including SPP6;

f) Advice Notes including PAN84;

g) NHS/Board objectives.

8.1.12. Design Criteria

8.1.12.1. The Building Services shall be designed in conjunction with the development of the Architectural and Structural packages to ensure a holistic approach to minimise energy use while maintaining user comfort, fabric protection and statutory compliance.

8.1.12.2. All Mechanical, Electrical, Public Health and Specialist system plant shall be designed in modular arrangements incorporating plant N+1 redundancy.

8.1.12.3. All Mechanical, Electrical, Public Health and Specialist systems shall be designed and installed in resilient arrangements with dual distribution paths and appropriate isolation facilities.

8.1.12.4. The lighting levels shall be in accordance with CIBSE guides and Building Control requirements.

8.1.12.5. Power shall be configured to meet the Target Energy demands and also the design peak load plus 25% capacity for future growth.

8.1.12.6. The growth shall be provided in a modular configuration to allow plant cycling and high efficient running.

8.1.12.7. Fire safety systems shall be provided in accordance with the Fire Strategy.

8.1.12.8. Fire alarms shall be Fire Code and BS5839 CAT L1.

8.1.12.9. Refer to Appendix M&E 3 for Room Design criteria and internal temperature frequency periods.

8.1.13. Compliance with Health Service Notes and Memorandums

8.1.13.1. The Mechanical, Public Health, Electrical, Life Safety and Lift Services shall be designed and installed in accordance with the relevant SHTM's, HTM,s, SHBN's, HBN's, SHGN's and HGN's to meet the Employers Requirements.

8.1.13.2. Refer to Volume 2.1 Section 5.0 General Design & Construction Requirements for document hierarchy and Compliance Requirements.

8.1.14. Compliance with Planning/Building Regulations

8.1.14.1. The Building Services Installations shall generally comply with the Building Regulations and Planning Requirements.

8.1.14.2. If any deviations are proposed these must be highlighted in the contractors return documentation together with the details of the proposed mitigation strategy.

8.1.15. Incoming Services - Utility Connections

8.1.15.1. General

8.1.15.2. Discussions with the supply company have been commenced by the Client and contract details are included in Appendix M&E 1.

8.1.15.3. The Contractor will be responsible for the provision of all utilities and the energy supply infrastructure to and from The Works (whether this is internal or external to the Site boundary), including:

a) Confirmation of the capacity of the proposed system;

b) Liaison with potential suppliers;

c) System development and planning;

d) Any supplies modifications to the periphery of the Site;

e) Any supplies modifications within the Site;

f) Metering and sub-metering of power supplies;

g) Metering and sub-metering of heating usage;

h) Metering and sub-metering of cooling usage;

i) Metering and sub-metering of water usage;

j) Metering required for BREEAM;

k) Strategic planning in the context of the site environment;

l) Emergency systems; and

m) Power factor correction.

8.1.16. Security of Incoming Supplies

8.1.16.1. The Contractor shall provide back up to respond to the failure of the incoming supply of Electricity, Gas and Water supplies to The Works. This shall:

a) Provide full standby generator capacity for all electrical services on an N+1 basis in accordance with the requirements and recommendations of (S)HTM 06-01;

b) Ensure that The Works are provided such that all the requirements detailed in (S)HTM 06-01 are satisfied;

c) Ensure that energy, water, power supplies, medical gases and communication supplies to and within The Works are maintained by providing standby sources of supply (eg. dual fuel boilers, standby generators etc);

d) Develop a strategy to ensure the security of the supply. The Contractor shall be required to demonstrate the feasibility of the strategy to the satisfaction of the Board; and

e) Ensure their town's water connection to the Site maintains an adequate and robust service and shall provide connection details with their proposals;

8.1.17. Water

8.1.17.1. A robust alternative town's water supply is to be provided by the Contractor to the Site from a separate sector of the Scottish Water network.

8.1.18. Site Mains Water, Fire Water, Quality & Distribution

8.1.18.1. The Contractor shall develop the Site potable and fire water networks as separate systems each arranged with adequate valving to achieve robustness in continuity of supply.

8.1.18.2. The outcome of the water survey works is awaited, it is anticipated that The Works are to be supplied from dual supplies one from Govan Road and a second from Hardgate Road.

8.1.18.3. The Contractor shall filter the Site potable water to the criteria set out in SHTN02 with 0.2 micron filtration. Pipework shall be stainless steel.

8.1.18.4. The water filtration system shall be established within the Energy Centre to provide resilient filtered water to meet the requirements for The Works.

8.1.18.5. The Contractor shall provide external isolation of water supplies to the new Facilities.

8.1.19. Incoming Power

8.1.19.1. The overall site power systems shall be integrated with the Distribution Network Operator (DNO) incoming arrangement to provide a resilient system.

8.1.19.2. Scottish Power have advised that the existing 11kV network cannot accommodate the New Hospital load; they have been requested to provide proposals to enhance their network for the development. The Contractor shall negotiate with the supplier and ensure that an integrated solution is provided to meet the new building together with the additional site requirements detailed below.

8.1.19.3. The system shall also be configured to provide power for retained estate and new build areas as indicated in Appendix M&E1.

8.1.20. Fossil Fuels

8.1.20.1. The Contractor shall be responsible, in conjunction with SGN in determining the philosophy for the provision of fossil fuels to the Site.

8.1.20.2. Options the Contractor shall consider are;

a) Un-interruptible gas supply;

b) Provision of dual fuel burners and a heating oil standby facility;

c) Installation of CHP for base load;

d) Provision of CHP to provide full campus Electrical and Heating Loads in “Island” configuration with grid as standby.

8.1.20.3. Standalone Heating Boilers are not mandatory if the bidder identifies packaged CHP plant which does not require them to provide the required resiliency and dual fuel capabilities.

8.1.20.4. Irrespective of the option proposed by the Contractor the availability criteria described elsewhere in this document must be strictly adhered to.

8.1.20.5. Natural gas is required for;

a) Space heating;

b) Limited steam generation (for humidification);

c) Combined Heat and Power systems; and

d) Catering.

8.1.20.6. The gas supply shall be provided by a new mains connection from Govan Road. The pipework shall be routed to the Energy Centre to feed the Heating Boilers, CHP plant and routed to serve localised requirements within the Works.

8.1.20.7. Twin regulators shall be provided at the gas meter, non return valves shall be fitted at fire isolation valve to avoid back pressure shutting down regulator valve on activation of the fire valve.

8.1.20.8. Automatic Isolation facility to be incorporated in all gas fire valves during fire alarm testing. Valves shall be capable of being reopened and set to work remotely via the BMS.

8.1.21. Standby Power

8.1.21.1. Electrical Supplies to the Works shall be fully backed up by on site generation as noted above and in item 8.3.31 below. The Contractor shall provide the infrastructure and plant space to allow the extension of the generation capacity to meet the additional site loads as noted above together with a 25% capacity for growth.

8.1.22. Medical Gases

8.1.22.1. A new oxygen VIE compound is to be provided by the Contractor rated to supply the combined demand of The Works and the retained estate.

8.1.22.2. The existing site systems shall be extended by the Contractor to also be capable of supplying the combined site demand, this may be achieved by the expansion of the Maternity accommodation or the establishment of a further VIE compound site, which summated with the existing Maternity storage will meet the combined demand of the the Works and retained estate.

8.1.22.3. For the purposes of the Bid, the bidder shall assume that the latter is required and shall include for a further new VIE compound to be located as per drawing G1274/U(96)01.

8.1.22.4. The Contractor shall provide all civil, builderswork and distribution pipework via a ring main distribution circuit, which should be carried through to the new building risers.

8.1.22.5. The system shall be fully compliant with current SHTM requirements.

8.1.22.6. The Contractor shall liaise closely with the Boards Supplier who will lease the VIE tanks. The contractor shall carry out all builders work, foundations, bases, blast walls together with all pipe and electrical works.

8.1.22.7. Medical gases shall be supplied and configured to suit the new Hospital requirements and retained estate requirements including:-

a) Nitrous Oxide;

b) Oxygen (as above);

c) Vacuum (Split over two systems with valved off link); and

d) Surgical and Medical Air services (Split over two systems with valved off link).

8.1.22.8. Medical air plant should be provided from 2 separate sources of supply via a ring main distribution net work, carried through to the internal risers.

8.1.22.9. Within the Children's hospital special care shall be taken in the location and covering of medical gas equipment to reduce fear while retaining full operational abilities. The proposal shall be robust, simple to use and easily cleanable.

8.1.23. IT

8.1.23.1. IT equipment/server rooms shall be established in both the new Children's Hospital and Adult Acute Hospital. The two new rooms shall be interlinked, together with associated hub rooms via a star/mesh configuration of cabling.

8.1.23.2. Distributed secondary comms rooms shall be established to allow CAT 6A cables to be run to all positions within The Works within the 90m cable length restriction.

8.1.23.3. All new incoming services shall be duplicated and presented individually at the two server rooms. Ducting and manholes to be provided to up to four providers with diverse routes for each network provider.

8.1.23.4. Distributed secondary comms rooms shall be established to allow CAT 6 Augmented (CAT6A) cables to be run to all positions within The Works within the 90m cable length restriction.

8.1.23.5. The Contractor shall ensure that his works have no impact on the security of services to the existing hospital estate during the site construction works.

8.1.24. NHS Model Engineering Specifications

8.1.24.1. The Contractor shall ensure that systems are installed in accordance with all relevant NHS Model Engineering Specifications and amendments to ensure compliance with the Technical Memorandum.

8.1.25. Service Capacity Reserve

8.1.25.1. In accordance with Good Industry Practice, all plant, plant spaces and building services systems shall be specifically designed and provided with defined reserve capacity allowances and future expansion capabilities for The Works (e.g. distribution boards with 25% spare capacity, 25% additional containment, 25% spare capacity in distribution Pipework, 25% additional plant capacity, 25% additional cooling capacity, 25% additional air handling capacity etc. for the buildings as designed). As detailed in 8.1.3.2, the Contractor to provide compliance matrix detailing how this to be delivered.

8.1.25.2. With optimum for maximum temperature variant (MV2).

8.1.25.3. This shall be demonstrated within the calculations, plant room layouts and service route drawings provided with each stage of the design build project to ensure full compliance at project completion.

8.1.25.4. In addition to the reserved capacity allowances the Contractor shall also ensure reserve capacity, service termination, zoning and general arrangement supports any future extension of the building that may be an optional feature of the Contractors Proposals.

8.1.26. Commissioning, Testing and Demonstrations

8.1.26.1. The Mechanical, Electrical, Public Health and Specialist systems shall be fully tested and commissioned in accordance with:

a) CIBSE Commissioning Code;

b) The Institute of Hospital Engineers Guidance to Engineering Commissioning;

c) Requirements of SHTN's and SHBNs; and

d) Requirements set out in the works documents

8.1.26.2. The Contractor demonstrations are to cover all aspects of the building, its services, and spatial relationships, Soft and Hard FM and incorporate requirements of the Board's Infection Control Team.

Refer to section 6.8 – Commissioning & Handover for details.

8.1.27. Environmental Proving

8.1.27.1. During the design stage the Contractor shall provide the Computational Fluid Dynamic requirements of SHPN57 e.g. CFD shall be used to model and prove the ventilation strategy for the works.

8.1.27.2. On completion of the commissioning of all individual systems the overall performance of the combined systems shall be demonstrated within every room within the Adult Acute and Children's Hospitals.

The following parameters shall be recorded:-

a) Space Temperature;

b) Space Humidity;

c) Space Sound Levels;

d) Controls Operation & Achieving Set Points;

e) Domestic Hot and Cold Water;

f) Air Velocities (Comfort Criteria);

g) Lighting Levels; and

h) Fire Alarm Sounders.

8.1.27.3. Trend logs from the BMS system are to be used as a record of the local conditions achieved where possible, or hand held instruments with current Calibration Certificates. All readings shall be recorded, tabulated and issued.

8.1.27.4. Measuring instrument Calibration Certificates shall be forwarded for record purposes.

8.1.27.5. Room cooling capacities shall be tested on a department by department basis by introduction of temporary heat loads to prove the system design capabilities.

8.1.27.6. This shall be carried out by the Contractor at their own cost.

8.1.27.7. The Contractor shall also carry out seasonal commissioning as detailed in Appendix U – BREAAM Guidance, to ensure full system performance i.e. Main cooling plant operation in the summer and heating plant in the winter.

8.1.28. Asset Register

8.1.28.1. The Contractor shall include for a comprehensive Asset Register to be compiled on an open protocol industry standard format for all elements of the Electrical, Mechanical, Public Health Medical Gases and Specialist systems.

8.1.28.2. The Contractor is advised that an NHS Scotland (HFS) National asset management package is currently out to tender for development, this should fully developed and implemented by the time The Works are in the construction phase, failing this the Asset Register management package should revert to industry standard current at time of construction.

8.1.28.3. The register shall be linked to the As Fitted drawings via MiCAD drawing mapping, the MiCAD should also integrate with the Labour Management Systems (LMS) to provide a fully integrated system complete with interfaces to the PPM and Board's labour resource software systems (Apollo or Eclipse).

8.1.28.4. For ease of reference, all installed Mechanical, Electrical, Public Health Medical Gases and Specialist systems components shall be asset tagged by the contractor, entered into the PPM system and linked to its full specification and maintenance schedule.

8.1.28.5. IT provision for this functionality should include for server capacity to effectively store all 3 elements, PPM, MICAD & LMS packages.

8.1.28.6. The tagging system shall be capable of simple extension to allow the Bar Coding of Hospital Equipment, and the bidders shall provide technology proposals for Board consideration.

8.1.28.7. The asset tagging system shall be interfaced with the Personal Digital Assistant (PDA) System to be utilised for Managing Building Handover and Snagging.

8.1.28.8. The Contractor shall provide and manage a computer based electronic system for the management of the handover of the building. The system shall allow a file for each room to be established, with drawings linked to the file and marked to highlight snags or defects. This system shall be configured to provide management reports on zoned and room type selection basis.

8.1.29. Planned Preventative Maintenance PPM

8.1.29.1. The Contractor should provide, as part of the contract, a full PPM manual and system (computer based software package) for all the buildings and for all building and building services elements of the project. This system will incorporate the As Fitted drawings (MiCAD format) and specifications. This schedule shall have a full planned maintenance programme of works that the FM & Estates managers can review to plan and establish their annual maintenance schedules and annual budgets. The Contractor will be responsible for the purchase and installation of the full PPM system, including pc work stations, barcode readers and tablets.

8.1.29.2. The system to be compiled on an open protocol industry standard format for all elements of the Mechanical, Electrical, Public Health and Specialist systems.

8.1.29.3. The PPM system shall be compiled at an early date with time and input included for three iterations of comments and workshops with the Estates Department to ensure that the system meets the various requirements of the Hospital Technical Publications, CIBSE,

Clinical Services and Estate's Department. The system shall be fully linked to the As Fitted drawings via MiCAD drawing mapping, to provide a fully integrated system complete with interfaces to the PPM and Board's labour resource software systems (Apollo or Eclipse).

8.1.29.4. It is understood that there may be an iterative process involved in the preparation of the information, however it is a requirement that the Contractor allows for and ensures that all PPM, Asset register, tagging, management systems and MiCAD information is fully updated to "as fitted" condition.

8.1.29.5. The Contractor shall handover a fully working system including PC's hardware, barcode readers, tablets, printers and project specific software together with system training for the Client's operators.

8.1.30. Helipad

8.1.30.1. The Contractor shall include for all services including;

a) Fire fighting systems;

b) Suppressant storage;

c) Associated drainage, lighting and vertical access; and

d) All items required to allow operation of the helipad to ensure full compliance with HBN 15-03 and CAA guides.

8.1.30.2. The Contractor shall liaise with Glasgow City Planning and the CAA to agree the proposed location and height for Energy Centre Flue and ensure that warning lights are fitted to all required parts of the development including the flue.

8.1.30.3. All warning lighting shall be installed in accordance with the CAA requirements and the lamp replacement methodology shall be included in the main Plant Replacement Strategy.

8.1.30.4. The Building Services shall be designed and installed to accommodate Compliant Helipad Operation with the inclusion of:-

a) Lighting to main energy centre flue;

b) Appropriate location and height selected for;

i. Heat rejection plant to avoid flight path;

ii. Heat rejection plant to avoid hot air generated turbulence; and

iii. Air intakes to avoid contamination from downwash; and

c) Extract ducts to avoid contamination of operators and patient's in transit.

8.1.31. Automated Material Transfer System

8.1.31.1. It is anticipated that an Automated Material Transfer System installation will be provided to reduce the requirement for manual handling and increase service efficiency, all as detailed within Appendix M&E7. The Contractor shall set out the building service and vertical transport implications to ensure that space allocation and service requirements are incorporated for docking stations and controls.

8.1.31.2. All power, controls and equipment shall be configured to ensure EMC compatibility with the robotic solution.

8.1.31.3. The building fabric and general building services installations shall be designed to accommodate the Automated Material Transfer System.

8.1.32. Radiation Protection

8.1.32.1. All required protection and amendments to the Mechanical, Electrical, Public Health and Specialist Services shall be provided by the Contractor to suit the radiation protection regime in accordance with the manufacturer's guidance HSE regulations and Technical Memorandums.

8.1.32.2. Contractor to note that all Radiation Protection measures proposed to be discussed and agreed/endorsed with/by the Boards Radiation Officer

8.1.33. Telemedicine

8.1.33.1. The mechanics of Telemedicine system shall be provided by the Contractor via the ICT network cabling infrastructure and field cabling. The PACS equipment shall be provided by the Board.

8.1.33.2. As the principal tertiary children's hospital RHSC Glasgow is actively involved in all aspects of telemedicine and the new hospital requires to be arranged and equipped to facilitate telemedicine as part of normal practice. In practice this will require:

a) The ability to plug in mobile telemedicine units throughout the clinical areas to enable clinical consultations;

b) The equipping of all teaching facilities within the hospital for the transmission and receipt of educational activities;

c) A dedicated telemedicine suite; and

d) An IT infrastructure which will enable engagement in telemedicine activities from individual offices / PCs.

8.1.33.3. Telemedicine and teleconferencing play an increasingly important role in provision of children's hospital services in Scotland through:-

a) The transmission and receipt of educational programmes;

b) Support for networked models of service delivery (regional and national); and

c) Support for direct clinical care in remote locations.

8.1.33.4. Telemedicine and teleconferencing shall also play an increasingly important role in provision of adult's hospital with similar facilities being provided.

SECTION 8.2 – MECHANICAL SYSTEMS

8.2.1. General

8.2.1.1. The Contractor shall design, supply, install, test, commission and maintain all Mechanical Building Services necessary to support the clinical activities of The Works. The following systems are indicative of those anticipated by the Board but are not exhaustive and it shall be the Contractor's sole responsibility to determine that all necessary systems (excluding Medical Equipment) are included.

8.2.1.2. Systems shall be designed, supplied, installed, tested, commissioned, and put into service all in accordance with all relevant Regulations and Standards.

8.2.2. Building Management Systems & Controls

8.2.2.1. The Contractor shall ensure that all plant can be operated in automatic mode or manual mode should a corruption in BMS software occur. Furthermore, physical bypasses shall be provided where appropriate for maintaining service, for example at control valves for critical departments.

8.2.2.2. Network communications equipment for BMS, CCTV, Access Control Systems etc. shall be housed in racks, located within environmentally controlled secure rooms. If it is proposed that these share node rooms with the main network services then suitable control measures and rack locking shall be provided.

8.2.2.3. The system shall be fully integrated with the Building Services, refer to Appendix M&E 5 for BMS requirements.

8.2.3. Metering

8.2.3.1. The Contractor shall ensure the use of meters giving high accuracy at low flow rates and that metering points give consumption in SI units including any time bands as appropriate. The Contractor shall ensure data collection and report production is by electronic systems.

8.2.3.2. The Contractor shall allow sub-metering of electricity, gas, heating and cooling usage for each individual department / ward /unit. With water consumption measured in departments and wards with high usage.

8.2.3.3. Metering shall be provided in accordance with the targeted BREEAM credits.

8.2.3.4. The BMS shall be installed to automatically read and provide trend analysis to a range of energy and water meters. All meters including those of the utility supply companies and internal sub-meters shall be automatically read by the BMS at pre-determined intervals. The Contractor shall ensure that the BMS is capable of reading utility meters on a continuous basis in order to facilitate trend analysis. The energy metering shall include (but not be limited to):-

8.2.4. Electricity

a) Main incoming HV supplies;

b) Main LV Switchboard;

c) External lighting (separate sub-meter for each car parking area);

d) All distribution boards with separate meters for power and lighting;

e) Departmental power and lighting;

f) HVAC control panels;

g) Cooling plant; and

h) Tenant areas;

For the purpose of energy estimates, hours run meters shall be provided by the Contractor for all Air Handling Unit (AHU) fans.

8.2.5. Water, Gas, Oil, Bio Fuel

Water

a) Main incoming water supply; and

b) Internal sub-meters

Gas

a) Main incoming gas supply; and

b) Internal sub-meters

Oil

a) Delivered to Site; and

b) Used on Site

Bio Fuel (if proposed)

a) Delivered to Site; and

b) Used on Site

8.2.6. Asset Management & Tracking (AM&T)

8.2.6.1. The Contractor shall also arrange for the Utility metering systems to interface with the Board's AM&T system for fiscal metering, electronic invoice & validation process.

8.2.7. Heating System

8.2.7.1. The Contractor shall provide all heating systems required to support the Board's Clinical Output Specification and to;

a) Zone and control heating circuits to provide an efficient and comfortable environment;

b) Provide valve isolation such that isolation of circuits and sub-circuits shall have minimal disruption to the remaining departments;

c) Provide 24 hour occupied (and unoccupied) wards and departments with a night set back Facilities;

d) Provide a temperature and ventilation night set-back facilities so that when departments are unoccupied they will have frost and anti-condensation protection;

e) Good quality heat emitters shall be provided to ensure satisfactory heat distribution within the area served. Heat emitters and all heating pipework shall be arranged such that in all areas, the surface temperature limits as laid down in Health Guidance Note "Safe Hot Water and Surface Temperatures" are not exceeded. Heating pipework shall not be utilised as a heat emitter within patient areas;

f) The bidder shall provide catalogue details of all proposed heat emitters; and

g) Particular attention shall be given to effective use of warm air curtains in entrance / draft lobbies.

8.2.7.2. The Heating pipework shall be thoroughly examined and tested prior to the fitting of insulation. Any site welds shall be x-rayed and a certificate issued to confirm the suitability of the completed joint for operation within the test requirements

8.2.8. Water Systems and Filtration

8.2.8.1. Cold Water Supply

8.2.8.2. The water supply system for The Works shall include two new supplies and also incorporate on-site segregated bulk water storage (24-hours). Treatment of potable cold water supplies is not acceptable and the provision of a wholesome supply from Scottish Water's mains with the minimum of storage and handling is required.

8.2.8.3. The Contractor shall design and install the domestic cold and hot water supply installations to fully comply with the requirements of;

a) (S)HTM04-01;

b) SHTM 2027;

c) SHTM 02;

d) SHTM 2040 "The control of legionella in healthcare premises - a code of practice"; and

e) Health Guidance Note "Safe Hot Water and Surface Temperatures."

8.2.8.4. Pipework shall be stainless steel with compatible accessories.

8.2.8.5. The Contractor shall include for all specialist membrane filtration treatment plant (Replaceable cartridge systems are not acceptable). The Contractor shall provide water sampling points throughout the installation in accordance with the SHTM02. Renal water treatment shall be provided by the Contractor in accordance with Appendix M&E6 with due regard for clinical requirements.

8.2.8.6. Secure local isolation via manual shut off valves shall be provided by the Contractor at all sanitary appliances and at final connection points to Equipment.

8.2.8.7. Area leak detection shall be interlinked to zoned automatic shut down valves.

8.2.8.8. Secure external isolation to the buildings shall be provided by the Contractor. Sentinal taps for testing shall be clearly identified on drawings.

8.2.8.9. Pipework and valving shall be configured to allow isolation of local services whilst maintaining adjacent facilities e.g. resilient pipework routing and valve location to ensure that only one Theatre to be off-line at a time, one CCU bed, one renal bed, one standard bed etc..

8.2.8.10. Plumbed in water dispensers shall be provided at ward level and strategic areas including main reception/café areas etc.

8.2.8.11. Plumbed water shall be provided to specialist services such as, but not limited to;

a) Washing machines in specialised units;

b) Catering requirements;

c) Dishwashers in ward areas in accordance with the exemplar layouts and Equipment List; and

d) Retail Units.

8.2.8.12. Plumbed water shall be provided to all vending machines as required throughout The Works in accordance with the Employers Requirements.

8.2.8.13. Attention is drawn in particular to SHTN 02 concerning pipework materials and standards of filtration to be used in Scottish Healthcare Facilities.

8.2.8.14. Cold water system to comply with Hai-Scribe and the Board's infection control requirements.

8.2.8.15. All hand washing facilities to be provided with automatic taps.

8.2.8.16. The Contractor shall carry out a full risk assessment of the complete water systems of the legionella risks and ensure that the system design and equipment selection and installation is carried out to minimise risks.

8.2.8.17. Water shall be provided for fire fighting including sprinklers, wet risers and fire hydrants in accordance with the local authority requirements.

8.2.9. Hot Water Supply

8.2.9.1. Appropriate operational engineering systems for hot water shall be included in the design of The Works.

8.2.9.2. Pipework shall be stainless steel with compatible accessories.

8.2.9.3. Domestic hot water systems shall be designed with plate heat exchangers and buffer vessels to provide adequate flow to satisfy maximum demand whilst minimising stored hot water and energy consumption. The provision of some storage via buffer vessels may be required to minimise the impact of hot water generation on boiler power. (If buffer vessels are required these shall be minimal rating)

8.2.9.4. The adoption of recommended design practices to control of legionella and other bacteria within the systems is critical and is considered mandatory.

8.2.9.5. Type 3 thermostatic mixing valves (TMV's) shall be installed (in accordance with NHS Model Engineering Specification D08) at all HWS outlets to SHTMs and SHGNs except where 60°C water is a particular requirement. Double check valves to be duplicated at TMV's.

8.2.9.6. The Contractor shall carry out a full risk assessment of the complete water systems of the legionella risks and ensure that the system design and equipment selection and installation is carried out to minimise risks.

8.2.9.7. Hot water system to comply with Hai-Scribe and the Board's infection control requirements.

8.2.9.8. Hot water boilers shall be provided in all Staff Rest rooms and Kitchen areas.

8.2.10. Special Water Services

8.2.10.1. The Contractor shall provide all special water services required to support the Employers Requirements, such as but not limited to:-

a) Special supplies such as de-ionised water to specialist Equipment;

b) Special supplies such as de-ionised water to Equipment washers / disinfection Equipment; and

Special supplies for Renal Dialysis (refer to appendix M&E6).

8.2.11. Ventilation & Air Conditioning

8.2.11.1. The heating, ventilation and air conditioning systems shall be logically designed to operate efficiently incorporating heat recovery and provide local control for all areas including single accommodation.

8.2.11.2. The energy and power systems shall be appropriately designed to provide fully integrated designs in terms of the incorporation of engineering services into the building fabric and external spaces.

8.2.11.3. The need to maintain the specified comfort conditions in all areas but particularly in clinical areas is of paramount importance and the Contractor shall develop strategies for achieving the specified environmental conditions with minimum energy consumption.

8.2.11.4. Air Handling Ductwork shall be constructed from galvanised mild steel sheet and not fabricated from any composite board systems. Ductwork shall be manufactured and installed in accordance with DW144.

8.2.11.5. It is essential that the Contractor designs and provides ventilation and air conditioning systems which will ensure occupants comfort. This shall be achieved by use of well tested design principals and suitable plant selection. Air flow problems must be avoided by accurate system balancing, correct selection and location of air diffusers to prevent high air velocities and stratification together with adequate air volumes and accurate temperature control.

8.2.11.6. The Contractor shall comply with the following general criteria for above systems:-

8.2.11.7. Provide natural and mechanical ventilation, comfort cooling, and air conditioning to suit The Works and clinical requirements.

8.2.11.8. Air changes shall be in accordance with CIBSE guides, SHTM's, HTM's and Building Regulations.

8.2.11.9. Provide a climate control facility in clinical and staff areas which are provided with air conditioning (if applicable).

8.2.11.10. Ensure heat gain from all Equipment and personnel is allowed for in sizing and selection of the systems.

8.2.11.11. Demonstrate how their proposals facilitate the control and management of an outbreak and spread of infectious diseases in accordance with SHTM 2025 and SHFN 30 and HAI-SCRIBE. The Contractor demonstration is to cover all aspects of the building, its services, spatial relationships, maintenance regime proposals and incorporate requirements of the Board's Infection Control Team.

8.2.11.12. Ensure that ventilation systems installed in areas classified as hazardous are designed to relevant standards.

8.2.11.13. Where grilles or diffusers are used within rooms the Contractor shall ensure they are:

a) Arranged to avoid draughts;

b) Designed to minimise noise intrusion into the space; and

c) Humidification shall be provided where control of humidity is required for clinical reasons.

8.2.11.14. The Contractor shall provide the resilience requirements of SHPN28 e.g**.** Steam Humidification shall not rely solely on interruptible gas supply.

8.2.11.15. The Contractor shall design the systems set back arrangement in accordance with the requirements of SHPN57 e.g**.** minimum set back temperature in Cardiac CC of 10°C.

8.2.11.16. The Energy Centre shall be adequately ventilated throughout and in compliance with HTM's, SHTN's, CIBSE and Building Regulations current at time of construction.

8.2.11.17. Special consideration shall be given to temperature control and ventilation within transformer rooms, generator rooms, UPS rooms and battery rooms to ensure optimum equipment operation.

Local Exhaust Ventilation Systems

8.2.11.18. The Contractor shall provide all LEV systems including but not limited to that required to support the provision of;

a) Catering;

b) Workshop and maintenance facilities;

c) Plaster rooms;

d) Decontamination suites; and

e) Areas requiring exhaust as noted in SHBN's, SHTN's and SHPN's etc

8.2.12. Fume Cupboard & Micro-biological Safety Cabinets

8.2.12.1. The Contractor shall provide fume cupboard and both CAT II and CAT III microbiological safety cabinet exhaust systems if required to support the Board's Clinical Output Specification, RDS/ADB information. Systems shall comply with NHS Specifications and Guidance documentation which shall include a matched supply system into the room(s) containing fume cupboards and micro-biological safety cabinets. Fume cupboard design and installation shall be to BS 7258. Microbiological Safety Cabinet design and installation shall be to BS 5726.

8.2.13. High Specification Air Conditioning Systems

8.2.13.1. The Contractor shall provide high specification, full function and close control air conditioning systems to support the Board's Clinical Output Specification, such as but not limited to:-

a) Aseptic rooms;

b) Ultra Clean ventilation and / or operating theatres;

c) Pharmacy; and

d) Areas handling radio isotopes or other radiological contaminants.

8.2.13.2. The operating theatre suite within the Adult Acute Hospital shall be provided with five number ultra clean ventilation (UCV) theatres. All other theatres shall be the standard type.

8.2.13.3. This should be verified with the current Architects drawings and Room data Sheets.

8.2.13.4. Each individual operating theatre shall be provided with its own plant, controls and power i.e. One supply and one extract unit, there shall be no sharing of ventilation between the theatre suite.

8.2.13.5. Air conditioning systems installed in the above areas shall be higher specification air conditioning systems with standby motors belted up in accordance with;

a) SHTM 2025;

b) SHTM 2040; and

c) NHS Model Engineering Specification C04.

8.2.14. Ventilation of Isolation Rooms

8.2.14.1. Each 28 bed ward within the Adult Acute Hospital will be provided with a single isolation room.

8.2.14.2. The Children's Hospital will be provided with two isolation rooms per 28 bed ward.

8.2.14.3. This should be verified with the current Architects drawings and Room Data Sheets.

8.2.14.4. The Contractor shall provide air conditioning systems to Isolation Rooms to support;

a) Employers Requirements;

b) Clinical Output Specification; and

c) NHS infection Control standards

With strict positive / negative pressure differentials.

8.2.14.5. A simple to read digital differential pressure gauge shall be provided by the Contractor at the entrance to the isolation suite lobby.

8.2.14.6. Refer to draft SHPN 4 and drawings G1274 M(57)02 & 03.

8.2.14.7. Ventilation and air conditioning systems for these rooms shall be designed and installed in accordance with;

a) SHTM 2025;

b) SHTM 2040;

c) SHPN 4; and

d) NHS Model Engineering Specification C04

8.2.14.8. The Contractor shall demonstrate how their proposals facilitate the control and management of an outbreak and spread of infectious diseases.

8.2.15. ICT Cooling

8.2.15.1. The Contractor shall provide N+1 redundant high specification, full function close control air conditioning systems to support the Board's Technology requirements, such as but not limited to:-

a) Server Rooms;

b) Computer Rooms;

c) Telephone Rooms;

d) CCTV DVR Equipment Rooms; and

e) Entertainment Server Rooms

8.2.15.2. The Contractor shall provide close control cooling systems to support the Board's Technology requirements, such as but not limited to:-

a) ICT Node Rooms;

b) BMS Node rooms (where these are separate from ICT node rooms);

c) Security Node rooms (where these are separate from ICT node rooms); and

d) Entertainment Node rooms (where these are separate from ICT node rooms)

8.2.15.3. No water or condensate generating equipment to be located above racks.

8.2.15.4. All services to be designed to operate on local control from diverse routed automatic change over power supplies to ensure no single point of failure, BMS to monitor plant operation, set points and room environment conditions.

8.2.16. Internal Drainage

8.2.16.1. The Contractor shall provide all necessary drainage to support the Employers Requirements and their aspirations regarding reduced water consumption which shall include but not be limited to:

a) General foul water drainage;

b) General surface water drainage;

c) Kitchen drainage, inclusive of grease traps;

d) Laboratory drainage;

e) Drainage from areas handling radio isotopes, or other contaminants such as silver;

f) Bedpan disposal system; and

g) Harvested rainwater shall not be utilised in clinical areas.

8.2.16.2. The design of the system shall be in accordance with the BS EN 12056 and the Local Authority's Building Inspector's requirements; pipe routing shall be configured to minimize the risk of blockage.

8.2.16.3. Drainage pipework and accessories material shall be selected to suit the appropriate location and type of waste.

8.2.17. Bedhead Services

8.2.17.1. The Contractor shall provide bed head services in line with the ADB sheet requirements together with clinical and operational requirements. The Contractor shall ensure that bedhead services are designed and installed in accordance with SHTM 2015.

8.2.17.2. The units shall be full integrated with the Patient entertainment systems and a dedicated power outlet shall be provided for patient's equipment.

8.2.17.3. The bedhead services shall be provided via high quality proprietary units with integrated lighting and medical gas outlets.

8.2.17.4. Gas Outlets in Children's Hospital to be concealed.

8.2.17.5. The bedhead units at renal locations shall be proprietary type rather than site constructed from standard components provided all in accordance with Appendix M&E6.

8.2.18. CHP Equipment

8.2.18.1. A CHP installation is proposed as part of the low C02 / energy strategy for the new Facilities. The CHP units shall be located within the Energy Centre. The Contractor shall develop the strategy to incorporate the full benefits of tri-generation and select appropriate plant to meet the works requirements.

8.2.18.2. The installation requires to comply with the following general principles;-

a) The system shall be fully integrated with the energy strategy for the new hospital buildings to ensure economical operation;

b) The units shall operate in accordance with the Clean Air Act; and

c) Where biofuels are proposed for the CHP these shall be stored separately from the main fuel storage system and shelf life control regime integrated in the storage facility.

8.2.19. Fire Fighting Systems

8.2.19.1. The Contractor shall provide all fire fighting systems in line with a robust fire strategy for the project as outlined in Volume 2/1 Section 5.11.

8.2.19.2. All elements of the fire fighting systems, such as but not limited to

a) Wet risers;

b) Sprinklers;

c) Gaseous Extinguishants;

d) Fire Hydrants; and

e) Smoke Control Systems etc.

8.2.19.3. The above shall be fully incorporated within the building design at an early date to ensure that all service routes and plant requirements are integrated in the building envelope while maintaining safe, secure access for maintenance and regular system testing of all systems without disturbance to the Clinical operations.

8.2.19.4. Where sprinklers are used special consideration must be given to mitigate infection control issues including risk assessments, water treatment and pre-action systems.

8.2.19.5. All in accordance with (S)HTM 05-01, 05-02 & 05-03.

8.2.19.6. Specialist systems shall be provided by the Contractor for the roof mounted helipad in line with the appropriate standards.

8.2.19.7. Authorised test certificates shall be provided by the Contractor for all life protection systems.

8.2.20. Gas Systems

8.2.20.1. Medical gases

8.2.20.2. The plant shall be rated to accommodate the requirements of the new and retained hospital estate The medical gas pipeline system for the site will require a detailed design package from a specialist consultant including all required co-ordination with existing gas supplies on-site throughout the phasing periods.

8.2.20.3. Contractor to note that detailed design proposals to be discussed and agreed/endorsed with/by Board's Medical Gas Officer.

8.2.20.4. For certification of the works all new developments will require new independent external plant and complete medical gas pipeline systems. The interconnections with the existing and upgraded systems shall be valved off for certification of the main works.

8.2.20.5. The Contractor shall liaise closely with the Boards Supplier who will lease the VIE tanks. The contractor shall carry out all builders work, foundations, bases, blast walls together with all pipe and electrical works

8.2.20.6. The Contractor shall provide all medical gases required to support the Employers Requirements such as but not limited to:-

Oxygen VIE comprising 2 No. Sources (2 fixed manifold rated for the combined load of the new and existing Hospital requirements) (Board provision) Together with connection to existing hospital VIE network and extension of the existing to provide supplies to meet the fall demand requirements of the new works and retained estate;

a) Nitrogen;

b) Nitrous Oxide;

c) Oxygen / Nitrous Oxide mixture;

d) Surgical air 7 bar;

e) Medical air 4 bar;

f) Carbon Dioxide;

g) Helium/Oxygen;

h) Medical Vacuum; and

i) Anaesthetic Gas Scavenging.

8.2.20.7. All medical gas, vacuum, scavenging, and air systems shall be fully maintainable without the requirement to alter other services and a section for each system shall be included in the Contractor's plant replacement strategy detailing the system resilience, redundancy together with the replacement methodology for all vessels, distribution and equipment while maintaining service.

8.2.20.8. All power supplies to medical gas, vacuum, scavenging, and air systems shall be provided from resilient redundant distribution networks with automatic change-overs with

a holistic approach used to minimise disruption to service during electrical testing and maintenance. Isolation and distribution shall be configured to ensure that work on one power stream does not effect other equipment.

8.2.20.9. Medical gas bottles, plant areas and stores shall be accommodated within suitably designed buildings, rooms and enclosures with good access, natural ventilation and satisfactory noise emissions control.

8.2.20.10. All medical gas installations which serve clinical departments shall be connected to essential electrical supplies.

8.2.20.11. The full status of the central medical gas plant shall be monitored by an alarm system with a status signal to an alarm panel located in the FM Control Centre, and local manned office. The panel shall also report the alarm to the BMS.

8.2.20.12. The Contractor shall provide the Medical Gas installation to comply with the following general criteria;

a) Install the piped medical gases in accordance with;

i. SHTM 2022;

ii. (S)HTM 02-01; and

iii. “Model Engineering Specification C11”;

b) Install outlets as required to allow the Clinical operation of each department to be carried out;

c) In accordance with ADB sheets;

d) Within play rooms and recreation rooms all outlets shall be located in lockable area together with masks and flow meters etc;

e) Provide a medical gas distribution system sized to accommodate the demand of The Works as defined in the Room Data Sheets, with the capacity to accommodate an increase in demand (flow and consumption) of no less than 25%;

f) Ensure that the provision of medical gasses to the point of use is continuous. Where the Contractor is providing medical gases via cylinders they shall provide manifold systems with automatic change over from duty to standby to no less than two equal banks of cylinders; and

g) Ensure that adequate points of isolation exist to all medical gas systems in accordance with SHTM 2022, (S)HTM 02-01.

8.2.20.13. The Contractor shall establish duplicate VIE plant compounds within suitable locations to ensure compliance with the Technical Memorandums, Local Approved Person and suppliers requirements. The system shall be rated to accommodate the full site wide requirements and the Contractor shall include for interlinking the new plant with the retained estate systems via valved off interconectors to improve overall site resilience.

8.2.20.14. A ring main will surround the site (NSGH & RHSC) feeding all necessary areas. It will be supplied from primary, secondary and tertiary sources. Compounds shall require an 8m

boundary zone for most activities around the enclosure, going up to 15m for places of assembly and flanges in flammable gas pipes. Allowance should be made for regular large vehicle access for tank refilling.

8.2.21. Medical & Dental Vacuum

8.2.21.1. The Contractor shall provide medical and dental vacuum by duplicate quadruplex vacuum systems each with three pumps and two vessels to provide service as detailed within the relevant ADB Sheets.

8.2.21.2. Medical and dental vacuum plant areas and stores shall be accommodated within suitably designed buildings, rooms and enclosures with good access, natural ventilation and satisfactory noise emissions control.

8.2.21.3. Installations shall be connected to essential electrical supplies.

8.2.21.4. The status of the central medical and dental vacuum plant shall be monitored by an alarm system with a status signal to an alarm panel located in the FM Control Centre, and local manned office. The panel shall also report the alarm to the BMS.

8.2.22. Anaesthetic Gas Scavenging System

8.2.22.1. The Contractor shall provide active AGSS systems in all locations where Nitrous Oxides are used. These shall be duplicate vacuum systems independent of the main vacuum systems.

8.2.22.2. AGSS plant areas and stores shall be accommodated within suitably designed buildings, rooms and enclosures with good access, natural ventilation and satisfactory noise emissions control.

8.2.22.3. The installation shall be connected to essential electrical supplies.

8.2.22.4. The status of the AGSS shall be monitored by an alarm system with a status signal to an alarm panel located in the FM Control Centre, and local manned office. The panel shall also report the alarm to the BMS.

8.2.23. Medical Air

8.2.23.1. Provision of medical air for the New Hospital Buildings would be best provided by duplicate - quadruplex medical air plant, comprising of 4 compressors, 4 dryers and 2 air receivers. It will be located within the Basement plant room area with sufficient air flow for ventilation and cooling of compressors. Each compressor sized for 50% of the design flow – providing the primary and secondary supply. This ensures an N+1 operation allowing full design flow with one compressor out of service. Emergency provision should be an automatic manifold (with cylinders) located within or close to the main building.

8.2.23.2. All supplies will conform to the European Pharmacopoeia standard for controlling air purity, all necessary filters and monitoring systems will be supplied. According to (S)HTM 02, the efficiency of plant, expressed as the volume of air delivered to the pipeline distribution system, a minimum efficiency of 5 m3/kWh at 100% and 10% is required. The power consumption at zero flow should be less than 1% of that at 100% design flow.

8.2.24. Surgical Air

8.2.24.1. The size of the development warrants dedicated duplicate surgical air supply. Surgical air will be provided by a duplex plants, located in each plant room area with sufficient air flow for ventilation and cooling of compressors. An emergency supply from an automatic reserve manifold (with cylinders) will be located in separate accommodation.

8.2.25. Manifold Installations

8.2.25.1. Other gases required throughout the hospital will be supplied by an automatic manifold installation, as in the case of N2O, with an emergency reserve supply connected. Gases used less frequently may be supplied by local cylinders at point of use.

8.2.26. Pneumatic Air Tube Delivery System

8.2.26.1. The Contractor shall provide a pneumatic air tube delivery system as required to the new Facilities to support the Clinical Requirements, as detailed in Appendix M&E7 of the Employers Requirements. The Contractor shall ensure that the pneumatic air transport system shall be designed and installed in accordance with SHTM 2009.

8.2.27. Fuel Storage

8.2.27.1. The Contractor shall provide fuel storage within steel tanks located in the Basement of the Energy Centre. One of the tanks shall be provided early for beneficial use of the Board during the construction works to allow removal of the existing vertical oil tanks. The system shall include, fill points, delivery systems pumps and controls (this facility shall be integrated with the two other tanks to provide a long term fuel management facility for the boards new and retained estate.

8.2.27.2. The following fuels shall be provided by the Contractor and stored:-

a) 35sec Gas Oil - Main Boiler Plant and retained existing estate; and

b) Diesel – Generators.

8.2.27.3. Fill points for the individual fuel types shall be provided by the Contractor at a suitable location on the external wall of the Energy Centre to facilitate automated fuelling from tankers.

8.2.27.4. Supply points shall also be provided by the Contractor for the individual fuel types at a suitable location on the external wall of the Energy Centre to facilitate automated fuel distribution to the site and for tank management.

8.2.27.5. The quantity of oil storage shall be in compliance with the requirements of Appendix M&E2 Paragraph 3.0.

8.2.27.6. All plant and equipment and installations shall be in accordance with the HTM's, SHTM's and National Health Service Model Engineering Specifications with amendments to the Model Engineering Specifications to meet the requirements of the HTM's and SHTM's.

8.2.28. Testing and Commissioning of Mechanical Services

8.2.28.1. All Buildings, Services and Equipment shall be commissioned by The Contractor to ensure that they are all compliant with the quality and performance specifications,

including manufacturer's recommendations, and that all systems operate to the Board's satisfaction.

8.2.28.2. The Contractor shall appoint an independent Commissioning Engineer to manage the Testing and Commissioning as detailed in Appendix M&E3

8.2.28.3. The Contractor shall as a minimum commission the works in accordance with the 'Guidance to Engineering Commissioning' published by The Institute of Hospital Engineers (1995).

8.2.28.4. The Contractor shall be responsible for demonstrating and certifying to the Board the successful completion of all commissioning, testing and compliance with all relevant standards.

8.2.28.5. The Contractor shall provide a comprehensive hard and soft copy sets of Operations and Maintenance Manuals together with the MiCAD as fitted drawings (hard and electronic) for all installed and commissioned Equipment. 3 number off sets of each to be provided.

8.2.29. Connection to Specialist equipment

8.2.29.1. The Contractor shall include for final connection of all specialist clinical equipment including MRI's Xray, Imaging, Theatre, CCU and general equipment as indicated in the Board's Equipment Schedules.

8.2.29.2. The main services shall be terminated within 1m of each piece of equipment with the final connection being carried out in conjunction with the equipment supplier.

8.2.29.3. Energy for all Board equipment shall be supplied from the most efficient source e.g. MTHW for dishwashers etc.

8.2.29.4. All terminations shall be in accordance with the manufacturers written recommendations.

8.2.30. Water Services Leak Detection

8.2.30.1. The Contractor shall provide leak detection to all external water mains and transfer pipework serving the satellite tanks located within the basements of the other buildings by means of pressure switches and interconnecting controls to provide an audible and visual alarm in the event of major leakage and provide alarm signals at the BMS front end within the FM Control Centre.

8.2.30.2. Leak detection shall also be provided by the Contractor at:

a) Perimeter of all ICT Server rooms;

b) Perimeter of all ICT Node rooms;

c) Plant room bunds adjacent to theatres, radiology and critical care areas; and

d) Tunnel sumps.

8.2.30.3. These shall provide an audible and visual alarm in the event of local leakage and provide alarm signals at the BMS front end within the FM Control Centre.

8.2.31. Smoke Control

8.2.31.1. The Contractor shall provide all Smoke Control and Smoke Extract systems and equipment to meet the agreed fire strategy for the hospital developments. All in accordance with (S)HTM 05-01, 05-02 & 05-03.

8.2.32. Stair pressurisation

8.2.32.1. The Contractor shall provide as required Stair Pressurisation systems and equipment to meet the agreed fire strategy for the hospital developments. All in accordance with (S)HTM 05-01, 05-02 & 05-03.

SECTION 8.3 - ELECTRICAL

8.3.1. General

8.3.1.1. The Contractor shall design, supply, install, test, commission and put into service all Electrical Building Services necessary to support the clinical activities of The Works. The following systems are indicative of those anticipated by the Board but are not exhaustive and it shall be the Contractor's sole responsibility to determine that all necessary systems (excluding Medical Equipment) are included.

8.3.1.2. Systems shall be designed, supplied, installed, tested, commissioned and put into service all in accordance with the relevant Regulations and Standards.

8.3.2. Electrical Distribution Systems

8.3.2.1. MV Systems

8.3.2.1.1 A new Primary Sub- Station shall be established within the Southern General Site, discussions have taken place with Scottish Power. The Contractor shall conclude these negotiations and include for all works associated with the Construction of the Primary Sub-Station.

8.3.2.1.2 Refer to Appendix M&E1 for Utility correspondence.

8.3.2.1.3 The new Primary Sub-station shall incorporate a composite Client/Utility Company outgoing 11kV switchboard; the switchboard shall be configured to meet Scottish Power Requirements together with metered outgoing ways to allow:

a) Two ring mains to be provided for the new Hospital system being designed by the Contractor; and

b) Two further ring mains for the Board's future configuration of the retained and future estates requirements.

8.3.2.1.4 Automatic protection shall be provided to route power through the rings to minimise downtime on all unaffected sub-stations after a cable or sub-station fault.

8.3.2.1.5 Distribution in relation to the Works is to consist of separate closed unit protected auto-switching ring mains dedicated to each hospital. Unit protection shall be by pilot cables and time graded relays.

8.3.2.1.6 A full instrumentation and protection system with multi-function meters, over-current and earth fault protection to the primary ring mains shall be provided complete with remote monitoring via the BMS and FM Control Centre.

8.3.2.1.7 Refer to drawing G1274E(60)01 for indicative schematic.

8.3.2.1.8 The new Primary Sub-Station shall be delivered to allow power to be made available in line with the Laboratory Practical Completion date. Refer to Volume 2.2 documentation for details of fall back scenario if this cannot be accommodated.

8.3.2.2. LV Systems

8.3.2.2.1 All wiring systems shall be of a form defined within BS 7671:2008 (IEE Wiring Regulations 17th Edition).

8.3.2.2.2 Main LV switchgear shall comprise metal cubicle pattern switchgear enclosures containing Air Circuit Breakers (ACB) and Moulded Case Circuit Breakers (MCCB) with electronic protection selected to allow short circuit, over-current and time grading for full co-ordination and discrimination.

8.3.2.2.3 Each LV section shall be fitted with automatic power factor correction to correct the local power factor to no less than 0.95, the correction equipment shall be located closed to the corrected load, with hard wired automatic drop out facility during generator run and reset on return to mains.

8.3.2.2.4 All ACB's and main distribution ACCB's shall be fitted with monitoring units to capture and relay switchgear status, energy consumption. harmonic content, operation counter and fault indication via the Central Power Monitoring System

8.3.2.2.5 The Central Power Monitoring System work-station shall be located within the main FM control room with a second work-station located in the Estates Office.

8.3.2.2.6 The Central Power Monitoring System shall provide hierarchical maps indicating active mimic of the complete power and stand-by power distribution systems.

8.3.2.2.7 Each Main Switchboard shall be fitted with a touch screen PC to provide access to the maps and interactive mimic screens.

8.3.2.2.8 A hard copy cellular wall mounted MV Mimic Diagram shall be provided by the Contractor in the Estates Office to allow system status to be recorded manually.

8.3.2.2.9 All main LV switchboards shall be constructed to Form 4 Type 6.

8.3.2.2.10 Sub distribution and final distribution boards shall be constructed to:

a) Form 4 Type 2 for Clinical Risk Categories 1 & 2; and

b) Form 4 Type 6 for Clinical Risk Categories 3, 4 & 5

8.3.2.2.11 Risk Categories determined as (S)HTM 06-01

8.3.2.2.12 For the Works, most of the areas fall into Clinical Risk Categories 3, 4 & 5. Robust electrical supplies shall be provided to serve:

a) General lighting;

b) Standby lighting;

c) General power;

d) Medical power;

e) Medical IPS power;

f) Mechanical services plant (ventilation, medical gases, water, chilled water etc); and

g) ICT Power

8.3.2.2.13 The tower of the Adult Acute hospital contains general ward areas. For the avoidance of doubt the Board require Building Services for the Wards appropriate to Clinical Risk Category 3.

8.3.2.2.14 Due to the adjacencies, dual transformers and switch panels shall be provided to form part of the dual-unified supply philosophy employed in the distribution design. Like the MV distribution, the LV distribution shall be divided into Side A and Side B circuits. Side A and Side B Main LV switch panels adjacent to transformer substations and separate compartments will be linked together via an automatic `*bus-coupler-bus-tie'* cable way and two ACB's.

8.3.2.2.15 A robust arrangement, shall be provided to ensure that a fault or problem on the Side A switch panel does not affect the Side B panel and vice versa.

8.3.2.2.16 The Contractor shall integrate the distributed transformers, main and secondary low voltage switch rooms within the development to suit the final layout while minimising cable losses and providing simple maintenance / replacement access.

8.3.2.2.17 All plant rooms are to be in accordance with (S)HTM 2023 and (S)HTM-06-01 and the contractor shall provide a detailed Plant Replacement Strategy.

8.3.2.2.18 Distribution of LV power within the tower will be by three-phase bus-bar ducting with full size phase, neutral and earth conductors. Multiple tap off units shall be provided at each floor to serve distribution boards for lighting and power together with 25% spare capacity.

8.3.2.2.19 Each tap off unit shall contain a circuit breaker to provide full electronic time graded fault protection. The energy monitoring strategy may incorporate meters within the tap off units however where split distribution boards are proposed multiple meters shall be incorporated in the split distribution boards. All meters shall be linked back to the central system to allow remote load monitoring and energy management.

8.3.2.2.20 Each rising bus-bar pair shall serve each of the 'wings' of the tower. In accordance with the dual-unified distribution, each bus-bar pair shall comprise separate Side A and Side B bus-bars rising through the building in separate risers.

8.3.2.2.21 The final solution shall provide full system resilience and allow the distribution equipment to be maintained with the minimum of disruption to services at ward and departmental level.

8.3.2.2.22 Final circuit distribution boards shall be Type A or B with miniature circuit breaker (MCB) and (RCBO's) boards to BS EN 60439-3 located within risers or dedicated cupboards. All distribution boards are to be lockable with a suited key system with sheet metal doors to prevent unauthorised access. All boards shall be provided with ASTA certified bus-bars (rated to suit the local prospective fault current) neutral and earth terminals for each single phase way, clean earth facilities, extension spreader boxes for incoming cables separate CPC's, RCBO connections and flexible split metering facilities.

8.3.2.2.23 Distribution boards with plastic enclosures must not be used.

8.3.2.2.24 Power for all Mechanical, Public Health and Specialist systems shall be provided with resilience and redundancy to allow maintenance to be carried out on specific plant and distribution paths without the requirement to take other plant out of service.

8.3.2.2.25 All power circuits to be sized in accordance with BS7671.

8.3.2.2.26 Switchgear, Control panels etc, shall be securely located in plant areas and distribution cupboards not able to be accessed by public, patients or non FM staff.

8.3.2.3. Cables and Containment

8.3.2.3.1 Primary LV sub-main distribution is to be by bus-ducts, bus-bars and multi-core XLPE/SWA/LSF (low smoke & fume) cables to BS6724 carried on ladder rack (larger cables) and/or cable tray/basket (smaller cables). Primary LV cabling and containment is to be concealed within dedicated risers, cable trenches and risers throughout the building.

8.3.2.3.2 Side A and Side B cables and containment will be segregated and run by different routes to the final outlet as far as practicable, this requires Side A and Side B final circuit cabling to be run in separate containment up to bed head trunking units.

8.3.3. Lighting and Power

8.3.3.1. Interior Lighting

8.3.3.1.1 The lighting design must be functional for clinical use in accordance with the CIBSE and Society of Light and Lighting guides together with relevant SHTM's, SHBN's etc., the Contractor shall also ensure that the overall lighting concept is co-ordinated with the building structure and the project aesthetic requirements. Particular attention is required within entrance, circulation and non clinical areas where a mixture of LED's, conventional low energy fittings and retail lighting techniques shall be utilised to enhance the internal and external building experience in line with the architectural intent.

8.3.3.1.2 Where high efficient fluorescent lamps are not appropriate e.g. for aesthetics, signage and lighting of art works etc, the use of high output LED units and compact discharge sources shall be selected in lieu of tungsten lamps.

8.3.3.1.3 The Contractor shall provide and install high efficiency luminaires, utilising high frequency electronic control gear to provide occupiers with improved visual comfort while reducing noise levels and running costs.

8.3.3.1.4 Where VDU's are being used, the Contractor shall ensure that the lighting scheme complies with "CIBSE Lighting Guide LG3 and LG7.

8.3.3.1.5 The Contractor shall ensure that corridor lighting is multi circuited to facilitate use of 100% or 50% of the luminaires. Where the corridor is over 15 metres in length interlaced zoned lighting shall be provided. This resilient strategy must be imposed on the lighting control system design to ensure that lighting in each area is partially retained in use during maintenance of the alternate area distribution board and alternate section of the lighting control system.

8.3.3.1.6 Night lighting shall be provided within all corridors either by individual fittings or by selective switching of the general corridor wall/ceiling luminaires. The Contractor shall ensure night lighting in corridors shall not spill into patient bedrooms, or other bedded areas. Night lighting shall be provided at nurse stations, patient bed areas and locations where call systems are installed.

8.3.3.1.7 Ward night lighting override control to be fitted at nurse stations.

8.3.3.1.8 Luminaires shall be located to provide ready access for lamp changing and maintenance, whilst still providing the recommended level and quality of illumination to the area.

8.3.3.1.9 All signage is to be illuminated to ensure ease of legibility without causing glare.

8.3.3.1.10 Where sealed fittings are required e.g. in treatment rooms, isolation suites, theatres etc. the diffusers shall be composite type with easy clean flat surfaces with the optics incorporated within a stable sandwich construction.

8.3.3.1.11 Treatment Room luminaires which provide the general lighting shall be controlled by at least two circuits depending on the arrangement of fluorescent tubes in each fitting. The design of these luminaires must provide ease of access for lamp changing.

8.3.3.1.12 In ward areas the lighting shall be integrated with the bedhead services solution with combination wall mounted dimmer controlled fittings providing patient rest, watch light, reading light and examination facilities.

8.3.3.1.13 Where bed areas are used for intervention and treatment an overhead lighting scheme supplemented by bedhead units providing patient rest, watch light, reading light and examination facilities shall be provided.

8.3.3.1.14 Light fittings shall not be mounted immediately above patient positions.

8.3.3.1.15 All fluorescent lamps used in clinical areas shall have as a minimum a colour rendering capability of ≥ 85 CRI. For practical reasons consideration should be given by the Contractor to using the same luminaire in both Clinical and Non-Clinical spaces within the same ward. A reading light with an on/off switch shall be provided at each bedhead location and at the door. The Contractor shall provide an additional switch on the nurse call handset.

8.3.3.1.16 Where luminaires of the fully recessed type (modular and / or downlighter) are installed within fire rated ceilings, they should be provided with a one hour rated fire canopy. The Contractor shall also ensure that they maintain the integrity of the ceiling and that the canopies are tested to “BS 476 Parts 20 and 23, clause 5. The Contractor shall also ensure that all canopies meet the requirements of “Class O materials”.

8.3.3.1.17 Hazardous areas shall be provided by the Contractor with the appropriate classified luminaries.

8.3.3.1.18 Luminaires with prismatic diffusers installed on fire escape routes shall be fitted with flame retardant diffusers to TP (a) classification, minimum Class 3 surface spread of flame.

8.3.3.1.19 Each high dependency and recovery bed position shall have a wall or bed-head trunking mounted, examination lamp with integral switch.

8.3.3.1.20 Sealed food factory type luminaires shall be provided by the Contractor in areas in which food is prepared, cooked and stored.

8.3.3.1.21 Accessible plant areas, roof void areas, ducts, lift motor rooms, shafts and similar utility areas shall be illuminated utilising suitably IP rated luminaires.

8.3.3.1.22 Over-mirror lights shall be provided by the Contractor in all en-suites, shower rooms bathrooms and in all Male and Female changing rooms.

8.3.3.1.23 Lighting in toilets accessible to the public shall be fitted with blue light effect to minimise unsocial activities.

8.3.3.1.24 Laser and x-ray warning lights shall be provided by the Contractor outside theatres, major treatment rooms and x-ray rooms interfaced with the laser / x-ray machines.

8.3.3.1.25 Lighting levels to be in accordance with CIBSE guides and SHPN's. Theatre Pendants and lights to be selected by Board. Contractor to allow for all services.

8.3.3.2. Lighting Control & Wiring

8.3.3.2.1 The Contractor shall provide automatic control of lighting using natural light level sensing and the BMS scheduling capability for unoccupied periods (with movement sensing override for safety) primarily in circulation areas and large open workspaces.

8.3.3.2.2 In plant rooms additional controls interfaced with the access control system shall be provided at main plant room entrances to override the automatic off signals, allowing staff to carry out inspection and maintenance outwith the normal reach of the presence detection system.

8.3.3.2.3 The Contractor shall ensure that the lighting design incorporates a flexible switching arrangement to allow for varying activities within each room and for cleaning purposes. Switches for all public areas should be positioned by the Contractor so that unauthorised persons cannot switch the lighting.

8.3.3.2.4 Lighting within all WC's, Staff WC's and changing rooms shall be controlled via passive infrared sensors/movement detectors or similar, with adjustable time control facilities.

8.3.3.2.5 Lighting within clinical areas shall incorporate manual override controls

8.3.3.2.6 The Contractor shall arrange the circuiting of luminaires to control groups of fittings in order to provide flexibility of switching arrangements. Such a facility is particularly

important in large spaces where the level of daylight is not uniform and artificial lighting is likely to be needed for long period in areas remote from windows.

8.3.3.2.7 The Contractor shall provide the luminaire isolation requirements of SHPN57 e.g. all luminaires to be provided with means of safe isolation to prevent isolation of adjacent fittings for replacement.

8.3.3.2.8 The Contractor shall provide alternative circuits together with two-way or intermediate switching at all section doors and corridor direction changes for lighting in corridors and circulation areas.

8.3.3.2.9 Where multi-gang lighting control switches are required the Contractor shall provide a label fixed to the grid under the switch plate, indicating the switches are fed from different supplies.

8.3.3.2.10 The Contractor shall provide the Lighting requirements of SHPN57 e.g. all lighting in Critical Care Areas shall be dimmable with local controls. (This is in addition to the general requirement for dimmable lighting which shall be provided throughout for the purpose of energy control and commissioning setting).

8.3.3.2.11 All small power accessories and Isolation devices shall be engraved with the accessory function.

8.3.3.2.12 Circuit designation labels shall be provided at all electrical accessories.

8.3.3.2.13 All power cables shall be provided with circuit references adjacent to terminations, the references shall be co-ordinated with the MiCAD As Fitted drawings and asset register tags.

8.3.3.3. Emergency Lighting

8.3.3.3.1 The Contractor shall connect the emergency lighting to addressable self-monitoring control panels with each luminaire containing an interface unit that shall be monitored and controlled by the control panel which shall report to the BMS system. The Contractor shall demonstrate that the emergency luminaires are automatically tested in accordance with the requirements of the British Standards.

8.3.3.3.2 Local circuit monitoring shall be provided to protect all areas.

8.3.3.3.3 The emergency luminaires may be of either the maintained or non-maintained variety. The Contractor shall ensure that they are powered by a suitable battery supply connected by an auto-changeover switch or utilise self-contained battery packs within luminaires (3-hour rated). The Contractor shall ensure that the emergency luminaires will be automatically energised in the event of a failure to the local lighting circuit.

8.3.3.3.4 The Emergency Lighting shall comply with BS5266 and (S)HTM2011.

Standby Lighting

8.3.3.4.1 The Contractor shall provide 100% standby lighting via the site generation system to enable normal activities to continue during the loss of a normal mains supply.

8.3.3.4.2 The Contractor shall ensure that the quality of standby lighting is equal to that of the normal lighting at the task points.

8.3.3.5. Wiring

8.3.3.5.1 Wiring will be generally be carried out using LSF insulated single cables run in concealed steel conduit and trunking. Connections to all suspended ceiling mounted fluorescent luminaires and non modular lights shall be made via a plug & socket/ lighting control module arrangement and a reasonable length of flexible heat resisting sheathed cable. Flexible cables shall not be trailed across the top of ceiling grids.

8.3.3.5.2 Modular wiring systems may be considered for lighting in non clinical areas, however if these are put forward the components must be sturdy, proven in use with long lifespan.

8.3.3.5.3 Loop In system in metal conduit to be utilised for wiring in areas with fixed ceilings.

8.3.3.6 Small Power

8.3.3.6.1 Where required small power circuits shall be provided in accordance with the MEIGaN.

8.3.3.6.2 Where required small power circuits shall be provided from Insulated Power Supplies.

8.3.3.6.3 Where required small power circuits shall be provided from Uninterruptible Power Supplies (UPS).Final circuits shall be interlaced fed from either side of the dual power distribution systems.

8.3.3.6.4 All clinical circuits shall be wired in metal conduit and containment.

8.3.3.6.5 Power shall be provided at docking stations for recharge of robotic units.

8.3.3.6.6 The Contractor shall provide the small power requirements of SHPN57 e.g. via ceiling mounted medical supply units rather than wall mounted outlets in Critical Care Areas.

8.3.3.6.7 The Contractor shall provide the power requirements of SHPN28 e.g. All Theatres shall be provided with two articulated pendants

8.3.3.7 External Lighting

8.3.3.7.1 The perimeter, including all entrance canopies and pedestrian walkways, to all buildings shall be lit by the use of energy efficient luminaires mounted in canopies, on walls, columns and/or bollards. All on-site access roads, service yards and areas, footpaths and cycle ways shall be lit to levels compatible with the GCC Highway standards. The lighting shall satisfy the requirements of BS 5489. Lighting shall be provided by the Contractor to all direction signs around the Site where these are not adequately illuminated by external lighting.

8.3.3.7.2 The system shall also provide a welcoming atmosphere to the main entrances.

8.3.3.7.3 All access routes to plant areas shall be lit to provide safe access for maintenance.

8.3.3.7.4 All wall mounted luminaries shall be fed by back entry. Cable runs on the outside of buildings shall not be permitted.

8.3.3.7.5 All external columns, bollards etc. shall be provided with fused cut-outs and adequate termination facilities for cabling.

8.3.3.7.6 When selecting luminaires, the Contractor shall give consideration to light pollution, vandalism, security, energy efficiency and local residents. The Contractor shall ensure that the installed scheme meets the requirements of the Civil Airport Authority (CAA).

8.3.3.7.7 The Contractor shall provide warning lighting on the main building and flue in accordance with the CAA requirements.

8.3.3.7.8 The Contractor shall provide helipad lighting in accordance with the CAA requirements and the Hospital Guides.

8.3.3.7.9 The BMS shall control external lighting to minimise energy consumption, by photocell or movement sensor, the lamp type selected must be sympathetic to frequency of switching dictated by the control means.

8.3.3.7.10 The Contractor shall utilise solar powered lighting where this can be shown to be effective on the site over a reasonable time period; these shall be supplemented by conventional luminaires when the output is not available.

8.3.3.7.11 The Contractor shall wire luminaires on multiple circuits to avoid loss of light to whole areas in the event of a maintenance and mains/circuit failure.

8.3.3.7.12 External lighting installations shall be designed to provide safe lighting levels in accordance with CIBSE guides and “Secure by Design” requirements.

8.3.3.7.13 Back-up floodlighting shall be provided from FM building into yard and buildings onto entrances pathways and roads should the ‘Contractors Street Lighting’ fail.

8.3.4 Fire Alarm and Detection Systems

8.3.4.1 The Contractor shall ensure that the fully addressable automatic fire detection system integrated within the BMS for The Works is fully compliant with the performance criteria laid down under (S)HTM05 and BS 5839. Refer to Fire Strategy Volume 2.1 Paragraph 5.11.

8.3.4.2 The systems are to be designed to BS 5839 category L1 and are generally to be analogue addressable with aspirated detection provided in areas including Theatres, X-ray, MRI, and ICT rooms and all other 'specialist suites'.

8.3.4.3 All aspirating air sampling units shall be located away from public areas, either in service cupboards or accessible services risers. All circulation doors shall be installed with integrated electro magnetic door hold open devices with all security door locks interlocked for evacuation in a zoned fire condition. The locks and hold open devices must not reduce the rated fire integrity of the doors.

8.3.4.4 The aspirated systems shall be capable of providing identification of alarms or faults within individual sampling pipes.

8.3.4.5 The system design shall be integrated with the requirements of the clinical requirements.

8.3.4.6 A Fire Control Station shall be set up within the new FM Building providing command and control for the life safety systems including PC Graphics for:

a) Fire Alarm Detection and annunciation;

b) Sprinklers (monitoring);

c) Smoke dampers (monitoring and control);

d) Fire fighting systems (monitoring and control);

e) Stair pressurisation (monitoring and control);

f) Helipad systems (monitoring);

g) Cold smoke extract (monitoring and control); and

h) All systems provided in accordance with the agreed fire strategy.

8.3.4.7 The Contractor shall liaise closely with the following;

a) Board's Fire Officer;

b) Glasgow City Council; and

c) Strathclyde Fire Brigade

and ensure that an agreed fire alarm cause and effect matrix is provided by the Contractor prior to detailed design to ensure that the systems support the overall fire strategy.

8.3.4.8 Control panels are to be provided in the Control Room and at the main entrances (or at the entrances to which the fire service are to attend, if different), with additional indicator panels provided throughout the building to allow staff to respond in accordance with local evacuation procedures, and to guide the fire service to the source of the alarm.

8.3.4.9 The control panels shall be fully networked with resilient connections to the site based PC font end with map facilities and remote graphics monitoring in Hillington via a dedicated link.

8.3.4.10 The system shall be equipped with sufficient sounders to maintain sound outputs in different areas in accordance with (S)HTM 05, and incorporate visual strobe indicators for a fire condition in accordance with the requirements of the Disability Discrimination Act.

8.3.4.11 The Contractor shall ensure that The Works are divided into zones by ward / department / unit area as well as by floors with mimic or repeater panels at each nurse station (or equivalent) and at least one panel per floor located in a central circulation area. In the event of fire The Works shall be capable of individual zone evacuation with all other zones receiving awareness signalling.

8.3.4.12 The Contractor shall ensure that all fire alarm panels are capable of giving details of system status for fire, fault, and alarm conditions including full text descriptions of location at all nodes and staff base positions.

8.3.4.13 All panels shall be capable of data / event logging and report generation.

8.3.4.14 Manual call points must be provided at every exit and staircase with no point in the building being more than 30m travel from a call device.

8.3.4.15 Fire Alarm Evacuation facilities shall be provided at each main node, these shall require a double action e.g. break frangible lid and then break glass unit.

8.3.4.16 Materials and equipment shall be the catalogued products of manufacturers regularly engaged in production and installation of automatic fire detection systems and shall be manufacturer's latest standard design that complies with the relevant Standards and Regulations.

8.3.4.17 The Contractor shall ensure, and provide necessary documentation to confirm that this system will have a documented history of compatibility by design for a minimum of 15 years. Future compatibility shall be supported for no less than 10 years. Compatibility shall be defined as the ability to upgrade existing systems to current level of technology, and extend new field panels on a previously installed network.

8.3.4.18 The Contractor shall take into account the need for maintaining patient security during alarm testing i.e. the testing regime shall not allow for ordinarily secure doors to open as a result of routine testing.

8.3.4.19 The Contractor to provide fire suppression systems in line with the proposed fire strategy, which shall include provision of gaseous systems in ICT rooms and Electrical Sub-stations together with the special requirements for the Helipad.

8.3.4.20 The Contractor shall provide fire hydrants to meet the Glasgow Council's Building Control Department and Strathclyde Fire Brigade requirements.

8.3.4.21 Progressive horizontal evacuation in patient areas is to be facilitated by each fire resisting sub-compartment being on a separate alarm zone, and by the use of two stage (evacuate/ alert) alarms. To avoid unnecessary disturbance, staff elsewhere in the building who are required to perform particular tasks in the event of a fire are to be automatically alerted by pagers or electronic communications devices to avoid the sounding of the fire alarm.

8.3.4.22 In areas where patients can escape unaided and in non-patient areas the audibility of the fire alarm should be in accordance with BS 5839. However, in other areas an audible alarm may be unacceptable and the use of visual devices is to be provided in areas such as very high dependency patient areas, these include operating theatres, ITU, audiology, plant areas, service yards, imaging and areas with high ambient noise etc.

8.3.4.23 The fire alarm signal is to be transmitted automatically to an alarm receiving centre via a monitored line to supplement the control room operation.

8.3.4.24 The fire alarm system is to contain links to all necessary ancillary services such as;

a) Automatic Door Releases;

b) Door Control Systems;

c) Access Control Systems;

d) Ventilation Systems;

e) Lifts etc; and

f) Robotics

8.3.4.25 All wiring to be MICC with red LSF sheath.

8.3.5 Telephone Distribution Systems

8.3.5.1 The Hospital requires efficient, high quality telecommunications service provided to both its internal and external customers on a 24-hour basis. The Contractor will provide a robust resilient high quality cabling infrastructure, with appropriately selected switches provided by the Hospital.

8.3.5.2 Cable links with existing Telephone equipment throughout the site will be required, with all necessary underground ducts together with copper and blown fibre provided by the Contractor.

8.3.5.3 Mobility will be covered with wireless handsets on the IP network.

8.3.5.4 Analogue line facility to be provided for faxes rather than VoIP.

8.3.5.5 10% fall back lines to be provided by the Contractor throughout the works, present technology is for PABX and analogue phones. (PABX by the Hospital, This may be simplified by technology improvement but allow analogue distribution in the meantime).

8.3.5.6 The Contractor shall supply onsite paging facilities for the works to meet the standards provided by the current service provider Multitone Electronics plc, Unit 33 Geddes House, Kirkton North, Livingston, West Lothian, EH54 6GU. Space to be allocated in node rooms for Multitone paging equipment.

8.3.5.7 New Aerial/s to be provided to ensure full coverage throughout the works.

8.3.5.8 Emergency Voice patching to be colour co-ordinated (grey).

8.3.5.9 Field cabling racks and cabling to be set up for Power over Ethernet to minimise requirement for power plugs at feature phones.

8.3.5.10 Payphones will be provided under the current managed service Premier Telesolutions, 10 Alexandra Way, Ashchurch Business Centre, Tewksbury, Gloucestershire, GL20 8NB. The contractor shall provide telephone outlets and power at required areas and the managed payphone company shall provide the hardware and service. Space to be provided for node cabinet etc.

8.3.5.11 A separate Comms room and Office shall be provided for the patient telephone lease company to accommodate their switch and billing units,

8.3.5.12 The Contractor shall include for Analogue lines to be provided for all remotely monitored systems including: Cardiac, Fire, Lifts, VIE, BMS, etc. and for all systems provided by the Contractor.

8.3.5.13 Lift cars to have two comms connections, one for remote monitoring of performance and one for interlinking to the Hillington Control Centre.

8.3.5.14 GEMS to be provided with dedicated incoming lines for their network and telephone switch equipment.

8.3.5.15 Contractor to include 6 ducts from each main server room to the main hospital boundary for Voice/Data Use to suit the agreed communications vendors.

8.3.5.16 Contractor to include 2 ducts from each main server room to the Laboratories.

8.3.5.17 Contractor to include 2 ducts from each main server room to the Estates Department.

8.3.6 Information Technology (IT) Equipment and Distribution Systems

8.3.6.1 Overall Requirements.

8.3.6.1.1 The Board recognises the importance of information and communication in all aspects of its work; improved communication enables improved efficiency.

8.3.6.1.2 The continued development of technologies provides an increased potential to simplify systems and reduce duplication allowing the Board a more complex management system of greater value to users and the Board itself.

8.3.6.1.3 This specification is intended to co-ordinate the various aspects of communication systems within the Board's operations. The specification does not describe all individual systems and their operation in great detail, but identifies the various communication systems, the Board's current strategies for their development and maintenance, the obligations placed on the Contractor.

8.3.6.2 The Contractor shall design, construct and put into service a comprehensive and robust infrastructure (e.g. containment, cabling, power, A/C, Racks, raised floors, floor grills, comms rooms and server rooms) for The Works in accordance with the requirements of the Board's Requirements.

8.3.6.3 The infrastructure shall be commissioned, labelled and documented prior to handover to the Board.

The Board will install hardware (e.g. servers, comms hardware, PCs, printers, scanners), make the final connections (at the application and in computer rooms) and commission the operational system.

8.3.6.4 The Contractor shall provide only those systems that are fully compatible with the Board's operational Information Technology systems.

8.3.6.5 The Works will be served by an N+1 server room distribution. These shall be provided internally within the new development. The server rooms should have dedicated air conditioning, fire suppression, generator back up with diverse routed power and redundant UPS systems to maintain resilience in the IT network.

8.3.6.6 The 2 main comms rooms will house servers for local distribution whilst providing diverse links with existing comms rooms throughout the Hospital estate and further a field. The Contractor shall design each room to accommodate 6 comms racks, 10 server racks and 10 equipment racks, sufficient racks for the Contractors field cabling together with sufficient racks for the Contractors BMS, CCTV, and Entertainment equipment etc. together with space provision for access round racks and work bench laptop space. All racks to be provided by the Contractor, racks are to be lockable with a suited key system for Voice, Data, combined Voice and Data, CCTV, BMS etc.

8.3.6.7 Within these principal ICT rooms, telephony servers will be provided by the hospital.

8.3.6.8 As above multiple racks shall be provided by the Contractor allowing sufficient space for network expansion. Racks shall be 42U, 800mm x 1000mm (space for 1200mm) suitable for high velocity through ventilation based on hot/cold isle philosophy.

8.3.6.9 Data risers shall be established to interlink the main server and hub rooms, the risers shall be of sufficient size to accommodate 25% network expansion and modification.

8.3.6.10 The Contractor shall provide the requisite number of hubs to suit their proposed building layout to ensure compliance with the cable length restrictions. Hubs shall be sized to accommodate all of the Contractors Equipment together with a 42U rack dedicated for the Board's use.

8.3.6.11 It is envisaged that the Board will be using voice over IP for telephony.

8.3.6.12 It is envisaged that the Board will be using wireless technology (RFID) for public, staff data, patient monitoring, equipment tracking and automated transfer system connections, access points shall be provided by the Contractor throughout the facility to meet these onerous demands. The access points shall be located to meet the various system demands throughout all areas of the works. The Contractor shall provide a robust system with area coverage overlap and resilient interconnection to the network suitable for supporting the full RFID requirements.

8.3.6.13 The Contractor shall ensure that the lighting in all ICT rooms is sufficient to allow for safe working on plant and equipment. No water, steam or waste services shall be located either in or directly above the ICT room due to risk of water damage.

8.3.6.14 Infrastructure provided by the Contractor shall be fully compliant with the requirements of the NHSIA N3 project.

8.3.6.15 The Infrastructure shall provide the Connectivity requirements of SHPN57 e.g. Wide bandwidth service etc.

8.3.6.16 The Infrastructure shall provide the Connectivity requirements of SHPN28 e.g. all theatres to be provided with cabling to theatre lights to allow for camera connection to seminar room and general telemedicine system, refer to section 8.1.34 for Telemedicine details.

8.3.7 ICT Workshop

8.3.7.1 The ICT staff workshop shall be provided adjacent to each server room; the workshop shall have suitable environment and services to allow equipment to be tested.

8.3.8 Wireless Networks

8.3.8.1 The Contractor shall provide a secure wireless network which supports the Board's requirements as set out below:

8.3.9 External Services (WAN)

8.3.9.1 As noted above multiple ducts shall be provided by the Contractor from the network vendors external access points (ducts) to each of the Server rooms. These shall be of a size suitable for external grade fibre cable(s), and copper multi-core cable(s).Further ducts will be required providing links to existing building within the estate. The Contractor shall ensure that the Board is granted free access to these ducts at all times so that it may access communications services from any third party it wishes to nominate.

8.3.10 Cabling

8.3.10.1 Cabling systems shall be installed to the highest ratified specification for IT wiring systems as defined in EN50173 and EN 50173 or equivalent standard.

8.3.10.2 All Fibres are to be single mode blown type, mesh star configuration with minimum of 20 pairs backbone.

8.3.10.3 The Contractor shall demonstrate that the proposed copper structured cable is suitable for the latest available known technology at the time of tender and be as a minimum CAT6 Augmented.

8.3.10.4 The jacket construction of the cable must be suitable for the application and details must be provided in the tender. The installation shall also cater for two outlets at every workstation being able to support a VoIP installation in line with the agreed schedules.

8.3.10.5 All voice cabling installed shall allow for an agreed spare capacity over and above the spare requirements stated in the general section.

8.3.10.6 Cables, which pass through the infrastructure of the buildings, shall be suitably protected against damage. Through walls and floors this shall involve an appropriate type of sleeve, through any form of metalwork or stiff plastic then a rubber grommet shall be used.

8.3.11 Data Patch Panels

8.3.11.1 The Contractor shall take cognisance of the ICT requirements and provide patch panels to meet the outlet requirements. 100% patch leads shall be provided with colours and lengths to be confirmed.

8.3.12 Data Outlets

8.3.12.1 The data and voice outlets will be RJ45, CAT6 augmented type with angled connector.

8.3.13 Public Address Systems

8.3.13.1 The Contractor shall provide a public address system to allow zoned emergency messaging throughout the hospitals, Lifts, Building links, tunnels, FM and Energy Centre together with external mustering areas, supplemented by local background music and zoned PA to allow entrances, receptions, atria, changing rooms and waiting areas to operate in line with the Clinical Requirements.

8.3.13.2 The emergency messaging shall be controlled from two locations and the system shall incorporate pre-recorded coded messages.

8.3.14 Staff Location System

8.3.14.1 Pagers to be integrated in the BMS and Telephone Systems to suit the Board Requirements.

8.3.15 Patients/Nurse Call Systems/Personal Attack Alarm

8.3.15.1 Nurse Call Systems

8.3.15.1.1 The Contractor shall provide a comprehensive Nurse Call System integrated within the BMS networking systems at all bed locations (and en-suites), Nurse Stations, Toilets and Showers, TV Rooms and all other areas frequented by patients. The system must be capable of emitting both audible and visual warnings for the following situations:

a) To summon a nurse (Patient to Nurse); and

b) To highlight a medical emergency (Nurse to Nurse).

8.3.15.1.2 The installation shall have the following functionality;

Ensure that both visual and audible warnings are sited in positions that enable the appropriate staff to respond to the exact location of the call both efficiently and effectively.

Ensure that the warnings, both visible and audible, should be specific to the type of emergency and must be consistent throughout all areas of The Works.

Provide systems that comply fully with the requirements of relevant S/HTMs and S/HBNs. In addition these systems shall enable on-screen alerts at locations to be agreed with the Board.

Ensure that the nurse call button / cord meet the need of the particular patient that may be required to use The Works. Patients may have cognitive problems or have difficulties with mobility.

8.3.15.1.3 A nurse call system is to be part of every bed head service. A patient hand unit with a call button is to link to an indicator panel at the Ward Nurses Station. The system is also to link to call buttons in other areas such as WC's, Bathrooms and Quiet rooms. The system shall include the following facilities:

a) Ensuite protection;

b) Over-door indicator lights;

c) Ability to link calls between adjacent wards; and

d) Cardiac arrest or 'crash' call alarms taken back to a 24 hour manned point to allow the 'crash' team to be paged

8.3.15.1.4 The Contractor shall provide a flexible system which annunciates within the nurse station with route indicators to the activated unit. Each bed system shall be transferable to adjacent and remote nurse stations via a hierarchical password control system to meet the Nursing requirements of the flexible ward configurations.

8.3.15.1.5 The system configuration shall be interlinked with the central PC based bed management system.

8.3.16 Clinical Equipment Alarms

8.3.16.1 Each clinical drug cupboard shall be alarmed as follows;

a) Light externally over door to room

b) Back to Nurses station

c) Back to local office to warn of unauthorised access.

8.3.16.2 The Contractor shall provide a system by which clinical Equipment alarms can be annunciated at a designated location during working hours but out of hours alarms can be directed to a designated member of staff, off-site. The Contractor shall determine all Equipment alarms of this nature.

8.3.17 Call Systems

8.3.17.1 The call systems or speech transfer systems shall be provided by the Contractor where normal speech is impaired by the use of glass security partitions or similar barriers. These shall generally be at public entrances and secure receptions these should contain staff control unit, speakers and microphones.

8.3.18 Induction Loops

8.3.18.1 The design of The Works shall include a comprehensive system of induction loops (fixed or portable) with suitably located dedicated sockets and signage such as to;

a) Reception areas;

b) Bedded bays;

c) Single Rooms;

d) Treatment Rooms;

e) Consulting Rooms;

f) Counselling Rooms; and

g) Interview Rooms.

8.3.18.2 Additionally, the design shall reflect these requirements in areas such as offices where staff may require this facility.

8.3.18.3 The Contractor shall provide induction loop or infrared systems in accordance with DDA requirements. The final provision and locations are to be agreed with the Board, dependent upon the final design solutions.

8.3.18.4 Portable hand held systems for use by visitors shall be made available at Reception. This shall ensure that the parts of The Works not provided with Induction Loops or infrared systems are made accessible to all users.

8.3.18.5 The “ear” symbol denoting the presence of an induction loop shall be prominently displayed. A sign shall explain clearly to people using hearing aids how they can benefit from the Induction Loop.

8.3.18.6 Alternative, proven systems that do not raise issues of patient confidentiality can be proposed by the Contractor to provide facilities wide coverage as appropriate.

8.3.18.7 The Induction Loop system shall be interlinked with the speech transfer system in order to provide a neat and unobtrusive configuration and an aesthetically discreet installation.

8.3.19 Television Installation

8.3.19.1 The contractor shall negotiate with a patient entertainment system supplier and provide the required backbone broadband cabling and wire ways and control room facilities for a leased patient entertainment system, to be installed at all bed heads in the Adult Hospital. Bed Head systems to provide:-

a) Television;

b) Radio;

c) Telephone; and

d) Game and internet services (optional at point of use)

Together with the associated infrastructure to allow these to be charged on a pre-payment basis.

8.3.19.2 Within areas were a conventional bedside screen is not suitable, the Contractor shall provide an alternative solution for location of the screen.

8.3.19.3 The Contractor shall provide a fully operational patient entertainment systems in the Children's Hospital to provide:-

a) Television;

b) Radio;

c) Interactive games;

d) Music;

e) Art; and

Protected Internet services.

8.3.19.4 In addition to facilities at each bed head, in the Children's Hospital, entertainment systems consisting of TV, DVD and games systems will be provided in the main waiting and play areas. These will require a central TV and radio reception and distribution system provided by the Contractor.

8.3.20 TV & Radio Facilities

8.3.20.1 The Contractor shall provide the infrastructure for reception and distribution of television and radio for use by patients, visitors and staff. This shall include external aerials / dishes, containment and cabling / distribution to enable radio (inc local hospital radio), and both digital satellite / terrestrial TV services to be distributed throughout The Works.

8.3.21 Lightning Protection & Earthing

8.3.21.1 The Contractor shall provide a lightning protection system for the protection of the structure, the contents and occupants. The lightning protection installation shall be in accordance with BSEN62305. The lightning protection system shall comprise of air termination network, down conductors, earth termination network, type 1 and type 2 surge arrestors and all required equi-potential bonds.

8.3.21.2 Surface fixed down conductors are not acceptable.

8.3.21.3 The Contractor shall provide a system of earthing comprising earth electrode systems, main and supplementary earth bars, main and supplementary equi-potential bonding, to ensure sufficient and fast operation of protective systems in the case of earth faults.

8.3.21.4 The earthing system shall comply with (S)HTM 06-01, BS7430, and BS7671 and with the Electricity at Work Regulations.

8.3.22 CCTV/Security Systems

8.3.22.1 General

8.3.22.1.1 The systems shall be closely integrated with the BMS to provide an integrated central monitoring and management facility. The Contractor shall provide security systems specifically designed to meet the requirements of each department / unit.

8.3.22.1.2 The systems shall present a secure and reassuring environment for staff, patients and visitors by providing appropriate security measures within the particular restraints imposed by clinical demand and personal freedom.

8.3.22.1.3 The design for all security systems shall be in line with the general principals of the approach recommended by Secured by Design refer also to section 7.

8.3.22.1.4 Local security systems alarm annunciation shall be provided within wards and at the central security facilities with remote monitoring and control off site at the Hillington Control Centre.

8.3.22.1.5 The main receptions shall also incorporate a CCTV monitor positions each with a flexible control facility to allow a combination of monitoring arrangements over two 20” Flat LCD screens.

8.3.23 Panic Alarm Systems

8.3.23.1 The Contractor shall provide panic alarm systems integrated within the BMS. Staff attack alarms will be provided by activation of a fixed discrete push button, hard wired to the underside of reception desks. All principal reception desks and staff bases will be provided with this facility.

8.3.23.2 Staff mobile panic alarms will be provided with link to receptions and security in the following areas:-

a) Accident & Emergency

b) Imaging (out of hours)

c) Pharmacy

d) Emergency Decontamination

e) Out of Hours Service Areas

8.3.23.3 All panic alarms fixed and mobile shall be monitored by the on site FM Control Centre and the remote Hillington Control Centre this shall provide a description of the alarm activation highlighting the precise location of staff members in distress.

8.3.24 Paging, Personal Attack Alarms

8.3.24.1 The Hospitals shall be installed with a radio-frequency network to facilitate the use of paging and personal attack alarms integrated within the BMS. This radio-frequency network shall include location beacons so that the exact location of pagers and attack alarm devices can be determined.

8.3.24.2 The radio-frequency network infrastructure shall be compatible with the Identicom personal security device, which is used widely across the NHS to provide lone-worker protection.

8.3.24.3 Panic buttons linked back to the FM Control Centre, and with a loud alarm at the scene, are to be installed at Reception desks and in Treatment Rooms

Decontamination room to be secured and fitted with Panic Alarm and two way intercom to adjacent area.

8.3.24.4 Treatment space in the Emergency Department to host CatA prisoners required (incl terrorist suspects transferred from 'G' Div HQ at Helen Street). This as well as decontamination room to have discrete entrance (double bank decontamination facility, have lobbies and two areas and may require armed escorts to be present. Provide lobby, seating, WC etc to support together with controlled ingress and egress and airlock type doors.

8.3.24.5 Police room in Emergency Department area to be fitted with panic alarm facilities.

8.3.24.6 The system shall be networked with the central management system and linked with other systems to allow:

The unlocking of doors along all escape routes to assist evacuation in an emergency.
Possible automatic locking of doors within an area if a panic button is pressed.
Activation of a security camera in a particular location when a door is opened to provide a picture of the person entering.

8.3.24.7 All A&E entrances shall have Video Access Control System for use at night time so that security staff can control entry from the desk positions in accordance with the Secured by Design recommendations.

8.3.24.8 General staff panic alarm system shall be integrated within the Wi-Fi network to allow staff to operate two stage affray facility within the hand held electronic PDA type equipment. This shall be configured to triangulate the location of staff members in distress and provide a department location.

8.3.25 Alarms & Intruder Detection System

8.3.25.1 The Contractor shall provide an IDS System within The Works to provide out of hours security cover. This shall be provided by PIR Detectors located within the corridors, rooms with ground floor windows, and rooms internally adjacent to any roof access points. In addition The Contractor shall ensure that restricted areas have door contacts available for monitoring unauthorised entry.

8.3.25.2 The following areas shall be fitted with local intruder alarm systems:

a) Pharmacies (to prevent the theft of controlled drugs)

b) X-ray department areas used for storing silver chemicals

c) Patient record offices

d) Stock rooms

e) Plant rooms

f) FM areas

g) All external doors

8.3.25.3 The intruder alarm systems shall link centrally back to the FM Control Centre.

8.3.25.4 The Contractor shall ensure that the proposed alarm systems for The Works include lifts, refrigeration equipment and all other critical equipment.

8.3.25.5 The Contractor shall ensure that the alarm systems can be securely monitored on Site and also remotely at the Hillington Control Room.

8.3.26 Security Access Control

8.3.26.1 The Contractor shall provide a comprehensive access control system to all external access doors and to internal doors requiring restricted access including access control doors to each ward and departments integrated within the BMS and plant area lighting controls to prevent unauthorised access. Control will be via a hierarchical proximity card system. Some departmental systems may only be activated outside normal working hours.

8.3.26.2 Ward access control doors shall also be fitted with CCTV camera and door access system. The CCTV camera shall be suitable for viewing of visitors in wheel chairs.

8.3.26.3 The Contractor shall provide the Entry requirements of SHPN57 e.g. Entrance to be controlled by use of entry-phone intercom system with CCTV linked to the reception/clerical office and communications base with access control provided across the full Critical Care Accommodation including changing room doors

8.3.26.4 Controlled access shall be provided by the Contractor to the Estates and FM vehicle hard standing and parking facilities for vehicles and pedestrians, traffic management lights and barriers shall be provided to control the yard and the associated slip road.

8.3.26.5 The Contractor shall ensure the system includes all necessary power supplies, card readers, actuators, egress buttons and emergency “break-glass” release units and fire alarm interfaces.

8.3.26.6 The system shall utilise the BMS LAN with separate field cabling and all necessary central controls / network cards provided suitable for future extension.

8.3.26.7 The system shall be interfaced with the robotics system to ensure that controlled access is provided while maintaining system integrity.

8.3.26.8 The system shall be interfaced with the theatre system to ensure that controlled access is provided while maintaining operational integrity.

8.3.26.9 The Contractor shall provide door entry video intercom systems to the designated main entrance doors and the delivery entrances with local control and facility to transfer to the main security room.

8.3.27 External CCTV

8.3.27.1 The Contractor shall provide a comprehensive colour CCTV system integrated within the BMS covering all external access points, car parking and external pedestrian/cycle circulation routes around the full Site including FM, service yards, car parks, walkways, boundary of/entrances to Site, boulevard, service tunnel etc, and the general road network.

8.3.27.2 The design shall also take cognisance of the Board's security requirements as detailed in the Boards operational requirements.

8.3.27.3 The Contractor shall ensure that the system comprises a multi-channel digital recorder with a recording frame per second for each camera which is in accordance with a detailed engineering specification to be agreed with Strathclyde Police.

8.3.27.4 The digital recorders shall also control playback of images onto a CCTV monitor.

8.3.27.5 The cameras shall be fully functional set up with stops to avoid over viewing adjacent properties, the RAID storage shall be 25 frames per second and all equipment shall be selected to provide good quality viewing and reproduction for use in prosecutions.

8.3.27.6 The external PA system shall be linked to cameras so operator can 'speak' to persons in external spaces in emergency or to reprimand/warn.

8.3.27.7 The system shall be fully integrated with the new Laboratories system and shall be configured to allow migration of the retained estate equipment without downtime.

8.3.28 Internal CCTV

8.3.28.1 The Contractor shall provide a comprehensive colour CCTV system integrated within the BMS covering all corridors, reception, lift lobbies and other areas where members of the public gather or areas where access is to be restricted i.e. wards.

8.3.28.2 CCTV cameras shall be installed at the main entrances, waiting and circulation areas of both hospitals where the security and safety of hospital staff and patients is a concern but where free access for the visiting public is allowed. The CCTV systems are also to cover:

a) All Exits and Entrances;

b) Ambulance Parking;

c) Vehicle Bays;

d) Fill points;

e) Cycle sheds;

f) All vehicle and cycle routes within the works;

g) All footpaths within the works;

h) Pharmacy Counters;

i) Ward Entrances;

j) Children's Play Areas;

k) Ambulance Entry Points;

l) A&E Departments;

m) Car Parks, Estates Yards, Public Spaces;

n) Generator Plant rooms;

o) Main Heating Plant rooms;

p) Corridors;

q) Receptions;

r) Lift lobbies; and

s) Other areas where members of the public gather or areas where access is to be restricted.

8.3.28.3 All CCTV cameras will be IP-based. They will be linked back to local hubs by fibre or Cat.6A cabling. Local data hubs will be connected back to a number of CCTV servers adjacent to electrical risers, which will in turn be linked to the main server room via a looped optical fibre network. CCTV servers will include input modules, processors and RAID storage. The system shall record at 25FPS per camera and provide 31 days storage. Each CCTV server will also be provided with an independent broadband connection to provide connectivity in the event of a network failure.

8.3.28.4 All cameras shall be linked back to the FM Control Centre and the off site facility at Hillington with local supplementary monitors in accordance with the Clinical Requirements.

8.3.28.5 The Police room in Emergency Department area to be fitted with CCTV monitors, to receive feeds from the Emergency Department cameras and any other surveillance as provided under the control of the main CCTV monitor position.

8.3.28.6 The CCTV system shall be linked to the intruder alarm and access control systems to provide specific viewing functions, such as presenting a picture on a monitor when an access card is presented to a reader, or when a movement detector activates.

8.3.29 Automatic Barriers

8.3.29.1 The Contractor shall provide all vehicle access barriers including associated power and control wiring. For Vehicle control at the A&E, FM to suit the developed traffic philosophy. Facilities shall be provided for audio visual links to the security desk to provide assistance. The Contractors shall also provide additional ducts and network cabling to strategic areas for future pay stations.

8.3.30 Uninterruptible Power Supplies (UPS)

8.3.30.1 The provision made for interruptible/ uninterruptible power supply (IPS/UPS) solutions to provide electrical safety in the patient environment shall be based on IEC 6034 for Electrical Installations in Medical Locations, (S)HTM-06-01 and the recommendations of Guidance Note 7 to BS7671 Wiring Regulations published by the Institution of Electrical Engineers.

8.3.30.2 UPS solutions shall also be provided by the Contractor to support Grade A standby lighting in Group 1 and Group 2 locations within areas of clinical risk 4 and 5.

8.3.30.3 The Contractor shall provide the UPS requirements of SHPN57 e.g. all patient supplies in Critical Care areas shall be UPS backed, dedicated plug arrangements shall be provided rather than colour coding to differentiate.

Lighting in Critical Care areas to be UPS backed, this element of the requirement may be provided from of series of resilient redundant "lighting off line" battery inverter units rather than from the main series of "on line" UPS sets.

8.3.30.4 UPS units shall be located to suit the load requirements and the Contractor shall allow for UPS resilience, redundancy, automatic by-pass and ensure that the equipment is provided with the appropriate environment to ensure full design life is achieved from all equipment and batteries.

8.3.30.5 Consideration shall be given to UPS island mode operation with measures taken to ensure that the output neutral is referenced to earth at all times e.g. bypass and isolation transformers permanently in circuit with local connection or reconstituting the UPS neutral –earth bond as required.

8.3.30.6 Batteries shall be minimum ten year design life type in accordance with British Standards, these shall be provided in cabinets and battery monitoring and battery isolation devices shall be linked to the central monitoring system.

8.3.30.7 Battery cabinets shall be located in separate plant rooms from all heat generating equipment with appropriate environmental conditions to provide a safe steady state environment for maximum battery life.

8.3.31 Generators

8.3.31.1 The site generation shall be sized to provide stand-by power for The Works and Laboratory with provision for integration of the retained estate.

8.3.31.2 The system shall comply with the distribution requirements of (S)HTM-06 as set out in the schematic drawing ref G1274/E(60)01 and the generators shall have sufficient capacity to pick up the load and meet the minimum frequency and stability requirements for the Emergency System after loss of mains power taking into consideration the site load including Medical equipment, UPS and HVAC variable speed drives.

8.3.31.3 Load management control shall be utilised to ensure that the lighting and small power are reinstated within 15 seconds of power failure. All other loads including Mechanical Services and Lift power shall be re-instated in a controlled manner within 25 seconds of power failure. The Contractor shall include for all load management software and hardware including automated motorised ACB's and MCCB's to ensure that the load management matches the generator status. The Control shall be run over twin redundant PLC's with automatic change over in the event of fault. All control circuits shall be constantly monitored for healthy operation and communication with faults indicted at the Plant rooms with remote indication via the BMS.

8.3.31.4 Active mimics shall be provided via touch screen PC's within each main switchroom to indicate the status of all main electrical plant and emergency systems.

8.3.31.5 All power for controls and monitoring equipment shall be provided from resilient supplies with UPS/ Battery backup, with back up to allow maintenance without system downtime.

8.3.31.6 A full load analysis shall be carried out to ensure that the appropriate generator sets are selected to meet the active power, reactive power and apparent power requirements and that change-overs are bump free with a maximum permissible voltage dip of 2% on load acceptance.

8.3.31.7 The alternators shall be selected to match the inrush current of the transformers which shall be brought on line (with lighting and small power loads connected) when one of the generators in each group is available on the bars. The remaining generators shall synchronise to the first unit in their group and signal to the load management controls when sufficient units are available to take the remaining loads.

8.3.31.8 Generators shall be rated as ISO8528 (2005) Continuous Operating Power COP.

8.3.31.9 Full load management shall be provided by the Contractor to allow isolated island running and parallel utility operation.

8.3.31.10 The engines shall comply with ISO 3046-1 and generators comply with ISO 8528.

8.3.31.11 To improve system resilience the generators shall be located in groups with Fire and Blast Separation.

8.3.31.12 Digital Automatic Voltage Regulations (AVR) shall be provided with optimized transient response to suit site load.

8.3.31.13 A stringent series of “Black Building Tests” shall be developed by the bidder to indicate cause and effect for all of the system fault scenarios, this shall be build up in iterations with simple single system faults escalating to major inter system failures in a matrix.

8.3.31.14 An override facility shall be provided via Castel interlocking to allow a controlled manual engine start up procedure to be available in the event of PLC failure.

8.3.31.15 Once the Matrix is agreed the tests shall be integrated in the overall commissioning strategy.

8.3.31.16 The fuel storage shall be integrated with the standby heating fuel system to provide a modular storage facility as described elsewhere.

8.3.31.17 Each generator shall be provided with a dedicated gravity feed day tank capable of tuning the set at maximum load for 10 hours.

8.3.31.18 A resilient dual piped, multiple pumped supply system shall be provided from the Modular Storage to deliver to the day tanks.

8.3.31.19 All engines should incorporate lean burn technology to minimize NOx, flues shall be run to the energy centre stack and discharged at high level.

8.3.32 Plant Rooms

8.3.32.1 The plant rooms shall be configured to ensure optimum environmental conditions to ensure efficient operation.

8.3.32.2 All walls, ceiling and floors within generator rooms, transformer rooms, MV and LV switchrooms shall be painted to minimize problems associated with dust.

8.3.32.3 All floors and roofs to be of water proof construction with all penetrations formed in bunded up-stands incorporated in the water proof design.

8.3.33 Theatre Panels

8.3.33.1 The Contractor shall provide proprietary theatre panels of touch screen design to meet the Clinical Requirements and provide a centralised control and monitoring position within the Theatre for all Electrical and Environment Systems including Mains power, Generator power, UPS power, fire alarms, temperature, humidity, theatre lights, room lights etc.

8.3.34 Lifts and Escalators

8.3.34.1 The Contractor shall provide bed passenger lifts (suitable for inclusion of at least one hospital bed (orthopaedic bed), goods lifts, service lifts, general passenger lifts, clean goods lifts, dirty goods lifts, FM robotics lifts, dumb waiters and evacuation lifts within the buildings in accordance with (S)HTM 2024 and EN 81. Evacuation lifts for emergency conditions will be considered within the fire strategy and shall be provided if required as part of that agreed strategy. All lifts provided for the movement of patients shall be supplied from the essential services supply in accordance with (S)HTM 2011.

8.3.34.2 The Contractor shall give consideration to the following in the provision of lifts:

a) The lifts shall be vandal / damage resistant but aesthetically pleasing and appropriately sized (lifts designated as passenger bed lifts shall be sized to accept as a minimum a bed and associated equipment);

b) Banks of lifts shall be appropriately controlled to maximize movement;

c) Collective controls of groups of lifts shall be used;

d) All floors including plant levels shall be served;

e) Control rooms shall be easily accessible and designed to minimise the need for artificial cooling;

f) All Lift power shall be via automatic changed over units with power fed from either side of the dual power distribution systems;

g) Emergency hands free telephones in lifts shall be accessible to the blind, partially sighted, deaf and wheelchair users. The Contactor shall link each lift car emergency phone directly to an individual emergency line at the Boards central communications centre, to facilitate emergency clinical support and communication, this shall be in addition to the lift remote fault reporting system provided by the lift suppler;

h) Remote lift operation monitoring shall be provided;

i) Lifts for people and goods shall be separated;

j) Dedicated lifts are required for theatres or swipe controlled staff access override;

k) Key operated Priority Control shall be provided for bed movement and a local controller shall be provided within the helicopter recovery area;

l) Manual Handling shall be reduced with the introduction of Automated transfer Systems which shall be integrated in the vertical transport solution. The Contractor shall clearly set out the number of lifts indicating if these are dedicated to Automated Transfer System or shared with the FM units;

m) All lift car levelling requirements shall be in accordance with the British Standards and also be in accordance with the Automated Transfer System step capabilities if this is less tolerant than the British Standard;

n) Lifts shall be conventional type rather than machine room less type to ensure operation of the Boards passenger evacuation procedures;

o) Escalators to be selected to meet the traffic flow in accordance with the Bidders scheme, units shall be designed and installed in accordance with BS5655;

p) The Bidders shall carry out vertical transport analysis for passenger, bed movement and FM movements and automated material transfer systems based on their proposed scheme and the clinical and operational requirements;

q) Lift and escalator ratings speeds shall be selected to ensure excellent service complete with inbuilt redundancy to allow for unit breakdown and planned maintenance;

8.3.35 Tagging

The Contractor shall provide a full asset tagging system in accordance with the NHS Scotland (HFS) National asset management requirements.

All installed Electrical, Mechanical, Public Health Medical Gases and Specialist systems components shall be asset tagged by the contractor, entered into the PPM system and linked to its full specification and maintenance schedule.

The tagging system shall be capable of simple extension to allow the Bar Coding of Hospital Equipment, and the bidders shall provide technology proposal for Board consideration.

The asset tagging system shall be interfaced with the PDA System to be utilised for Managing Building Handover and Snagging.

8.3.36 Service Tunnels

Full resilient building services shall be provided in the service tunnels including, ventilation, smoke control, heating, small power, lighting, emergency lighting, illuminated signage, fire alarms, leak detection, access control, public address/background music and CCTV etc. to allow the tunnels to continue to operate during sectional maintenance.

The tunnels shall be configured to meet the developed traffic flow requirements, with full consideration of the Automated Material Transfer System operation requirements including power, ventilation, unit recovery, weight, gradient and step limitations.

Special consideration shall be given the risk of single point of failure within the tunnel and the main services shall be separately routed with dedicated maintenance access provided to allow ongoing operation during maintenance.

8.3.37 Laboratory Services

All specialist services e.g. security, access control, CCTV, fire alarms BMS etc within the new hospitals shall be fully compatible with building the services to be provided in the Laboratory Building.

8.3.38 Future Proofing

The Contractor shall ensure that all systems are future proofed and shall provide a compliance matrix indicating measures taken in their supply chain to indicate the level of future proofing included in their bid.

SECTION 8.4 - DRAWINGS (these are located in Appendix M)

Schematics	Number G1274-
Main Power Schematic	E/(60)01
Power Distribution Schematic	E/(60)02
Fire Alarm Schematic	E/(67)01
CCTV/Staff attack & Intruder Schematic	E/(68)01
Nurse Call Schematic	E/(68)02
Data Schematic Diagram	E/(68)03
Typical CWS Distribution Layout	P/(53)01
Wet Riser Distribution Schematic	P/(67)02
Medical Gas Pipeline System Schematic	M/(54)01
Natural Gas Schematic	M/(54)02
Sprinkler Installation Schematic	P/(67)01
Chilled Water Distribution Schematic	M/(55)01
MTHW Distribution Schematic	M/(56)01
Typical LTHW Distribution Schematic within Building	M/(56)02
Isolation Suites, plant room adjacent Ventilation System	M/(57)01
Isolation Suite Vent System plant room above	M/(57)02
Typical Adult Ward Tower Ventilation Schematic	M/(57)03
Operating Theatre Ventilation Outline Plan and Schematic	M/(57)04
Site Layout Drg's	Number G1274-
Water, Gas and electric Site Incoming Services	U(96)01
Indicative MTHW heating distribution route	M/(56)03
Energy Centre	Number G1274-
Proposed Energy Centre Plant room layouts MTHW Solution	ME/(60)01
Indicative Primary Sub Station Layout	ME/(60)02
Detail Drawings	Number G1274-
Indicative layout of Main Services Tunnel	ME/(60)03
Board Drawing	
Existing External Services Site Plan	G1700X G(52)Combined-Site

Section 9.0 Civil & Structural Engineering Requirements

The Contractor shall in carrying out the Works comply with the following non-exhaustive list of civil & structural engineering requirements.

9.1 **General Requirements**

9.1.1 The Contractor shall ensure that the design and construction of the civil and structural engineering elements of the buildings and external works meets the following criteria:

a) Be designed observing due skill, care and attention to the requirements of the brief;

b) Be fully co-ordinated with the design of the building fabric, finishes, services, facades, internal walls, medical equipment and existing Site features, including buildings / structures;

c) Provide adequate space for the distribution of services, while maintaining the required finished floor levels and the floor to ceiling heights called for in the Room Data Sheets; and elsewhere in the Employers Requirements documents;

d) Maximise the clear zone above the ceilings for services to the degree consistent with overall economy for the Board;

e) Be economically adaptable to meet changing clinical needs; and

f) Require minimum maintenance and be designed to accommodate maintenance requirements for services, equipment and building fabric.

9.2 Minimum Design and Construction Standards

9.2.1 Unless otherwise agreed with the Board the Contractor shall ensure that all structural and civil engineering elements are designed in accordance with current revisions of the following standards and guidance documents:

a) BS6399 - Loading for buildings or Eurocode 1 (incl. Eurocode 0);

b) BS5950 – Structural use of steelwork in building or Eurocode 3;

c) BS8110 - Structural use of concrete or Eurocode 2;

d) BS5628 – Code of practice for the use of masonry or Eurocode 6;

e) BS5268 – Structural use of timber or Eurocode 5;

f) BS8002:1994 – Code of practice for earth retaining structures;

g) BS8004:1986 – Code of practice for foundations;

h) BS8102:1990 – Code of practice for protection of structures against water from the ground;

i) BS8007:1987 – Code of practice for design of concrete structures for retaining aqueous liquids;

j) BRE Special Digest 1:2005: Concrete in Aggressive Ground;

k) BS5606:1990 – Guide to accuracy in building;

l) BS8000 – Workmanship on building sites;

m) BS8500 – Guide to specifying concrete;

n) Glasgow City Council Roads Development Guide;

o) Design Manual for Roads and Bridges;

p) Specification of Highway Works, published by The Stationary Office as Volume 1 of the Manual of Contract Documents for Highway Works;

q) The Traffic Signs Regulations and General Directions 2002;

r) The Traffic Signs Manual;

s) Sewers for Scotland 2nd Edition;

t) BS EN 752:2008 – Drain and Sewer Systems outside buildings;

u) BS EN 12056 – Gravity drainage systems inside buildings;

v) BS EN 1825 – Grease Separators;

w) BS EN 1295 – Structural Design of Buried Pipelines Under Various Conditions of Loading;

x) CIRIA C624: Development and Flood Risk – Guidance for the Construction Industry;

y) CIRIA C635: Design for Exceedance in Urban Drainage – Good Practice: 2006;

z) CIRIA C697: The SUDS Manual: 2007;

aa) CIRIA R168: Culvert Design Guide;

bb) The Water Environment (Controlled Activities) (Scotland) Regulations 2005;

cc) SPP7 – Planning & Flooding;

dd) Glasgow City Council – ENV 3 – Flood Prevention and Land Drainage;

ee) ICE specification for piling and embedded retaining walls, 2nd Edition;

ff) CIRIA 66S: Assessing Risks posed by hazardous ground gases to buildings: 2008; and

gg) WRAS information and Guidance Note No. 9-04-03. The selection of Materials for Water Supply Pipes to be laid in Contaminated Land.

9.2.2 The Contractor shall deliver the Works set out in accordance with BS5606 – Guide to Accuracy in Building Critical dimensions and setting out points shall be clearly marked on drawings.

9.2.3 Construction tolerances, unless otherwise stated by the Board shall be no greater than those specified in Tables 1 and 2 of BS5606. Where the operational constraints of the building require special levels of construction accuracy then The Contractor shall be responsible for establishing and designing for these.

9.2.4 The performance of components shall be in accordance with the appropriate British Standards.

9.2.5 The Contractor shall ensure that building structures are designed to resist imposed, roof and wind loads not less than those required by current revisions of BS6399, Loading for Buildings.

9.2.6 The Contractor shall ensure that building structures are designed to carry the loads of heavy plant or medical equipment (including ceiling mounted tacking hoist systems) in their permanent positions and any loads that will be imposed upon the structures during the installation, removal or replacement of such heavy items. This requirement may involve the design of 'strong routes' through the buildings and/or specially strengthened areas of the roof onto which heavy items can be lifted.

9.2.7 The Contractor shall ensure that any measures considered necessary shall be taken to protect the building from ingress of naturally occurring ground gases e.g. carbon dioxide, carbon monoxide, methane and hydrogen sulphide.

9.2.8 In addition to reference to the above Performance Standards the Contractor shall take cognisance of the comprehensive list of relevant compliance documents as detailed in Section 5.1 of Employers Requirements: Minimum Design & Construction Standards.

9.3 Loadings & Structural Flexibility

9.3.1 The Works shall be designed to cater for the dead loadings associated with the chosen materials for the structure, finishes, partitions and cladding to the buildings. As a minimum, it shall also be designed for the imposed loads as specified in current British Standards. The design shall also take into account the need for specialist measures to allow for the installation, replacement and removal of Special Equipment and associated services. Structural deflections shall be limited as necessary for the proper installation and functioning of specified equipment.

9.3.2 The Contractor shall account for (but not be limited to) the following loading schedule

a) General floor loadings – Dead and Live loads;

b) Point loads for Clinical equipment and Services;

c) Impact loads;

d) Vibration loads;

e) Special plant foundation loads; and

f) Service loads

9.3.3 The Contractor shall take account of concentrated point loads from both mobile and stationary plant and Equipment. The structure should incorporate reasonable measures to accommodate updated versions of such machinery without major disruption. In addition, the Contractor shall ensure that floors and supporting structures have the capacity for retro-fitting lifting devices for all fixed items of plant and Equipment weighing 35kg or more.

9.3.4 The Contractor shall take cognisance of the requirements in designated patient areas for ceiling mounted tracking hoists etc and such measures to allow for the installation of Special Equipment and associated services.

9.3.5 The Contractor shall ensure that specific areas of the Works satisfy particular requirements of the Board's operations or Equipment in those areas. Relevant constraints may include but are not limited to maximum allowable (structural deflections) differential settlement, (vibration) and the meeting of any constraints.

9.3.6 The Contractor shall take account of dynamic loads from general movement of people through to activities such as aerobics, dance or other rhythmic activities that can give rise to harmonic effects in poor design.

9.3.7 Lateral stability bracing systems shall not obstruct or hinder Clinical or Non-Clinical operations and shall not obscure the windows or doors.

9.3.8 The vibration response of the buildings shall comply with the requirements of SHTM 2045 and be compatible with the requirements of the Equipment to be installed.

9.3.9 With respect to the Works, the Contractor shall:

a) Take due account of future flexibility of the Works (in terms of future change of use and/or relocation of equipment);

b) Specifically make allowance for future flexibility of ceiling mounted lifting equipment in designated patient areas, including the requirement for re-configuration, extension and/or retro-fitting of lifting equipment i.e. the whole of the designated area shall be capable of accommodating re-configuration or retro-fitting;

c) Make specific allowance for items of particularly heavy equipment and/or other onerous loading conditions; and

d) Make specific allowance for installation, transfer and/or removal routes for heavy equipment throughout the Facilities.

9.3.10 Parts of the structure potentially subject to damage from trolleys or vehicles shall be designed with adequate protection to prevent such damage from occurring.

9.3.11 Structural deflections shall be limited as necessary for the proper installation and functioning of special mobile, rail mounted, or fixed Equipment.

9.3.12 The Contractor shall include, within their design, provision for removal, replacement and upgrading of installed plant and Equipment. As part of this element of design, a comprehensive replacement strategy shall be prepared for implementation. This strategy shall, wherever possible, consider how these activities can be undertaken whilst minimising disruption to the function of the completed Works.

9.4 Foundations & Sub-Structure

9.4.1 The foundations shall be designed and constructed in accordance with the relevant Codes of Practice, recognising the prevailing ground conditions at the site as identified in the Ground Investigation Report (contained in Appendix N) and historical ground investigation information issued with the tender. Where the Contractor considers there is insufficient ground investigation information within the information issued for tender purposes, he shall identify this and allow for carrying out further investigation as he considers is required.

9.4.2 The Contractor shall take due cognisance of:

a) Recognition of applied loading;

b) Settlement and its effect on new buildings, links to adjacent buildings, existing adjacent foundations and existing services;

c) Dewatering and its effect on new buildings, links to adjacent buildings, existing adjacent foundations and existing services;

d) Earthworks;

e) Basement construction and waterproofing category;

f) Possibility of uncharted services and existing buried structures; and

g) Utilities Diversions.

9.5 **Basements & Tunnels**

9.5.1 The Contractor shall refer to the Masterplan, Acute Adult and Children's Hospital, Laboratory and Energy Building drawings contained in appendices for proposed locations of basements and tunnels. Basements structures in the main hospitals will generally be provided for FM/distribution and plantroom/service areas. Basements areas in the laboratory building are generally for access to the labs and mortuary as well as services distributions. It is intended that significant size tunnels will be provided between and connecting basement areas. The tunnels will provide routes for distribution of services and movement of staff.

9.5.2 Basement and Tunnel structures should be designed in accordance with the recommendations of BS 8102. The Contractor should provide designs appropriate to use of these elements i.e. he is to confirm categories of design A, B or C and identify where each is employed

a) Category A – Technical Protection;

b) Category B – Structural Integral Protection; and

c) Category C – Drained Protection.

9.6 Movement Joints

9.6.1 Structural/movement joints shall not be located through:

a) Kitchen and food preparation areas;

b) Treatment and surgery rooms;

c) Any room that HAI~Scribe prevents a floor joint from being provided in (including Theatres for example);

d) Rooms requiring a sterile environment; and

e) Any room with (now or in the future) tracking hoists or other similar lifting equipment

9.7 Superstructure

9.7.1 The Works primarily comprise the following elements:

a) Acute Adults and Children's Hospital;

b) New Laboratories Building;

c) New Energy Centre; and

d) External works and roadways/infrastructure, including utilities.
(Multi-storey car parks by others).

General

9.7.2 The Contractor shall provide designs appropriate to the type of buildings and in appliance with all SHBN's, SHTN's HBN's and Codes of Practice. The design of each building should demonstrate.

a) Ability to withstand loads and load combinations imposed on the building, vertical, horizontal, dynamic, temporary etc;

b) Compliance with robustness (tieing) requirements of current Codes of Practice and Technical Standards (Scotland) i.e. progressive collapse requirements;

c) Provision of movement must be included in designs, horizontal, vertical, shrinkage, temperature effects etc;

d) Vibration sensitive equipment will be in use throughout the new faculties. Designs should take cognisance of vibration categories;

e) Integration of building services with structure will be a highly important part of the design process. The Contractor shall demonstrate how design coordination will be achieved;

f) All material used in the design of structures shall be compatible with each other and such things as finishes (e.g. Painted); and

g) The Contractor shall prepare and supply an overall Design Philosophy Statement which should include as a minimum, General Project information, The Site, Design Team Parties, Construction Programme, The Structural Scheme, Design Standard and Sources of Reference, Modelling and Analysis and Calculations and Checking.

Acute Adults & Children's Hospital

9.7.3 The building will comprise basements, large area footprint storied structure (podium decks) and ward block multi-storey towers in 4 wings with associated cores. The Contractor shall demonstrate load paths through the building, identifying such things as transfer structures, stability cores, basements, retaining walls and foundations.

9.7.4 It is anticipated that a Helipad will be provided at roof level. The Contractor shall demonstrate a design in compliance with HBN 15-03 Hospital Helipads and identify in particular,

a) Size of helipad;

b) Size of helicopter designed for a loading applied to roof structure;

c) Load transfer of helipad structure to hospital roof structure;

d) Ramp access from/ to pad/ roof; and

e) Integration with emergency services requirements, such as fire fighting systems.

New Energy Centre

9.7.5 The Contractor is required to provide a building structure housing the new equipment that will service the overall hospital development. It is anticipated that large heavy equipment, boilers, generators, CHP plant etc. will be integrated into the design. Large spaced, double storey heights etc. will be required.

New Multi-storey Car Parks (by others)

9.7.6 The Contractor is required to provide a road and drainage and external works design that reflects and takes cognisance of the overall site, including the provision of new multi-storey car parking. Refer to Masterplan Layout for locations and sizes/ capacity of new car parking requirements.

9.8 Fire & Corrosion Protection

9.8.1 The Contractor shall provide fire protection to all elements of structure and ensure fire ratings are in compliance with space used and the more onerous of Building Regulations/the Board's requirements.

9.8.2 The Contractor shall provide a corrosion protection system appropriate to the various structural elements and their location of the buildings.

9.8.3 The corrosion protection system used shall be relevant to type of structure and its structural function and its material and location within the overall building frame. All materials used shall be compatible with each other and with surface finish materials. Reference should be made to the design life of the building structures and finishes, refer Section 5.0.

9.9 Durability & Maintainability

9.9.1 All elements of the structure shall be capable of withstanding potential deterioration due to weather, ground conditions, wear and tear, and accidental damage relevant to their location and environment.

9.9.2 Where the requirement for maintenance is less than the required life expectancy of the element(s) practical and realistic arrangements shall be designed into the construction of the Works to allow for any necessary repairs, replacements and painting etc. to be carried out safely without compromising the operational activities within and around the Works.

9.9.3 Contractor to provide a strategy statement on maintenance and replacement.

9.10 Other Performance Requirements

9.10.1 The Contractor shall ensure that all building elements and retaining structures shall incorporate appropriate means to resist the passage of dampness, both into the building structure and fabric, and into the accommodation, including the resistance to any hydrostatic pressure. The Contractor shall ensure that all such construction shall be in accordance with the requirements of the Building (Scotland) Regulations 2004, BS8102 and Code of Practice CP 102 for Protection of Structures against Water from the Ground.

9.11 Underground Drainage

9.11.1 A 'Drainage Impact Assessment and Strategy Report' has been prepared (see Appendix L) and is prescriptive in outlining the requirements which are to be assessed and met in respect of the foul and surface water drainage from the development. The report covers, *inter alia*:-

a) The proposed surface water drainage strategy and the resulting surface water drainage network design considerations and projected amendments to existing culverted watercourses;

b) The proposed foul water drainage strategy, projected foul flows and the drainage network anticipated. The Contractor is required to confirm by calculation their own assessment of flows for the development;

c) Sustainable Urban Drainage criteria which require to be met for each element of the development. Again, the Contractor is required to review the requirements and develop appropriate methods for implementation of the treatment required;

d) The management and maintenance of the designed drainage systems shall be accompanied by a summary which details the residual requirements for maintenance of each element of the drainage system, including parts of the network prospectively vestable in Scottish Water; and

e) The criteria for assessment of Flood Risk for the designed drainage networks and the development as a whole. The requirements for mitigation of the assessed flood risk and the appropriate finished floor levels for access, egress and buildings are also outlined for the Contractors to address.

9.11.2 In the development of the guidance within the 'Drainage Impact Assessment and Strategy Report', the Contractor shall be responsible for liaison with the relevant stakeholders in agreeing connection requirements to the surrounding public sewers, watercourses and drainage networks. The Contractor is responsible for the design and construction of a drainage solution that meets all the requirements of and satisfies the relevant regulatory authorities including, but not limited to, GCC, SEPA and Scottish Water.

9.11.3 All phases of the development shall treat the disposal of surface water in accordance with the principles of 'The SUDS Manual' Report no C697 published by CIRIA (March 2007)

9.11.4 The Contractor shall provide, where necessary within the on-site drainage network any isolators, retention traps, interceptor tanks and other such devices necessary to prevent the discharge of any potentially dangerous or otherwise contaminative materials to the public sewers.

9.11.5 The Contractor shall design and provide separate foul and surface water drainage systems in accordance with the requirements of the Building (Scotland) Regulations 2004.

9.11.6 All drainage shall be designed to avoid the risk of local flooding and flooding of the system into which they discharge. Flooding of electrical equipment areas and areas where stray current leakage may occur in the presence of water shall be prevented.

9.11.7 Drainage shall be sufficient to ensure that no areas of standing water occur outwith extreme storm events. The drainage systems shall be capable of coping with, as a minimum, the foul loading and the storm event specified by the relevant authority and shall be considered an integral part of

the public sewerage system. This shall include any storage required on the public network to offset the assessed impact of the development.

9.11.8 The drainage system shall be capable of taking such detritus as may normally arise during the operation of the system and during normal and winter maintenance conditions and those within the design criteria of the relevant authority.

9.11.9 The Contractor shall design the drainage system in such a way as to minimise the requirement for internal manholes.

9.12 Roads, Footpaths, Cycle paths and Car Parking

9.12.1 The extent of adoptable and non-adoptable roads is shown on the Exemplar layout drawings.

9.12.2 The Contractor shall provide a network of internal roadways providing;

a) a spine road network through the site between Govan Road and Hardgate Road to facilitate the increased levels of Hospital traffic;

b) a road network through the site between Govan Road and Hardgate Road with designated provision for blue light ambulances, related and relevant to the position of A&E services at all phases of the development;

c) a public transport hub served independently served from (a) or (b) above and in keeping with the requirements of the 'Clyde Fastlink' proposals being promoted by Glasgow City Council;

d) service access to the relevant areas as indicated on the Masterplan, which will be independent of any of the networks in (a) – (c) above;

e) sufficient Ambulance provision at A&E as outlined elsewhere in these requirements, and separate provision for temporary private vehicle layover in the same environs; and

f) a taxi / car drop-off and layover bay at an appropriate location and geometry to effect the efficient and safe pick-up and dropping off of visitors and other users of the hospital facilities.

A maximum of 3,500 car parking spaces, comprising 2400 staff and 1100 visitor / patient spaces are being created on site by others. The Contractor shall require to liaise with the Board and the consultant teams and contractor(s) carrying out this work in order to establish common routes, levels and other relevant co-ordination requirements.

9.12.3 The layout and geometry of the network of internal roads shall be generally in accordance with the Masterplan and exemplar layout provided to the Contractor.

9.12.4 The Contractor will provide details of junction upgrades including priority control measures for blue light ambulances and provision for 'Clyde Fastlink' shall be developed by the Contractor in consultation with Glasgow City Council.

9.12.5 The Contractor shall design the construction of new roads in accordance with the Glasgow City Council 'Roads Development Guide' for a Traffic Distributor Road. Pavements shall provide a residual design life at the year of completion of the works of no less than 40 years.

9.12.6 The Contractor is responsible for all approvals and consents in relation to all on-site and any off-site road, footpath, cycleway or other transport requirement.

9.12.7 The Contractor shall ensure that all roads, delivery and refuse collection areas have sufficient headroom above them to allow for the passage of appropriate emergency, servicing, delivery or refuse collection vehicles and are designed to provide sufficient space to allow efficient manoeuvring of such vehicles without undue difficulty, risk of impact or adverse effect of exhaust fumes on occupants of the buildings.

9.12.8 All structures which support roads / footpaths / cycleway shall be designed in accordance with the relevant provisions of the Design Manual for Roads and Bridges, and assume design loadings equivalent to the maximum permitted vehicle on the public highway.

9.12.9 The Contractor shall ensure that all roads, car parks and other areas that may be used by fire appliances shall have sufficient headroom for such vehicles and are designed to allow their efficient manoeuvring. The Contractor shall agree with the Board the types of delivery vehicles, which require to be considered in the design. Refer to briefing paper, facilities service yard/compound in Appendix L.

9.12.10 New car parks within the Site shall be designed by The Contractor to comply with applicable SHTM, HTM, HBN 45, HFN 20, HFN 21 and the requirements of Glasgow City Council Roads Development Guide.

9.12.11 Details showing the phased construction of all temporary and new car parking facilities constant with the masterplan shall be provided by the Contractor.

9.12.12 Where areas of surface car parks are required to be traversed by vehicles heavier than 2500kg for maintenance or access purposes, the sub-base and surfacing of these areas shall be specifically designed by The Contractor for these heavier loads.

9.12.13 Roads, delivery and refuse collection areas, and car parks, together with their supporting groundworks and structures, shall be designed by The Contractor to provide full and sufficient access for inspection, maintenance and repair of roads, car parks, delivery and refuse collection areas, structures, underground and underground drainage, including existing drainage items such as manhole covers and drains. Where access for maintenance, repair or replacement of underground services is required under the terms of an easement, the design of all elements affecting the exercise of such an easement shall also be in accordance with the requirements of the company that has the right to exercise the easement.

9.12.14 The Contractor shall also comply with the following criteria:

a) To roads, footways, footpaths and cycleways, construction is to be bituminous and in accordance with Glasgow City Council's Roads Development Guide appropriate for a Traffic Distributor Road;

b) Proposals for differential surfacing to pedestrian crossing areas are sought and shall be submitted by the Contractor for approval. Surfaces shall provide 20 years life before replacement form the date of completion of the works;

c) Cycleways shall include green surface finish utilising a recognised surfacing material which will provide 20 years life before replacement form the date of completion of the works;

d) Pedestrian crossings: types, locations, lighting and controls shall be agreed with the Board (controlled crossings to be included, exact locations to be agreed at design development stage);

e) Kerbs: to comply as a minimum standard with BS7263, Part 1: Pre-cast Concrete channels and edgings;

f) Traffic Signs and Markings to be designed to The Traffic Signs Regulations & General Directions 2002 and The Traffic Signs Manual (part of the Design Manual for Roads &

Bridges), and for the Board's approval. Markings and signage shall dimensioned apposite to a road with a design speed equivalent to 30mph;

g) Supplementary signage to support the management of traffic to preserve the provisions in (a) to (g) above shall be submitted for the Boards approval. Furthermore, the Contractor shall design and provide appropriate signage external to the car parking and other facilities to ensure ease of navigation around the Site for intermittent or infrequent users;

h) Gradients outwith carriageways shall comply with the provisions of HBN 45 and the Building (Scotland) Regulations 2004 as applicable. No gradient in excess of 1:20 shall be allowed in parking areas (other than access roadways), and 1:15 on pedestrian staff, patient and visitor access paths from parking areas to the building entrances;

i) Parking bays: comply with the reference documents, HBN 45, HBN 20, HFN 21 and the item on gradients above. The minimum parking standard parking bay shall be 2.5 x 4.8 m. Variation from the standard (to make optimum use of the space for example) may be desirable and allowed subject to agreement with the Board; and

j) Traffic parking restrictions and parking management: to be agreed with the Board.

9.12.15 Designs shall cater for the access and parking needs of pedestrians and the physically disadvantaged. This shall involve catering for visitors and staff using different modes of transport in adapted vehicles and with multiple aids / equipment.

9.12.16 This is to allow tailgate access by disabled people without the need to set ramps or lifts down within the main circulation routes of car parks. The first and last accessible parking bays in a row of 'in line' spaces shall be provided with a minimum clear area of 1.2m to both sides.

9.12.17 Parking for the transport requirements of deliveries and waste disposal, ambulances, fire appliances and other specialist and emergency vehicles shall be segregated from public and staff parking.

9.12.18 Car parking provision shall take into account the following requirements:

a) Dedicated parking for those with disabilities, the elderly and those with small children located close to the clinical areas, especially for those with limited mobility and eyesight;

b) Space for larger vehicles, which may be fitted with wheelchair ramp or carrying specialist mobile equipment from / to the Works (such spaces will be larger than the normal car parking space);

c) Appropriate zoned parking for night staff as near as practical to the controlled night entrance for staff; and

d) Electric car charging facilities in a minimum of 20nr bays.

9.13 Other External Works

9.13.1 The Contractor shall design the external works for ease of navigation and progression around the site by staff, patients and visitors.

9.13.2 The Contractor shall seek advice from the Board to seek to minimise the risk of crime and vandalism on the Works. This advice shall be pro-actively sought by the Contractor as part of the design process.

9.13.3 The Contractor shall seek advice from Strathclyde Police's crime prevention representative on the proposals for external works to minimise the risk of crime and vandalism on the Site and the Works, including compliance with Secure by Design.

9.13.4 The Masterplan and accompanying landscape drawings demonstrate the general arrangements of the external works.

9.14 Hard Landscaping Requirements

9.14.1 The Contractor shall incorporate into the Works all associated hard landscaping for the Site, including but not limited to, the following:

a) Access and hardstanding for emergency and delivery vehicles;

b) Access for building maintenance and window cleaning;

c) Access and circulation for, visitors and patients on foot, bicycles, in cars or on public transport;

d) Parking for vehicles and bicycles including disabled facilities;

e) Drop-off facilities including lay-bys and bus/transport stops;

f) Service areas, as appropriate;

g) Accommodation for building services plant, waste and materials management, as appropriate;

h) Amenity areas for staff, patients and visitors;

i) Suitable pathways and paving;

j) Protection against noise and environmental pollution;

k) Security provisions, as appropriate;

l) Appropriate Site boundary treatment;

m) Walls, fencing, gates / barriers and hedgerows as appropriate along the Site Boundary and at particular locations inside the Site;

n) CCTV surveillance to all car parks, pedestrian routes, cycle paths, therapy gardens and other specified external areas;

o) External lighting;

p) Suitable means of shelter against adverse weather conditions at entrances, bus/transport waiting, and drop-off locations and covered links provided, as appropriate;

q) Automatic vehicle access barriers; and

r) Fire hydrants.

Section 10.0 Sustainability

10.1 Sustainability

10.1.1 The consideration and implementation of sustainable facilities is a key concern and requirement of the Board in all its functions and activities.

10.1.2 The particular low carbon and sustainability considerations and requirements of the Board are provided in Section 8.0 and Appendix M.

10.1.3 The carbon management plan of the Board is contained for reference in Appendix P.

10.1.4 Guidance with regard to the consideration and assessment of BREEAM points are contained in Appendix U for reference.

Section 11.0 Community Engagement

11.1 Community Engagement

11.1.1 The consideration and implementation of Community Engagement (CE) initiatives is of great importance to the Board. The requirements of the Contractor with regard to CE in relation to the Works are contained in Appendix V.

Section 12.0 Bid Return Requirements

12.0 Bid Return Requirements

12.1 The particular bid return requirements of the Board are identified and listed, along with the evaluation process, in Volume 3 of this ITPD.

12.2 It is anticipated that the bid return information will allow the Board to assess the bids and select a private sector partner to contract with.

12.3 The Contractor will then work with the Board through the Stage 3 Design Development period to produce the FBC design requirements as identified in Appendix K.

MAIL TYPE	MAIL NUMBER	REFERENCE NUMBER
Transmittal	BMCE-TRANSMIT-006859	BMCE-TRANSMIT-006859

1:200 Department Plan Drawings for RDD Review RETURNED WITH COMMENTS AND REVIEW STATUS

From Glasgow DocControl - Brookfield Multiplex Construction Europe

To (26)

Mr David Bower - Brookfield Multiplex Construction Europe

Mr Gavin Burnett - Brookfield Multiplex Construction Europe

Mr Ken Hall - Brookfield Multiplex Construction Europe

Mr Jim Murray - Brookfield Multiplex Construction Europe

Mr Grant Wallace - Brookfield Multiplex Construction Europe

Mr David Hall - Currie & Brown

Ms Gill Kirkness - Doig+Smith LLP

Mrs Susan Logan - Ecoteric Limited

Ms Emma Corry - Gillespies Landscape Architect

Karen Connelly - Glasgow NHS Board

Mrs Heather Griffin - Glasgow NHS Board

Ms Mairi Macleod - Glasgow NHS Board

Mrs Fiona McCluskey - Glasgow NHS Board

Mr Peter Moir - Glasgow NHS Board

Ms Jackie Stewart - Glasgow NHS Board

Frances Wrath - Glasgow NHS Board

Mr James Miller - Ironside Farrar

Mr Brendan Rooney - Mercury Engineering (Ireland)

Ms Liane Edwards - NIGHTINGALE ASSOCIATES

Ms Carla Queiroz - NIGHTINGALE ASSOCIATES

Ms Sonja Von Maltzahn - NIGHTINGALE ASSOCIATES

Ms EMMA WHITE - NIGHTINGALE ASSOCIATES

Mr Jeff Murdoch - URS Corporation Ltd

Mr Neil McGarry - WSP Buildings

Mr John Young - WSP Buildings

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Mr Steve Pardy - Zisman Bowyer and Partners

Cc (13)

Ms Harinder Kaur - Astins Ltd

Mr Manny Ajuwon - Brookfield Multiplex Construction Europe

Mr Darren Pike - Brookfield Multiplex Construction Europe

Mr Darren Smith - Brookfield Multiplex Construction Europe

Mr William Basterfield - Gillespies Landscape Architect

Mr Stephen Richards - Gillespies Landscape Architect

Ms Shiona Frew - Glasgow NHS Board

Mr Alan Seabourne - Glasgow NHS Board

NSGH Document Control - Mercury Engineering (Ireland)

Mr James Ferry - Mercury Engineering (Ireland)

Mr Robert O'Donovan - Mercury Engineering (Ireland)

Mr Pete Dunbar - WSP Buildings

Mr Michael Woods - WSP Buildings

Sent Friday, 25 November 2011 11:45:20 AM GMT (GMT +00:00)

Reason Returned with Comments and Review Status

Status N/A

DOCUMENT ATTACHMENTS (82)

(**0** selected)

File	Document No	Revision	Title	Status
	NA-xx-00-PL-252-401	06	Ground Floor Plan_NCH Rehab & Therapies	Status A
	NA-xx-00-PL-252-402	08	Ground Floor Plan_NCH Entrance_OPD_Cardiology Testing	Status A
	NA-xx-00-PL-252-403	06	Ground Floor Plan_NCH Observation Ward And Child Protection	Status A
	NA-xx-00-PL-252-404	07	Ground Foor Plan_NCH Emergency Department and Decontamination Unit	Status A
	NA-xx-00-PL-252-405	09	Ground Floor Plan_NSGH Emergency Department	Status A
	NA-xx-00-PL-252-406	06	Ground Floor Plan-NSGH Acute Assessment	Status A
	NA-xx-00-PL-252-407	14	Ground Floor Plan_NSGH Radiology And Medical Illustration	Status A

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File	Document No	Revision	Title	Status
	NA-xx-00-PL-252-408	06	Ground Floor Plan_NCH Radiology	Status A
	NA-xx-00-PL-252-409	07	Ground Floor Plan_NSGH OPD_Rehab & Therapies	Status B
	NA-xx-00-PL-252-411	10	Ground Floor Plan Entrance Reception, Atrium Space, Phamacy, FM Offices and Discharge Lounge	Status B
	NA-xx-01-PL-252-400	09	First Floor Plan_Restaurant_Sanctuary And Atrium Space	Status B
	NA-xx-01-PL-252-401	10	First Floor Plan_NCH Theatres_Interventional_Radiology And Radiology	Status A
	NA-xx-01-PL-252-402	06	First Floor Plan_NCH 23 Hour Unit	Status A
	NA-xx-01-PL-252-403	11	First Floor Plan_NCH Critical Care (Picu)_Cardiology Ward_Support_MDU And Special Feeds	Status A
	NA-xx-01-PL-252-404	08	First Floor Plan_NSGH Coronary Care Unit and Critical Care (1 Of 2)	Status A
	NA-xx-01-PL-252-405	06	First Floor Plan_NSGH Critical Care (2 of 2)	Status A
	NA-xx-01-PL-252-406	09	First Floor Plan-NSGH Stroke Ward And Medical Day Unit	Status B
	NA-xx-01-PL-252-407	09	First Floor Plan_NSGH Radiology	Status A
	NA-xx-01-PL-252-408	06	First Floor Plan_Nuclear Medicine	Status A
	NA-xx-01-PL-252-409	09	First Floor Plan - NSGH OPD And Pre-Op Asessment	Status A
	NA-xx-02-PL-252-400	05	Second Floor Plan Atrium and Bed Management	Status B
	NA-xx-02-PL-252-401	06	Second Floor Plan-NSGH Dermatology Ward	Status A
	NA-xx-02-PL-252-402	09	Second Floor Plan_NCH Schiehallion Ward_Day Case Unit_Anaesthetics_Service Offices, TCT & Hospital at Night	Status B
	NA-xx-02-PL-252-403	06	Second Floor Plan_NCH Acute Receiving Ward	Status B

File	Document No	Revision	Title	Status
	NA-xx-02-PL-252-404	13	Second Floor Plan_NSGH Endoscopy_Decontamination_Medical Physics_Emergency Linen, Transport base and Telephone Services	Status A
	NA-xx-02-PL-252-409	08	Second Floor Plan_NSGH Dermatology OPD_Renal Dialysis	Status A
	NA-xx-02-PL-252-415	06	Second Floor Plan_NSGH Theatres	Status A
	NA-xx-03-PL-252-400	08	Thrid Floor Plan_Health Records_Radiology Hot Desks, FM Facilities, Equipment Library, Staff Change and Meeting Rooms	Status B
	NA-xx-03-PL-252-401	01	Third Floor Plan - Plant	Status A
	NA-xx-03-PL-252-402	06	Third Floor Plan_NCH In Patient Ward and Medicinema	Status B
	NA-xx-03-PL-252-403	07	Third Floor Plan_NCH In Patient Ward_Ward Support	Status A
	NA-xx-03-PL-252-405	01	Third Floor Plan - Plant	Status A
	NA-xx-03-PL-252-406	01	Third Floor Plan - Plant	Status A
	NA-xx-03-PL-252-409	01	Third Floor Plan - Plant	Status A
	NA-xx-04-PL-252-402	06	Fourth Floor Plan_NCH_DCFP	Status A
	NA-xx-04-PL-252-403	05	Fourth Floor Plan-NSGH Haemato-Oncology Ward	Status A
	NA-xx-04-PL-252-406	01	Fourth Floor Plan - NCH Plant	Status A
	NA-xx-04-PL-252-411	06	Fourth Floor Plan_NSGH Generic Ward Support, Higher Acuity Renal Ward and Renal Ward	Status B
	NA-xx-05-PL-252-400	01	Fifth Floor Plan - Generic Ward - Lift Core	Status A
	NA-xx-05-PL-252-401	02	Fifth Floor Plan Rheumatology Ward	Status A
	NA-xx-05-PL-252-402	02	Fifth Floor Plan NSGH ENT Ward	Status A

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File	Document No	Revision	Title	Status
	NA-xx-05-PL-252-403	02	Fifth Floor Plan Generic Ward (1 of 2)	Status A
	NA-xx-05-PL-252-404	02	Fifth Floor Plan Generic Ward (2 of 2)	Status A
	NA-xx-06-PL-252-400	07	Sixth Floor Plan_Generic Ward_Lift Core	Status A
	NA-xx-06-PL-252-401	07	Sixth Floor Plan_Generic Ward	Status A
	NA-xx-06-PL-252-402	03	Six Floor Plan-Generic Ward (Helipad)	Status A
	NA-xx-06-PL-252-403	01	Sixth Floor - NSGH Generic Ward	Status A
	NA-xx-06-PL-252-404	01	Sixth Floor Plan - NSGH Generic Ward	Status A
	NA-xx-07-PL-252-400	01	Seventh Floor Plan - Generic Ward - Lift Core	Status B
	NA-xx-07-PL-252-401	01	Seventh Floor Plan - NSGH Generic Ward (1 of 4)	Status A
	NA-xx-07-PL-252-402	01	Seventh Floor Plan - NSGH Generic Ward (2 of 4)	Status A
	NA-xx-07-PL-252-403	01	Seventh Floor Plan - NSGH Generic Ward (3 of 4)	Status A
	NA-xx-07-PL-252-404	01	Seventh Floor Plan - NSGH Generic Ward (4 of 4)	Status A
	NA-xx-08-PL-252-400	01	Eighth Floor Plan - Generic Ward - Atrium and Lift Core	Status A
	NA-xx-08-PL-252-401	01	Eighth Floor Plan - NSGH Elderly Ward	Status A
	NA-xx-08-PL-252-402	01	Eigth Floor Plan - NSGH Generic Ward	Status A
	NA-xx-08-PL-252-403	01	Eigth Floor Plan - NSGH Generic Ward	Status A
	NA-xx-08-PL-252-404	01	Eigth Floor Plan - NSGH Generic Ward	Status A

A52787523

File	Document No	Revision	Title	Status
	NA-xx-09-PL-252-400	01	Nineth Floor Plan - Generic Ward - Atrium and Lift Core	Status A
	NA-xx-09-PL-252-401	01	Nineth Floor Plan - Generic Ward	Status A
	NA-xx-09-PL-252-402	01	Nineth Floor Plan - Generic Ward	Status A
	NA-xx-09-PL-252-403	01	Nineth Floor Plan - Generic Ward	Status A
	NA-xx-09-PL-252-404	01	Nineth Floor Plan - Generic Ward	Status A
	NA-xx-10-PL-252-400	01	Tenth Floor Plan - NSGH Ward - Atrium and Lift Core	Status A
	NA-xx-10-PL-252-401	01	Tenth Floor Plan - NSGH Ward	Status A
	NA-xx-10-PL-252-402	01	Tenth Floor Plan - NSGH Ward	Status A
	NA-xx-10-PL-252-403	01	Tenth Floor Plan - NSGH Ward	Status A
	NA-xx-10-PL-252-404	01	Tenth Floor Plan - NSGH Ward	Status A
	NA-xx-11-PL-252-400	01	Eleventh Floor Plan - NSGH Ward - Atrium and Lift Core	Status A
	NA-xx-11-PL-252-401	01	Eleventh Floor Plan - NSGH Ward - Atrium	Status A
	NA-xx-11-PL-252-402	01	Eleventh Floor Plan - NSGH Ward - Atrium	Status A
	NA-xx-11-PL-252-403	01	Eleventh Floor Plan - NSGH Ward - Atrium	Status A
	NA-xx-11-PL-252-404	01	Eleventh Floor Plan - NSGH Ward - Atrium	Status A
	NA-xx-12-PL-252-400	01	Twelfth Floor Plan - NSGH Atrium and Lift Core	Status A
	NA-xx-12-PL-252-401	01	Twelfth Floor Plan - Plant Room (1 of 4)	Status A

A52787523

File	Document No	Revision	Title	Status
	NA-xx-12-PL-252-402	01	Twelfth Floor Plan - Plant Room (2 of 4)	Status A
	NA-xx-12-PL-252-403	01	Twelfth Floor Plan - Plant Room (3 of 4)	Status A
	NA-xx-12-PL-252-404	01	Twelfth Floor Plan - Plant Room (4 of 4)	Status A
	NA-xx-13-PL-252-402	01	Thirteenth Floor Plan - Ramp Access to Helipad	Status A
	NA-xx-14-PL-252-402	01	Fourteenth Floor Plan - Helipad	Status A
	NA-xx-B1-PL-252-400	06	Basement Floor Plan_Kitchen, FM & Distribution Stores, Bed Maintenance and AGV Charging	Status A
	NA-xx-B1-PL-252-401	01	Basement Floor Plan - Kitchen / FM & Distribution and Stores	Status A

ATTRIBUTES

Attribute 1	Stage 3 - Adults New Hospital, Stage 3 - Childrens New Hospital
Attribute 2	030. Architectural, 600. Reviewable Design Data (RDD)

MESSAGE

Dear All

Please find attached 1:200 department plan drawings for RDD Review, returned with comments and review status for your information/action.

Please note comment received from NHS Board - Lift cores C&D require name change in hold area to "Clean & Dirty Hold" Refer PMI Sypro ref ID488. Lift note can be picked up during next Gen revision.

(Attached: 82 Drawings).

Kindest Regards
Jules

Document Control - Construction

Brookfield Multiplex
NSGH Project Office
Hardgate Road
Govan
G51 4SX

A52787523

Glasgow

Tel: [redacted]

See paper apart
(Note: due to the size of the document it is provided apart from this bundle)

New South Glasgow Hospital
Adult Hospital Bedroom

A52787523

Brookfield

NHS Greater Glasgow and Clyde

The Scottish Government

New Southern General Hospitals

Project Management Instruction Report

Notify

ID	1109	**Notified by**	GGC01.sfrew on 22/06/2012 15:03:30
Notified to	BCL01-Brookfield Construction Limited	**Date notified**	22/06/2012
Date response required	06/07/2012		
Title	PMI 173 - A&C Hospitals - Sensor Taps		
Description	The Board advise BMCL that they require all taps to be non-sensor with the exception of those taps previously identified to meet the BREEAM criteria.		
Instruction	As above		
Status	None	**Cancel PMI**	None

Meeting

Documents

Notes

This document states the correct information at time of production (Thursday 22th June @15:38).
Content is subject to change at any moment in time and cannot be used as evidence of current information
Sypro takes no responsibility for out of date information.

A52787523

MAIL TYPE	MAIL NUMBER	REFERENCE NUMBER
Early Warning Notice	BMCE-EWN-000480	BMCE-GC-037703

Fwd: PMI 228 - Change to NSGH Level 4 - hepa filtration

From Mr James Bailey - Brookfield Multiplex Construction Europe

To (23)

Mr Gavin Burnett - Brookfield Multiplex Construction Europe
Mr Alasdair Fernie - Brookfield Multiplex Construction Europe
Mr Ken Hall - Brookfield Multiplex Construction Europe
Mr Paul Heath - Brookfield Multiplex Construction Europe
Mr Nigel Hollowell - Brookfield Multiplex Construction Europe
Mr Derek McFarlane - Brookfield Multiplex Construction Europe
Mr George McLatchie - Brookfield Multiplex Construction Europe
Mr George Miller - Brookfield Multiplex Construction Europe
Mr Jim Murray - Brookfield Multiplex Construction Europe
Mr Darren Pike - Brookfield Multiplex Construction Europe
Mr Darren Smith - Brookfield Multiplex Construction Europe
Mr Grant Wallace - Brookfield Multiplex Construction Europe
Ms Ceara Pimley - Gillespies Landscape Architect
Ms Liane Edwards - NIGHTINGALE ASSOCIATES
Mr Justin Liebenberg - NIGHTINGALE ASSOCIATES
Mr JASON TRUSCOTT - NIGHTINGALE ASSOCIATES
Ms EMMA WHITE - NIGHTINGALE ASSOCIATES
Mr JOHN WIGGETT - NIGHTINGALE ASSOCIATES
Mr Pete Dunbar - WSP UK
Mr Neil McGarry - WSP UK
Mr Michael Woods - WSP UK
Mr John Young - WSP UK
Mr Zisman NSGH - Zisman Bowyer and Partners

Sent Wednesday, 17 July 2013 9:26:42 AM BST (GMT +01:00)

Status **Closed-Out**

A52787523

FILE ATTACHMENTS (1)

File Name
PMI 228 - Change to NSGH Level 4 - hepa filtration.pdf

ATTRIBUTES

Attribute 1	Stage 3 - Adults New Hospital, Stage 3 - Childrens New Hospital
Attribute 2	010. General Project Administration

MESSAGE

EARLY WARNING NOTICE

The following matters could:

- Increase the total of the prices
- Delay Completion
- Delay meeting a Key Date
- Impair performance of the works in use

***DETAILS OF EARLY WARNING NOTIFICATION (Please attach relevant documents)**

Further to the drawings and information previously provided by Heather Griffin identifying changes to NSGH level 4 the Board request that: a) BMCL stop the fit out works in this area b) BMCL provide an assessment of the works already carried out in this area c) BMCL and NHS to develop the design detail utilizing the RDD process in order to come to a design within the £700k (inc OH&P) as currently identified by BMCL. Initial design meetings with HGriffin can commence w/c 8th July 2013 (took Place Tuesday 16th July 2013)

*The following works may be affected:

***PROPOSALS REQUIRED (Assumptions to be noted if any)**

Proposals already discussed and minuted. EWN sent out for administration purposes.

You are instructed to attend a risk reduction meeting on *(DD/MM/YY) to discuss the above.

A52787523

From: J Clare

Sent: 08/07/2013 7:53:28 AM BST (GMT +01:00)

To: Ope Adebanjo, James Bailey, Tim Baillie , John Ballantyne, Patricia Ballantyne, Peter Beauchamp, Andrew Bebbington, Gary Bennett, John Beryl, Rob Blady, David Bower, Gavin Burnett, John Clare, John Curry, Jamie Davies, Steven Docherty, Andrew Eagleton, Alasdair Fernie, Jamie Ferrie, David Fraser, Hugh gallagher, William Gingell, David Goudie, Colin Grindlay, Ken Hall, Andy Halliday, Ian Hamilton, Paul Heath, Nigel Hollowell, Stuart Jackson, Leigh Jamieson, Russell Johnson, David Jordan, Alan Keeley, Andy Kerr, Samson Kolawole, Chris Martin, Derek McFarlane , Paul McGuinness, Mark McKinnon, Steven McLachlan, George McLatchie, Julie Miller, Paul Miller, Jim Murray, Peter Norton, Jamie Philip, Darren Pike, Stewart Preston, Andrew Richardson, Malcolm Ross, Mike Sharples, Fergus Shaw, Darren Smith, Allan Stephen, William Todd, John Wales, Grant Wallace, Chris Wilson, David Wilson

Mail Number: BMCE-GC-037703

Subject: PMI 228 - Change to NSGH Level 4 - hepa filtration

Dear All,

Please find attached PMI 228 as instructed by the Board. Please note there are no accompanying documents for this PMI.

Regards,

John Clare
Project Accounts Assistant

Brookfield Multiplex Construction Europe Ltd
NSGH Project Office
Hardgate Road
Glasgow
G51 4SX
T [redacted]
E [redacted]
W www.brookfieldmultiplex.com

PMI 228 - Proposed Design Programme

		w/c	15/07/2013	22/07/2013	29/07/2013	05/08/2013	12/08/2013	19/08/2013	26/08/2013	02/09/2013	09/09/2013	16/09/2013	23/09/2013	30/09/2013	07/10/2013
Item No	Description														
1	BMCE / Design Team meet with NHS and agree Layout / Ventilation Schematic / Plant Room Schematic														
2	NA to prepare & issue GA plan to design team														
3	Design Team Coordiantion Meetings														
4	NA to prepare & Issue update to all relevant drawing series														
5	WW to prepare & Issue update of all relevant construction drawings / schedules etc														
6	WSP to prepare & Issue update of all relevant construction drawings / schedules etc														
7	Mercury to prepare & Issue update of all relevant construction drawings / schedules etc														
8	BMCE review prior to issue to NHS for RDD														
9	BMCE to Issue full package of drawings / schedules etc to NHS for RDD														
10	NHS RDD review & return														
11	Design Team to prepare and issue ammedments to relevant Building Warants														

IBI Nightingale

Consultants Fee

Ref 09080/120

Description:

Work associated with BMCE-EWN-000382- amendment to Level 04 ward wing and 2no isolation rooms to upgrade to Haemato-oncology standard, and amend ward entrance to typical ward layout

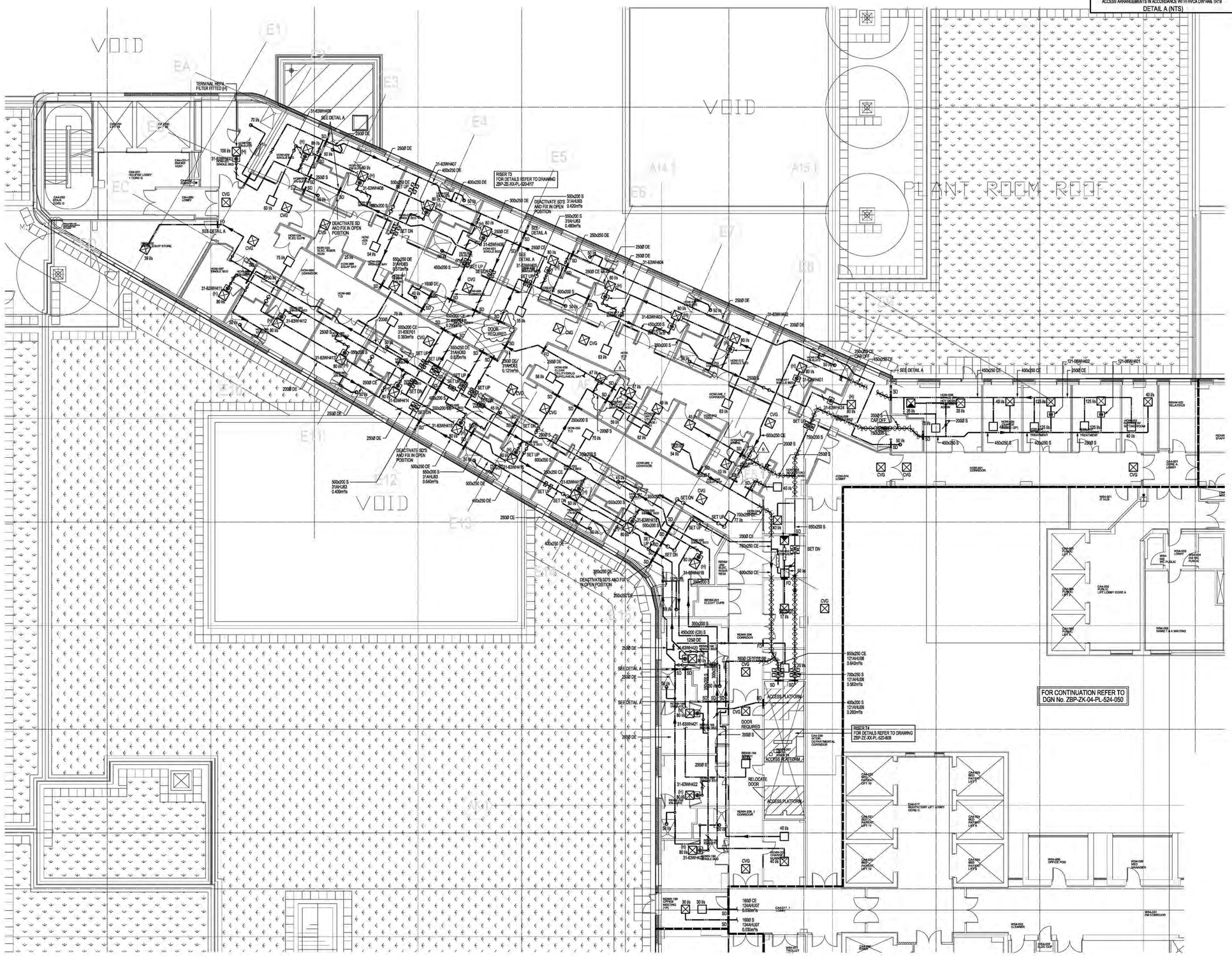
Date 22.05.13

Prepared L Edwards

- **brief/ scope clarification meeting (NHS/BM)**
- **252 series revisions (internal setting-out)**
- **322 series plans & schedules (internal doors)**
- **330 series plans (finishes)**
- **332 series revisions (ceilings)**
- **400 series revisions (Fixtures & Fittings, drawings and RDS)**
- **572 series revision (fire Strategy)**
- **QA / checking / upload**
- **reco-ordination time (consultants)**

Total exl. VAT, and extras

Total	**£7,800.00**



TYPICAL DETAIL AT DEPARTMENT FIRE BARRIERS
(CIRCULAR DUCTWORK DETAIL SIMILAR)
ACCESS ARRANGEMENTS IN ACCORDANCE WITH HVCA DW144& TR19

DETAIL A (NTS)

GRILLE DUCT CONNECTIONS SCHEDULE

DUCT SIZE mm	MAX AIR VOL l/s
100Ø	18
125Ø	28
160Ø	47
200Ø	76
250Ø	125
315Ø	195
355Ø	230
400Ø	300

Notes:
- This drawing is copyright.
- Do not scale dimensions from this drawing.
- All discrepancies on this drawing are to be reported to the architect.
- Do not modify any element of this drawing.
- Use drawing only for purpose(s) issued.

No	Design Risk Register

This Drawing corresponds with Architects and Structural Drawings
Architects electronic issue dated as below
Compiled from the following reference files:

X-NA-XX-04-PL-251-WIP-FourthFloorPlan_25	dated 09/11/12
X-NA-SZ-04-PL-252-WIP-NSGH-ZE_ZF_ZI_ZJ_ZK_31	dated 17/10/13
X-NA-SZ-04-PL_400-WIP-NSGH-ZE_ZF_ZI_ZJ_ZK_27	dated 17/10/13

and Structural Engineers drawing:

X-WSP-SZ-04-PL-260-WIP-STRUCTURAL_32	dated 11/09/12
X-WSP-SZ-XX-PL-260-WIP-GRID_05	dated 04/04/11
X-WSP-SZ-04-PL-220-WIP-SLAB_10	dated 11/09/12

Architects to be informed of all discrepancies in dimensions
Contractor to check all dimensions on site
© This drawing is copyright

NOTES

1. FOR SYMBOLOGY REFER TO ZBP DRG No. ZBP-XX-XX-DT-S90-001
2. THIS DRAWING TO BE READ IN CONJUNCTION WITH ALL CONTRACT DOCUMENTATION
3. REFER TO LATEST ARCHITECTURAL AND STRUCTURAL DRAWINGS AND RELEVANT CONSTRUCTION DETAILS.
4. GRILLE POSITIONS SHOWN ON THIS DRAWING ARE INDICATIVE ONLY AND SUBJECT TO FINAL SELECTION AND CO-ORDINATION BY SUB CONTRACTOR
5. WHERE LONG RUNS OF PARALLEL DUCTWORK EXIST A CLEARANCE OF 300mm MUST BE ALLOWED TO ALLOW FOR FIXINGS TO BE MADE TO THE STRUCTURE FOR PARTITIONING, CEILINGS AND OTHER SERVICES ETC.
6. WHERE FIRE RATED DUCTWORK IS INDICATED, IT SHALL EXTEND TO A MINIMUM OF 150mm BEYOND THE WALLS OF THE PROTECTED ROOM(S).
7. WHERE DUCTWORK PASSES THROUGH FIRE OR SOUND RATED WALLS OR STRUCTURE THE HOLE THROUGH WHICH THE DUCT PASSES SHALL BE MADE GOOD TO EQUAL THE RATING OF THE WALL/STRUCTURE
8. ACCESS PANELS TO BE SIZED AND POSITIONED IN ACCORDANCE WITH HVCA DW144 & TR19
9. EACH INDIVIDUAL GRILLE/ DIFFUSER BRANCH DUCT CONNECTION SHALL INCORPORATE AN OPPOSED BLADE VOLUME CONTROL DAMPER POSITIONED AS FAR AS POSSIBLE FROM THE TERMINAL. WHERE THIS IS NOT PRACTICAL THE GRILLE/ DIFFUSER SHALL INCORPORATE AN OPPOSED BLADE VOLUME CONTROL DAMPER. FOR CLARITY THESE DAMPERS ARE NOT INDICATED ON THE DRAWINGS
10. ACCESS TO VCD'S ABOVE NON ACCESSIBLE CEILINGS TO BE CO-ORDINATED WITH LUMINAIRE POSITIONS

Rev	Date	Revision Notes	Drn	Chk
H	22.11.13	FIRE/ SMOKE DAMPERS ADDED TO SUIT UPDATED FIRE STRATEGY	RTS	SDP
G	13.11.13	RDD COMMENTS INCORPORATED COMMENT BOX AMENDED	RTS	SDP
F	11.10.13	RDD COMMENTS INCORPORATED COMMENT BOX ADDED	RTS	SDP
E	01.10.13	PMI 228 - MINOR MODIFICATIONS AS INDICATED	RTS	SDP
D	23.08.13	PMI 228 HEPA FILTERS & HEATER BATTERIES ADDED. VENTILATION AMENDED TO SUIT REVISED ARCHITECTURAL LAYOUTS.	RTS	MH
C	22.11.12	AIR VOLUMES AT RISERS AMENDED. NOTES ADDED. HEATER BATTERY REFERENCES AMENDED.	RTS	AP
B	30.08.12	ISSUED FOR BUILDING WARRANT	AEM	AP
A	03.05.12	ISSUED FOR CONSTRUCTION T3 SERVICES FROM RISERS AMENDED. CHILLED BEAM ARRANGEMENTS AMENDED. DIRTY EXTRACTS FROM EN-SUITES AMENDED. VENTILATION ROUTES AMENDED TO CO-ORDINATE WITH PIPED SERVICES AND DRAINAGE. DETAIL "A" ADDED	RTS	AP
01	16.03.12	ISSUED FOR TENDER T1 REVIEW	RTS	AP

Client: NHS Greater Glasgow and Clyde

Contractor: Brookfield MULTIPLEX / BM

WALLACE WHITTLE Consulting Engineers

Project: NEW SOUTH GLASGOW HOSPITALS (NSGH) PROJECT

Drawing Title: MECHANICAL SERVICES VENTILATION LAYOUT FOURTH FLOOR NSGH HAEMO ONCOLOGY WARD

Job No	Drawn	Checked	Approved
2900	RTS	AP	AP

Status	Date	Scale @ A0
CONSTRUCTION T3	JAN'11	1:100

Drawing No.

Origin	Zone	Level	Type	Content	Sequential	
ZBP	ZE	04	PL	524	045	H

PLOTTED:22/01/2013 @ 15:53:52 BY:akcarme
U:\Asset\Hospital\2900 Stage 2\BIM Drawings\Mechanical\Fourth Floor\Zone E\ZBP-ZE-04-PL-524-045.dgn

Glasgow DocControl MULTIPLEX CONSTRUCTION EUROPE	Final (WF-003737) RDD - FIRST SUBMISSION WORKFLOW TRANSMITTAL	11/07/2013 BMCE-WTRAN-008189
Glasgow DocControl MULTIPLEX CONSTRUCTION EUROPE	Fwd: Final (WF-003737) RDD - FIRST SUBMISSION - … TRANSMITTAL	11/07/2013 BMCE-TRANSMIT-016760

MAIL TYPE	MAIL NUMBER	REFERENCE NUMBER
Transmittal	BMCE-TRANSMIT-016760	BMCE-WTRAN-008189

Fwd: Final (WF-003737) RDD - FIRST SUBMISSION - 332 series 1:50s RCPs PG10 Issued for Review - Reviewed

From Glasgow DocControl - Brookfield Multiplex Construction Europe

To (29)

Ms Harinder Kaur - Astins Ltd

Mr Gavin Burnett - Brookfield Multiplex Construction Europe

Ms Emma Cooper - Brookfield Multiplex Construction Europe

Mr Ken Hall - Brookfield Multiplex Construction Europe

Mr Jim Murray - Brookfield Multiplex Construction Europe

Ms Ceara Pimley - Gillespies Landscape Architect

Ms Joanne Walker - Gillespies Landscape Architect

Karen Connelly - Glasgow NHS Board

Mrs Heather Griffin - Glasgow NHS Board

Mr David W Loudon - Glasgow NHS Board

Ms Mairi Macleod - Glasgow NHS Board

Mrs Fiona McCluskey - Glasgow NHS Board

Mr Peter Moir - Glasgow NHS Board

Ms Jackie Stewart - Glasgow NHS Board

Frances Wrath - Glasgow NHS Board

NSGH Document Control - Mercury Engineering

Mr Brendan Rooney - Mercury Engineering

Ms ANNIE CHEUNG - NIGHTINGALE ASSOCIATES

Ms Liane Edwards - NIGHTINGALE ASSOCIATES

Mr TERRY LANE - NIGHTINGALE ASSOCIATES

Mr MARK LLOYD - NIGHTINGALE ASSOCIATES

Ms ELIZABETH PETROVITCH - NIGHTINGALE ASSOCIATES

Ms Carla Queiroz - NIGHTINGALE ASSOCIATES

A52787523

Ms Magda Szczepanska - NIGHTINGALE ASSOCIATES

Ms EMMA WHITE - NIGHTINGALE ASSOCIATES

Mr Neil McGarry - WSP UK

Mr John Young - WSP UK

Mr Zisman NSGH - Zisman Bowyer and Partners

Mr Steve Pardy - Zisman Bowyer and Partners

Cc (44)

Mr Raymond Snell - ARJO MED AB LTD

Mr Gerry Goldie - Astins Ltd

Ms Shannon Ramsay - Astins Ltd

Mr Donnie Gillespie - Baxter & Gillespie Ltd

Mr Stuart Andrews - Brookfield Multiplex Construction Europe

Gillon Armstrong - Brookfield Multiplex Construction Europe

Mr John Beryl - Brookfield Multiplex Construction Europe

Mr David Campbell - Brookfield Multiplex Construction Europe

Mr John Curry - Brookfield Multiplex Construction Europe

Mr Mark Dickson - Brookfield Multiplex Construction Europe

Andrew Eagleton - Brookfield Multiplex Construction Europe

Mr Hugh gallagher - Brookfield Multiplex Construction Europe

Mr David Goudie - Brookfield Multiplex Construction Europe

Mr Ken Hall - Brookfield Multiplex Construction Europe

Mr Russell Johnson - Brookfield Multiplex Construction Europe

Mark McKinnon - Brookfield Multiplex Construction Europe

Mr Stevie McLachlan - Brookfield Multiplex Construction Europe

Julie Miller - Brookfield Multiplex Construction Europe

Mr John Mitchell - Brookfield Multiplex Construction Europe

Lachlan Nicholson - Brookfield Multiplex Construction Europe

Mr Peter Norton - Brookfield Multiplex Construction Europe

Mr Brian Park - Brookfield Multiplex Construction Europe

Mr Jamie Philip - Brookfield Multiplex Construction Europe

Mr Stewart Preston - Brookfield Multiplex Construction Europe

Mr Andrew Richardson - Brookfield Multiplex Construction Europe

Mr Malcolm Ross - Brookfield Multiplex Construction Europe

Mr Fergus Shaw - Brookfield Multiplex Construction Europe

Mr Sam Small - Brookfield Multiplex Construction Europe

Mr Darren Smith - Brookfield Multiplex Construction Europe

Mr Allan Stephen - Brookfield Multiplex Construction Europe

Mr Jerry Sullivan - Brookfield Multiplex Construction Europe

Mr William Todd - Brookfield Multiplex Construction Europe

Mr Chris Wilson - Brookfield Multiplex Construction Europe

Mr COLIN BURGESS - CATERING DESIGN SERVICES

Mr Daniel Howell - Deanestor Plc

Mr Ryan Eagle - Fenestra FF&E

Ms Shiona Frew - Glasgow NHS Board

Mr Steve Houston - JTC Furniture Group

Mr David Winning - Morris and Spottiswood

PFP Admin - PFP Ltd

Mr Mark Reeves - Stopfire Limited

Mr Safedar Mohamed - Timbmet Door Solutions Limited

Mr Pete Dunbar - WSP UK

Mr Michael Woods - WSP UK

Sent Thursday, 11 July 2013 3:13:26 PM BST (GMT +01:00)

Reason Returned with Comments and Review Status

Status N/A

DOCUMENT ATTACHMENTS (15)

(**15** selected)

File	Document No	Revision	Title	Status
	NA-ZA-02-PL-332-513	A	Second Floor-NCH Acute Receiving Unit-Ceiling & Soffit plan	Status B
	NA-ZA-02-PL-332-514	A	Second Floor-NCH Acute Receiving Unit-Ceiling & Soffit plan	Status B
	NA-ZB-02-PL-332-510	A	Second Floor-NCH Anaesthetic Offices/Admin Support-Ceiling & Soffit plan	Status A
	NA-ZB-02-PL-332-511	A	Second Floor-NCH Day Investigation Unit-Ceiling & Soffit plan	Status B
	NA-ZB-02-PL-332-512	A	Second Floor-NCH Acute Receiving Unit-Ceiling & Soffit plan	Status B
	NA-ZC-02-PL-332-508	A	Second Floor-NCH Schehallion Ward-Ceiling & Soffit plan	Status B
	NA-ZC-02-PL-332-509	A	Second Floor-NCH Schehallion Ward-Ceiling & Soffit plan	Status B

A52787523

File	Document No	Revision	Title	Status
	NA-ZF-02-PL-332-505	A	Second Floor-NSGH Dermatology Ward-Ceiling & Soffit Plan	Status B
	NA-ZF-02-PL-332-506	A	Second Floor-NSGH Dermatology Ward-Ceiling & Soffit Plan	Status A
	NA-ZF-02-PL-332-507	A	Second Floor-NSGH Dermatology Ward-Ceiling & Soffit Plan	Status B
	NA-ZJ-02-PL-332-529	A	Second Floor-NSGH Dermatology OPD-Ceiling & Soffit Plan	Status A
	NA-ZJ-02-PL-332-530	A	Second Floor-NSGH Dermatology OPD-Ceiling & Soffit Plan	Status A
	NA-ZJ-02-PL-332-531	A	Second Floor-NSGH Renal Dialysis-Ceiling & Soffit Plan	Status B
	NA-ZJ-02-PL-332-532	A	Second Floor-NSGH Renal Dialysis-Ceiling & Soffit Plan	Status B
	NA-ZJ-02-PL-332-533	A	Second Floor-NSGH Renal Dialysis-Ceiling & Soffit Plan	Status B

ATTRIBUTES

Attribute 1	Stage 3 - Adults New Hospital, Stage 3 - Childrens New Hospital
Attribute 2	030. Architectural, 600. Reviewable Design Data (RDD)

MESSAGE

Dear All,

Please see attached reviewed RDD documents with NHS comments and status stamp for your Information and/or action.

If you have any queries about the attached please dont hesitate to contact us on the below details.

Regards,

Danielle

Document Control - Construction

Brookfield Multiplex
NSGH Project Office
Hardgate Road
Govan
G51 4SX

Glasgow

Tel: [redacted]

From: G DocControl

Sent: 11/07/2013 3:12:05 PM BST (GMT +01:00)

To: Glasgow DocControl

Cc: Gavin Burnett, Darren Smith, Karen Connelly, Shiona Frew, Mairi Macleod, Peter Moir, Alan Seabourne, Frances Wrath, Liane Edwards, TERRY LANE, Matthias Peretz, ELIZABETH PETROVITCH, Carla Queiroz, Magda Szczepanska, JASON TRUSCOTT, EMMA WHITE, JOHN WIGGETT

Mail Number: BMCE-WTRAN-008189

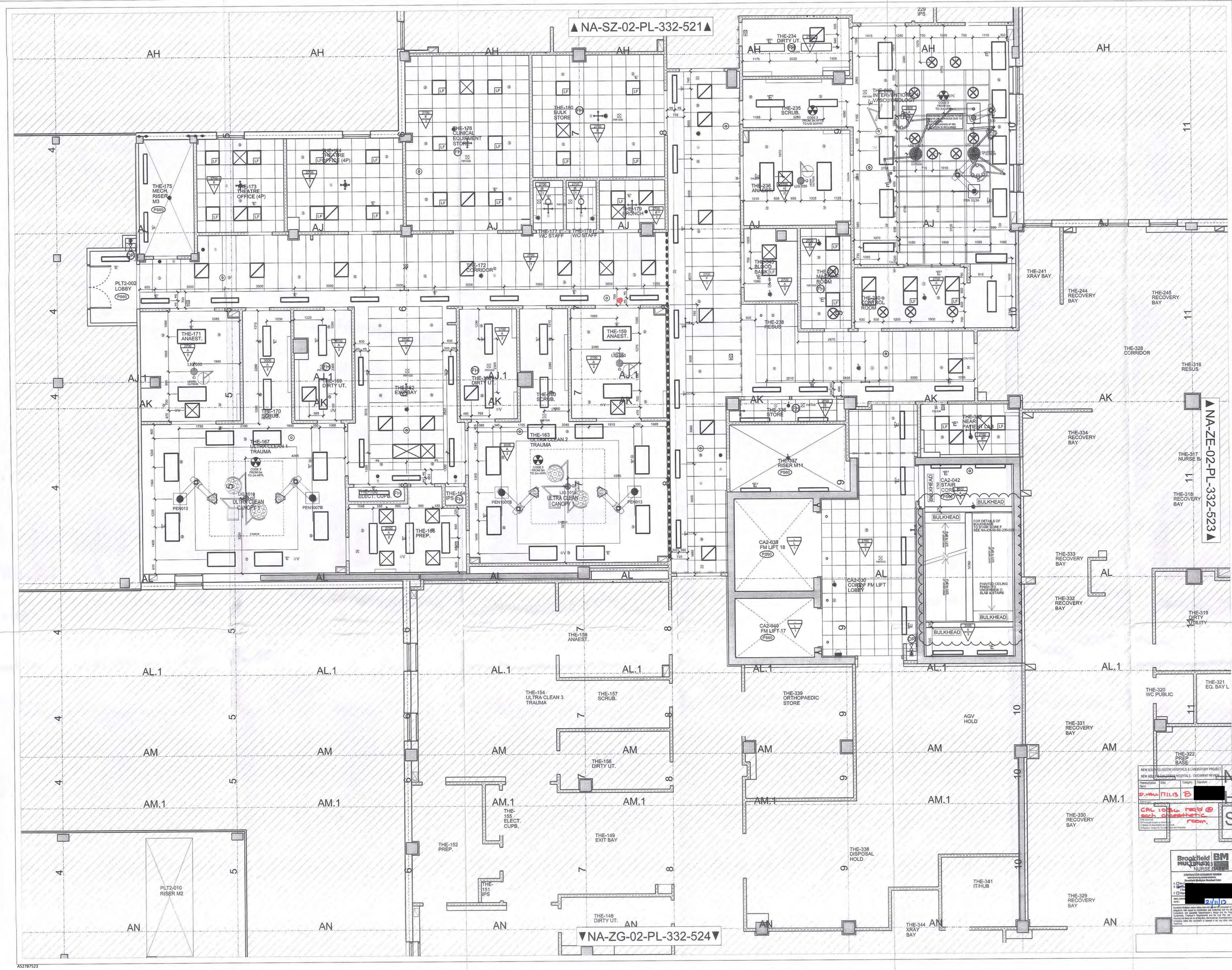
Subject: Final (WF-003737) RDD - FIRST SUBMISSION

Workflow Review History

The attached documents have completed the "RDD - FIRST SUBMISSION" workflow with the following results :

This transmittal was automatically generated.

Doc No	Step	Participant	Review Outcome	Comments
NA-ZJ-02-PL-332-533	RDD - NHS	G DocControl	Proceed Subject to Comments	
NA-ZJ-02-PL-332-532	RDD - NHS	G DocControl	Proceed Subject to Comments	
NA-ZJ-02-PL-332-531	RDD - NHS	G DocControl	Proceed Subject to Comments	
NA-ZJ-02-PL-332-530	RDD - NHS	G DocControl	No Comment	
NA-ZJ-02-PL-332-529	RDD - NHS	G DocControl	No Comment	
NA-ZF-02-PL-332-507	RDD - NHS	G DocControl	Proceed Subject to Comments	
NA-ZF-02-PL-332-506	RDD - NHS	G DocControl	No Comment	
NA-ZF-02-PL-332-505	RDD - NHS	G DocControl	Proceed Subject to Comments	
NA-ZC-02-PL-332-509	RDD - NHS	G DocControl	Proceed Subject to Comments	
NA-ZC-02-PL-332-508	RDD - NHS	G DocControl	Proceed Subject to Comments	
NA-ZB-02-PL-332-512	RDD - NHS	G DocControl	Proceed Subject to Comments	
NA-ZB-02-PL-332-511	RDD - NHS	G DocControl	Proceed Subject to Comments	
NA-ZB-02-PL-332-510	RDD - NHS	G DocControl	No Comment	
NA-ZA-02-PL-332-514	RDD - NHS	G DocControl	Proceed Subject to Comments	
NA-ZA-02-PL-332-513	RDD - NHS	G DocControl	Proceed Subject to Comments	



Notes:
- This drawing is copyright.
- Do not scale dimensions from this drawing.
- All discrepancies on this drawing are to be reported to the architect.
- Do not modify any element of this drawing.
- Use drawing only for purpose(s) issued.

Designer Identification of Hazard/Risk

- Indicates a Residual Risk requiring a Compulsory Action
- Indicates a Residual Risk for Information
- Indicates a Residual Risk requiring a Prohibitive Action
- Indicates a Residual Risk as a Warning

Note:

CEILING TYPE

CEILING SETTING OUT

CEILING MOUNTED SERVICES/EQUIPMENT

CEILING FINISHES

MECHANICAL SERVICES

LIGHTING SERVICES

PARTITION PERFORMANCE

REFERENCE DRAWINGS
STRUCTURAL
X-WSP-SZ-02-PL-260-WIP-STRUCTURAL_04
X-WSP-SZ-XX-PL-260-WIP-GRID_05
M+E
X-ME-SZ-02-PL-332-WIP-Zone D RCP_17
X-ME-ZE-02-PL-332-WIP-Zone E RCP_17

Rev	Date	Drw	Revision Notes	Chk	App
G	23/10/13	ML	STAIR CORE F FINISHES REVISED FOLLOWING BMC COMMENTS	ML	JL
F	10/10/13	ML	CEILING BULKHEAD & SETTING OUT ADDED TO STAIR CORE F	ML	JL
E	20/06/13	ML	CEILING REVISED AS PER STRATEGY/1:50 RDD COMMENTS RE-ISSUED FOR REVIEW (T3)	LE	EW
D	17/04/13	ML	PG2 Zone D/E re-issued for review (T3) following Pendant coordination between Mer/Board & general updates to M+E	LE	EW
C	22/01/13	ML	PG2 Zone D/E Issued for review (T3)	LE	EW
B	04/07/12	ML	PG2 Zone D/E Issued for RDD incorporating BMC review comments.	LE	EW
A	01/06/12	ML	Issued for Construction Production Group 2 Zone D & E	LE	EW
01	29/03/12	GOB	ISSUED FOR TENDER (T2)	ML	EW

0 6 NOV 2013

Client: NHS

Contractor: Brookfield MULTIPLEX BM

NIGHTINGALE associates architects
87-91 Newman Street
London
W1T 3EY
Tel: 0207 079 9900
Fax: 0207 079 9901
www.nightingaleassociates.com

Project: NEW SOUTH GLASGOW HOSPITALS (NSGH) PROJECT

Drawing Title: SECOND FLOOR NSGH THEATRES AODOS & RECOVERY CEILING AND SOFFIT PLAN

Job No	Drawn	Checked	Approved
09080	ML	LE	EW

Status	Date	Scale@A0
CONSTRUCTION	02/03/12	1:50

Origin	Zone	Level	Type	Content	Sequential	Rev
NA	SZ	02	PL	332	522	G

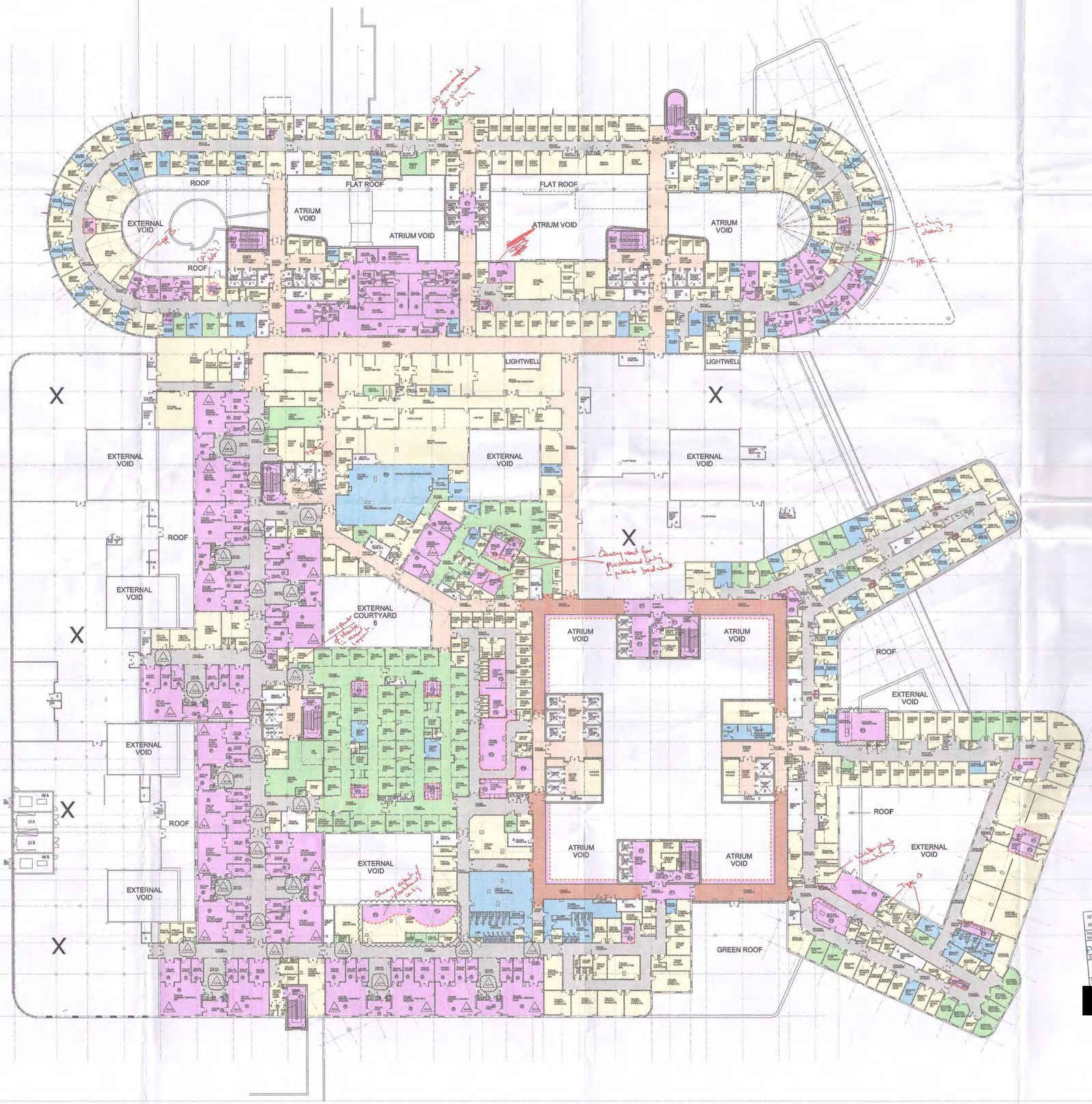
NEW SOUTH GLASGOW HOSPITALS & LABORATORY PROJECT
NEW ADULTS/CHILDREN'S HOSPITALS - DOCUMENT REVIEW

Representative Name	Date	Category	Signature
D. HALL	17.11.13	B	[redacted]

Comments:
CAL 10/34 reqd @ each anaesthetic room.

Brookfield MULTIPLEX BM
NURSE BASE
CONSTRUCTION DOCUMENT REVIEW
NEW SOUTH GLASGOW HOSPITAL
Brookfield Multiplex Received Date:
[redacted]
21/11/13

A52787523



MOTE: ALL TYPE G TO BE REPLACED WITH TYPE E

Notes:
- This drawing is copyright.
- Do not scale dimensions from this drawing.
- All discrepancies on this drawing are to be reported to the architect.
- Do not modify any element of this drawing.
- Use drawing only for purpose(s) issued.

Designer Identification of Hazard/Risk

X TYPE YOUR NOTES HERE

CEILING TYPE KEY

A		PLASTERBOARD CEILING SMOOTH SUPERCOOL® AND JOINTLESS MEMBRANE WITH CONCEALED SUPPORT GRID SYSTEM, NORMAL HUMIDITY AND CLASS 1 SURFACE SPREAD OF FLAME (WITH 60 CATEGORY 1)
B		600x600mm MOISTURE RESISTANT MINERAL FIBRE TILES SUPERCOOL® AND JOINTLESS MEMBRANE WITH EXPOSED GRID SYSTEM, HIGH HUMIDITY AND CLASS 1 SURFACE SPREAD OF (WITH 60 CATEGORY 2)
C		600x600mm MINERAL FIBRE TILES SUPERCORATE AND JOINTED MEMBRANE WITH CONCEALED SUPPORT GRID SYSTEM, HIGH HUMIDITY AND CLASS 1 SURFACE SPREAD OF FLAME (WITH 60 CATEGORY 2 & 3)
D		600x600mm MINERAL FIBRE TILES SUPERCOOL® AND JOINTLESS MEMBRANE WITH EXPOSED GRID SYSTEM, NORMAL HUMIDITY AND CLASS 1 SURFACE SPREAD OF FLAME (WITH 60 CATEGORY 4)
E		600x600mm MINERAL FIBRE TILES JOINTED MEMBRANE WITH EXPOSED GRID SYSTEM, NORMAL HUMIDITY AND CLASS 1 SURFACE SPREAD OF FLAME (WITH 60 CATEGORY 4 & 5)
F		600x1200mm SUSPENDED MINERAL TILE PLANK SYSTEM WITH SUPERCOOL® AND JOINTLESS MEMBRANE WITH EXPOSED GRID SUPERCORATE AND JOINTED MEMBRANE WITH EXPOSED GRID SYSTEM, NORMAL HUMIDITY AND CLASS 1 SURFACE SPREAD OF FLAME (WITH 60 CATEGORY 4)
G		300x1200mm SUSPENDED MINERAL TILE PLANK WITH ACOUSTIC CONCEALED SUPPORTS (SUPERCOOL® AND JOINTLESS MEMBRANE WITH EXPOSED GRID SUPERCORATE AND JOINTED MEMBRANE WITH EXPOSED GRID SYSTEM, NORMAL HUMIDITY AND CLASS 1 SURFACE SPREAD OF FLAME (WITH 60 CATEGORY 4)
H		SUSPENDED FABRIC STRETCH CEILING SYSTEM WITH SUPERCOOL® AND JOINTLESS MEMBRANE WITH CONCEALED MEMBRANE CONCEALED SUPPORT SYSTEM, NORMAL HUMIDITY AND CLASS 1 SURFACE SPREAD OF FLAME (WITH 60 CATEGORY 1)
J		TIMBER SHEATHING WITH ACOUSTIC PROPERTIES AS PER ACOUSTIC CONSULTANTS RECOMMENDATIONS (N.B. WITH PERFORATIONS & CONCEALED ACOUSTIC INSULATION)
K		SPECIAL 600x600mm ACOUSTIC TILE SUPERCOBOOTH 10 SLIM BY MPI WITH THE ACOUSTIC BOOTH DESIGN & BE PER ACOUSTIC CONSULTANTS RECOMMENDATIONS
L	X	TYPICALLY NO CEILING FINISH REQUIRED BUT ALLOW FOR DUSTPROOF SEALANT APPLIED TO SOFFITS OF ALL CABIN, GRILLE & MBE CUPBOARDS & IN ANY AREAS - UNLESS SPECIFIED SEPARATELY BY THE MBE ENGINEER
M		LARGE MODULE METAL CEILING PANEL SYSTEM WITH SUPERCOOL® AND JOINTLESS MEMBRANE WITH CONCEALED MESH EXTENDED SPACE IN LINE WITH EXTERNAL CANOPY SOFFIT DESIGN (Size approximately 2400x500mm)
N		SMALL MODULE METAL CEILING PANEL SYSTEM WITH CONCEALED GRID (size approximately 1000x300mm)
P		SPECIAL CEILING FINISH BY SPECIALISTS (TO ADVISE)
R		LOCKABLE METAL ACCESS CEILING PANELS WITHIN FINISH PLASTERBOARD CEILING

CEILING FINISHES & HEIGHT DETAILS KEY

1		"BLANK" = FACTORY SELF-FINISH - ALL TILES AND TILE PLANKS
2	A	ASEPTIC PAINT FINISH / ELASTOMERIC HYGIENE COATING WITH ANTI BACTERIAL PROPERTIES
3	P1	WATER BASED ACRYLIC DIAMOND EGGSHELL EMULSION PAINT
4	P2	WATER BASED ACRYLIC DIAMOND EGGSHELL EMULSION PAINT WITH ANTI-BACTERIAL PROPERTIES
5		BULKHEAD DETAIL - ALL BULKHEADS TYPICALLY MEASURE 300mm BELOW THE ADJACENT CEILING HEIGHT
6	3.2 m	CEILING HEIGHT IN METRES (FROM FFL TO UNDERSIDE OF CEILING SOFFIT) NOTE: ALL CEILING HEIGHTS ARE +0.2m UNLESS OTHERWISE STATED OR NOTED ON THE DRAWINGS

Rev	Date	Drw	Revision Notes	Chk	App
05	16/02/12	CQ	Ceiling heights in NSGH Theatres amended	LE	EW
04	13/01/12	CQ	Updated to pre RDD meeting comments	LE	EW
03	23/09/11	CQ	Updated to App K comments (clouded for clarity). Background updated to reflect 1:50 UGM Sign-Off.	EW	EW
02	24/09/10	CQ	Issued for Appendix K (FBC)	AB	AB
01	30/07/10	CQ	FIRST ISSUE	AB	AB

NEW SOUTH GLASGOW HOSPITALS
- 3 MAR 2012

NEW SOUTH GLASGOW HOSPITALS & LABORATORY PROJECT
NEW ADULT & CHILDRENS HOSPITALS - DOCUMENT REVIEW

Representative	Date	Category
[redacted]	16/4/12	B

Comment

1. No Comment
2. Proceed Subject to Amendment
3. Resubmit Revised Document

[redacted] AGREED 02/07/12

Client: NHS Greater Glasgow and Clyde

Contractor: Brookfield MULTIPLEX BM

NIGHTINGALE associates architects
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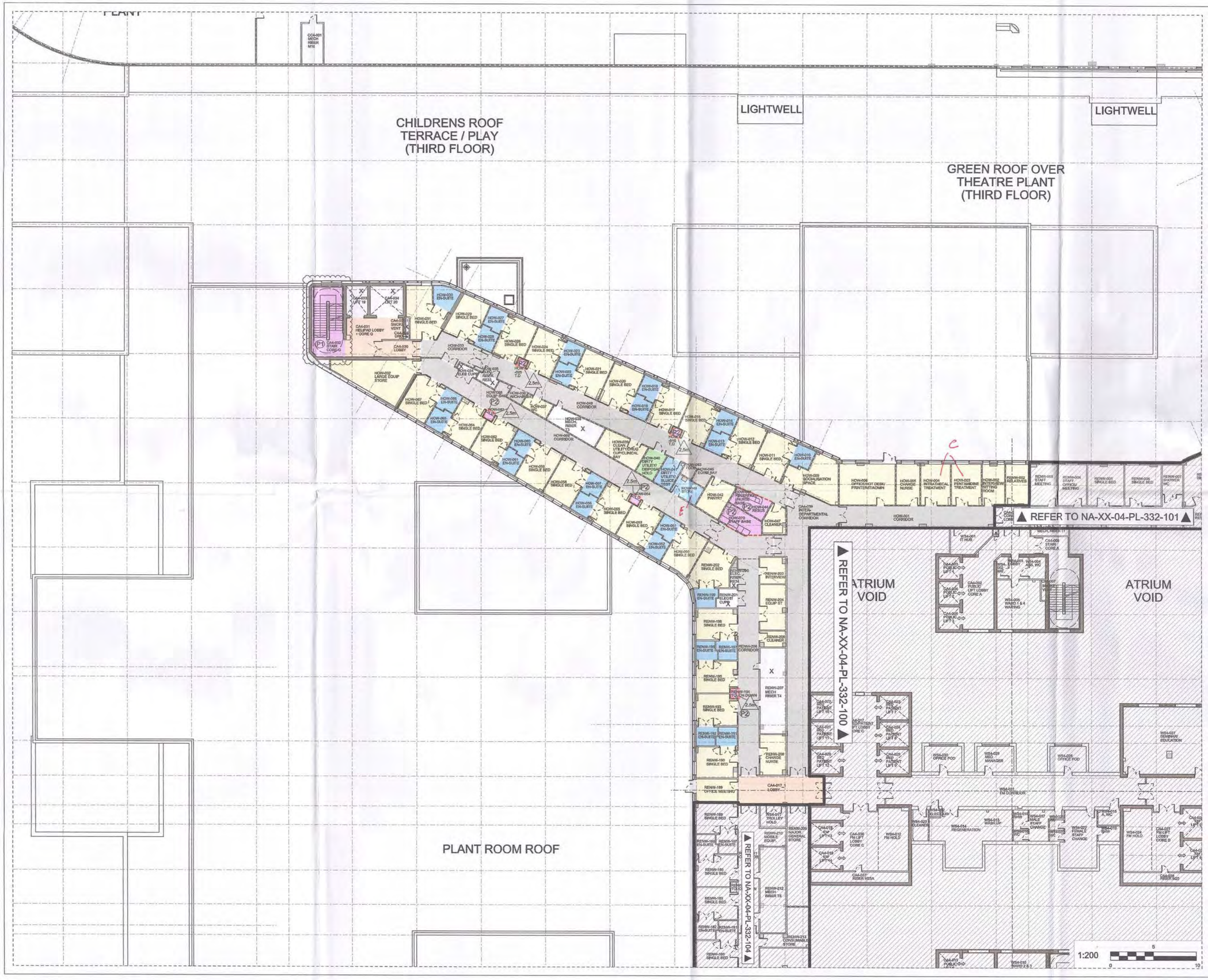
Project
NEW SOUTH GLASGOW HOSPITALS
(NSGH) PROJECT

Drawing Title
SECOND FLOOR PLAN
CEILING FINISHES
STRATEGY PLAN

Job No	Drawn	Checked	Approved
0908D	—	EW	EW
Status: Design Development		Date: 15/07/10	Scale@A0: 1:300

Drawing No						Rev
Origin	Zone	Level	Type	Content	Sequential	
NA	XX	02	PL	332	150	05

A52787523



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- This drawing is copyright.
- Do not scale dimensions from this drawing.
- All discrepancies on this drawing are to be reported to the architect.
- Do not modify any element of this drawing.
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CEILING TYPE KEY

NOTE ALL TYPE G TO BE REPLACED WITH TYPE F

CEILING FINISHES & HEIGHT DETAILS KEY

NEW SOUTH GLASGOW HOSPITALS & LABORATORY PROJECT
NEW ADULT & CHILDRENS HOSPITALS - DOCUMENT REVIEW

Representative Name	Date	Category	Signature
FWatt	11/6/12	B	[redacted]

Comment

A No Comment
B Processed Subject to Amendment
C Subject to Comment and Resubmit

[redacted] 02/07/12

AGREED

Rev	Date	Drw	Revision Notes	Chk	App
02	13/01/12	CQ	Updated to pre RDD meeting comments	LE	EW
01	23/09/11	CQ	First Issue as 1:200 department sheet. Updated to App K comments (clouded for clarity). Background updated to reflect 1:50 UGM Sign-Off.	EW	EW

NORTH

NEW SOUTH GLASGOW HOSPITALS
- 3 MAR 2012

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NHS

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Project
NEW SOUTH GLASGOW HOSPITALS (NSGH) PROJECT

Drawing Title
FOURTH FLOOR PLAN
HAEMATO - ONCOLOGY WARD
CEILING FINISHES - STRATEGY PLAN

Job No	Drawn	Checked	Approved
09080	CQ	EW	EW

Status	Date	Scale@A1
Design Development	16/06/11	1:200

Drawing No

Origin	Zone	Level	Type	Content	Sequential	Rev
NA	XX	04	PL	332	103	02

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New South Glasgow Hospitals
2010 Instruction to Proceed Bible – Index (Page 1 of 2)

2009 Project Bible	2010 Instruction To Proceed
Folder A – Employer's Requirements	**Folder A1** – ERs remain output standard to be achieved by the Contractor. Any agreed adjustments are listed in 'The M&E Clarification Log (2010 ItP) – FINAL' (located in Folder B1) or 'The 2010 Instruction To Proceed Log – FINAL' (located in Folder S).
Folder B – Logs	**Folder B1** – 2009 logs updated to provide 2010 versions: The BIW Log (2010 ItP) – FINAL; The Clarification Log (2010 ItP) – FINAL; The M&E Clarification Log (2010 ItP) – FINAL; The RFI Log (2010 ItP) – FINAL; and The Sustainability Log (2010 ItP) – FINAL.
Folder C – Volume 1 Schedule of Accommodation	**Folder C1** – blank other than copy of Appendix 2 & 3 of the 2010 Instruction to Proceed letter (which clarifies the position between the Parties in relation to SoA at Volume 1 of the Contractor's Proposals) a copy of the 'SOA 1:200 Drawings (General Arrangement) Plans' drawing list, and a copy of the (non-exhaustive) list of functionality requirements for individual rooms/spaces noted by the Board at this point in time.
Folder D – Volume 2 – Drawings 2.1 – 2.10	**Folder D1** – where an item from the 2009 bible has not been superseded by a Folder U, V or W (written or drawn) Appendix K document the Folder D 2009 version remains current.
Folder E – Volume 2 – Drawings 2.11 – 2.48	**Folder E1** – where an item from the 2009 bible has not been superseded by a Folder U, V or W (written or drawn) Appendix K document the Folder E 2009 version remains current.
Folder F – Volume 3 Design Narratives	**Folder F1** – where an item from the 2009 bible has not been superseded by a Folder U, V or W (written or drawn) Appendix K document the Folder F 2009 version remains current.
Folder G – Volume 4 Specifications	**Folder G1** – where an item from the 2009 bible has not been superseded by a Folder U, V or W (written or drawn) Appendix K document the Folder G 2009 version remains current.
Folder H – Part 1 Volume 5 Components	**Folder H1** – Updated Component List included.
Folder I – Volume 7 SHTM	**Folder i1** – 2009 information retained as the output to be achieved by the Contractor. Any agreed adjustments are listed in 'The M&E Clarification Log (2010 ItP) – FINAL' (located in Folder B1) or 'The 2010 Instruction To Proceed Log – FINAL' (located in Folder S).
Folder J – Volume 8 ADB	**Folder J1** – 2009 ADB sheets remain, to be read in conjunction with the enclosed Environmental Matrix and the Environmental Matrix Report. 2009 ADB sheets to be updated to incorporate agreed environmental information and data from the agreed 1:50 process.

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2010 Instruction to Proceed Bible – Index (Page 2 of 2)

Folder K – Volume 9 Programme	**Folder K1** – Programmes (Revision Date 17/12/2010 – Issue Date 03/01/2011) Stage 3 Summary Master Programme, BCL-GSM-CN02-001, enclosed for reference. (This does not affect the monthly programme process/acceptance under the Contract, rather notes the programme version as at the issue of the ItP).
Folder L – Volume 10 Logistics	**Folder L1** – updated phased logistics drawings enclosed. Ongoing logistics discussed and agreed between the Parties on an ongoing basis through Phase 3 + Phase 3A.
Folder M – Not Used	Not used. This was M&E information which moved to Contract Data Part 2 and is located with the Folder B1 Logs
Folder N – Labs Arch Drawings AA 70 Series	Not used. As per 2009 Project Bible – not forming part of this ItP
Folder O – Labs Arch Drawings other than AA 70 Series	Not used. As per 2009 Project Bible – not forming part of this ItP
Folder P – Labs Civil, Structural and MEP	Not used. As per 2009 Project Bible – not forming part of this ItP
Folder Q – Labs Briefing Sheets	Not used. As per 2009 Project Bible – not forming part of this ItP
Folder R – Ground Investigation Report	**Folder R1** – 2009 Bible Folder R information included as this is the basis of the agreed risk position between the parties.
Folder S – 2010 ITP Log	**Folder S** – new folder - new log 'The 2010 Instruction to Proceed Log – FINAL' enclosed to capture alternate design solutions / comments as relevant from Stage 2 process.
Folder T – Equipment List	**Folder T** – new folder – agreed current Equipment List enclosed.
Folder U – Appendix K (Masterplan and Architecture)	**Folder U** – new folder - relevant Appendix K (Masterplan and Architecture) work in progress design development enclosed.
Folder V – Appendix K (M&E Engineering)	**Folder V** – new folder - relevant Appendix K (M&E Engineering) work in progress design development enclosed. (Includes the 'Response to Comments on Appendix K M&E Drawings' tracker).
Folder W – Appendix K (Civil and Structural Engineering)	**Folder W** – new folder - relevant Appendix K (Civil and Structural Engineering) work in progress design development enclosed. (Includes the ['Report on Civil and Structural Engineering Drawings]).
Folder X – Critical Failures	**Folder X** – new folder – work in progress in relation to Critical Failures enclosed.
Folder Y – Statutory Consents	**Folder Y** – new folder - Planning information and documentation enclosed.
Folder Z – Unallocated	Unallocated

Department / Service	Quantity		Quantity	Size	Total		Notes
	Units			m2	m2		

DESIGN FOR STAGE 2

NCH SoA - Version 4

Reflects 240 beds with expansion for 16 beds embedded in wards etc Feb 09

Emergency Complex							
Emergency Department					1,719		
Acute Assessment Beds							See In-patient Servcies Wards
Critical Care Transport Base					97		
					1,815		

In-Patient Services - Wards							
	beds		**Wards**				
Emergency							
Observation ward	**20**		**1.00**	**878**	**878**		Located in Emergency Complex as Generic Clusters / ward
In-Patient Beds							
24 bed Wards	**72**		**3.00**	**986**	**2,958**		83% Single Rooms in wards / clusters of 8 beds
Ward Support Accommodation			**1.00**	**1,025**	**1,025**		FM / Admin support for generic beds + family / activity etc support for all beds
Observation Room			**1.00**	**13**	**13**		Required for sleep studies in one generic ward
Scoring Room			**1.00**	**13**	**13**		Required for sleep studies in one generic ward
Nephrology/Renal - Day Case					**71**		Part of Inpatient Ward - 4 dialysis points (1 Isolation @16m2 + 3 spaces @12 +circ)
Nephrology/Renal - Bio Engineering Room					**40**		Maintenance and repair of dialysis equipment
Acute Receiving Unit	**40**		**1.00**	**1,506**	**1,506**		80% Single Rooms in wards / clusters of 8 beds
Support for Acute Receiving Unit & Shiehallion			**1.00**	**340**	**340**		
Schiehallion Ward	**22**		**1.00**	**1,108**	**1,108**		
Day Case Unit, Treatment & Base	**4**		**1.00**	**452**	**452**		
Teenage Cancer Trust	**4**		**1.00**	**193**	**193**		Needs further clarification with NHS Board and TCT
Cardiology Beds							
Cardiology Beds	**14**		**1.00**	**690**	**690**		
Additional Accommodation Cardiology			**1.00**	**99**	**99**		
Critical Care Beds	**22**		**1.00**	**2,275**	**2,275**		
Total (before Psychiatry, Day & 23 hour)	**198**				**11,661**		

Department / Service	Quantity		Quantity	Size	Total		Notes
	Units			m2	m2		
Revised Bed Complement							
As Above	198						
Neo-natal Ward	12						In Maternity Building
Add: Child Psychiatry	6						See Supplementary Schedule
Add: MDU	10						See below
Add: Day & 23 Hour Unit	30						See below
Total Beds (excl dialysis & recovery)	**256**						*Per Decisions on Bed Numbers following CHKS & March 07 Reviews*

Operating Facilities, 23 Hour Unit, CT / MRI & Interventional Radiology							
Day & 23 Hour Unit	**30**		**1.00**		**0**		Included Theatre SoA
Operating Theatres & Recovery	9 Theatres		**1.00**	**4,447**	**4,447**		Includes anaesthetic department
CT & MRI Suite	1 MRI 1 CT		**1.00**	**657**	**657**		
Cardiac Catheter & Interventional Radiology	1 Cardiac Cath 1 Intervent Radiology		**1.00**	**492**	**492**		
					5,596		

Diagnostic / Support Departments							
Radiology							
Plain Film	3						DR Technology. Chest Bucky & Skull / OPG included in 2 rooms
Ultrasound	2						
Nuclear medicine							Part of joint facility with SGH
MRI	1						Additional MRI in theatre area
Fluoroscopy - Diagnostic	1						
Interventional Radiology Lab							In theatre area
Cardiac Catheter Lab							In theatre area
Bone Mineral Densitometry	1						
Radiology Total			**1.00**	**1,730**	**1,730**		
Pharmacy (OPD Dispensing & Non Sterile Prep)					**0**		Now incorporated into a Joint dispensary with SGH
Bio Engineering & Medical Devices Library					**90**		
Medical Illustration					**100**		Provisional estimate for clinical service only
					1,920		

Department / Service	Quantity		Quantity	Size	Total		Notes
	Units			m2	m2		
Other Patient / Support Departments							
Endoscopy							Carried out in generic theatres
Cardio / Respiratory Investigation					277		Includes Case Review / Viewing
Clinical Investigations / Medical Day Unit	Chairs &				450		
Rehab Suite - Physiotherapy & Orthotics					961		Gym, Parallel Bars, Treatment, Gait Analysis, Hydrotherapy & Orthotics
Special Feeds Prep Area					82		
					1,770		
Out-Patient Services							
Fracture Clinic							Allowance included in emergency and OPD SoAs
Outpatient Services					2,486		
OPD Addition for Psychology & Liaison Psychiatry					110		Include in a main OPD cluster
Child Protection Suite	100				69		
Lung Function Suite							Area within OPD
Audiology	4 x test rooms				444		Reflects expanded service and new national standards
					3,108		
Admin & Training & Education							See 10 November 2006 Briefing Note (transfer of 1500m2 to another project)
Management Offices & Meetings Rooms					273		Very provisional (Trust Offices & Op Management)
					273		
Main Entrance / Public Areas							
Main Entrance & Reception Area					811		
					811		
FM & Staff Facilities							Requires further FM input
Main Dining Room & Servery (900 meals)					0		Shared with SGH
End Kitchen (2800 Meals)					0		Shared with SGH
Occupational health centre					0		Shared with SGH
Staff changing - manual					0		Shared with SGH (allowances for clinical staff in depts & wards)
Staff Accommodation					0		
Junior Doctors' Mess					0		
Security					0		Included in main entrance
IT & Telephone services					0		Shared with SGH
Hotel Services & Domestic / Portering					100		Includes local Domestic Equip Store, Porters Base & FM Supervisors
Clean Laundry					0		See Clean Supplies
Laundry					0		External compound
Clean Supplies Unloading Area					0		Shared with SGH
Clean Supplies / Laundry Store & Distribution					150		Very provisional for local sorting - most shared with SGH
Creche / Nursery					0		Shared with SGH
					250		

Department / Service	Quantity		Quantity	Size	Total		Notes
	Units			m2	m2		
TOTAL					27,205		
ALLOWANCE FOR COMMUNICATION & PLANT SPACE (29.5%)					8,026		Based on OBC Pref Option 18.5% commiunication and 11% plant
GROSS AREA					35,231		
Supplementary Schedule							
Child Psychiatry							
Dept of Child Forensic Psychology					772		
					772		
TOTALS OF MAIN & SUPPLEMENTARY SCHEDULES							
Main Schedule - Gross Area					35,231		
Child Psychiatry - Gross Area					772		
TOTAL GROSS AREA					36,003		

EMERGENCY DEPARTMENT

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Entrance, reception & waiting facilities					
Car parking spaces for people with disabilities & parents with young children	1			G0927	In circulation allowance
Ambulance parking bay	1			G0905	In circulation allowance
Main entrance draught lobby	1	11.0	11.0	J0107	
Main entrance draught lobby	1	11.0	11.0	J0112	
Parking bay: 6 wheelchairs	1	4.0	4.0	G0119	
Parking bay: 3 accident trolleys & 3 wheelchairs	1	12.0	12.0	G0128	
Reception: 2 staff	1	10.0	10.0	J0206	
Waiting area: 25 - 30 persons including 2 wheelchair users incl Play Area	1	40.5	40.5	J1116	
Waiting play area: 10 children	1	18.0	18.0	J1410	
Public telephone: single booth, accessible	1	2.0	2.0	G0705	
Refreshment: drinking water dispenser	1	0.5	0.5	P0810	
Triage Rooms	2	12	24		
WC & handwash: semi ambulant	4	2.5	10.0	V1106	
WC & handwash: accessible, wheelchair assisted	1	4.5	4.5	V0904	
Nappy change room with handwash	1	4.0	4.0	V1113	
Infant feeding room	1	5.5	5.5	S0010	
Sub-Total			**157.0**		

Assessment & Treatment Facilities (Minors Area)					
Assess & Treatment room: Paediatric, A&E	6	16.0	96.0	C0304	Open Fronted Bays with curtains Include 1 x ENT & 1 x Ophthalmic.
Infant Feeds Pantry	1	6.0	6.0		
Staff Base - 3 person	1	11.0	11.0		
WC & handwash: specimen; accessible, wheelchair	1	4.5	4.5	V1406	
Waiting area: 10 persons including 1 wheelchair user	1	25.5	25.5	J1201	
Sub-Total			**143.0**		

Assessment & Treatment Facilities (Majors Area)					
Assess & Treatment room: A&E, multi-functional	12	16.0	192.0	X0242	
Assess / Treatment with Mental Health Issues	1	11.0	11.0		
Procedures Room	3	16.0	48.0		
Treatment room: Plaster	1	16.0	16.0	X0207	
Waiting Room for Family Members	1	12.0	12.0		
WC & handwash: accessible, wheelchair assisted	1	4.5	4.5	V0904	
Staff & communication base: 5 staff	1	30.0	30.0	T0212	
Clean Utility	1	12.0	12.0	T0316	
Sub-Total			**325.5**		

Patient resuscitation facilities					
Resuscitation room: 4 places	1	116.0	116.0	X0238	
Sub-Total			**116.0**		

Distressed & bereaved persons facilities					
Sitting & body viewing room	1	16.0	16.0	S0029	
Body viewing/bier room	1	10.0	10.0	L1612	
Sub-Total			**26.0**		

Support facilities: Clinical					
Near patient testing/status laboratory	1	8.5	8.5	L1305	
Dirty utility: bedpan disposal & urine test	2	12.0	24.0	Y0311	
Parking bay: ultrasound unit	1	1.0	1.0	G0139	
Sub-Total			**33.5**		

Staff support facilities: Rest and recreation					
Rest & dining room: 35 staff	1	40.0	40.0	D0407	
Beverage / Rest Point	1	18.0	18.0		
Sub-Total			**58.0**		

Staff support facilities: Sanitary & changing					
WC & wash: ambulant	8	2.0	16.0	V1005	
Shower: ambulant (non patient)	4	2.5	10.0	V0801	
Staff changing room: 30 places	1	16.0	16.0	V0517	
Staff changing room: 50 places	1	25.0	25.0	V0515	
Sub-Total			**67.0**		

Staff support facilities: Offices					
Office: 1 staff	2	9.0	18.0	M0219	
Office: 3 staff	2	18.0	36.0	M1002	
Office: 4 staff (workstations)	3	24	72	M1014	
Interview & counselling room: 5 persons	1	9.0	9.0	M0704	
Sub-Total			**135.0**		

Staff support facilities: Education and training					
Seminar & training room: 20 persons	1	37.5	37.5	H0513	
Library & study room: 5 persons	1	18.0	18.0	H0339	
Sub-Total			**55.5**		

Support facilities: Holding & storage					
Store: equipment & supplies	1	30.0	30.0	W1320	
Medicines Management Room	1	12.0	12.0		
Store: major incident equipment	1	6.0	6.0	W1303	
Store: ready to use medical gas cylinders	1	9.0	9.0	W1313	
Sub-Total			**57.0**		

Support facilities: Miscellaneous					
Hold: disposal	1	10.0	10.0	Y0614	
Cleaners (Housekeeping) room	1	7.0	7.0	Y1501	
Switchgear room	1	4.0	4.0	K0101	
Battery & UPS room	1	9.0	9.0	K0109	
Sub-Total			**30.0**		

Total Net			**1,203.5**
Planning	**5%**		**60.2**
Sub-Total			**1,263.7**
Engineering	**3%**		**37.9**
Circulation	**33.0%**		**417.0**
Total			**1,718.6**

Critical Care Transport Base					
Ambulance bay with 32amp hook up points with sufficient space behind each vehicle space for full length ramp extension	4		0.0		external
Additional Ambulance response car space	1				external
On call staff car parking spaces adjacent to base	6				external
Secure medical gas starage	1				external
Clinical work room with preparation area and work stations; comprehensive equipment store	1	30.0	30.0		
Trolley store: accommodation for 6 intensive care trolleys/incubators	1	30.0	30.0		
Protective Clothing Store	1	6.0	6.0		
Laundry/Drying room	1	9.0	9.0		
Sub-Total			**75.0**		

Total Net			**75.0**
Planning	**5%**		**3.8**
Sub-Total			**78.8**
Engineering	**3%**		**2.4**
Circulation	**20.0%**		**15.8**
Total			**96.9**

OBSERVATION WARD

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Entrance					
Enquiry & Admin Area (Staff base)	1	8.0	8.0		
Waiting & Play Area	1	25.0	25.0		
Sub Total			**33.0**		
Bed Area					
Single bedroom: Children/young people, with relatives overnight stay	18	16.5	297.0		
Isolation single bedroom: Children/young people, with relatives overnight stay	2	16.5	33.0		
Lobby: air lock to bedroom	2	7.0	14.0		
Shower, WC & wash: accessible, wheelchair assisted	20	4.5	90.0		
Office Area with workstations	1	18.0	18.0		
Staff & communication base, enclosed: 2 staff	1	8.0	8.0		
Sub Total			**460.0**		
Utility Area					
Clean utility	1	14.0	14.0		
Cleaners Room	1	7.0	7.0		
Parking bay: resuscitation trolley	1	1.0	1.0		
Medicines Management Room	1	12.0	12.0		
Dirty utility: bedpan disposal & urine test	1	12.0	12.0		
Hold: disposal & recycling	1	12.0	12.0		
Store: linen	1	3.0	3.0		
Store: clothing back-up	1	3.0	3.0		
Store: general	1	6.0	6.0		
Bed, Cot & Equipment Store	1	20.0	20.0		
Sub Total			**90.0**		
Patient Support Area					
Parking bay:	1	5.0	5.0		
Pantry: serving ward & Regeneration & Wash Up	1	12.0	12.0		
Visitor WC	2	2.5	5.0		
Ward Food trolley parking bay	1	1.5	1.5		
WC & handwash: ambulant - staff	2	2.0	4.0		
Sub Total			**27.5**		

Total net			**610.5**
Planning	**5%**		**30.5**
Sub-Total			**641.0**
Engineering	**3%**		**19.2**
Circulation	**34.0%**		**217.9**
Grand Total			**878.2**

GENERIC WARDS
INPATIENT FLOOR (3 WARDS)

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Bed Area					
Single bedroom: Children/young people, with relatives overnight stay	20	16.5	330.0		
Lobby: air lock to bedroom	2	7.0	8.0		
Shower, WC & wash: accessible, wheelchair assisted	20	4.5	90.0		
Multi-bed room & day space: Children/young people, 4 beds, with relatives overnight stay	1	68.0	68.0		
Shower, WC & wash: accessible, wheelchair assisted	1	7.0	7.0		
Office Area with workstations (x4)	1	18.0	18.0		
Office - clinical - 2 person	1	12.0	12.0		
Staff & communication base, open 2 staff	1	5.0	5.0		
Touchdown	2	2.0	4.0		
Sub Total			**542.0**		
Utility Area					
Bath, WC & wash: treatment, assisted	1	14.0	14.0		
Clean utility	1	14.0	14.0		
Cleaners Room	1	7.0	7.0		
Parking bay: resuscitation trolley	1	1.0	1.0		
Dirty utility: bedpan disposal & urine test	1	12.0	12.0		
Store: linen & Clothing Back-up	2	2.5	5.0		
Store: general	1	5.0	5.0		
Store: equipment	1	5.0	5.0		
Sub Total			**63.0**		
Patient Support Area					
Treatment room: child	1	16.5	16.5		
Interview & counselling room: 5 persons	1	9.0	9.0		
Parking bay:	1	5.0	5.0		
Pantry: serving ward	1	12.0	12.0		
Ward Food trolley parking bay	1	1.5	1.5		
WC & handwash: ambulant - staff	1	2.0	2.0		
Sub Total			**46.0**		
Recreation, Play & Dining Area					
Dining room & Playroom: 10 - 15 patients	1	25.0	25.0		
Store Room	1	5.0	5.0		
WC & handwash: accessible, wheelchair assisted	1	4.5	4.5		
Sub Total			**34.5**		

Total Net			**685.5**
Planning	**5%**		**34.3**
Sub-Total			**719.8**
Engineering	**3%**		**21.6**
Circulation	**34.0%**		**244.7**
Total			**986.1**

SUPPORT CENTRE

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Parent / Family Facilities					
Enquiry & Admin Area	1	10.0	10.0		
Sitting room with beverage & snack preparation bay: 20 visitors	1	45.0	45.0		
WC & handwash: accessible, wheelchair assisted plus shower	1	6.0	6.0		
WC - Ambulatory	2	2.0	4.0		
Nappy change room with WC & handwash, single side table access	1	7.5	7.5		
Infant feeding room	1	5.5	5.5		
Sub Total			**78.0**		
Activity, Play & Classroom Facilities					
Supervised Play for Inpatients - (Discharge Lounge)	1	100.0	100.0		
Medicinema	1	138.0	138.0		
WC & handwash: accessible, wheelchair assisted	1	4.5	4.5		
WC - Ambulatory	2	2.0	4.0		
Sub Total			**246.5**		
Social Work					
Social Workers	1	12.0	12.0		
Sub Total			**12.0**		
Staff Facilities					
Staff Rest with beverage point	1	15.0	15.0		
Staff WC/wash	4	3.0	12.0		
Staff locker room - F	1	30.0	30.0		100 handbag lockers.
Staff locker room - M	1	10.0	10.0		30 lockers.
Staff shower	2	4.0	8.0		
Accessible shower / WC	1	4.5	4.5		Includes lockers
Sub Total			**79.5**		

Total Net			**416.0**
Planning	**5%**		**20.8**
Sub-Total			**436.8**
Engineering	**3%**		**13.1**
Circulation	**25.0%**		**109.2**
Total			**559.1**

FM & ADMINISTRATION SUPPORT FOR 72 BEDS (3 x 24 BED WARDS)

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Staff Offices, Workstations, Education & Support					
Office - 4 Person	2	24.0	48.0		
Workstations x 6	3	24.0	72.0		
Medicines Management	1	15.0	15.0		
Near patient testing/status laboratory	1	8.5	8.5		
Seminar / Education Room (15 places)	2	28.0	56.0		
Sub Total			**199.5**		
Shared FM & Other Support					
Cleaners (Housekeeping) room	1	7.0	7.0		
Disposal Hold & Recycling Point	1	20.0	20.0		
Regen Kitchen	1	30.0	30.0		
Allowance for Wash Up	1	12.0	12.0		
Clean Equipment Store	1	8.0	8.0		
Bulk Fluid Store	1	15.0	15.0		
Sub Total			**92.0**		
Bed, Cot & Equipment Store	1	55.0	55.0		
Sub Total			**55.0**		

Total Net			**346.5**
Planning	**5%**		**17.3**
Sub-Total			**363.8**
Engineering	**3%**		**10.9**
Circulation	**25.0%**		**91.0**
Total			**465.7**

Total of FM / Admin Support + Support Centre **1,024.8**

ACUTE RECEIVING UNIT (40 BEDS)

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comments
Bed Area					
Single bedroom: Children/young people, with relatives overnight stay	32	16.5	528.0		
	2	7.0	8.0		
Shower, WC & wash: accessible, wheelchair assisted	32	4.5	144.0		
Multi-bed room & day space: Children/young people, 4 beds, with relatives overnight stay	2	68.0	136.0		
Shower, WC & wash: accessible, wheelchair assisted	2	7.5	15.0		
Office Area with workstations (x4)	1	18.0	18.0		
Office - clinical - 2 person	1	12.0	12.0		
Staff & communication base, open 2 staff	2	5.0	10.0		
Touchdown	3	2.0	6.0		
Sub Total			**877.0**		
Utility Area					
Bath, WC & wash: treatment, assisted	1	14.0	14.0		
Clean utility	1	14.0	14.0		
Cleaners Room	1	7.0	7.0		
Parking bay: resuscitation trolley	2	1.0	2.0		
Dirty utility: bedpan disposal & urine test	1	12.0	12.0		
Store: linen & Clothing Back-up	2	2.5	5.0		
Store: general	1	5.0	5.0		
Store: equipment	1	5.0	5.0		
Sub Total			**64.0**		
Patient Support Area					
Treatment room: child	2	16.5	33.0		
Interview & counselling room: 5 persons	2	9.0	18.0		
Parking bay:	1	5.0	5.0		
Pantry: serving ward	1	12.0	12.0		
Ward Food trolley parking bay	1	1.5	1.5		
WC & handwash: ambulant - staff	1	2.0	2.0		
Sub Total			**71.5**		
Younger Children's Play & Dining Area					
Dining room & Playroom: 10 - 15 patients	1	25.0	25.0		
Store Room	1	5.0	5.0		
WC & handwash: accessible, wheelchair assisted	1	4.5	4.5		
Sub Total			**34.5**		

Total Net			**1,047.0**
Planning	**5%**		**52.4**
Sub-Total			**1,099.4**
Engineering	**3%**		**33.0**
Circulation	**34.0%**		**373.8**
Total			**1,506.1**

ADDITIONAL SUPPORT ACCOMMODATION - Shiehallion & ARU

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comments
Staff Offices, Workstations, Education & Support					
Office - 2 Person	1	12.0	12.0		
Workstations x 6	2	24.0	48.0		
Medicines Management	1	15.0	15.0		
Sub Total			**75.0**		

Shared FM & Other Support					
Disposal Hold & Recycling Point	1	10.0	10.0		
Staff Rest with beverage point	1	15.0	15.0		
Group Activity (Adolescents)	1	60.0	60.0		Supports all adolescent needs and includes office & TCT Communal Area
Data Management & BMT Compliance Office	1	18.0	18.0		
Hospital at Night Office	1	12.0	12.0		
Regeneration Kitchen & Wash up (Check with FM)	1	30.0	30.0		
WC & handwash: ambulant - staff	2	2.5	5.0		
Seminar Room	1	28.0	28.0		Schiehallion
Sub Total			**178.0**		

Total Net			**253.0**
Planning	**5%**		**12.7**
Sub-Total			**265.7**
Engineering	**3%**		**8.0**
Circulation	**25.0%**		**66.4**
Total			**340.0**

SCHIEHALLION WARD (22 BEDS)

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comments
Bed Area					
Single bedroom: Children/young people, with relatives overnight stay	21	16.5	346.5		
Lobby: air lock to bedroom	8	7.0	56.0		
Shower, WC & wash: accessible, wheelchair assisted	21	4.5	94.5		
Office Area with workstations (x4)	1	18.0	18.0		
Office - clinical - 2 person	1	12.0	12.0		
Staff & communication base, open 2 staff	1	5.0	5.0		
Touchdown space	2	2.0	4.0		
Sub Total			**532.0**		
Utility Area					
Bath, WC & wash: treatment, assisted	1	14.0	14.0		
Clean utility	1	14.0	14.0		
Cleaners Room	1	7.0	7.0		
Parking bay: resuscitation trolley	1	1.0	1.0		
Dirty utility: bedpan disposal & urine test	1	12.0	12.0		
Store: linen & Clothing Back-up	2	2.5	5.0		
Store: general	1	5.0	5.0		
Store: equipment	1	5.0	5.0		
Sub Total			**63.0**		
Patient Support Area					
Treatment room: child	1	16.5	16.5		
Chemotherapy Room	1	12.0	12.0		
School Room	1	18.0	18.0		
Play Room	1	25.0	25.0		
Store Room	1	5.0	5.0		
Interview & counselling room: 5 persons	2	11.0	22.0		
Parking bay:	1	5.0	5.0		
Pantry: serving ward	1	12.0	12.0		
Ward Food trolley parking bay	1	1.5	1.5		
WC & handwash: ambulant - staff	1	2.0	2.0		
Sub Total			**119.0**		
Radiotherapy Treatment Suite					
Radiation shielded patient bedroom	1	20.0	20.0		Part of overall Schiehallion bed complement (22)
Radiation shielded toilet/shower (and drain)	1	4.5	4.5		
Secure shielded ante-room for storage of radioisotope/radioactive injection rig/radioactive waste	1	10.0	10.0		
Radiation shielded controlled lobby	1	6.0	6.0		
Adjoining relatives bed space	1	10.0	10.0		
Ensuite bathroom for relatives	1	6.0	6.0		
Sub Total			**56.5**		
External play area including covered area	1		**0.0**		
Sub Total			**0.0**		External Area

Total Net			**770.5**
Planning	**5%**		**38.5**
Sub-Total			**809.0**
Engineering	**3%**		**24.3**
Circulation	**34.0%**		**275.1**
Total			**1,108.4**

DAY CASE UNIT (Incl Treatment) & Staff Base

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comments
Day Unit					
Reception	1	5.0	5.0		
Waiting/Play area	1	20.0	20.0		
Consult/Exam/Treatment Room	4	16.5	66.0		Note specific requirements in Operational Policy
Haemophilia Unit Consult/Exam/Treatment Room	1	16.5	16.5		
Haemophilia Unit Office (2 Person)	1	12.0	12.0		Co-located with Haemophilia/Consult/Exam/Treatment room
Day Stay Ward	1	68.0	68.0		
Patient WC	2	2.5	5.0		Ensuite to Day Stay Ward
Disabled WC	1	4.5	4.5		
Patient WC	1	2.5	2.5		
BMT Waiting Area	1	9.0	9.0		FACT-JACIE requirement
BMT Day Stay Ward	1	36.0	36.0		
Store: linen & Clothing Back-up	1	2.5	2.5		
Store: general	1	5.0	5.0		
Clean Utility	1	14.0	14.0		
Dirty utility: bedpan disposal & urine test	1	12.0	12.0		
Managers Office	1	9.0	9.0		
Interview Room	1	9.0	9.0		
Office Area with workstations (x4)	1	18.0	18.0		
Sub Total			**314.0**		
Total Net			**314.0**		
Planning	**5%**		**15.7**		
Sub-Total			**329.7**		
Engineering	**3%**		**9.9**		
Circulation	**34.0%**		**112.1**		
Total			**451.7**		

TEENAGE CANCER TRUST

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comments
Teenage Cancer Trust Accomodation					Adjacent to Shiehallion Ward
Single bedroom: Children/young people, with relatives overnight stay	4	16.5	66.0		
Shower, WC & wash: accessible, wheelchair assisted	4	4.5	18.0		(As per HBN 04-01)
Contingency	1	50.0	50.0		
Sub Total			**134.0**		

Total Net			**134.0**
Planning	**5%**		**6.7**
Sub-Total			**140.7**
Engineering	**3%**		**4.2**
Circulation	**34.0%**		**47.8**
Total			**192.8**

CARDIOLOGY (14 BEDS)

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comments
Bed Area					
Single bedroom: Children/young people, with relatives overnight stay	10	16.5	165.0		
Lobby: air lock to bedroom	2	7.0	14.0		
Shower, WC & wash: accessible, wheelchair assisted	10	4.5	45.0		
Multi-bed room & day space: Children/young people, 4 beds, with relatives overnight stay	1	68.0	68.0		
Shower, WC & wash: accessible, wheelchair assisted	1	7.0	7.0		
Office Area with workstations (x4)	1	18.0	18.0		
Office - clinical - 2 person	1	12.0	12.0		
Clinical Workstations (x6)					
Staff & communication base, open 2 staff	1	5.0	5.0		
Touchdown	1	2.0	2.0		
Sub Total			**336.0**		
Utility Area					
Bath, WC & wash: treatment, assisted	1	14.0	14.0		
Clean utility	1	14.0	14.0		
Cleaners Room	1	7.0	7.0		
Parking bay: resuscitation trolley	1	1.0	1.0		
Dirty utility: bedpan disposal & urine test	1	12.0	12.0		
Store: linen & Clothing Back-up	1	3.0	3.0		
Store: general	1	5.0	5.0		
Store: equipment	1	5.0	5.0		
Sub Total			**61.0**		
Patient Support Area					
Treatment room: child	1	16.5	16.5		
Interview & counselling room: 5 persons	1	9.0	9.0		
Parking bay:	1	5.0	5.0		
Pantry: serving ward	1	12.0	12.0		
Ward Food trolley parking bay	1	1.5	1.5		
WC & handwash: ambulant - staff	2	2.0	4.0		
Sub Total			**48.0**		
Recreation, Play & Dining Area					
Dining room & Playroom: 10 - 15 patients	1	25.0	25.0		
Store Room	1	5.0	5.0		
WC & handwash: accessible, wheelchair assisted	1	4.5	4.5		
Sub Total			**34.5**		

Total Net			**479.5**
Planning	**5%**		**24.0**
Sub-Total			**503.5**
Engineering	**3%**		**15.1**
Circulation	**34.0%**		**171.2**
Total			**689.8**

ADDITIONAL ACCOMMODATION - Cardiology

Staff Offices, Workstations, Education & Support					
Office - 2 Person	1	12.0	12.0		
Workstations x 6	1	24.0	24.0		
Medicines Management	1	8.0	8.0		
Sub Total			**44.0**		

Shared FM & Other Support					
Cleaners (Housekeeping) room					
Disposal Hold & Recycling Point	1	10.0	10.0		
Regen Kitchen & Wash Up Allowance	1	12.0	12.0		
Clean Equipment & Fluid Store	1	8.0	8.0		
Sub Total			**30.0**		

Total Net			**74.0**
Planning	**5%**		**3.7**
Sub-Total			**77.7**
Engineering	**3%**		**2.3**
Circulation	**25.0%**		**19.4**
Total			**99.5**

CRITICAL CARE

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Entrance/Reception/Administration facilities			0.0		
Combined entrance	1		0.0		In circulation allowance
Visitors Foyer	1		0.0		In circulation allowance
Visitors waiting area:	1	15.0	15.0		
Visitors wc: Disabled/ wheelchair user	1	4.5	4.5		
Telephone area: single booth; low height	1	2.0	2.0		
Reception desk/office: 4 places					
Sub-Total			**21.5**		
Family & Friends facilities (adjacent to main entrance)			0.0		
Private (single) Family Sitting	2	10.0	20.0		
Relatives en-suite wc: Disabled/ wheelchair user	1	4.5	4.5		For 1 of the above rooms
Relatives sitting room: 12 places	1	16.0	16.0		
Relatives pantry/beverage bay	1	6.0	6.0		
Sub-Total			**46.5**		
Clinical areas			0.0		
Critical care bed area: single room; Isolation (access via gowning lobby)	6	25.5	153.0		
Gowning lobby: single bedroom	6	7.0	42.0		
Relatives interview room	2	9.0	18.0		close to 4 bed areas
Critical care bed area:	16	25.5	408.0		
Workstation & X-ray Viewing Area	2	12.0	24.0		
Central Communications / Staff Base + Reception	1	34.0	34.0		
Communications "Touch down bases"	11	2.0	22.0		(as per HBN 04-01) (1 per 2 rooms)
Sub-Total			**701.0**		
Utility/clinical area support facilities			0.0		
Clean utility (including blood bank area)	2	17.0	34.0		
Status laboratory	1	8.5	8.5		
Dirty utility with urine testing	1	12.0	12.0		
Dirty Utility with urine testing/equipment cleaning	1	18.0	18.0		
Disposal hold	2	10.0	20.0		
Housekeepers (cleaners) room	1	10.0	10.0		
Patients pantry	1	6.0	6.0		
Milk store	1	4.0	4.0		
Play Leader Base & Toy Store	1	16.0	16.0		
Medicines Management Room	1	18.0	18.0		
ECMO Prep Area + Ensuite Store & Office	1	24.0	24.0		
Patients assisted bathroom, wc & wash (Stretcher hoist)	1	16.0	16.0		
Sub-Total			**186.5**		
Storage/holding facilities			0.0		
Bulk supplies store	2	25.0	50.0		
Clinical equipment store	2	25.0	50.0		
Equipment service room	1	24.0	24.0		
Linen bay/store	2	4.0	8.0		
Furniture / Bed Store	1	20.0	20.0		
Ready use medical gas cylinders store	2	4.0	8.0		
Mobile imaging equipment bay (x-ray & Ultrasound) with image intensifiers	2	8.0	16.0		
Cardiac arrest/emergency trolley bay	2	3.0	6.0		
Sub-Total			**182.0**		

CRITICAL CARE

Staff facilities			0.0		
Clinical directors office: 1 place	1	12.0	12.0		
Office: 1 place	2	12.0	24.0		
Offices: 2 place	1	13.0	13.0		
Clinical staff office: 4 places	5	24.0	120.0		
Hot Desk Room / Library	1	18.0	18.0		
Meeting room/interview room (8 person)	1	20.0	20.0		
Staff rest room with dining area	1	30.0	30.0		
Staff snack/beverage preparation bay	1	8.0	8.0		
Staff changing facilities 30 places	1	15.0	15.0		
Staff changing facilities 50 places	1	25.0	25.0		
Staff shower	5	2.5	12.5		
Staff wc & wash: Ambulant user	5	2.0	10.0		
Seminar/training room: 25 places	1	30.0	30.0		
Staff office/restroom	1	13.0	13.0		
Staff office/restroom en-suite shower, wc & wash	1	5.0	5.0		
Sub-Total			**355.5**		

Engineering facilities			0.0		
Switchgear cupboard	2	2.0	4.0		
Battery/UPS room	2	9.0	18.0		
Sub-Total			**22.0**		

Total Net			**1515.0**
Planning	**5%**		**75.8**
Sub-Total			**1,590.8**
Engineering	**3%**		**47.7**
Circulation	**40.0%**		**636.3**
Total			**2,274.8**

OPERATING THEATRES

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Main Entrance/Reception Area					
Entrance Foyer	1	0.0	0.0		In circulation allowance
Reception, administration office & communication base: 4 staff	1	24.0	24.0		
Manager's Office	1	12.0	12.0		
Offices - 2 person	1	13.0	13.0		
Waiting & Play Area (unsupervised)	1	20.0	20.0		
Sub Total			**69.0**		
Multifunction Area (Pre-op Assess & AODOS)					
Nurses Station	1	8.0	8.0		
Duty porters area: 2 porters	1	5.0	5.0		
WC & handwash: accessible, wheelchair assisted	2	4.5	9.0		
Nappy Change	1	6.0	6.0		
Assessment/Pre-op/Changing Rooms (With couch)	4	14.0	56.0		
Assessment/Pre-op/Changing Rooms (With chair)	4	7.0	28.0		
Clothes Store Trolley Area	1	4.0	4.0		Lockable space for 2 x "patient/carer baggage trolleys" prior to their transfer to wards)
Pre-op Playroom (supervised)	1	45.0	45.0		Should be sub-dividable to support children with challenging behaviours
Playroom Store	1	6.0	6.0		En-suite to playroom
Adolescent's Mess Room	1	30.0	30.0		
Holding Area	2	13.5	27.0		
Cleaners (Housekeepers room)	1	7.0	7.0		
Sub Total			**231.0**		
Operating Theatre Entrance/Exit/Interface Area					
Lobby	1	12.0	12.0		
Additional Waiting Parking Area For Theatre Trolleys (4-5 empty trolleys)	1	10.0	10.0		
Sub Total			**22.0**		
Operating theatre suites facilities					
Operating theatre: general	4	55.0	220.0		
Operating theatre: ultra clean	3	55.0	165.0		
Operating Theatre - cardiac	2	63.0	126.0		
ECMO Prep Area + Ensuite Store	1	20.0	20.0		Accessible from both cardiac theatres
Anaesthetic room: bed space	9	19.0	171.0		
Scrub-up & gowning room	9	11.0	99.0		
Preparation room	9	12.0	108.0		
Exit/parking bay: theatre, 1 bed/trolley	9	12.0	108.0		
Store: equipment, local to theatre	5	2.0	10.0		1 between 2 theatres
Dirty utility: serving 2 theatres	4	14.0	56.0		1 between 2 theatres
Dirty utility: serving 1 theatre	1	12.0	12.0		
Offices - 2 person	2	13.0	26.0		Located within clinical areas to support management of the operating theatre/recovery function
WC & wash: ambulant	4	2.0	8.0		Servicing Theatres & Reception/Recovery
Sub Total			**1129.0**		

Reception/Recovery Unit Facilities					
Reception/Recovery bay: post anaesthetic, 1 place	18	13.5	243.0		
Recovery room: post anaesthetic, 1 place	3	16.5	49.5		
Nurses Station	1	8.0	8.0		
Charge Nurse/Sister's Office	1	9	9.0		
Clean utility	1	14.0	14.0		
Dirty utility: bedpan disposal & urine test	1	12.0	12.0		
Cleaners Room	1	7.0	7.0		
Sub Total			**342.5**		

Post Acute Recovery (23 hour ward)					
Clean Store & Utility	1	14.0	14.0		
Dirty Utility	1	8.0	8.0		
Store Room	1	8.0	8.0		
Linen Room	1	4.0	4.0		
Disposal Hold	1	8.0	8.0		
Cleaners Room	1	7.0	7.0		
Parents Changing Room (With WC & Shower) (Disabled access)	1	6.0	6.0		
Parents Room	1	22.0	22.0		
Parents pantry/beverage bay	1	6.0	6.0		en-suite to Parents room
Pantry/Beverage Area with Re-gen Area	1	16.0	16.0		
Staff Base	1	8.0	8.0		
Offices - 2 person	1	13.0	13.0		
Single Rooms	10	16.5	165.0		
Patients en-suite with chamfered shower as per HBN 00-02	10	4.5	45.0		En-suite to single rooms
4 Bed Bay	3	73.0	219.0		
En-suite WC, Wash & Shower	3	7.0	21.0		1 per 4 bed bay
Trolley Bay (8 trolley cubicles)	1	78.0	78.0		Forms part of the total ward of 20 beds / trolleys
En-suite WC, Wash & Shower	1	7.0	7.0		
Discharge Lounge for Adolescents & Young People	1	20.0	20.0		
Step Down Playroom (supervised)	1	35.0	35.0		
Staff WC	2	2.0	4.0		
WC - Disabled	1	4.5	4.5		
Sub Total			**718.5**		

Support facilities					
Office: medical reporting, 1 staff	1	10.5	10.5		
Blood bank refrigerator bay	1	3.0	3.0		
Near patient testing/status laboratory	1	8.5	8.5		
Store room: flexible endoscope	1	10.0	10.0		Equiped with endoscope storeage cabinets to support daily scope requirements
Generic Laboratory	1	16.0	16.0		
Service room: equipment	1	21.0	21.0		
Parking bay: mobile x-ray & ultrasound unit	2	5.0	10.0		
Parking bay: resuscitation trolley	1	1.0	1.0		
Parking bay: fibre optic bronchoscope light source trolley	1	1.0	1.0		
Store: satellite pharmacy	1	6.0	6.0		
Store: bulk supplies	3	35.0	105.0		
Store: clinical equipment	2	30.0	60.0		
Store: linen	1	6.0	6.0		
Store: ready to use medical gas cylinders	1	4.0	4.0		
Hold: disposal	1	15.0	15.0		
Cleaners (Housekeeping) room	1	7.0	7.0		
Switchgear room	1	4.0	4.0		
UPS & IT hub room	1	9.0	9.0		
Sub Total			**297.0**		

Staff support facilities					
Rest & dining room with beverage & snack preparation bay: 40 staff	1	56.0	56.0		include 6 IT points (NOT workstations)
Workstations (6)	1	24.0	24.0		Immediately adjacent to rest/dining area and joined by a flexible partition to allow whole area to be "opened up"
Utility: footwear washing	1	4.0	4.0		
Staff changing room including boot change: 40 places	1	20.0	20.0		Male staff
Staff changing room including boot change: 70 places	1	35.0	35.0		Female staff
WC & wash: ambulant	4	2.0	8.0		
WC & handwash: accessible, wheelchair assisted	1	4.5	4.5		
Shower: ambulant (non patient)	5	2.5	12.5		
Interview/meeting room: 8 persons	1	18.0	18.0		
Seminar room: 30 persons	1	55.0	55.0		
Library & study room: 10 persons	1	30.0	30.0		
Sub Total			**267.0**		

Anaesthetic Department Facilities					
Clinical Director's Office	1	14.0	14.0		
Office: 2 staff	9	13.0	117.0		
Office: 2 staff	1	13.0	13.0		
Office: 8 staff	1	40.0	40.0		
Office - Pain Team	1	15.0	15.0		
WCs	2	2.0	4.0		
WC - Disabled	1	4.5	4.5		
Store: general & stationery	2	9.0	18.0		
Cleaners Room	1	7.0	7.0		
Sub Total			**232.5**		

Total Net			**3308.5**
Planning	**5%**		**165.4**
Sub-Total			**3,473.9**
Engineering	**3%**		**104.2**
Circulation	**25.0%**		**868.5**
Total			**4,446.6**

CT, MRI and INTERVENTIONAL SUITE

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Cross-sectional Imaging facilities: CT					
Sub-waiting area: 5 places, incl. 1 wheelchair place	1	9.0	9.0		
Assisted patient changing cubicle	1	3.5	3.5		
Patients/staff belongings locker bay	1	2.0	2.0		
Anaesthetic Room/Minor procedures room	1	19.0	19.0		
CT scanner room	1	40.0	40.0		
Lead apron & protection gear holding area	2	0.5	1.0		
Counselling/interview room: 5 places	1	9.0	9.0		
Control Room	1	16.0	16.0		
Radiologists Office / Reporting area	1	8.0	8.0		
CT Prep Room (Clean Utility)	1	14.0	14.0		
Dirty Utility	1	9.0	9.0		
Sub Total			**130.5**		

Cross-sectional Imaging facilities: MRI					
Non Controlled Area:					
Sub-waiting area: 5 places, incl. 1 wheelchair place	1	9.0	9.0		
Interview & Patient / Staff locker bay	1	9.0	9.0		
Trolley / Transfer Area to MRI Compatible Trolley	1	16.0	16.0		
Dirty Utility	1	9.0	9.0		
Controlled Area:					
Controlled Lobby			0.0		In circulation allowance
Anaesthetic Room	1	19.0	19.0		NB If located within controlled area will need to be spec'd accordingly
Ambulant Changing Cubicle	1	1.5	1.5		
Assisted patient changing cubicle	1	4.5	4.5		
Visitors & patients wc: Disabled/ wheelchair user - asstd	1	4.5	4.5		
MRI scanner engineering/technical room	1	24.0	24.0		
MRI scanner room (3 Tesla):	1	84.0	84.0		
Cleaners' room with non-ferromagnetic equipment/materials	1	7.0	7.0		
Image Review / Analysis Workstation Room	1	8.0	8.0		
Prep & Store Room (Clean Utility)	1	14.0	14.0		
Control Room	1	20.0	20.0		Includes safety records and slave anaesthetic monitors
Sub Total			**229.5**		

Shared facilities: CT & MRI & Interventional Labs					
Sub-reception/administration/records area: 2 reception & 2 workstation position	1	16.0	16.0		
Waiting area: 15 places, incl. 2 wheelchair places	1	25.0	25.0		
Allowance for children wait / play	1	15.0	15.0		
Drinking water dispenser	1	0.5	0.5		
Supt Office (2 person)	1	15.0	15.0		
WC Ambulant Asstd	1	2.5	2.5		
Visitors & Patients WC - disabled / wheelchair user - asstd	1	4.5	4.5		
Patients bed/trolley sub-waiting area: 4 places	1	20.0	20.0		include medical gases - patients may be from critical care or ED & have to wait etc
Cleaners Room	1	7.0	7.0		
Store Rooms	2	6.0	12.0		
Sub Total			**117.5**		

Total Net			**477.5**
Planning	**5%**		**23.9**
Sub-Total			**501.4**
Engineering	**3%**		**15.0**

Circulation	**28.0%**		**140.4**
Total			**656.8**

INTERVENTIONAL RADIOGRAPHY AND ANGIOGRAPHY SUITE

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Interventional Radiology & Angiography Suite					
Store room (linen)	1	2.0	2.0		
Disposal Hold	1	6.0	6.0		Also used bty CT / MRI
Dirty utility	2	12.0	24.0		En-suite to labs
Prep Rooms - en-suite to Labs	2	12.0	24.0		ensuite to labs
Interventional Radiology laboratory	1	65.0	65.0		
Cardiac Catheter (Biplane) laboratory + Theatre Set Up / Capacity	1	75.0	75.0		
Control room - shared	1	20.0	20.0		
Catheter (angiography) laboratory computer/engineering services room	2	16.0	32.0		
Scrub-up/gowning room: 3 places	2	11.0	22.0		ensuite to labs
Anaesthetic room	2	19.0	38.0		ensuite to labs
Patient bed/trolley theatre exit bay parking bay: 1 place	2	12.0	24.0		
Interventional Sterile Supplies Storage Area	1	10	10		
Office / Reporting - 4 stations	1	16	16		
Sub Total			**358.0**		

Total Net			**358.0**
Planning	**5%**		**17.9**
Sub-Total			**375.9**
Engineering	**3%**		**11.3**
Circulation	**28%**		**105.3**
Total			**492.4**

RADIOLOGY - MAIN DEPT

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Main entrance, reception & waiting facilities					
Wheelchair parking bay: 6 wheelchairs	1	4.0	4.0		
Reception/appointments desk: 3 position	1	15.0	15.0		
Central waiting area: 55 places, incl. 3 wheelchair places	1	88.0	88.0		
Staff Base (Near A&E and OPD Entrances)	1	16.0	16.0		
Trolley Wait - 4 positions	1	20.0	20.0		
Resus Bay	1	1.0	1.0		
Paeds waiting area & play area	1	15.0	15.0		
Visitors & patients wc: Ambulant user	2	2.5	5.0		
Visitors & patients wc: Disabled/ wheelchair user	1	4.5	4.5		
Porters room: 2 person (enclosed)	1	5.0	5.0		
Staff WC	2	2.5	5.0		
Disposal Hold	1	10.0	10.0		
Cleaners Room	1	7.0	7.0		
Equipment store	1	12.0	12.0		
Baby/infant feeding room	1	6.0	6.0		
Sub Total			**213.5**		

General x-ray imaging facilities					
Ambulant patients pass through changing cubicle	3	2.5	7.5		
Disabled/wheelchair patients pass through changing cubicle	1	4.5	4.5		
Bone mineral densitometry imaging room incl. control area	1	18.0	18.0		
General computed radiography x-ray room incl. control cubicle	3	40.0	120.0		
Store Room	1	8.0	8.0		
Computed radiography imaging film processing/ viewing area serving 3 exam rooms	1	30.0	30.0		
Clean Utility	1	12.0	12.0		
Dirty Utility	1	9.0	9.0		
Linen Trolley Bay	1	2.0	2.0		
Sub Total			**211.0**		

Ultrasound imaging facilities					
Visitors & patients wc: Disabled/ wheelchair user	1	4.5	4.5		
Ambulant patients changing cubicle	2	1.5	3.0		
Disabled/wheelchair patients changing cubicle	1	3.5	3.5		
Patients belongings locker bay: 12 lockers	1	1.5	1.5		
General Ultrasound examination room	2	16.0	32.0		
Patients en-suite wc: Disabled/ wheelchair user	1	4.5	4.5		
Counselling/interview room: 5 places	1	16.0	16.0		*Also identified as "soft" expansion for future 3rd U/S)
Store Room	1	6.0	6.0		
Clean Utility	1	12.0	12.0		(Shared with fluroscopy)
Dirty Utility	1	9.0	9.0		(Shared with fluroscopy)
Linen Trolley Bay	1	2.0	2.0		(Shared with fluroscopy)
staff reception	1	11.0	11.0		(Shared with fluroscopy)
Sub Total			**105.0**		

Fluoroscopy & fluorography diagnostic imaging facilities					
Ambulant patients changing cubicle	1	1.5	1.5		
Disabled/wheelchair patients changing cubicle	1	3.5	3.5		
Patients belongings locker bay: 4 lockers	1	0.5	0.5		
Lead apron & protection gear holding area	1	0.5	0.5		
Universal or remote fluoroscopy room incl. control area	1	40.0	40.0		
Computed radiography imaging film processing/viewing area	1	15.0	15.0		
Patients en-suite wc: Disabled/ wheelchair user	1	4.5	4.5		
Store Room	1	6.0	6.0		
Sub Total			**71.5**		
Offices, Reporting & Admin facilities					
Manager / CD	1	14.0	14.0		
Consultant Office - 2 person	5	13.0	65.0		
Senior radiographers office: 3 place	3	15.0	45.0		
Radiologists Communal Reporting area:	1	48.0	48.0		6 to 8 positions
Lead clinician's room	1	16.0	16.0		2 positions
Image Analysis Laboratory & Reporting Room	1	26.0	26.0		near to MRI
Head of Paediatric Clinical Physics	1	13.0	13.0		with meetings area
Secretairal / Admin office:	1	30.0	30.0		
Office supplies store	1	6.0	6.0		
Radiographer's reporting room	1	18.0	18.0		
Photocopy room / Store	1	6.0	6.0		
Sub Total			**287.0**		

Whole Department: Staff facilities					
Staff wc & wash: Ambulant user	2	2.5	5.0		
Staff wc: Disabled/wheelchair user	1	4.5	4.5		
Staff shower	2	2.5	5.0		Split M:F
Staff Lockers	1	18.0	18.0		Split M:F
Seminar room: 20 places	1	35.0	35.0		Equiped with 4 workstations. (En-suite to hot desk/staff support to allow whole area to be "opened up" into an 80m2 space
Hot Desk/Staff Support Area (6 x workstations)	1	45.0	45.0		With 50/50 split via temporary partition between workstation and support area
Sub Total			**112.5**		

MRI Suite					
Non Controlled Area:					
Sub-reception/administration/records area	1	11.0	11.0		
Sub-waiting area / patient familiarisation / Simulator	1	26.0	26.0		
Interview & Patient / Staff locker bay	1	9.0	9.0		
Trolley / Transfer Area to MRI Compatible Trolley	1	16.0	16.0		Also supports secondary function as an infrequent "recovery area"
WC - Disabled	1	4.5	4.5		
Clean Utility	1	12.0	12.0		May be shared with ultrasound/fluro if design allows

Dirty Utility	1	9.0	9.0		May be shared with ultrasound/fluro if design allows
Linen Trolley Bay	1	2.0	2.0		May be shared with ultrasound/fluro if design allows
Controlled Area:					
Controlled Lobby	0	17.0	0.0		In circulation allowance
Ambulant Changing Cubicle	1	1.5	1.5		
Assisted patient changing cubicle	1	3.5	3.5		
Visitors & patients wc: Disabled/ wheelchair user - asstd	1	4.5	4.5		
MRI scanner engineering/technical room	1	24.0	24.0		
MRI scanner room (3 Tesla):	1	84.0	84.0		Size varies 65m2 to 84m2 according to position of room and if some of field is external to building and access restricted. Access to install / remove magnet is critical to design - identify exterrnal wall (panels?)
Cleaners' room with non-ferromagnetic equipment/materials	1	7.0	7.0		
Image Review / Analysis Workstation Room	1	8.0	8.0		
Patient Prep & Store Room	1	16.0	16.0		
Feed/sleep area	1	9.0	9.0		Transferred from CT & MRI Schedule
Control Room	1	20.0	20.0		Includes safety records and slave anaesthetic monitors
Sub Total			**267.0**		

Total Net			**1,267.5**
Planning	**5%**		**63.4**
Sub-Total			**1,330.9**
Engineering	**3%**		**39.9**
Circulation	**27%**		**359.3**
Total			**1,730.1**

CARDIOLOGY TESTING

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Testing Area					
Sub-reception: 1 position	1	8.0	8.0		
Sub-waiting area: 10 places, incl. 2 wheelchair	1	16.0	16.0		
Drinking water dispenser	1	0.5	0.5		
Patient Trolley / Chairs Bay	1	8.0	8.0		
Visitors & patients wc: Disabled/ wheelchair user	1	4.5	4.5		
Physical measurement bay	1	3.5	3.5		
Echocardiography room	3	18.0	54.0		
Exercise ECG room:	2	16.0	32.0		
Other Testing / Consult	2	16.0	32.0		Including Holter Tape
Sterile supplies store	1	6.0	6.0		
Equipment store	1	4.0	4.0		
Sub Total			**168.5**		

Case Conference / Pre Op Reviews					
Meetings / Seminar Room	1	30.0	30.0		With Audio-Visual equip
Sub Total			**30.0**		

Total Net			**198.5**
Planning	**5%**		**9.9**
Sub-Total			**208.4**
Engineering	**3%**		**6.3**
Circulation	**30%**		**62.5**
Total			**277.2**

CLINICAL INVESTIGATION/ MEDICAL DAY UNIT

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Entrance and Reception					
Reception & Nurse Base - 2 position	1	10.0	10.0		
Workstation Area - 4 positions	1	16.0	16.0		
Manager's Office	1	9.0	9.0		Opens into workstation / reception area
Waiting & Play Area	1	24.0	24.0		
Visitors wc: Ambulant user	1	2.5	2.5		
Visitor / Patients wc: Disabled/ wheelchair user	1	4.5	4.5		
Sub Total			**66.0**		
Patient investigation & treatment spaces					
Consulting/examination room: dual sided couch access	2	13.5	27.0		With med gas
Prep Room / Clean Store	1	8.0	8.0		
Treatment room	2	16.0	32.0		With Med Gas.
Dirty utility	1	9.0	9.0		
Day Room (8 chairs)	1	36.0	36.0		With Med gas for 8 chairs.
Ensuite	2	4.5	9.0		
Patient trolley area - 10 trolley cubicles	1	80.0	80.0		With Med gas and parent's chair for each trolley space
Sub Total			**201.0**		
Other areas					
Family Interview room	1	11.0	11.0		
Family Instruction / Staff Training Room	1	14.0	14.0		with clinical WHB
Beverage preparation bay	1	6.0	6.0		
Sub Total			**31.0**		
Sanitary facilities					
Staff WC	1	2.0	2.0		
Staff Lockers & change	2	5.0	10.0		
Patients wc: Disabled/ wheelchair user	1	4.5	4.5		
Sub Total			**16.5**		
Support spaces					
Resuscitation trolley parking bay: 1 trolley	1	1.0	1.0		
Notes Cupboard	1	2.0	2.0		
General store	1	4.0	4.0		
Disposal hold	1	6.0	6.0		
Linen Cupboard	1	2.0	2.0		
Sub Total			**15.0**		

Total Net			**329.5**
Planning	**5%**		**16.5**
Sub-Total			**346.0**
Engineering	**3%**		**10.4**
Circulation	**27%**		**93.4**
Total			**449.8**

REHABILITATION: THERAPY & ORTHOTICS

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Entrance & Waiting					
Sub-reception: 1 position	1	8.0	8.0		
Sub-waiting area: 20 places, incl. 2 wheelchair places	1	32.0	32.0		
Drinking water dispenser	1	0.5	0.5		
Social Work	1	12	12		
Visitors & patients wc: Ambulant user	2	2.5	5.0		
Allowance for Classroom(s) & Assoc Accomm	1	80.0	80.0		
Visitors & patients wc: Disabled/ wheelchair user	1	4.5	4.5		
Sub Total			**142.0**		
Hydotherapy Pool					
Staff base: 2 staff	1	6.0	6.0		
Waiting area: 3 persons including 1 wheelchair user	1	6.0	6.0		
Patient changing room with cubicles, 6 places, ambulant persons	1	12.0	12.0		
WC dual access & handwash: accessible, wheelchair assisted	1	5.5	5.5		
Hydrotherapy pool	1	30.0	30.0		
Store: equipment, hydrotherapy pool & cleaning	1	5.0	5.0		
Hydrotherapy: laundry & utility room	1	6.0	6.0		
Sub Total			**70.5**		
Therapy Treatment & Orthotics					
Small Gymnasium (Equipment Room)	1	24.0	24.0		
ADL Kitchen (small)	1	22.0	22.0		
Flexible Treatment / Consult Rooms	10	12.0	120.0		
Consult / Exam / Exam (Single Sided)	2.0	13.5	27.0		
Treatment - large	1	16.0	16.0		
Store: exercise equipment, activity area	1	6.0	6.0		
Store: exercise equipment, therapy treatment cubicles	1	6.0	6.0		
Therapy Room	1	14.0	14.0		
Group Teaching Room	1	15.0	15.0		
Machine Room	1	25.0	25.0		
Fabrication Workroom	1	50.0	50.0		
Store Room	1	28.0	28.0		
Cast Rectification Room	1	20.0	20.0		
Casting Rooms	3	10.0	30.0		
Store Room	1	8.0	8.0		
Sub Total			**411.0**		
Staff Facilities					
Offices -1 person	2	9.0	18.0		
Staff Base / Workstations	2	18.0	36.0		
OT Base	1	24.0	24.0		
Staff Restroom & Beverages	1	18.0	18.0		
Staff WCs	3	2.0	6.0		
Cleaners Room	1	7.0	7.0		
Sub Total			**109.0**		

Total Net			**732.5**
Planning	**5%**		**36.6**
Sub-Total			**769.1**
Engineering	**3%**		**23.1**
Circulation	**22%**		**169.2**
Total			**961.4**

OUTPATIENTS

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Outpatient Entrance					
Enquiry / reception point	1.0	10.0	10.0		
Vending Area & Telephones	1.0	3.0	3.0		
Sub Total			**13.0**		
Phlebotomy Room (1 position)	2.0	8.5	17.0		
Physical Measurement (5 Bays)	1.0	18.0	18.0		
Medicines Management Room / Dispensing	1.0	15.0	15.0		
Youth Booth	1.0	16.0	16.0		
Baby / Infant Feeding Room	1.0	5.0	5.0		
Nappy Change Room	1.0	4.0	4.0		
Toilets	4.0	2.5	10.0		
Disabled WC	1.0	4.5	4.5		
Store	1.0	6.0	6.0		
Cleaners Room	1.0	6.0	6.0		
Sub Total			**101.5**		
Total for Outpatient Entrance			**114.5**		

Admin & FM & Staff Areas etc					
Medical Records Sorting / Holding	1.0	15.0	15.0		
Disposal Hold	3.0	6.0	18.0		
Resus Bays	1.0	1.0	1.0		
OPD Manager	1.0	10.0	10.0		
OPD Sister	1.0	10.0	10.0		
Admin / Clinical Notes Workstations	1.0	16.0	16.0		
Changing & Shower / WC - Male Staff	1.0	8.0	8.0		
Changing & Shower / WC - Female Staff	1.0	18.0	18.0		
Sub Total			**96.0**		

Generic OPD Cluster A					
Waiting Area (incl parent supervised play)	1.0	45.0	45.0		
Reception / Office - 3 position	1.0	12.0	12.0		
WC - Disabled Size	1.0	4.5	4.5		
Nurse Base	1.0	4.0	4.0		Adjacent to waiting area
Relatives / Interview / Counselling Room	1.0	9.0	9.0		
Treatment Room (with prep area)	1.0	16.5	16.5		
Consult / Exam Room	8.0	16.5	132.0		
Equipment / General Store	1.0	5.0	5.0		
Sub Total			**228.0**		

Generic OPD Cluster B					
Waiting Area (incl parent supervised play)	1.0	30.0	30.0		
Reception / Office - 3 position	1.0	12.0	12.0		
WC - Disabled Size	1.0	4.5	4.5		
Nurse Base	1.0	4.0	4.0		Adjacent to waiting area
Relatives / Interview / Counselling Room	1.0	9.0	9.0		
Treatment Room (with prep area)	1.0	16.5	16.5		
Consult / Exam Room	8.0	16.5	132.0		
Equipment / General Store	1.0	5.0	5.0		
En-suite Bathroom / WC to Treatment Room			6.0		
Additional Space Allowance for Treatment Room			4.5		
Sub Total			**223.5**		

OPD Cluster C (Nephrology & Dental)					
Waiting Area (incl parent supervised play)	1.0	30.0	30.0		
Reception - 3 position	1.0	12.0	12.0		
WC - Disabled Size	1.0	4.5	4.5		
Nurse Base	1.0	4.0	4.0		Adjacent to waiting area
Dental Room (1 chair)	2.0	20.0	40.0		
Dental Lab	1.0	6.0	6.0		
Consult / Exam / Exam (Single Sided)	5.0	13.5	67.5		
Treatment Room (with prep area)	1.0	16.5	16.5		
Equipment / General Store	1.0	6.0	6.0		
Sub Total			**186.5**		

Generic OPD Cluster D					
As Cluster A			228.0		
Plaster Treatment Room & Store			36.0		4 couches + Desk etc + Store
Sub Total			**264.0**		

Utility Room Support for Clusters A & B					
Clean Utility	1.0	14.0	14.0		
Dirty Utility	1.0	9.0	9.0		
Store Room	1.0	8.0	8.0		
Specimen / Disabled WC	1.0	4.5	4.5		with hatch to dirty utility
Linen Cupboard	1.0	1.0	1.0		
Staff WC	1.0	2.0	2.0		
Cleaners Room	1.0	6.0	6.0		
Sub Total			**44.5**		

Utility Room Support for Clusters C & D					
As for Clusters A&B			44.5		
Sub Total			**44.5**		

OPD Cluster E (Ophthalmology & Dietician)					
Waiting Area (incl parent supervised play)	1.0	45.0	45.0		
Reception - 3 position	1.0	12.0	12.0		
WC - Disabled Size	1.0	4.5	4.5		
Nurse Base	1.0	4.0	4.0		Adjacent to waiting area
Orthoptic Examination Room	3.0	20.0	60.0		
Ophthalmology consulting/examination room	4.0	13.0	52.0		
Equipment / General Store	1.0	6.0	6.0		
Sub Total			**183.5**		

OPD Cluster F (Audiology)					
Waiting Area (incl parent supervised play)	1.0	30.0	30.0		
Reception - 3 position	1.0	12.0	12.0		
WC - Disabled Size	1.0	4.5	4.5		
Nurse Base	1.0	4.0	4.0		Adjacent to waiting area
Audiometric Test Room	4.0	30.3	121.2		
Lobby & Control Areas	4.0	8.0	32.0		with window to test room
Workshop	1.0	12.0	12.0		
Interview / Fitting / Consult / Vestibular Function	4.0	16.0	64.0		Sound dampened - see National standards
Equipment / General Store	1.0	6.0	6.0		
Sub Total			**285.7**		

Utility Room Support for Clusters E & F					
Electrophysiology Room	2.0	21.0	42.0		
Clean Utility	1.0	14.0	14.0		
Store Room	1.0	8.0	8.0		
Linen Cupboard	1.0	1.0	1.0		
Staff WC	1.0	2.0	2.0		
Sub Total			**67.0**		

OPD Cluster G (Neurology)					
Waiting Area (incl parent supervised play)	1.0	12.0	12.0		
Reception - 1 position	1.0	8.0	8.0		
WC - Disabled Size	1.0	4.5	4.5		
Staff WC	1.0	2.0	2.0		
Standard Single Sided Consult Rooms	4.0	13.5	54.0		
EEG	2.0	16.0	32.0		
Reporting / Viewing Room	1.0	25.0	25.0		
meeting rooms	2.0	20.0	40.0		
Treatment Room	1.0	16.0	16.0		
Family Room	1.0	13.5	13.5		
Assessment Classroom	1.0	12.0	12.0		
Library	1.0	12.0	12.0		
Sub Total			**231.0**		

Lung Function Suite					
Lung Volumes Lab	1	21.5	21.5		
Exercise Test lab	1	23	23		
Sweat Test Lab	1	12.5	12.5		
Infant Lung Function Lab	1	13	13		
Fitness to Fly Lab	1	12	12		
Clinical Prep/Store	1	7	7		
Reporting room	1	18	18		
Shower	1	6.5	6.5		
Sub Total			**113.5**		

Total Net			**2,082.2**
Planning	**5%**		**104.1**
Sub-Total			**2,186.3**
Engineering	**3%**		**65.6**
Circulation	**31%**		**677.8**
Total			**2,929.7**

Main OPD Area	**2,486.0**
Audiology	**443.7**

PSYCHOLOGY & LIAISON PSYCHIATRY

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Outpatient Area					Position alongside a main OPD Cluster
General Office & Reception	1	12.0	12.0		with overview of waiting area
Sub - Waiting Area	1	12.0	12.0		
WC - Asstd Ambulatory	1	2.5	2.5		
Clinical Interview Rooms	2	12.0	24.0		
Interview Room (Obs Family / Play)	1	20.0	20.0		
Observation Room	1	8.0	8.0		
Sub Total			**78.5**		

Total Net			**78.5**
Planning	**5%**		**3.9**
Sub-Total			**82.4**
Engineering	**3%**		**2.5**
Circulation	**30%**		**24.7**
Total			**109.6**

CHILD PROTECTION UNIT

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Child Protection Suite					
Consult / Treatment	2	16.5	33.0		Includes use of scopes. 2 way mirror
Family / Police Room	1	12.0	12.0		
Clinical Bathroom	1	6.0	6.0		
Sub Total			**51.0**		

Total Net			**51.0**
Planning	**5%**		**2.6**
Sub-Total			**53.6**
Engineering	**3%**		**1.6**
Circulation	**25%**		**13.4**
Total			**68.5**

DEPT OF CHILD FORENSIC PSYCHOLOGY

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
DCFP					
Reception	1	10	10		Reception / waiting combined
Large group interview room(Therapy room)	1	18	18		
Observation room	1	9	9		
Therapy Rooms	3	10	30		
Soft Play ball	1	100	100		
Staff room (max 10 people)	1	15	15		
Multi disciplinary team room (10 person)	1	20	20		
Assisted Bathroom	1	14	14		
Assisted Shower room	1	8	8		
Nurses Station	1	12	12		
Work Station room	1	15	15		
Dining room	1	20	20		
Living room	1	18	18		
Quiet room	1	10	10		
OT/SLT Therapy room	1	15	15		
Therapy room with wet and dry areas	1	15	15		
2 - Bed room	2	34	68		
1 - Bed room	3	16.5	49.5		
Ensuite WC & WHB	2	4.5	9		
Store - therapy equipment	1	5	5		
school - classrooms	1	10	10		
school - classrooms	1	15	15		
school - office (3 staff)	1	15	15		
school - store	1	5	5		
school - wc's (disabled)	2	4.5	9		
ward pantry	1	12	12		
clinic treatment room	1	16.5	16.5		
DSR	1	7	7		
Sluice	1	10	10		
Storage	1	10	10		
Ward Manager Office	1	9	9		
Sub Total			**579.0**		

Total Net			**579.0**
Planning	**5%**		**29.0**
Sub-Total			**608.0**
Engineering	**3%**		**18.2**
Circulation	**24%**		**145.9**
Total			**772.1**

MAIN ENTRANCE & PUBLIC AREAS

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Entrance					
Entrance draught lobby	1	12.0	12.0		
Entrance concourse	1	30.0	30.0		
Patient trolley/wheelchair parking bay:	1	6.0	6.0		
Refreshment vending machine bay	1	3.0	3.0		
Telephones w/chair height	1	1.5	1.5		
Telephones	2	1.0	2.0		
Shopping & pushchair bay	1	8.0	8.0		
Pay-on-foot car park ticket bay	1	6.0	6.0		
Sub Total			**68.5**		
Reception					
Main Reception & Information	1	15.0	15.0		
Cashiers office	1	12.0	12.0		With security hatch & safe
Waiting area: 25 places, incl. 3 wheelchair places	1	40.0	40.0		
Sub Total			**67.0**		
Sanitary facilities					
WC: visitor ambulant user	4	2.5	10.0		
WC: visitors disabled/ wheelchair user	2	4.5	9.0		
Baby/infant feeding room	1	5.5	5.5		
Nappy change room	1	4.0	4.0		
Disabled changing/WC	1	10	10		
Cleaners Room & Equipment Store	1	12.0	12.0		
Sub Total			**50.5**		
Elective Admission & Discharge Lounge					
Reception/admissions office	1	12	12.0		
Interview rooms	2	9	18.0		
Ambulance Crew Room	1	12.0	12.0		
Sub Total			**42.0**		
Security & Porters					
Security (local) & Porters room:	1	14.0	14.0		
Sub Total			**14.0**		
Chaplaincy					
Vestibule	1	5.0	5.0		
Washing Area	1	4.0	4.0		
Chapel	1	30.0	30.0		Multi - worship
Quiet / Counselling Room	1	9.0	9.0		
Vestry office: 2 places	1	13.0	13.0		
Sub Total			**61.0**		
Radio Lollipop & Siblings Creche					
Entrance / Office	1	10.0	10.0		
Lobby & Waiting to Studio & Creche	1	8.0	8.0		
Broadcasting Studio	1	12.0	12.0		
En-suite store to Studio	1	3.0	3.0		
Siblings Creche	1	25.0	25.0		
Sub Total			**58.0**		

Volunteers Service					
Office - 2 person	1	13.0	13.0		
Volunteers Lounge & Meetings Room	1	18.0	18.0		With Beverage area
Sub Total			**31.0**		

Family Bereavement Service					
Waiting Area (4 persons)	1	6.0	6.0		
Office -- 1 person + visitors	2	11.0	22.0		
Children's Therapy Room	1	11.0	11.0		
Counselling Room	2	9.0	18.0		
WC - Ambulatory Asstd	1	2.5	2.5		
Sub Total			**59.5**		

Patient Information & Support					
Patients advocates room	1	12.0	12.0		
Interview Room - 5 places	2	9.0	18.0		
Family Information & resource centre (including Internet & NHS Information Stations x 4)	1	25.0	25.0		
Office - 2 person	1	13.0	13.0		
Sub Total			**68.0**		

Total Net			**519.5**
Planning	**5%**		**26.0**
Sub-Total			**545.5**
Engineering	**3%**		**16.4**
Circulation	**25%**		**136.4**
Total			**698.2**

Retail & Café					Gross area allowances
General Retail Space			20.0		
Snack Bar (incl seating area)			48.0		
Gross Total			**68.0**		

Additional Atria Allowance

GROUND FLOOR TOTAL **766.2**

WC Allowance for Upper Floors
3 floors @ 15m2 per floor **45.0**

DEPARTMENT TOTAL **811.2**

CONSULTANT OFFICES AND SUPPORT ACCOMMODATION

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Management & Meeting Rooms					
Management Offices	2	14.0	28.0		
Admin & Secretarial Support - 5 person (25m2) + files annexe (5m2)	1	30.0	30.0		
Other Operational Management Offies - 2 person	4	13.0	52.0		
Store Rooms	2	4.0	8.0		
Photocopying Rooms	1	6.0	6.0		
Conference / Meeting Rooms	2	25.0	50.0		
Beverage Bay	1	6.0	6.0		
Cleaner's Room	1	7.0	7.0		
WCs - Ambulant User	2	2.0	4.0		
WCs - Independent Wheelchair	1	4.5	4.5		
Sub Total			**195.5**		

Total Net			**195.5**
Planning	**5%**		**9.8**
Sub-Total			**205.3**
Engineering	**3%**		**6.2**
Circulation	**30%**		**61.6**
Total			**273.0**

MAN6 - BREEAM

RQ'D 18/01/10.

1:200 & 1:50 DESIGN PROCESS

Introduction

The attached chart (appendix A) sets out the process for achieving the sign-off of the 1:200 department layout drawings for both the adult and children's hospitals. The same format will be used for the 1:50 room layouts.

This process is reliant upon there being close communication between the User Group Leads and the Acute Service Director at all times.

There is a schedule of all User Group meetings and the membership of each group has been approved by the Acute Service Director and Chief Operating Officer.

Design Process

Seven days before the first meeting of each User Group a drawing(s) will be issued by the Project Team to each Group Lead. At the User Group meeting the Design Team (Architect supported by the Health Planner and Project Team members) will provide a detailed update on the User Group department(s) design progress.

During the User Group sessions discussion will lead to:

[1] Accepting the Design Team proposals;
[2] Making some changes with no impact on cost or other departments;
[3] Making changes with an impact on other departments and/or cost.

If the User Group decision is that [1] or [2] above are the agreed status then the design process can move on to the next planned meeting or the group decide that the design is concluded and can be signed off. The Design Acceptance Procedure Form will be signed to acknowledge the status.

If the group agree the status is [3] then the following procedures will be implemented:

- Immediately issue an Early Warning Notice of the proposed change
- Immediately, or up to 7 days if sketch design and costs are required, the Group Lead will discuss the issues with their Director providing them with the reasoning behind the proposed changes(s). This can be supported by members(s) of the Project Team or Design Team if required.
- The Directors must be presented with all appropriate information including an initial sketch and high level budget cost of the proposed change to enable them to decide whether or not to initially accept or reject the changes.
- If Director decides the change(s) is not required or not worth further work then this will be relayed to the Brookfield via the Adult or Children's Project Manager. This must be relayed to Brookfield within 7 days of the User Meeting.
- If the Director agrees that the change(s) submitted should be considered for implementation then he/she must make a case to the New South Glasgow Hospital & Laboratories Executive Board Sub-Group. Details of the proposal including design and financial implications will be provided by the Project Director. (This group will meet weekly and consider only exceptional

circumstances which cause a change to the project and incur additional capital or revenue costs).

The Acute Director(s) must provide the Executive Sub-Group with detailed reasoning and information for requesting change(s) which have an impact on the cost of the project. At the same time the Project Team will initiate the formal Change Control Procedure (CCP) to record all necessary information for the New South Glasgow Hospitals and Laboratories Executive Board. The CCP must be signed by the appropriate Senior Manager (i.e. Chief Executive or Chief Operating Officer) before it can be implemented.

The Executive Sub-Group will have the final say on the decision. The Project Director will communicate the decision to the Brookfield within 21 days of the User Group meeting to enable the Design Team to conclude their work for the next set of meetings.

If the changes being considered are complex and/or of a large scale then the Project Director will open discussion with Brookfield to agree how much time can be allowed or is required, beyond the 21 days, to complete any necessary work or achieve a higher level of approval within the Board, without affecting the programme. As the timescales are contractual and changes could cause changes in the Master Programme, which would have a cost impact, it is important that any changes that impact upon programme, either by delaying or instigating additional work, are avoided. It must be made clear to all groups that this contract is a fixed price and it is not anticipated that any changes will increase the existing footprint of the building and hence the cost.

All changes with a financial impact will be recorded and reported to the next meeting of the New South Glasgow Hospitals and Laboratories Executive Board.

Progress update on the design process will be provided at the monthly Acute Services Redesign Group where members will have the opportunity to raise issues etc with the Project Team.

The level of sign-off of drawings will follow the following procedure and will be recorded on the "Design Acceptance Procedure" Form as shown in Appendix B.

APPENDIX .

1:200 & 1:50 Process

SET UP MEETING
refer meeting schedule

Lead discusses with Director

ISSUE OF 1ST DRAWING
week before meeting (email & hard copies)

7 days

MEETING WITH USERS & ARCHITECTS
- Members agreed by Directors
- Infection Control at all meetings
- Group agrees/changes drawings
- Changes with financial implications

Change → Early warning event - Change Control Process initiated

Agreed

Change, with financial implications — 7 days

Initial outline sketch and cost prepared by BCL

Rejected

Group Lead feeds back to Director for consideration

35 days

14 days*

Approval given to go forward

Detailed Proposal including design and financial implications prepared by BCL

Project Exec Board for approval ↔ Exec Sub-Group (exceptional circumstances)

Immediate Instructions given to Brookfield by Project Director
(Approval date confirmed depending on issue)

Agreed

Compensation Event

2nd DRAWING ISSUED
week before meeting [as above]

7 days

2nd MEETING

REPEAT

1:50s ISSUED
(as 1:200 process)

* Should a longer period be required for redesign/costing refer matter to Project Directors NHS & Brookfield for approval.

Timeline

DECEMBER 2009

ADULT – start early Jan 2010

NCH – start end Jan 2010

Adult - finish 12th May 2010

NCH - finish 24th May 2010

Design

Regular updates to ASR/R Group as design develops

Meetings in 2010

21/01/10
18/02/10
18/03/10
15/04/10
20/05/10
17/06/10
15/07/10
19/08/10
16/09/10
21/10/10

APPENDIX B

NEW SOUTH GLASGOW HOSPITALS & LABORATORY PROJECT

DESIGN ACCEPTANCE PROCEDURE

The design approval procedure will be used to review and approve a range of deliverables such as clinical functionality at departmental and room level, finishes, colour schemes, materials and components.

The attached form will be used to record the design development process to review and sign off the clinical functionality both at department level and also for the room layout process. These two operations will follow a three stage process.

The review of items such as colour schemes, components and finishes will also follow a three stage process although it is envisaged that these could be completed in fewer stages.

The form is set out to record the history of the design acceptance process and it is envisaged that each drawing, specification or schedule will have its own sheet to record and sign off the history and acceptance of the contractors design.

At each review the Board will consider the design information provided by the contractor and respond within the timescale, confirming the level of approval and providing supporting narrative or marked up drawings.

The Board will ensure that all responses are signed off by the appropriate staff to record user, managerial acceptance of the design element under review.

NEW SOUTH GLASGOW HOSPITALS & LABORATORY PROJECT DESIGN ACCEPTANCE PROCEDURE	
Building:	Issued by:
Subject:	Date Issued:
Aspect for Review:	Date return:

DESIGN REVIEW HISTORY			
	Level of Approval	Approval Date	Remarks
Design Review 1			
Design Review 2			
Design Review 3			

BOARD RESPONSE

Level of Approval

Information referred to:

Detailed comment:

Approval Levels: A= No comment. B= Proceed subject to comments. C= Resubmit with amendments. D=Rejected.

BOARD ACCEPTANCE SIGN OFF

User Group Lead:	Date:
Design Manager:	Date:
Project Manager:	Date:

New South Glasgow Hospitals (NSGH) Project Agenda

Adult Hospital

Clinical User Group Meeting: No. 1 (1:200 Stage)
Department: XXXXXX
Date of Meeting: XXXXXX
Time: XXXXX

Meeting Agenda

1.0 Introductions
Open Meeting
Confirm Meeting Attendees / Distribute Attendance List
Terms of Reference for the Group
Group Lead remit

Project Manager.

Summary of Current Project Status & 1:200 Design Process
- Summary of 1:200 Meeting Process
- Number of Review Meetings
- Change Management
- Department Sign-Off

2.0 Brief Presentation of the Scheme
Short powerpoint presentation of the current design
Site Masterplan
1:500 Plans / Key Department Adjacencies
3D Visualisations / Fly-through

Design Team.
20 min's.

3.0 1:200 Department Plan Review
Locate the Department in the Building / Main Clinical Adjacencies
Main Entrances to the Department
Summary of the Department's Main Elements
Detailed Review / Room Adjacencies

HIGH LEVEL SOA

4.0 Main Circulation Flows Review
Key Patient Journeys to and from the Department
Circulation Flows around the Department
Detailed Review

5.0 Agree Action Plan and Responsibilities
Summarise Comments
Agree amendments required to Department
Sign-Off Drawing Mark-Up as 'Record Copy'
Sign off Design Acceptance Procedure

DESIGN TEAM

Project Manager.

6.0 AOB/ Confirm date of next meeting

New South Glasgow Hospital Project (NSGH)
1:200 Design User Group Meeting Schedule

NA Issue 13

KEY
- Meeting Lead: Heather Griffin
- Meeting Lead: Mairi Macleod
- Meeting to be confirmed
- Most recent revisions in blue

#	Adult's Hospital User Group	User Group Meeting 1 Day	Date	Time Allowed	Location	User Group Meeting 2 Day	Date	Time Allowed	Location	User Group Meeting 3 Day	Date	Time Allowed	Location
1	Inpatient Wards (Generic)	Wednesday	20th Jan	9.00am - 12.30pm	1 Jubilee Court, Hillington Park, Glasgow G52 4LB	Monday	8th March	2.30pm - 5.00pm	Lecture Theatre, 5th Floor, neurosurgery building, SGH	Tuesday	20th April	9.00am - 12.30pm	1 Jubilee Court Hillington
2	Stroke Ward	Wednesday	20th Jan	12.30pm - 2.00pm	1 Jubilee Court, Hillington Park, Glasgow G52 4LB	Monday	8th March	11.00am - 1.00pm	Project Office, Ground Floor, St Andrews House, 80 Queen Elizabeth Avenue, Hillington Industrial Estate, G52 4NQ	Tuesday	20th April	12.30pm - 2.00pm	1 Jubilee Court Hillington
3	Rehab	Wednesday	20th Jan	2.30pm -	1 Jubilee Court, Hillington Park, Glasgow G52 4LB	Monday	8th March	9.00am - 10.30am	Project Office, Ground Floor, St Andrews House, 80 Queen Elizabeth Avenue, Hillington Industrial Estate, G52 4NQ	Tuesday	20th April	2.30pm - 4.00pm	1 Jubilee Court Hillington
4	Renal Inpatients, Day Unit & Renal Dialysis	Thursday	21st Jan	12.30pm - 5.00pm	1 Jubilee Court, Hillington Park, Glasgow G52 4LB	Wednesday	10th March	9.00am - 1.00pm	1 Jubilee Court Hillington	Thursday	22nd April	9.00am - 1.00pm	1 Jubilee Court Hillington
5	Main Entrance & Public Areas	Friday	22nd Jan	9.00am - 5.00pm	1 Jubilee Court, Hillington Park, Glasgow G52 4LB	Tuesday	9th March	9.30am - 12.30pm	Training Room 1, Management Annex, SGH	Wednesday	21st April	9.00am - 11.00am	1 Jubilee Court Hillington
6	Radiology - Main Imaging Imaging Department	Monday	25th Jan	9.00am - 5.00pm	1 Jubilee Court, Hillington Park, Glasgow G52 4LB	Monday	15th March	9.00am - 5.00pm	Board Room, 1 Jubilee Court, Hillington Park, Glasgow G52 4LB	Tuesday	27th April	9.00am - 5.00pm	Conference Room, Clock Tower Building, SGH
7	Outpatients (Generic) & Pre-Assessment Unit	Tuesday	26th Jan	12.30pm - 5.00pm	1 Jubilee Court, Hillington Park, Glasgow G52 4LB	Thursday	11th March	9.00am - 12.00 noon	1 Jubilee Court Hillington	Friday	23rd April	9.00am - 12.00 noon	1 Jubilee Court Hillington
8	Theatres, AODOS & Recovery	Wednesday	27th Jan	12.30pm - 5.00pm	1 Jubilee Court, Hillington Park, Glasgow G52 4LB	Thursday	11th March	1.30am - 5.00pm	1 Jubilee Court Hillington	Friday	23rd April	1.30pm - 5.00pm	1 Jubilee Court Hillington
9	Acute Assessment Unit (AAU)	Friday	29th Jan	9.00am - 3.00pm	Ebenezer Duncan, Victoria Infirmary, Glasgow, Glasgow City G429	Friday	12th March	9.00am - 3.00pm	Lecture Theatre, QMH, Dalnair Street, Glasgow G38SJ	Monday	26th April	9.00am - 3.00pm	Lecture Theatre, QMH, Dalnair Street, Glasgow G38SJ
10	Medical Day Unit (MDU) / Clinical Investigations Unit	Monday	1st Feb	9.00am - 12.30pm	1 Jubilee Court, Hillington Park, Glasgow G52 4LB	Tuesday	16th March	9.00am - 12.00 noon	1 Jubilee Court Hillington	Wednesday	28th April	9.00am - 12.00 noon	1 Jubilee Court Hillington
11	Critical Care	Monday	1st Feb	1.00pm - 5.00pm	1 Jubilee Court, Hillington Park, Glasgow G52 4LB	Friday	19th March	9.00am - 12.30pm	1 Jubilee Court Hillington	Thursday	22nd April	2.00pm - 4.30pm	1 Jubilee Court Hillington
12	Emergency Department (ED)	Tuesday	2nd Feb	9.00am - 12.30pm	1 Jubilee Court, Hillington Park, Glasgow G52 4LB	Thursday	18th March	9.00am – 12.30pm	1 Jubilee Court, Hillington Park, Glasgow G52 4LB	Thursday	29th April	1.30pm – 5.00pm	1 Jubilee Court Hillington
13	Coronary Care Unit (CCU)	Tuesday	2nd Feb	2.00pm - 5.00pm	1 Jubilee Court, Hillington Park, Glasgow G52 4LB	Wednesday	17th March	9.00am - 12.30pm	1 Jubilee Court, Hillington Park, Glasgow G52 4LB	Tuesday	4th May	1.30pm - 5.00pm	1 Jubilee Court Hillington
14	Nuclear Medicine (Adults & Children)	Wednesday	3rd Feb	10.00am - 12.00 noon	Imaging room, RHSC, Dalnair Street, Glasgow G38SJ	Wednesday	14th April	10.00am -	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ	Tuesday	18th May	9.30am -	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ
15	Endoscopy	Wednesday	3rd Feb	12.00 noon - 3.00pm	1 Jubilee Court, Hillington Park, Glasgow G52 4LB	Friday	19th March	1.30pm - 5.00pm	1 Jubilee Court Hillington	Tuesday	4th May	9.00am - 12.00 noon	1 Jubilee Court Hillington
16	Urology	Wednesday	3rd Feb	3.30pm - 4.30pm	1 Jubilee Court, Hillington Park, Glasgow G52 4LB	Thursday	18th March	5.00pm -	Project Office, St Andrews House, 385 Hillington Road, Hillington Park, Glasgow, G524BL	Wednesday	28th April	1.30pm - 3.30pm	1 Jubilee Court Hillington
17	Diabetes	Wednesday	3rd Feb	5pm -	St Andrews House, 385 Hillington Road, Hillington Park, Glasgow, G524BL	Friday	12th March	3.30pm - 5.00pm	Project Office, St Andrews House, 385 Hillington Road, Hillington Park, Glasgow, G524BL	Thursday	22nd April	5.00pm -	Project Office, St Andrews House, 80 Queen Elizabeth Avenue, Hillington, G52 4NQ
18	Haemato-oncology (Inpatient Ward)	Thursday	4th Feb	9.00am - 1.00pm	1 Jubilee Court, Hillington Park, Glasgow G52 4LB	Thursday	25th March	2.00pm - 5.00pm		Friday	7th May	9.00am - 12.30pm	1 Jubilee Court Hillington
19	Pharmacy (Adults & Childrens) & Aseptic Suite	Thursday	4th Feb	1.00pm - 5.00pm	Queen's Park House, Victoria Infirmary, 1st Floor Langside Rd, Glasgow	Tuesday	23rd March	9.00am - 12 noon	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ	Thursday	13th May	9.30am - 11.00am	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ
20	ENT	Friday	5th Feb	8.30am - 10.00am	1 Jubilee Court, Hillington Park, Glasgow G52 4LB	Wednesday	17th March	2.30pm - 3.15pm	1 Jubilee Court Hillington	Thursday	6th May	11.00am - 11.45am	1 Jubilee Court Hillington
21	Ophthalmology	Friday	5th Feb	10.15am - 11.45am	1 Jubilee Court, Hillington Park, Glasgow G52 4LB	Wednesday	17th March	3.30pm - 5.00pm	1 Jubilee Court Hillington	Wednesday	28th April	4.00pm - 5.30pm	Project Office, St Andrews House, 80 Queen Elizabeth Avenue, Hillington, G52 4NQ
22	Orthopaedics	Friday	5th Feb	12.00 noon - 1.30pm	1 Jubilee Court, Hillington Park, Glasgow G52 4LB	Wednesday	17th March	1.30pm - 2.30pm	1 Jubilee Court Hillington	Thursday	6th May	12.00 noon - 1.00pm	1 Jubilee Court Hillington
23	Cardiology Outpatients & Rehab	Friday	5th Feb	2.15pm - 3.45pm	1 Jubilee Court, Hillington Park, Glasgow G52 4LB	Wednesday	17th March	9.00am - 12.30pm	1 Jubilee Court, Hillington Park, Glasgow G52 4LB	Tuesday	4th May	1.30pm - 5.00pm	1 Jubilee Court Hillington
24	Decontamination Suite	Monday	8th Feb	9.00am - 1.00pm	1 Jubilee Court, Hillington Park, Glasgow G52 4LB	Monday	22nd March	9.00am -	1 Jubilee Court Hillington	Wednesday	5th May	9.00am - 1.00pm	1 Jubilee Court Hillington
25	FM Facilities (Adults & Children)	Tuesday	9th Feb	9.00am - 3.00pm	1 Jubilee Court, Hillington Park, Glasgow G52 4LB	Monday	22nd March	9.00am -	1 Jubilee Court Hillington	Wednesday	5th May	9.00am - 1.00pm	1 Jubilee Court Hillington
26	Medical Illustration (Adults & Children)	Thursday	11th Feb	9.00am - 11.00am	80 Queen Elizabeth Ave, Renfrewshire G524 (Hillington Park)	Wednesday	24th March	3.00pm -	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ	Wednesday	19th May	10.00am - 12 noon	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ
27	Dermatology Ward & OPD	Tuesday	23rd Feb	5.30pm -	Project Offices, St Andrews House, 385 Hillington Road, Hillington Park, Glasgow, G524BL	Monday	29th March	5.00pm - 7.00pm	Project Office, St Andrews House, 385 Hillington Road, Hillington Park, Glasgow, G524BL	Friday	7th May	1.30pm - 4.00pm	1 Jubilee Court Hillington
	Children's Hospital User Group												
28	Cardiology - Cardiology Ward	Monday	8th Feb	12.00 noon - 1.30pm	Cardiology Teaching Room, RHSC, Dalnair Street, Glasgow G38SJ	Thursday	1st April	1.00pm - 4.30pm		Thursday	27th May	1.00pm - 3.00pm	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ
29	Cardiology - Cardiology Testing	Monday	8th Feb	2.00pm - 3.00pm	Cardiology Teaching Room, RHSC, Dalnair Street, Glasgow G38SJ	Thursday	1st April	1.00pm - 4.30pm		Thursday	27th May	1.00pm - 3.00pm	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ
30	Cardio/Respiratory Investigation - Lung Function Suite	Monday	8th Feb	3.00pm - 4.30pm	Cardiology Teaching Room, RHSC, Dalnair Street, Glasgow G38SJ	Thursday	1st April	1.00pm - 4.30pm		Thursday	27th May	1.00pm - 3.00pm	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ
31	Theatres and 23 Hour Ward, CT, MRI Sleep studies	Monday	8th Feb	4.30pm -	Committee Room, RHSC, Dalnair Street, Glasgow G38SJ	Thursday	30th March	1.30pm - 4.30pm	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ	Wednesday	19th May	2.00pm - 5.00pm	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ
32	Child Protection	Wednesday	10th Feb	11am -	Conference Room, QMH, Dalnair Street, Glasgow G38SJ	Thursday	25th March	9.00am - 10.30am	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ	Friday	14th May	9.30am -	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ
33	Inpatient Wards & Renal Services, Acute Receiving Unit, Renal Dialysis & Hospital at Night	Thursday	11th Feb	1.00pm - 5.00pm	Conference Room, QMH, Dalnair Street, Glasgow G38SJ	Friday	26th March	9.00am - 12.00 noon	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ	Tuesday	25th May	9.00am - 12 noon	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ
34	Emergency Department, Observation Ward & Transport Base	Friday	12th Feb	9.00am - 12.00 noon	Conference Room, QMH, Dalnair Street, Glasgow G38SJ (Transport @10.30)	Tuesday	23rd March	2.00pm - 4.00pm	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ	Tuesday	18th May	2.00pm -	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ
35	Main Entrance & Public Areas, Health Records Admin & Support	Tuesday	16th Feb	2.00pm - 5.00pm	Conference Room, QMH, Dalnair Street, Glasgow G38SJ	Friday	26th March	1.00pm - 4.00pm	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ	Friday	14th May	1.00pm -	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ
36	Ophthalmology	Thursday	18th Feb	11.00am - 12.30pm	Conference Room, QMH, Dalnair Street, Glasgow G38SJ	Wednesday	14th April	1.00pm -	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ	TBC	TBC	TBC	TBC
37	Schiehallion Ward (Haemato - oncology) Day Case and TCT	Thursday	18th Feb	1.00pm - 4.00pm	Seminar Room Schiehallion, RHSC, Dalnair Street, Glasgow G38SJ	Friday	16th April	2.00pm -	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ	Monday	17th May	1.00pm -	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ
38	Medical Records (Adults & Children)	Friday	19th Feb	9.00am - 12.00 noon	80 Queen Elizabeth Ave, Renfrewshire G524 (Hillington Park)	Tuesday	13th April	9.30am -	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ	TBC	TBC	TBC	TBC
39	Audiology	Friday	19th Feb	12.30pm - 1.30pm	Committee Room, RHSC, Dalnair Street, Glasgow G38SJ	Wednesday	31st March	11.30am - 1.30pm	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ	Friday	14th May	12.00noon -	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ
40	OPD	Monday	22nd Feb	9.00am - 5.00pm	Classroom, QMH, Dalnair Street, Glasgow G38SJ	Wednesday	14th April	1.00pm - 5.00pm	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ	Wednesday	26th May	9.00am -	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ
41	Medical Physics (Adults & Children's Hospital)	Tuesday	23rd Feb	9.00am -	Conference Room, QMH, Dalnair Street, Glasgow G38SJ	Monday	29th March	2.00pm - 4.00pm	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ	Thursday	13th May	3.00pm -	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ
42	Rehabilitation Suite, Therapies & Special Needs	Tuesday	23rd Feb	1.00pm - 5.00pm	Classroom, QMH, Dalnair Street, Glasgow G38SJ	Tuesday	30th March	9.00am - 1.00pm	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ	Tuesday	25th May	1.00pm -	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ
43	Radiology - Imaging	Wednesday	24th Feb	9.00am - 11.30am	Imaging Room, RHSC, Dalnair Street, Glasgow G38SJ	Monday	29th March	9.00am - 12.00 noon	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ	Monday	17th May	9.00am - 11.00am	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ
44	Psychiatry / DCFP	Wednesday	24th Feb	1.00pm - 4.00pm	Caledonian House, RHSC, Dalnair Street, Glasgow G38SJ	Monday	12th April	9.30am -	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ	Thursday	13th May	1.00pm -	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ
45	Critical Care (PICU)	Thursday	25th Feb	1.30pm - 4.00pm	PICU Department, RHSC, Dalnair Street, Glasgow G38SJ	Wednesday	24th March	10.00am - 2.00pm	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ	Wednesday	26th May	2.30pm -	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ
46	Day Investigation Unit / Medical Day Unit	Thursday	25th Feb	9.00am -	Anathestic Seminar Room, RHSC, Dalnair Street, Glasgow G38SJ	Thursday	15th April	9.00am - 11.00am	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ	Thursday	27th May	9.30am -	Physio Gym, QMH, Dalnair Street, Glasgow G38SJ

NA-SH-001_14
NEW SOUTH GLASGOW HOSPITALS
1:200 USER GROUP MEETING TRACKING SCHEDULE & PROGRAMME Rev 14

NIGHTINGALE associates

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C	Severe / Significant change (redraw)

Tracking Status

√	Complete
●	Amendment from Bid drawings. Workshop review required to resolve issues.
*	Complete redesign/redraw therefore no drawing markup issued directly following UGM

#	DEPARTMENT NAME	FLOOR	Sheet & Drawing No.	Latest Rev	1:200 NA Lead/Design Responsibility	1:50 stage NA Lead	Date Issue for UGM1 drawings	PreMeeting Briefing Pack Issued	User Group Meeting No. 1	UGM 1 Change Status	Markup issued to board	Action points received	M&E Design Review	Structural Design Check	SOA compliance	Final Check & Issue	Date Issue for UGM2 drawings	PreMeeting Briefing Pack Issued	User Group Mtg No 2	UGM 2 Change Status	Markup issued to board	Action points received	Review by M&E	Structural Design Check	SOA compliance	Final Check & Issue	Date Issue for UGM3 drawings	PreMeeting Briefing Pack Issued	User Group Mtg No 3	User Group Mtg No 4 required?	Area Reports, B/W, Thematic views issued	Signed Dwg Markup issued	Sign Off Action points received	FINAL SIGN OFF
										3 weeks (approx)										3 weeks (approx)										Sign off Period				
Adult 1:200's Design User Group Meetings																																		
1	Inpatient Wards (Generic)	03-05	NA-xx-06-PL-252-001 NA-xx-06-PL-252-402 NA-XX-XX-SK-AS-400-100	05 01	Terry, Rowland & Emma	Rowland	05/01/10	√	20/01/10	A	√	√	√	√	√	√	26/02/10	√	08/03/10	A	√	√	√	ongoing	√	√	09/04/10	√	20/04/10	–	Yes	√	√	√
2	Stroke Ward	01	NA-xx-03-PL-252-406	07	Terry & Rowland	Rowland	13/01/10	√	20/01/10	C	√	√	√	●	√	√	26/02/10	√	08/03/10	B		√	√	ongoing		√	09/04/10	√	20/04/10	–	Yes	√	√	√
3	Rehabilitation (Outpatients)	00	NA-xx-00-PL-252-409 NA-xx-06-PL-252-400	03 03	Mark & Terry	Mark	13/01/10	√	20/01/10	A	√	√		√		√	26/02/10	√	08/03/10	A	√	√	√	ongoing	√	√	09/04/10	√	20/04/10	–	Yes	√	√	√
4	Renal Inpatients & Day Unit, & Renal Dialysis	02&04	NA-xx-04-PL-252-411 NA-xx-02-PL-252-409	04 06	Terry & Mark	Mark	15/01/10	√	21/01/10	B	√	√			√	√	02/03/10	√	10/03/10	A C	√	√	√	ongoing		√	13/04/10	√	22/04/10	–	Yes	√	√	√
5	Main Entrance & Public Areas	00&01	NA-xx-00-PL-252-411 NA-xx-01-PL-252-400	06 04	Anna & Graham	Anna	13/01/10	√	22/01/10	A	√	√	√	√	√	√	01/03/10	√	09/03/10	B	√	√	√	√	√	√	12/04/10	√	21/04/10	–	Yes	√	√	√
6	Radiology	00&01	NA-xx-00-PL-252-407 NA-xx-01-PL-252-407	07 04	Terry & Matt	Matt	18/01/10	√	25/01/10	C	√	√	●	√	√	√	05/03/10	√	15/03/10	B	√	√	√	ongoing	ongoing	√	13/04/10	√	27/04/10	11/05/10			√	
7	OPD (Generic) & Pre Assessment Unit	00&01	NA-xx-00-PL-252-409 NA-xx-01-PL-252-409	04 03	Terry & Matt	Matt	19/01/10	√	26/01/10	C	√	√	√	√	√	Sketch Issued	03/03/10	√	11/03/10	B	√	√	√	ongoing	ongoing	√	14/04/10	√	23/04/10	–	Yes	√	√	√
8	Operating Theatres AODOS & Recovery	02	NA-xx-02-PL-252-415	04	Terry & Gary	Rowland	20/01/10	√	27/01/10	C	√	√	●	●	√	√	03/03/10	√	11/03/10	B	√	√	√	ongoing	ongoing	√	14/04/10	√	23/04/10	–	Yes	√	√	√
9	Acute Assessment Unit (AAU)	00	NA-xx-00-PL-252-406	04	Terry & Matt	Rowland & Matt	22/01/10	√	29/01/10	C	√	√	√	●	√	√	04/03/10	√	12/03/10	B	√	√		ongoing	ongoing	√	15/04/10	√	26/04/10	–	Yes	√	√	√
10	MDU/Clinical Investigations Unit	01	NA-xx-01-PL-252-406	07	Graham	Rowland	18/01/10	√	01/02/10	C	*	√	√	√	√	√	08/03/10	√	16/03/10	B		√	√	ongoing	ongoing	√	19/04/10	√	28/04/10	–		√	√	√
11	Critical Care	01	NA-xx-01-PL-252-414	05	Graham	Graham	25/01/10	√	01/02/10	C	*	√	√	●	√	√	11/03/10	√	19/03/10	B		√	√	ongoing	ongoing	√	13/04/10	√	22/04/10	–	Yes	√	√	√
12	Emergency Department (ED)	00	NA-xx-00-PL-252-405	06	Graham	Graham & x1	21/01/10	√	02/02/10	C	*	√	√	●	√	√	10/03/10	√	18/03/10	A		√	√	ongoing	ongoing	√	20/04/10	√	29/04/10	–	Yes		√	√
13	Coronary Care Unit (CCU)	01	NA-xx-01-PL-252-404	06	Graham	Graham	24/01/10	√	02/02/10	B	*	√	√	√	√	√	09/03/10	√	17/03/10	B		√	√	ongoing	ongoing	√	23/04/10	√	04/05/10	–	Yes	√	√	√
14	Ayrshire Day Surgery Unit (ADSU) & Endoscopy	01	NA-xx-01-PL-252-408	04	Graham	Rowland	08/01/10		03/02/10	C	*	√			√	√	06/04/10	√	14/04/10	A		√	√	ongoing	ongoing	√	07/05/10	√	18/05/10	–	Yes			
15	Endoscopy	02	NA-xx-02-PL-252-404	08	Graham	Rowland	11/01/10	√	03/02/10	A		√	√	√		√	11/03/10	√	19/03/10	C		√	√	ongoing	ongoing	√	21/04/10	√	04/05/10	–	Yes		√	√
16	Urology	01	NA-xx-01-PL-252-409 NA-xx-01-PL-252-410	07 02	Matt & Graham	Mark	26/01/10	√	03/02/10	C	√	√				Sketch Issued	10/03/10	√	18/03/10	A		√		ongoing	ongoing	√	19/04/10	√	28/04/10	–	Yes		√	√
17	Diabetes	01	NA-xx-01-PL-252-409	07	Matt	Matt	26/01/10	√	03/02/10	C	√	√				Sketch Issued	04/03/10	√	12/03/10	A	√	√	√	ongoing	ongoing	√	13/04/10	√	22/04/10	–	Yes	√	√	√
18	Haemato-oncology (Inpatient Ward)	04	NA-xx-04-PL-252-403	03	Mark	Mark	22/01/10	√	04/02/10	B		√				√	16/03/10	√	25/03/10	B		√		ongoing	ongoing	√	28/04/10	√	07/05/10	–	Yes	√		√ 1/2
19	Pharmacy & Aseptic Suite (Adults & Childrens)	00	NA-xx-00-PL-252-413 NA-xx-02-PL-252-404	05 10	John & Neil	Neil	27/01/10		04/02/10	B / C		√	●	√	●	√	15/03/10	√	23/03/10	A / A		√	√	ongoing	ongoing	√	04/05/10	√	13/05/10	21/05/10	Yes	√	√	√
20	ENT	01	NA-xx-01-PL-252-409	07	Matt & Mark	Matt & Mark	28/01/10	√	05/02/10	C	√	√		√		Sketch Issued	09/03/10	√	17/03/10	A	√	√		ongoing	ongoing	√	27/04/10	√	06/05/10	–	Yes	√		√
21	Ophthalmology	01	NA-xx-01-PL-252-409	07	Matt & Mark	Matt & Mark	28/01/10	√	05/02/10	C	√	√		√		Sketch Issued	09/03/10	√	17/03/10	A	√	√	√	ongoing	ongoing	√	19/04/10	√	28/04/10	–	Yes		√	√
22	Orthopaedics	00	NA-xx-00-PL-252-408	04	Matt & Mark	Matt & Mark	28/01/10	√	05/02/10	C	√	√		√		Sketch Issued	09/03/10	√	17/03/10	A	√	√	√	ongoing	ongoing	√	27/04/10	√	06/05/10	–	Yes	√		√
23	Cardiology OPD & Cardiac Rehabilitation	01 00	NA-xx-01-PL-252-409 NA-xx-00-PL-252-409	07 05	Matt & Mark	Matt & Mark	28/01/10	√	05/02/10	C	√	√		√		Sketch Issued	09/03/10	√	17/03/10	B A	√	√	√	ongoing	ongoing	√	23/04/10	√	04/05/10	–	Yes	√	√	
24	Decontamination Suite	02	NA-xx-02-PL-252-404	03	Gary	Rowland	29/01/10		08/02/10	C	√	√			√	√	12/03/10	√	22/03/10	A		√	√	ongoing	ongoing	√	26/04/10		05/05/10	–	Yes	√	√	√
25	FM Facilities (Adult & Children's)	B1-04	NA-xx-01-PL-252-400 NA-xx-02-PL-252-400 NA-xx-03-PL-252-400 NA-xx-06-PL-252-400 NA-xx-B1-PL-252-400 NA-xx-B1-PL-252-010	06 01 05 05 03 02	Gary & Matthias	Matthias & Rowland	01/02/10	√	09/02/10	B/C		√	●			√	12/03/10		22/03/10	C		√	√	ongoing	ongoing	√	26/04/10		05/05/10	–		√	√	√
26	Medical Illustration (Adults & Childrens)	00	NA-xx-00-PL-252-407	06	Jonathan	Rowland	03/02/10		11/02/10	C	√	√		●		√	15/03/10	√	24/03/10	C		√	√	ongoing	ongoing	√	10/05/10		19/05/10	–				√
27	Dermatology Ward & Dermatology OPD	02	NA-xx-02-PL-252-401 NA-xx-02-PL-252-409	04 05	Matt	Matt	15/02/10	√	23/02/10	A	√	√				Sketch Issued	18/03/10	√	29/03/10	B		√		ongoing	ongoing	√	28/04/10		07/05/10	–	Yes	√	√	√

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Children's 1:200's Design User Group Meeti	**Children's 1:200's Design User Group Meetings**																																	
28	Cardiology Ward	01	NA-xx-01-PL-252-403	07	Jonathan	Jonathan	29/01/10		08/02/10	B	√	√				√	23/03/10	√	01/04/10	A	√	√	√	ongoing	ongoing	√	18/05/10		27/05/10	–				
29	Cardiology Testing	00	NA-XX-00-PL-252-402	04	Jonathan	Jonathan	29/01/10		08/02/10	A	√	√				√	23/03/10	√	01/04/10	B	√	√	√	ongoing	ongoing	√	18/05/10		27/05/10	–				
30	Lung Function Suite	00	NA-XX-00-PL-252-402	04	Jonathan	Jonathan	29/01/10		08/02/10	A	√	√				√	23/03/10	√	01/04/10	B	√	√	√	ongoing	ongoing	√	18/05/10		27/05/10	–				
31	Theatres, Endoscopy, Recovery, & CT/MRI Suite (to be covered in Radiology)	01	NA-xx-01-PL-252-401 NA-xx-02-PL-252-402	05 06	Jonathan	Jonathan	29/01/10		08/02/10	C	√	√				√	19/03/10	√	30/03/10	B	√	√	√	ongoing	ongoing	√	10/05/10	√	19/05/10	–				
	Day & 23 Hour Unit	01	NA-xx-01-PL-252-402	04	Jonathan	Jonathan	29/01/10		08/02/10	C		minutes received				√	19/03/10	√	30/03/10	B	√	√	√	ongoing	ongoing	√	10/05/10		19/05/10	–				√
32	Child Protection	00	NA-xx-00-PL-252-403	04	Jonathan	Jonathan	02/02/10		10/02/10	C	√	√				√	16/03/10	√	25/03/10	C	√	√	√	ongoing	ongoing	√	05/05/10		14/05/10	–				√
33	Inpatient Wards & Renal Services	03	NA-xx-03-PL-252-402 NA-xx-03-PL-252-403	03 04	Jonathan		03/02/10		11/02/10	B	√	√				√	17/03/10	√	26/03/10	A	√	√	√	ongoing	ongoing	√	14/05/10	√	25/05/10	–				√
	Acute Receiving Unit	02	NA-xx-02-PL-252-403	04	Jonathan		03/02/10		11/02/10	B	√	√				√	17/03/10	√	26/03/10	B	√	√		ongoing	ongoing	√	14/05/10	√	25/05/10	–				√
	Renal Dialysis	03	NA-XX-03-PL-252-403	04	Jonathan		03/02/10		11/02/10	C	√	√				√	17/03/10	√	26/03/10	B	√			ongoing	ongoing	√	14/05/10	√	25/05/10	–				√
	Hospital Hotel	02	NA-XX-02-PL-252-403	06	Jonathan		03/02/10		11/02/10	C	√	√				√	17/03/10	√	26/03/10	√	√			ongoing	ongoing	√	14/05/10	√	25/05/10	–				√
34	Emergency Department & Transport Bays	00	NA-xx-00-PL-252-404	03	Jonathan		04/02/10		12/02/10	C	√	√				√	12/03/10	√	23/03/10	B	√	√	√	ongoing	ongoing	√	07/05/10	√	18/05/10	–	Yes			
	Observation Ward	00	NA-xx-00-PL-252-403	04	Jonathan		04/02/10		12/02/10	C	√	√				√	12/03/10	√	23/03/10	A	√	√	√	ongoing	ongoing	√	07/05/10		18/05/10	–				√
35	Main Entrance & Public Areas	00	NA-xx-00-PL-252-402	02	Gary & Anna	Rowland & Anna	08/02/10		16/02/10	C	√	√				√	17/03/10	√	26/03/10	A	√	√	√	ongoing	ongoing	√	06/05/10		TBC 14/05/2010	–				√
	Sanctuary	00	NA-xx-00-PL-252-403	03	Anna & Gary	Rowland & Anna	08/02/10		16/02/10	C	√	√				√	17/03/10	√	26/03/10	√	√	√		ongoing	ongoing	√	06/05/10		TBC 14/05/2010	–				√
	Admin, Training, Health Records & Staff Facilities	03	NA-xx-03-PL-252-403	03	Gary & Anna	Rowland & Anna	08/02/10		16/02/10	A	√	√				√	17/03/10	√	26/03/10	√	√	√	√	ongoing	ongoing	√	05/05/10		TBC 14/05/2010	–				√
36	Ophthalmology	00	NA-xx-00-PL-252-402	04	Graham & Terry		10/02/10		18/02/10	C	√	√				√	01/04/10		14/04/10	√				ongoing	ongoing	√	17/05/10		26/05/10	–		√		√
37	Schrahalion Ward (Haemato - oncology), Day Case & TCF	02	NA-xx-02-PL-252-402	06	Jonathan		10/02/10		18/02/10	C	√	√				√	07/04/10	√	16/04/10	B	√			ongoing	ongoing	√	06/05/10	√	17/05/10	–	Yes			
38	Medical Records (Adults & Children)	03	NA-xx-03-PL-252-403	03	Graham		11/02/10		19/02/10	A	√	√				√	31/03/10	√	13/04/10	√		√		ongoing	ongoing	√	TBC		Not Required	–				√
39	Audiology	00	NA-xx-00-PL-252-402	03	Jonathan		11/02/10		19/02/10	B	√					√	22/03/10	√	31/03/10	B	√	√	√	ongoing	ongoing	√	06/05/10	√	14/05/10	–				√
40	Outpatients OPD (Generic & Specialists)	00	NA-xx-00-PL-252-402	04	Graham & Terry		15/02/10		22/02/10	C	√	√				√	01/04/10	√	14/04/10	B		√	√	ongoing	ongoing	√	17/05/10		26/05/10	–		√		
41	Medical Physics & B/P Engineering (Adults & Children)	02	NA-xx-02-PL-252-404	06	Terry & Matt		15/02/10	√	23/02/10	C	√ SOA	√				√	18/03/10	√	29/03/10	A	√	√	√	ongoing	ongoing	√	04/05/10		N/A	–	Yes			√
42	Rehabilitation Suite, Therapies & Special Feeds	00	NA-xx-00-PL-252-401 NA-xx-01-PL-252-403	02 02	Terry & Matt	Rowland	15/02/10	√	23/02/10	C	√	√				√	19/03/10	√	30/03/10	√ / A	√		√	ongoing	ongoing	√	14/05/10	√	25/05/10	–		√		
43	Radiology, & CT/MRI from Theatres Suite?	00&01	NA-xx-00-PL-252-407 NA-xx-01-PL-252-401	03 04	Terry & Matt	Matt & Rowland	16/02/10	√	24/02/10	A	√	√				√	18/03/10	√	29/03/10	C	√	√ Admin bldg	√	ongoing	ongoing	√	06/05/10	√	17/05/10	Yes (Likely)		√	√	
44	Psychiatric Unit	04	NA-xx-04-PL-252-402	03	Matt	Rowland	16/02/10	√	24/02/10	B	√	√				√	31/03/10	√	12/04/10	B	√	√		ongoing	ongoing	√	04/05/10	√	13/05/10	–				√
45	Critical Care (PICU)	01	NA-xx-01-PL-252-403	06	Jonathan	Jonathan	17/02/10	√	25/02/10	C	√	√				√	15/03/10	√	24/03/10	C	√	√	√	ongoing	ongoing	√	17/05/10	√	26/05/10	–				
46	Day Investigation Unit / Medical Day Unit	01	NA-xx-01-PL-252-403	06	Jonathan	Jonathan	17/02/10	√	25/02/10	C	√	√				√	06/04/10	√	15/04/10	A	√	√	√	ongoing	ongoing	√	18/05/10		27/05/10	–				√

New South Glasgow Hospitals (NSGH) Project

Adult Hospital

Clinical User Group Meeting: No. 3 (1:200 Stage 3)
Department: Ward Users Group
Date of Meeting: Tuesday 20th April, 2010
Time: 9.00am - 12.30pm

Attendance Sheet

Name	Organisation/Role	Attendance
John Stuart	NHS Greater Glasgow & Clyde	[redacted]
Morag Busby	NHS Greater Glasgow & Clyde	
Brenda Byrom	NHS Greater Glasgow & Clyde	
Colin Cuthbertson	NHS Greater Glasgow & Clyde	
Gill Donnelly	NHS Greater Glasgow & Clyde	
Catherine Nivison	NHS Greater Glasgow & Clyde	
Linda Robertson	NHS Greater Glasgow & Clyde	
Maureen White	NHS Greater Glasgow & Clyde	
Rob Boulton-Jones	NHS Greater Glasgow & Clyde	
Sophia (Theresa) Boyle	NHS Greater Glasgow & Clyde	
Audrey Thompson	NHS Greater Glasgow & Clyde	
Heather Griffin	NHS Greater Glasgow & Clyde	
Fiona McCluskey	NHS Greater Glasgow & Clyde	
HEATHER GRIFFIN	PROJECT MANAGER	
FIONA MCCLUSKEY	NHSGGC	
ROWLAND PHILLIPS	NA.	[redacted]
[illegible]	[illegible]	
[illegible]	Project Team	
[illegible]	Project Team	
Frances Wrath	Project Team	
DAVID MCLEISH	DOIG+SMITH	
PAUL BRITTON	TRIDAL	
TERRY SULLIVAN	MGWITHGALES	

NEW SOUTH GLASGOW HOSPITALS & LABORATORY PROJECT
DESIGN ACCEPTANCE PROCEDURE

Building: NSGH	**Issued by:**
Subject: Generic Inpatient Ward	**Date issued:**
Aspect for Review:	**Date returned:**

DESIGN REVIEW HISTORY

	Level of Approval	**Approval Date**	**Remarks**
Design Review 1			
Design Review 2			
Design Review 3			

BOARD RESPONSE

Level of Approval [ ] **Outcome**

Information referred to: _____

Detailed comment: _____

Approval Levels: A = No comment. B = Proceed to comments. C = Resubmit with amendments. D = Rejected.

BOARD ACCEPTANCE SIGN OFF

User Group Lead: _____ Date: _____

Infection Control Lead: _____ Date: _____

Facilities Management Lead: _____ Date: _____

Design Manager: _____ Date: _____

Project Manager: _____ Date: _____

WARD USER GROUP

ACTION POINTS 20/4/2010

1) Disposal Hold down to be relocated to opposite Clean Utility
2) Dirty Test Room to be renamed Dirty Utility and to be drawn as SDA
3) Architect / Structural Engineer reviewing layout at the end of the helipad wand leg to try and get improved line of sight into the end bedroom
4) Architects to move 3D images of end bedrooms (to helipad wing) showing view from the corridor
5) Entrance to en-suite in Helipad wing, end bedroom to be reviewed at 1:50 stage

---

1:50's

SINGLE BEDROOM

1) CHA307 to be moved to SHA055 location
2) CHA 317 move to window side of room
3) Mobile Trolley to be added in location of CHA317
4) The non-standard size bedrooms require to be reviewed at the 1:50 stage – helipad room and 2nr rooms at wand corners
5) Demonstrate that hoist can get in and out of en-suite
6) Drawing options for bedheads required

SOCIALISATION SPACE

1) Architect to clarify if there can be an open plan space
2) BOA030 to be omitted
3) [illegible] to be moved

PAGE 2

4/ BOA012 to be reduced to 1m

5/ TV outlet to be added

6/ Nurse call push button to be added

RESUS TROLLEY BAY

1/ 1m double socket to be added

WHEELCHAIR PARKING BAY

1/ Add 2m double socket

INTERVIEW ROOM

1/ Add mobile computer trolley and redraw room as per Arch sketch
2/ Reduce size of Notice Board to 600 x 900mm
3/ Add Art hook
4/ Add double socket
5/ Omit THA053 and add round occasional table

TOUCHDOWN BASE

1/ Omit cupboard storage unit
2/ Confirm that there is a light
3/ Middle touchdown base to ward wing requires 12 panel staff call
4/ Worktop to be at sitting height
5/ Add drawer - CHA031

STAFF COMMUNICATION BASE / SENIOR OFFICE (Drawings 013 + 018)

1/ Pneumatic Tube system to be located in Clean Utility
2/ Change worktop from 'L' shape to long workstation

PAGE 3

3, 1500 mm high, fixed partition required at the end of the workstation to separate cream

4, NHS to confirm Printer provision

5, LIGHT 136 to be omitted from drawing 013 and added to drawing 016

6, Nurse call panel to be added

7, Security panel to be added

8, Medical gas panel to be added

9, Add ... line : ORA 056

10, Add 2no Waste bins

11, IT Project Manager to review 1:50 layouts and provide feedback

12, Move brooms into corner and add magnetic Whiteboard.

CLEAN UTILITY

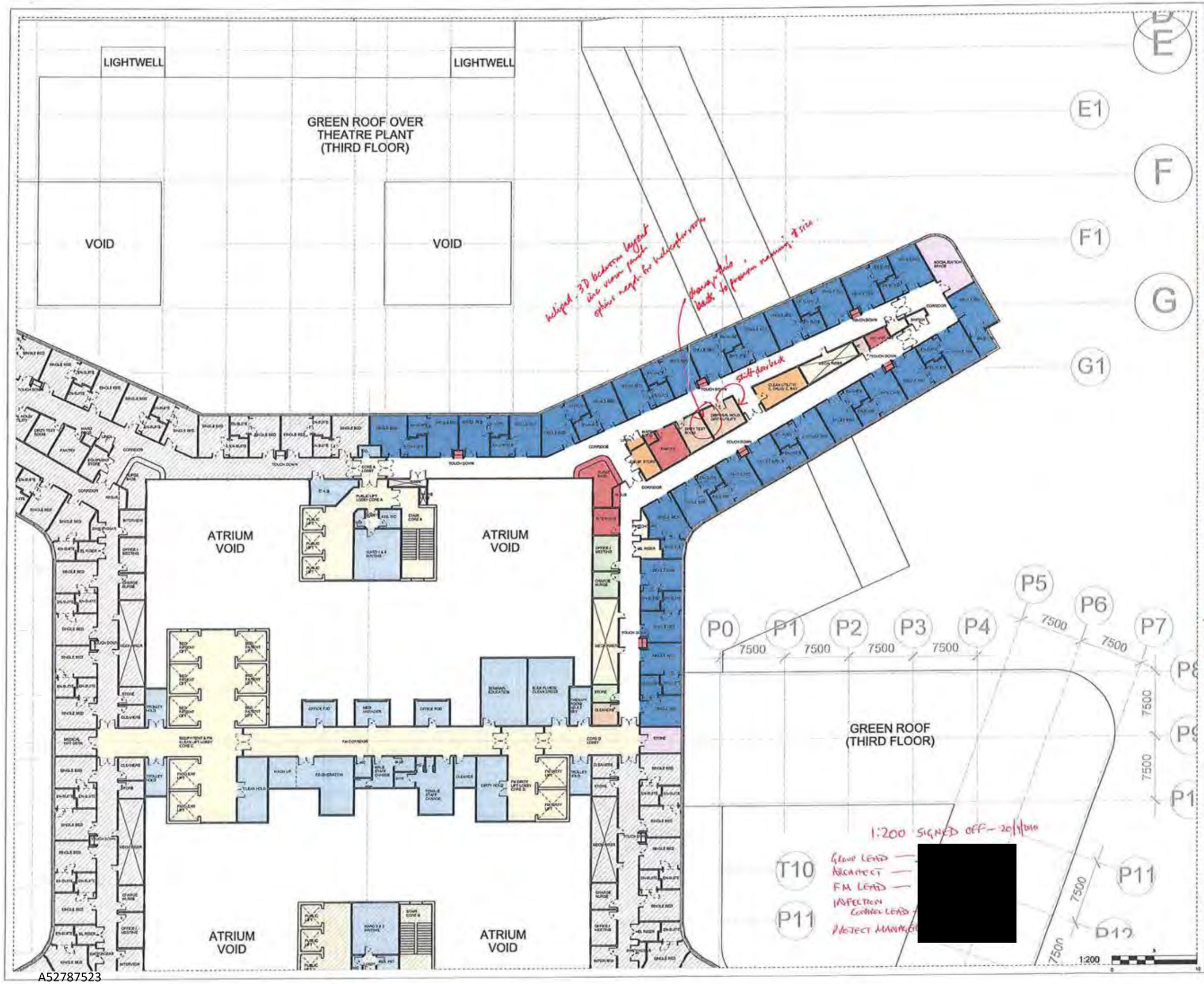
1, Add Pneumatic tubes (from Staff base)

2, Add 2no double sockets

3, Room layout to be redesigned as per Architect's sketch

BULK STORAGE

1, NHS to confirm Strategy



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- Do not scale dimensions from this drawing.
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- Do not modify any element of this drawing.
- Use drawing only for purpose(s) issued.

Designer Identification of Hazard/Risk

- Hospital Street, Lift, Stairs and Risers
- Main Entrance, Reception and Waiting Space
- Staff Support, Offices and Administrative Services
- Bedrooms and En-suites
- Patients Support Facilities
- Backup Storage
- Utilities
- Additional Accomodation and Services
- Shared Ward Support
- Department Circulation

Rev	Date	Drw	Revision Notes	Chk	App
04	09/06/10	AB	Revised for User Group Meeting 3	TS	X
03	25/03/10	CG	Plan Revised	TS	X
02	05/02/10	AB	Revised for User Group Meeting 2	TS	X
01	05/01/10	GO	Issued for User Group Meeting 1	TS	X

GENERIC WARDS AGS SIGN OFF SUBJECT TO ACTION POINTS ATTACHED 20/1/10 TS/KP

Client: NHS

Contractor: **Brookfield**

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Project: NEW SOUTH GLASGOW HOSPITALS (NSGH) PROJECT

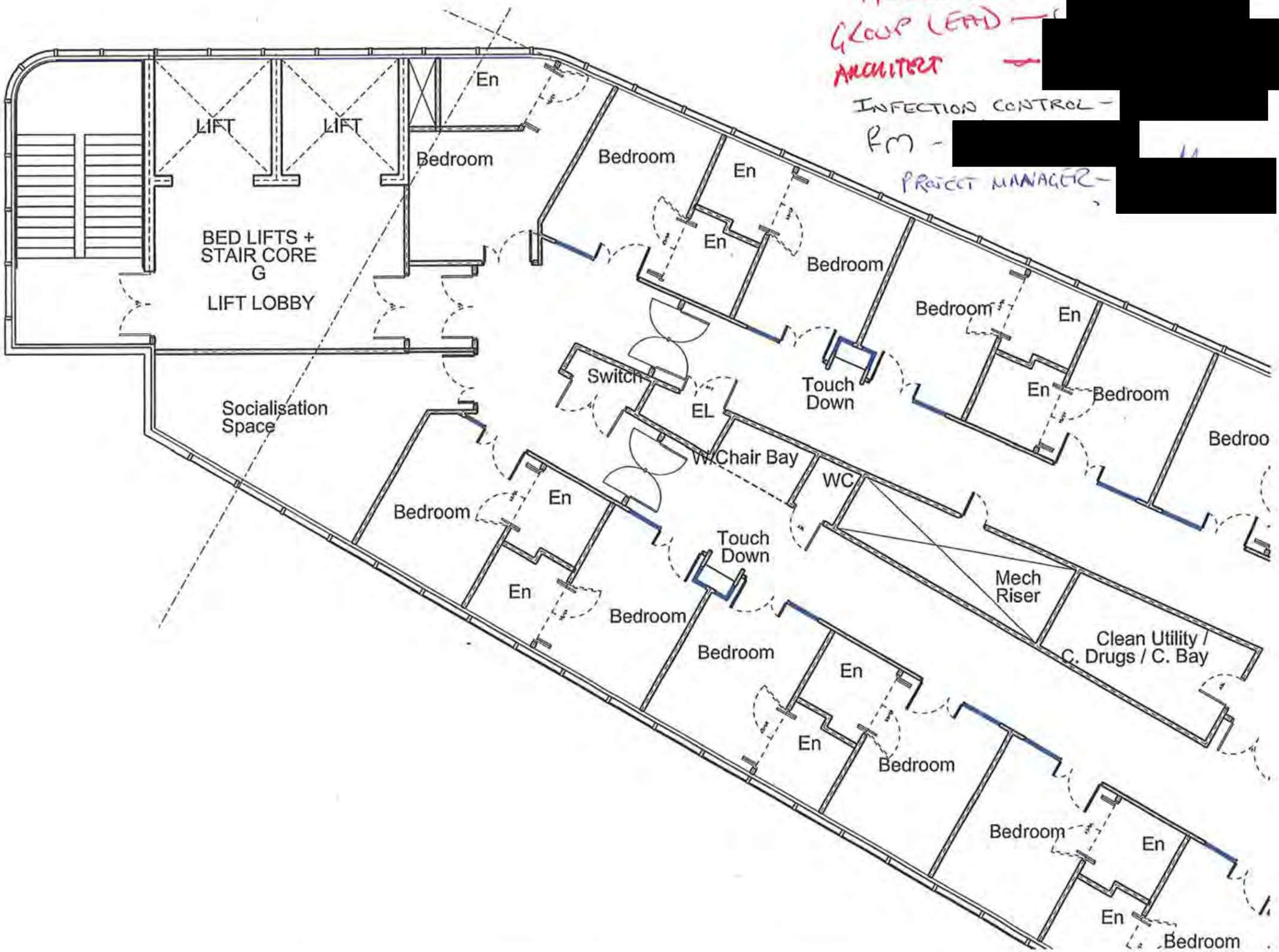
Drawing Title: SIXTH FLOOR PLAN GENERIC WARD

Job No.	Drawn	Checked	Approved
09060	AB	AB	TS
Status: Preliminary		Date: 02/09/09	Scale@A1: 1:200

Drawing No						Rev
Origin	Zone	Level	Type	Content	Sequential	
NA	XX	06	PL	252	401	04

A52787523

1:200 SIGN OFF 20/4/20
PROVIDED ACTION POINTS ADDRESSED
GROUP LEAD – [redacted]
ARCHITECT – [redacted]
INFECTION CONTROL – [redacted]
FM – [redacted]
PROJECT MANAGER – [redacted]



A52787523

DESIGN ACCEPTANCE PROCEDURE FORM

Generic Ward User Group meeting 20/1/10
ACTION POINTS

Generic Wards

- Can isolation lobby area be used to provide additional storage space? Architect to check. If not, can space be taken from socialisation area to achieve this?
- Controlled drug cupboard should be within the clean utility
- Relocate food trolley bay adjacent to pantry
- Wheelchair bay : merge the two areas (keep fire partition at one side of area)
- Clinical supplies bay : merge into the clean utility
- Centralise the Resus trolley bay (relative to beds)
- 2 x single bedroom at end of ward finger : can window be relocated to improve observation? Architect to investigate.
- Socialisation space : investigate options for an open plan area in an alternative location of ward (i.e. end of ward finger), or open plan area in current location
- Reception area : utilise this area for additional waiting space

Ward Support Cluster

- No action points

DESIGN ACCEPTANCE PROCEDURE FORM

Ward User Meeting – 8th March 2010

ACTION POINTS

Ward Area

1. Hot Desk Area could be re-designated as Storage Area pending outcome of scope of equipment library operation.

2. Small Wait Area next to Nurse Base can be used as Hot Desk/Touch Down Base in lieu of hot desk area noted above pending answer from 1. above.

3. Preferred location for Socialisation Space is at end of ward finger whether or not this is a closed or open plan space.

4. Infection Control to comment on door location at Dirty Utility.

5. Clarify use of quarter circle ducts at ends of ward finger. *(appear to have door access from end bedrooms)*

Support Core Area

No action points.

Anna Brown

From:	Anna Brown
Sent:	14 May 2010 18:05
To:	Heather Griffin; 'McCluskey, Fiona'; Carol Craig
Cc:	Emma White; 'Bill McGaugie'; 'Gillian Kirkness'; 'David Bower'; 'Darren Smith'; 'John Young'; 'Steve Pardy'; Scott McCallum; 'David McLeish'; Carla Queiroz; Terry Sullivan; Garry Howard; John Wiggett; Matthew Cromack; Mark Drane; Jamie Brewster; Graham Harris
Subject:	NSGH Adults - Post UGM3 Signoff Record Dwg for Generic Inpatient Ward
Attachments:	2010-05-14 Post UGM3 GenericWardHelipadCorridor-Bedroom2 3D.pdf; 2010-05-14 Post UGM3 GenericWardHelipadCorridor-Bedroom1 3D.pdf; 2010-05-14 Post UGM3 GenericWardHelipadAerialPlan 3D.pdf; NA-xx-06-PL-252-401_05.pdf; NA-xx-06-PL-252-402_01.pdf

Dear Heather, Carol & Fiona,

For your record and distribution, please find attached the revised drawing for the Adults Department following the sign off during **User Group Meetings 3** on 20/04/2010 for:

Adults Generic Inpatient Ward
NA-xx-06-PL-252-401_05.pdf
NA-xx-06-PL-252-402_01.pdf

Also, as discussed in UGM3, the observation and view into the helipad ward wing bedroom was raised as a concern by the Users. We have investigate the design and layout of this end wing area and we now feel we have resolved the issues on the plan and have enhanced the outlook from the patient/bed location. Please find attached 3D images showing the view from both sides of the department corridor and an aerial plan 3D:

2010-05-14 Post UGM3 GenericWardHelipadAerialPlan 3D.pdf
2010-05-14 Post UGM3 GenericWardHelipadCorridor-Bedroom1 3D.pdf
2010-05-14 Post UGM3 GenericWardHelipadCorridor-Bedroom2 3D.pdf

If you have any queries please don't hesitate to contact us.

Regards,

Anna Brown

NIGHTINGALE ASSOCIATES
87-91 Newman Street | London | W1T 3EY

t: [redacted] | f: [redacted]
e: [redacted]

w: www.nightingaleassociates.com

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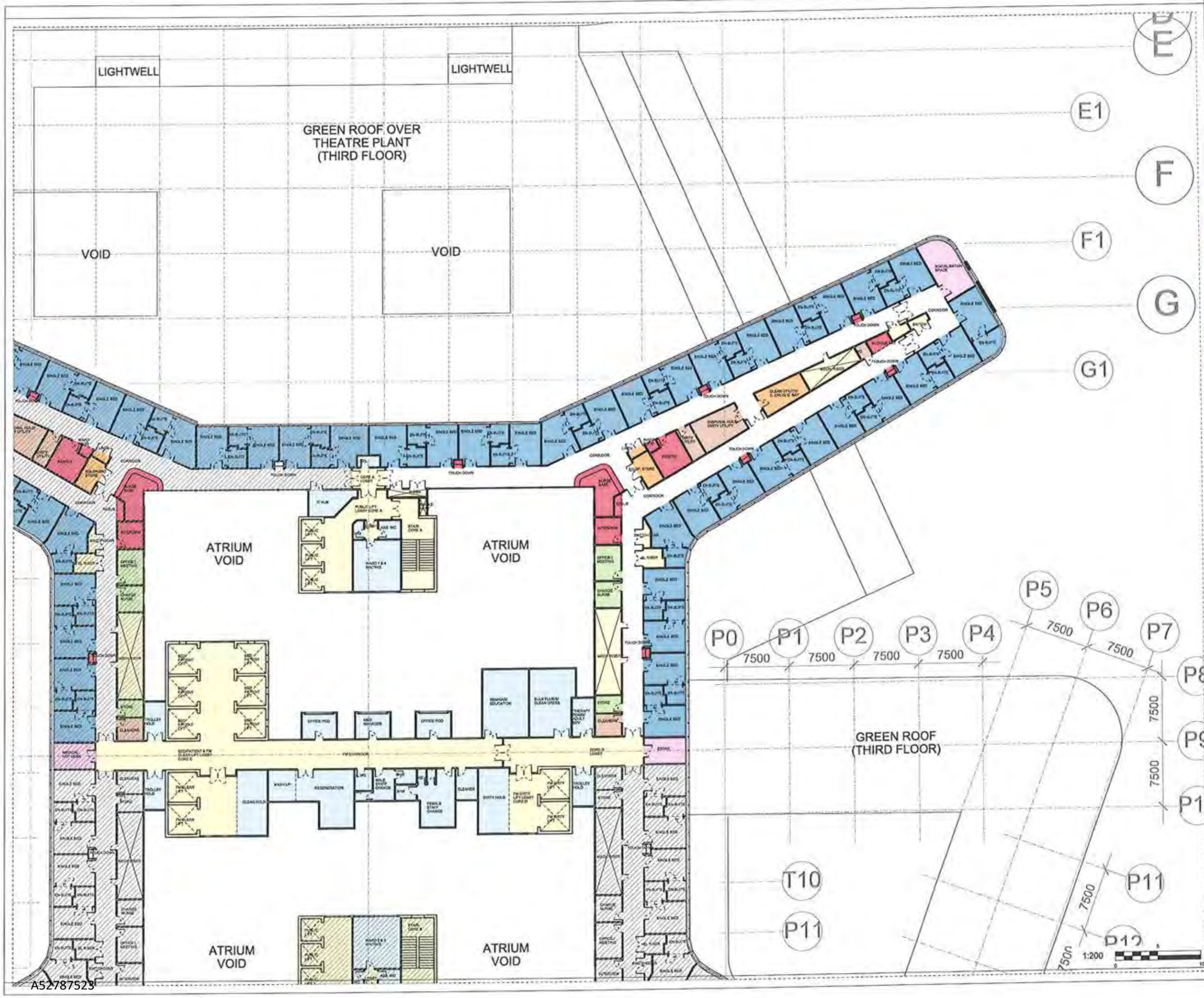

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- Backup Storage
- Utilities
- Additional Accomodation and Services
- Shared Ward Support
- Department Circulation

Rev	Date	Drn	Revision Notes	Chk	App
05	14/05/10	AB	Generic Ward revised post UGM 3 for 1:200 Sign-Off	TS	X
04	06/04/10	AB	Revised for User Group Meeting 3	TS	X
03	19/03/10	CG	Plan Revised	TS	X
02	26/02/10	AB	Revised for User Group Meeting 2	TS	X
01	05/01/10	GO	Issued for User Group Meeting 1	TS	X

Client: NHS

Contractor: **Brookfield**

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Project: NEW SOUTH GLASGOW HOSPITALS (NSGH) PROJECT

Drawing Title: SIXTH FLOOR PLAN GENERIC WARD

Job No	Drawn	Checked	Approved
09080	AB	AB	TS
Status: Preliminary		Date: 02/09/09	Scale@A1: 1:200

Drawing No						Rev
Origin	Zone	Level	Type	Content	Sequential	
NA	XX	06	PL	252	401	05

Notes:
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- Do not scale dimensions from this drawing.
- All discrepancies on this drawing are to be reported to the architect.
- Do not modify any element of this drawing.
- Use drawing only for purpose(s) issued.

Designer Identification of Hazard/Risk

Rev	Date	Drw	Revision Notes	Chk	App
01	14/05/10	AB	FIRST ISSUE - revised post UGM 8 for 1:200 sign-Off	AB	AB

Client: NHS

Contractor: **Brookfield**

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Project
NEW SOUTH GLASGOW HOSPITALS
(NSGH) PROJECT

Drawing Title
SIXTH FLOOR PLAN
GENERIC WARD (Helipad)

Job No	Drawn	Checked	Approved
09080	XXX	XXX	XXX
Status: Preliminary		Date: 02/09/09	Scale@A1: 1:200

Origin	Zone	Level	Type	Content	Sequence	Rev
NA	XX	06	PL	252	402	01

NEW SOUTH GLASGOW HOSPITALS & LABORATORIES

MEDICAL PLANNING GROUPMEETING No 2: 10th March 2010
ACTION NOTE

Present:

Heather Griffin (HG)
Karen Connelly (KC)
Mark Baird (MB)
Frances Wrath (FW)
Scott McCallum (SMc)
Mairi Macleod (MM)
Fiona McCluskey (FMc)
George Iliopoulos (GI)
Emma White (EW)
David Bower (DB) Chair

Apologies:

David Hall (DH)

Distribution

David Hall
Manny Ajuwon
Shiona Frew
Gill Kirkness
Ed McIntyre
Peter Dunbar
Steve Pardy

Item No	Item	Discussion/Information	Action	Date	Action by Whom
	Actions Arising				
2.01	Programme	BCL confirmed that the 1:200 programme is on programme	Note		
2.02	Meeting Schedule	BCL have updated and issued the 1:200 user group meeting schedule. This is updated weekly to effect any meeting changes that have taken place	BCL		DB
3.0	User Group Meeting Review and Fedback				
3.01	Design Development	C&B have reviewed the design development document with NHS and issued comments.	Note		
3.02	Task List	David Hall to issue after receiving feedback from NHS	Note		
3.03	Change Control – FM Kitchens	Potential kitchen relocation being evaluated in accordance with change control procedure.	Note		
3.04	User Group Meeting Tracking Schedule	NA tabled their tracking schedule (Rev 7) which is appended to these minutes.	Ongoing		NA (EW)
3.05	Standard Distribution Protocol	The issue of drawings to the Board would continue on Outlook. An Aconex distribution list was discussed but considered that the relevant individuals should receive notification when drawings are uploaded onto Aconex. Doc Controller for the Boad is Shiona.	Note		
4.0	Schedule of Acommodation				

4.01	Excel version of SoA	This has been issued to design team			
4.02	Changes to SoA	NA/Tribal are using the SoA document issued as a live document. Adjustments to areas from Round 1 have been agreed with Tribal and Frances Wrath and would be carried over into Round 2 user group meetings. The document will be finalised at the end of Round 3.	NA		SMc
4.03	Codebook Reports	NA to produce during Rounds 2 and 3	NA		EW
5.0	RDS & 1:50 Design Development				
5.01	Design Process Map	C&B to issue collated comments	C&B		DH
5.02	RDS Development	Tribal have updated the RDS development process and issued. A revised document will be issued incorporating revised timetable for issue of batches of RDS. FW requested that the RDS are issued directly to her immediately. The first batches 1A and 1C will be issued on 11/3/10 Unions have been issued	NA/ Tribal	11/03/10	GI
		FW to review and return by 17/03/10	NHS	17/03/10	FW
5.03	ADB Briefing Code Review	FW is happy with the briefing codes prepared by NA.	Note		
5.04	RDS Codes and Standards	RDS are being checked against the appropriate applicable legislation and guidance documents	Ongoing		NA/ZBP
5.06	RDS Programme	Tribal to issue proposed timetable of delivery of RDS by Friday 12th March. DB will incorporate this programme into the main Stage 2 programme.	NA/Tribal BCL	12/3/10	GI DB
5.07	Room Standardisation	Currently there are 490 standard room types.			
6.0	AOB				
6.1	Mock ups	NA have issued drawings of the rooms for mock up to determine spatial requirements. NHS to advise location.	C&B	15/03/10	MB
	Next Meeting	3.00pm Wednesday 31st March 2010 St Andrews House Hillington			

NA-XX-XX-SH-XXX-001_01
NEW SOUTH GLASGOW HOSPITALS
1:200 USER GROUP MEETING TRACKING SCHEDULE & PROGRAMME Rev 7

NIGHTINGALE associates

UGM Change Status Key

A	Minor / Nominal change
B	Medium change
C	Severe / Significant change (redraw)

Tracking Status

√	Complete
●	Amendment from Bid drawings. Workshop review required to resolve issues.
*	Complete redesign/redraw therefore no drawing markup issued directly following UGM

#	DEPARTMENT NAME	FLOOR	Sheet & Drawing No.	Rev	NA Lead/Design Responsibility	Date Issue for UGM1 drawings	PreMeeting Briefing Pack Issued	User Group Meeting No. 1	5 weeks (approx) UGM 1 Change Status	Markup issued to board	Action points received	M&E Design Check	Structural Design Check	SOA compliance	Final Check & Issue	Date Issue for UGM2 drawings	PreMeeting Briefing Pack Issued	User Group Mtg No 2	5 weeks (approx) UGM 2 Change Status	Markup issued to board	Action points received	M&E Design Check	Structural Design Check	SOA compliance	Final Check & Issue	Date Issue for UGM3 drawings	PreMeeting Briefing Pack Issued	User Group Mtg No 3	FINAL SIGN OFF
Adult 1:200's Design User Group Meetings																													
1	Inpatient Wards (Generic)	03-05	NA-xx-06-PL-252-401 NA-xx-06-PL-252-400 NA-XX-XX-SK-AS-400-100	02 03	Mark, Terry & Neil	05/01/10	√	20/01/10	A	√	√	√	√	√	√	26/02/10		08/03/10								09/04/10		20/04/10	
2	Stroke Ward	01	NA-xx-01-PL-252-406	03	Terry & Neil	13/01/10	√	20/01/10	C	√	√	√	●	√	√	26/02/10	√	08/03/10								09/04/10		20/04/10	
3	Rehabilitation (Outpatients)	00	NA-xx-00-PL-252-409	02	Mark, Terry & Neil	13/01/10	√	20/01/10	A	√	√		√		√	26/02/10	√	08/03/10								09/04/10		20/04/10	
4	Renal Inpatients & Day Unit & Renal	02&04	NA-xx-04-PL-252-411 NA-xx-02-PL-252-409	02 02	Terry & Mark	15/01/10	√	21/01/10	B	√	√			√	√	02/03/10	√	10/03/10								13/03/10		22/04/10	
5	Main Entrance & Public Areas	00&01	NA-xx-00-PL-252-411 NA-xx-01-PL-252-400	02 02	Anna & Graham	13/01/10	√	22/01/10	A	√	√	√	√	√	√	01/03/10	√	09/03/10								12/04/10		21/04/10	
6	Radiology	00&01	NA-xx-00-PL-252-407 NA-xx-01-PL-252-407	02 02	Terry & Matt	18/01/10	√	25/01/10	C	√	√	●	√	√	√	05/03/10		15/03/10								16/04/10		27/04/10	
7	OPD (Generic)	00&01	NA-xx-00-PL-252-409 NA-xx-01-PL-252-409	A01 A01	Terry & Matt	19/01/10	√	26/01/10	C	√	√	√	√	√	√	03/03/10	√	11/03/10								14/04/10		23/04/10	
8	Operating Theatres AODOS & Recovery	02	NA-xx-02-PL-252-415	02	Garry & Terry	20/01/10	√	27/01/10	C	√	√	●	●	√	√	03/03/10	√	11/03/10								14/04/10		23/04/10	
9	Acute Assessment Unit (AAU)	00	NA-xx-00-PL-252-406	02	Terry & Matt	22/01/10	√	29/01/10	C	√	√	√	●	√	√	04/03/10		12/03/10								15/04/10		26/04/10	
10	MDU/Clinical Investigations Unit	01	NA-xx-01-PL-252-406	03	Graham	19/01/10	√	01/02/10	C	*	√	√	√	√	√	08/03/10		16/03/10								19/04/10		28/04/10	
11	Critical Care	01	NA-xx-01-PL-252-404 NA-xx-01-PL-252-405	02 02	Graham	25/01/10	√	01/02/10	C	*	√	√	●	√	√	11/03/10		19/03/10								21/04/10		30/04/10	
12	Emergency Department (ED)	00	NA-xx-00-PL-252-405	02	Graham	21/01/10	√	02/02/10	C	*	√	√	●	√	√	10/03/10		18/03/10								20/04/10		29/04/10	
13	Coronary Care Unit (CCU)	01	NA-xx-01-PL-252-404	02	Graham	24/01/10	√	02/02/10	B	*	√	√	√	√	√	09/03/10		17/03/10								23/04/10		04/05/10	
14	Nuclear Medicine	01	NA-xx-01-PL-252-408	02	Graham	08/01/10		03/02/10	C	*				√	√	06/04/10		14/04/10								07/05/10		18/05/10	
15	Endoscopy	02	NA-xx-02-PL-252-404	A01	Graham	11/01/10	√	03/02/10	A		√	√	√			11/03/10		19/03/10								23/04/10		04/05/10	
16	Urology	00	NA-xx-00-PL-252-409	A01	Matt & Graham	26/01/10	√	03/02/10	C	√	√				√	10/03/10		18/03/10											
17	Diabetes	00	NA-xx-00-PL-252-409	A01	Matt & Graham	26/01/10	√	03/02/10	C	√	√				√	04/03/10		12/03/10											
18	Haemato-oncology (Inpatient Ward)	04	NA-xx-04-PL-252-403	A01	Matt & Neil	22/01/10	√	04/02/10	B		√					16/03/10		25/03/10								29/04/10		10/05/10	
19	Pharmacy & Aseptic Suite	00	NA-xx-00-PL-252-411 NA-xx-02-PL-252-404	A01	John & Neil	27/01/10		04/02/10	B / C		√	●	√	●		15/03/10		23/03/10								04/05/10		13/05/10	
20	ENT	05	NA-xx-01-PL-252-409	A01	Matt	28/01/10	√	05/02/10	C	√	√		√		√	09/03/10		17/03/10											
21	Ophthalmology	01	NA-xx-01-PL-252-409	A01	Matt	28/01/10	√	05/02/10	C	√	√		√		√	09/03/10		17/03/10											
22	Orthopaedics	00	NA-xx-00-PL-252-409	A01	Matt	28/01/10	√	05/02/10	C	√	√		√		√	09/03/10		17/03/10											
23	Cardiology OPD & Rehab	01	NA-xx-01-PL-252-409		Matt	28/01/10	√	05/02/10	C	√	√		√		√	09/03/10		17/03/10								23/04/10		04/05/10	
24	Decontamination Suite	02	NA-xx-02-PL-252-404	A01	Garry	29/01/10		08/02/10	C	√	√					12/03/10		22/03/10								26/04/10		05/05/10	
25	FM Facilities (Adult & Children's)	B1-04	NA-xx-00-PL-252-400 NA-xx-01-PL-252-400 NA-xx-02-PL-252-400 NA-xx-03-PL-252-400 NA-xx-04-PL-252-400 NA-xx-B1-PL-252-400 NA-xx-B1-PL-252-010 NA-xx-01-PL-252-403 NA-xx-02-PL-252-402 NA-xx-02-PL-252-403 NA-xx-03-PL-252-402 NA-xx-03-PL-252-403	A01 A01 A01 A01 A01 A01 A01 A01 A01 A01 A01	Garry & Matthias	01/02/10	√	09/02/10	B/C		√					12/03/10		22/03/10								26/04/10		05/05/10	
26	Medical Illustration (Adults & Childrens)	00	NA-xx-00-PL-252-408		Jonathan	03/02/10		11/02/10	C	√	√					15/03/10		24/03/10											
27	Dermatology Ward & OPD	02	NA-xx-02-PL-252-401	A01	Terry & Matt	15/02/10	√	23/02/10	A	√	√					10/03/10		18/03/10											

NA-XX-XX-SH-XXX-001_01
NEW SOUTH GLASGOW HOSPITALS
1:200 USER GROUP MEETING TRACKING SCHEDULE & PROGRAMME Rev 7

NIGHTINGALE associates

UGM Change Status Key

A	Minor / Nominal change
B	Medium change
C	Severe / Significant change (redraw)

Tracking Status

√	Complete
●	Amendment from Bid drawings. Workshop review required to resolve issues.
*	Complete redesign/redraw therefore no drawing markup issued directly following UGM

#	DEPARTMENT NAME	FLOOR	Sheet & Drawing No.	Rev	NA Lead/Design Responsibility	Date Issue for UGM1 drawings	PreMeeting Briefing Pack Issued	User Group Meeting No. 1	UGM 1 Change Status (5 weeks (approx))	Markup issued to board	Action points received	M&E Design Check	Structural Design Check	SOA compliance	Final Check & Issue	Date Issue for UGM2 drawings	PreMeeting Briefing Pack Issued	User Group Mtg No 2	UGM 2 Change Status (5 weeks (approx))	Markup issued to board	Action points received	M&E Design Check	Structural Design Check	SOA compliance	Final Check & Issue	Date Issue for UGM3 drawings	PreMeeting Briefing Pack Issued	User Group Mtg No 3	FINAL SIGN OFF
Children's 1:200's Design User Group Meeti	**Children's 1:200's Design User Group Meetings**																												
28	Cardiology Ward	01	NA-xx-01-PL-252-403	A01	**Jonathan**	29/01/10		**08/02/10**	B	√	√					23/03/10		**01/04/10**											
29	Cardiology Testing	00	NA-XX-00-PL-252-402	A01	**Jonathan**	29/01/10		**08/02/10**	A	√	√					23/03/10		**01/04/10**											
30	Lung Function Suite	00	NA-XX-00-PL-252-402	A01	**Jonathan**	29/01/10		**08/02/10**	A	√	√					23/03/10		**01/04/10**											
31	Theatres, Endoscopy, Recovery. & CT/MRI Suite (to be covered in Radiology)	01	NA-xx-01-PL-252-401	A01	**Jonathan** & Gary	29/01/10		**08/02/10**	C	√	√					21/04/10		**30/04/10**											
	Day & 23 Hour Unit	01	NA-xx-01-PL-252-402 NA-xx-01-PL-252-403	A01	**Jonathan** & Gary	29/01/10		**08/02/10**	C		*minutes received*					21/04/10		**30/04/10**											
	FM Facilities (Adult & Children's)		*refer Adults*			*refer Adults*			*refer Adults*							*refer Adults*										*refer Adults*			
32	Child Protection	00	NA-xx-00-PL-252-403	A01	**Jonathan**	02/02/10		**10/02/10**	C	√	√					16/03/10		**25/03/10**											
33	Inpatient Wards & Renal Services	03	NA-xx-03-PL-252-402 NA-xx-03-PL-252-403	A01	**Gary** & Jonathan	03/02/10		**11/02/10**	B	√	√					17/03/10		**26/03/10**								14/05/10		**25/05/10**	
	Acute Receiving Unit	02	NA-xx-02-PL-252-403	A01	**Jonathan**	03/02/10		**11/02/10**	B	√	√					17/03/10		**26/03/10**											
	Renal Dialysis	03	NA-XX-03-PL-252-403	A01	**Jonathan**	03/02/10		**11/02/10**	C	√	√					17/03/10		**26/03/10**											
	Hospital at Night	02	NA-XX-02-PL-252-402 (mark up on NA-XX-02-PL-252-403)	A01	**Jonathan**	03/02/10		**11/02/10**	C	√	√					17/03/10		**26/03/10**											
34	Emergency Department & Transport Base	00	NA-xx-00-PL-252-404	A01	**Jonathan**	04/02/10		**12/02/10**	C	√	√					12/03/10		**23/03/10**											
	Observation Ward	00	NA-xx-00-PL-252-403	A01	**Jonathan**	04/02/10		**12/02/10**	C	√	√					12/03/10		**23/03/10**											
35	Main Entrance & Public Areas	01	NA-xx-00-PL-252-402	A01	**Gary**, Graham, Jonathan & Anna	08/02/10		**16/02/10**	C	√	√					17/03/10		**26/03/10**											
	Admin, Training, Health Records & Staff Facilities	03	NA-xx-03-PL-252-403	A01	**Jonathan** & Anna	08/02/10		**16/02/10**	A	√	√					17/03/10		**26/03/10**											
36	Ophthalmology	00	NA-xx-00-PL-252-402	A01	**Jonathan**	10/02/10		**18/02/10**	C	√	√					01/04/10		**14/04/10**											
37	Schiehallion Ward (Haemato - oncology), Day Case & TCT	02	NA-xx-02-PL-252-402	A01	**Jonathan**	10/02/10		**18/02/10**	C	√	√					07/04/10		**16/04/10**								06/05/10		**17/05/10**	
38	Medical Records (Adults & Children)	03	NA-xx-03-PL-252-400	A01	**Jonathan**	11/02/10		**19/02/10**	A	√	√					31/03/10		**13/04/10**											
39	Audiology	00	NA-xx-00-PL-252-402	A01	**Gary** & Jonathan	11/02/10		**19/02/10**	B	√						22/03/10		**31/03/10**								05/05/10		**14/05/10**	
40	Outpatients OPD (Generic & Specialities)	00	NA-xx-00-PL-252-402	A01	**Garry** & Matt	15/02/10		**22/02/10**	C	√	√					01/04/10		**14/04/10**								17/05/10		**26/05/10**	
41	Medical Physics & Bio-Engineering	02	NA-xx-02-PL-252-404	A01	**Terry** & Matt	15/02/10	√	**23/02/10**	C	√ SOA	√					18/03/10		**29/03/10**											
42	Rehabilitation Suite, Therapies & Special Feeds	00	NA-xx-00-PL-252-401 NA-xx-01-PL-252-403	A01	**Terry** & Matt	15/02/10	√	**23/02/10**	C	√	√					19/03/10		**30/03/10**											
43	Radiology, & CT/MRI from Theatres Suite?	00&01	NA-xx-00-PL-252-408 NA-xx-01-PL-252-401	A01	**Terry** & Matt	16/02/10	√	**24/02/10**	A	√	√					18/03/10		**29/03/10**								06/05/10		**17/05/10**	
44	Psychiatry / DCFP	04	NA-xx-04-PL-252-402	A01	Terry & **Matt**	16/02/10	√	**24/02/10**	B	√	√					31/03/10		**12/04/10**								04/05/10		**13/05/10**	
45	Critical Care (PICU)	01	NA-xx-01-PL-252-403	A01	**Jonathan**	17/02/10	√	**25/02/10**	C	√	√					15/03/10		**24/03/10**											
46	Day Investigation Unit	01	NA-xx-01-PL-252-403	A01	**Jonathan**	17/02/10	√	**25/02/10**	C	√	√					23/03/10		**01/04/10**								18/05/10		**27/05/10**	

Adult Design User Group Meetings 4 - 1:50 Room Type Stage (Week One)

Venues: **NHS Contact Centre, 1 Jubilee Court, Hillington Park, Glasgow, Lanarkshire G52 4LB, UK.**

	1			2			3			4			5		
	Monday			**Tuesday**			**Wednesday**			**Thursday**			**Friday**		
UGM		**14/06/2010**			**15/06/2010**			**16/06/2010**			**17/06/2010**			**18/06/2010**	
	9.00	Inpatient Wards (Generic)	**RP /** SvM	**9.00**	Renal Inpatients & Day Unit	**MD**	**9.00**	Radiology	**MC /** MD	**9.00**	OPD (Generic)	**MC /** MD	**9.00**	Operating Theatres, AODOS & Recovery	**RP /** SvM
	10.00			**10.00**			**10.00**			**10.00**			**10.00**		
	11.00			**11.00**			**11.00**			**11.00**			**11.00**		
	11.30			**11.30**	Renal Dialysis		**11.30**			**11.30**			**11.30**		
	12.00	Stroke Ward	**RP /** SvM	**12.30**		**MD**	**12.30**			**12.30**			**12.30**		
	13.00			**13.30**			**13.00**	Lunch (30mins)		**13.00**	Lunch (30mins)		**13.00**	Lunch (30mins)	
	13.30	Lunch (30mins)			Lunch (30mins)		**13.30**			**13.30**			**13.30**		
	14.00	Main Entrance & Public Areas	**AB** / CQ	**14.00**	Rehabilitation OPD	**MD**	**14.30**	Radiology	**MC /** MD	**14.00**	Ophthalmology	**MC**/MD	**14.00**	Operating Theatres, AODOS & Recovery	**RP /** SvM
	15.30			**15.30**			**15.30**			**15.00**	ENT	**MC**/MD	**15.00**		
	15.30			**15.30**	Coffee (30 mins)		**15.30**			**15.30**	Coffee (30 mins)		**15.30**		
	16.30			**16.30**	Rehabilitation ADL	**MD**	**16.30**			**16.00**	Orthopaedics	**MC**/MD	**16.30**		
	17.30			**17.30**			**17.30**			**17.00**	Diabetes	**MC**/MD	**17.30**		
										18.00	Urology	**MC**/MD			

Board Group Membership:
Heather Griffin
Frances Wrath
Fiona McCluskey
Karen Connelly
Jackie Stewart

Brookfield :
David Bower

NA Team:
Rowland Phillips (RP)
Sonja Von Maltzhan (SvM)
Anna Brown (AB)
Carla Queiroz (CQ)
Matt Cromack (MC)
Mark Drane (MD)

Tribal:
George Illiopoulos (GI)
Peter Lillis (PL)

Doig & Smith
Bill McGaugie

ZBP:
tbc

Adult Design User Group Meetings 4 - 1:50 Room Type Stage (Week Two)

Venues: **NHS Contact Centre, 1 Jubilee Court, Hillington Park, Glasgow, Lanarkshire G52 4LB, UK.**

6	7	8	9	10

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	Monday			Tuesday			Wednesday			Thursday			Friday		
UGM		21/06/2010			22/06/2010			23/06/2010			24/06/2010			25/06/2010	
	9.00	Acute Assessment Unit (General)	MC/ RP/SvM	9.00	Critical Care	GHa / CQ	9.00	Coronary Care Unit (CCU)	GHa / CQ	9.00	Inpatient Wards (Haemato-Onc)	NE / RP / SvM	9.00	Decontamination Suite	RP / SvM
	10.00			10.00			10.00			10.00			10.00		
	11.00	Coffee (30 mins)		11.00			11.00			11.00			11.00		
	11.30	Acute Assessment Unit (Sp Clusters)	MC/ RP/SvM	11.30			11.30	Cardiology OPD & Rehab	GHa / CQ	11.30			11.30		
	12.30			12.30			12.30			12.30			12.30		
	13.30	Lunch (30mins)		13.30	Lunch (30mins)		13.30	Lunch (30mins)		13.30	Lunch (30mins)		13.30	Lunch (30mins)	
	14.00	MDU/Clinical Investigations Unit	RP / SvM	14.00	Emergency Department (ED)	GHa / CQ	14.00	Dermatology Ward & OPD	MC / RP	14.00	Pharmacy & Aseptic Suite	NE / RP / SvM	14.00	Endoscopy	RP / SvM
	15.00			15.00			15.00			15.00			15.00		
	15.30			15.30			15.30			15.30			15.30		
	16.30			16.30			16.30			16.30			16.30		
	17.30			17.30			17.30			17.30			17.30		

Group Membership:
Heather Griffin
Frances Wrath
Fiona McCluskey
Karen Connelly
Jackie Stewart

Brookfield :
David Bower

NA Team:
Matt Cromack (MC)
Rowland Phillips (RP)
Sonja Von Maltzhan (SvM)
Graham Harris (Gha)
Carla Queiroz (CQ)
Neil Evans (NE)

Tribal:
George Illiopoulos (GI)
Peter Lillis (PL)

Doig & Smith
Bill McGaugie

ZBP:
tbc

Adult Design User Group Meetings 4 - 1:50 Room Type Stage (Week Three)

Venues: **NHS Contact Centre, 1 Jubilee Court, Hillington Park, Glasgow, Lanarkshire G52 4LB, UK.**

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	Monday			Tuesday			Wednesday			Thursday			Friday		
UGM		28/06/2010													
	9.00														
	10.00	FM Facilites (Adult &													

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	11.00	FM Facilites (Adult & Children's)	**RP/** MP													
	11.30															
	12.30															
	12.30	Lunch (30mins)														
	13.00	FM Facilites (Adult & Children's)	**RP/** MP													
	14.00															
	15.00															
	15.30															
	17.00															

Group Membership:
Heather Griffin
Frances Wrath
Fiona McCluskey
Karen Connelly
Jackie Stewart

Brookfield :
David Bower
Phil White (FM tbc)

NA Team:
Rowland Phillips (RP)
Matthias Peretz (MP)

Tribal:
George Illiopoulos (GI)
Peter Lillis (PL)

Doig & Smith
Bill McGaugie

ZBP:
tbc

Children's Design User Group Meetings 4 - 1:50 Room Type Stage (Week Three)

Venue/s: **QMH, Dalnair Street, Glasgow G38SJ.**
RHSC, Dalnair Street, Glasgow G38SJ.

	11			12			13			14			15		
	Monday			**Tuesday**			**Wednesday**			**Thursday**			**Friday**		
UGM 1		**28/06/2010**			**29/06/2010**			**30/06/2010**			**01/07/2010**			**02/07/2010**	
	9.00	FM Meeting (Adult & Childrens)	**RP** / MP	**9.00**	Theatres/Endoscopy & Recovery	**JH** / RP / SvM	**9.00**	Cardiology	**JH** / SvM	**9.00**	Inpatient Wards	**JH**	**9.00**	Emergency Department & Transport Base	**JH**
	10.00			**10.00**			**10.00**			**10.00**			**9.30**		
	11.00			**11.00**			**11.00**			**11.00**			**10.30**		
	12.00			**11.30**			**11.30**	Cardiology & Cardio/Respiratory	**JH** / SvM	**11.30**	Renal Services	**JH**	**11.30**		
	13.00			**12.30**			**12.00**			**12.00**			**12.00**		
	13.30	Lunch (30mins)		**13.30**	Lunch (30mins)		**13.30**	Lunch (30mins)		**12.30**			**13.30**	Lunch (30mins)	
	14.00	FM Meeting (Adult & Childrens)	**RP** / MP	**14.00**	Theatres/Endoscopy & Recovery	**JH** / RP / SvM	**14.00**	Child Protection	**JH** / SvM	**13.00**	Lunch (30mins)		**13.00**	Observation Ward	**JH**
	15.00			**15.00**			**15.00**			**14.00**	Acute Receiving Unit	**JH**	**14.00**		
	16.00			**15.30**			**15.30**	Medical Illustration (Adults & Childrens)	**JH** / SvM	**15.00**			**15.00**		
	16.30			**16.30**	Day & 23 Hour Unit / Sleep Studies		**16.30**			**16.00**			**16.00**		
	16.30			**17.30**			**17.30**	Hospital At Night		**17.00**			**17.00**		

Group Membership:
Mairi Macleod
Frances Wrath
Fiona McCluskey
Karen Connelly
Jackie Stewart

Brookfield :
David Bower

NA Team:
Jonathan Hendrick (JH)
Rowland Phillips (RP)
Sonja Von Maltzhan (SvM)

Tribal:
George Illiopoulos (GI)
Peter Lillis (PL)

Doig & Smith
David McLeish
Bill McGaugie

ZBP:
tbc

Children's Design User Group Meetings 4 - 1:50 Room Type Stage (Week Four)

Venue/s: **QMH, Dalnair Street, Glasgow G38SJ.**
RHSC, Dalnair Street, Glasgow G38SJ.

16	17	18	19	20

	Monday			Tuesday			Wednesday			Thursday			Friday		
UGM 1		**05/07/2010**			**06/07/2010**			**07/07/2010**			**08/07/2010**			**09/07/2010**	
	9.00	Main Entrance & Public Areas	**AB** / CQ	**9.00**	OPD (Generic)	**RP** / SvM	**9.00**	Medical Physics & Bio-Engineering	**RP** / SvM	**9.00**	Radiology/CT/MRI Suite	**MC** / RP / SvM	**9.00**	Nuclear Medicine	**RP** / SvM
	10.00			**10.00**			**10.00**			**10.00**			**10.00**		
	11.00			**11.00**			**11.00**			**11.00**			**11.00**		
	11.30			**11.30**			**11.30**			**12.00**			**12.00**		
	12.30			**12.30**			**12.30**			**12.30**			**12.30**		
	13.30	Lunch (30mins)		**13.30**	Lunch (30mins)		**13.30**	Lunch (30mins)		**13.00**	Lunch (30mins)		**13.30**	Lunch (30mins)	
	14.00	Admin, Training, H Records & Staff Fac	**AB** / CQ	**14.00**	Ophthalmology	**RP** / SvM	**14.00**	Rehabilitation & Therapies	**RP** / SvM	**14.00**	Radiology/CT/MRI Suite	**MC** / RP / SvM	**14.00**	Psychiatry / DCFP	**RP** / SvM
	15.00			**15.00**			**15.00**			**15.00**			**15.00**		
	15.30	Medical Records	**AB** / CQ	**15.30**	Coffee (30 mins)		**15.30**			**16.00**			**16.00**		
	16.30			**16.30**	Audiology	**RP** / SvM	**16.30**			**16.30**			**16.30**		
	17.30			**17.00**			**17.30**			**17.30**			**17.30**		

Group Membership:
Mairi Macleod
Frances Wrath
Fiona McCluskey
Karen Connelly
Jackie Stewart

Brookfield :
David Bower

NA Team:
Anna Brown (AB)
Carla Queiroz (CQ)
Rowland Phillips (RP)
Sonja Von Maltzhan (SvM)
Matt Cromack (MC)

Tribal:
George Illiopoulos (GI)
Peter Lillis (PL)

Doig & Smith
David McLeish
Bill McGaugie

ZBP:
tbc

Children's Design User Group Meetings 4 - 1:50 Room Type Stage (Week Five)

Venue/s: **QMH, Dalnair Street, Glasgow G38SJ.**
RHSC, Dalnair Street, Glasgow G38SJ.

21 **22**

	Monday			Tuesday			Wednesday			Thursday			Friday		
UGM 1		**12/07/2010**			**13/07/2010**			**14/07/2010**			**15/07/2010**			**16/07/2010**	

	9.00	Day Investigation Unit	**JH**	**9.00**	Schiehallion Ward (Haemato - oncology), Day Case & TCT	**JH**									
	10.00			**10.00**											
	11.00			**11.00**											
	11.30			**11.30**											
	12.30			**12.00**											
	13.30	Lunch (30mins)		**12.30**	Lunch (30mins)										
	14.00	Critical Care (PICU)	**JH**	**13.00**	Schiehallion Ward (Haemato - oncology), Day Case & TCT	**JH**									
	15.00			**14.00**											
	15.30			**15.30**											
	16.30			**16.30**											
	17.00			**17.00**											

Group Membership:
Mairi Macleod
Frances Wrath
Fiona McCluskey
Karen Connelly
Jackie Stewart

Brookfield :
David Bower

NA Team:
Jonathan Hendrick (JH)

Tribal:
George Illiopoulos (GI)
Peter Lillis (PL)

Doig & Smith
David McLeish
Bill McGaugie

ZBP:
tbc

Adult Design User Group Meetings 5 - 1:50 Room Type Stage (Week One)

Venue/s: **NHS Contact Centre, 1 Jubilee Court, Hillington Park, Glasgow, Lanarkshire G52 4LB, UK.**

	1			2			3			4			5		
	Monday			**Tuesday**			**Wednesday**			**Thursday**			**Friday**		
UGM 1		**16/08/2010**			**17/08/2010**			**18/08/2010**			**19/08/2010**			**20/08/2010**	
	9.00	Inpatient Wards (Generic)	**RP /** SvM	**9.00**	Renal Inpatients & Day Unit	**MD**	**9.00**	Radiology	**MC** / MD	**9.00**	OPD (Generic)	**MC** / MD	**9.00**	Operating Theatres, AODOS & Recovery	**RP /** SvM
	10.00			**10.00**			**10.00**			**10.00**			**10.00**		
	11.00			**11.00**			**11.00**			**11.00**			**11.00**		
	11.30			**11.30**	Renal Dialysis		**11.30**			**11.30**			**11.30**		
	12.00	Stroke Ward	**RP /** SvM	**12.30**			**12.30**			**12.30**			**12.30**		
	13.00			**13.30**		**MD**	**13.00**	Lunch (30mins)		**13.00**	Lunch (30mins)		**13.00**	Lunch (30mins)	
	13.30	Lunch (30mins)			Lunch (30mins)		**13.30**			**13.30**			**13.30**		
	14.00	Main Entrance & Public Areas	**AB** / CQ	**14.00**	Rehabilitation OPD	**MD**	**14.30**	Radiology	**MC** / MD	**14.00**	Ophthalmology	**MC**/MD	**14.00**	Operating Theatres, AODOS & Recovery	**RP /** SvM
	15.30			**15.30**			**15.30**			**15.00**	ENT	**MC**/MD	**15.00**		
	15.30			**15.30**	Coffee (30 mins)		**15.30**			**15.30**	Coffee (30 mins)		**15.30**		
	16.30			**16.30**	Rehabilitation ADL	**MD**	**16.30**			**16.00**	Orthopaedics	**MC**/MD	**16.30**		
	17.30			**17.30**			**17.30**			**17.00**	Diabetes	**MC**/MD	**17.30**		
										18.00	Urology	**MC**/MD			

Board Group Membership:
Heather Griffin
Frances Wrath
Fiona McCluskey
Karen Connelly
Jackie Stewart

Brookfield :
David Bower

NA Team:
Rowland Phillips (RP)
Sonja Von Maltzhan (SvM)
Anna Brown (AB)
Carla Queiroz (CQ)
Matt Cromack (MC)
Mark Drane (MD)

Tribal:
George Illiopoulos (GI)
Peter Lillis (PL)

Doig & Smith
Bill McGaugie

ZBP:
tbc

Adult Design User Group Meetings 5 - 1:50 Room Type Stage (Week Two)

Venue/s: **NHS Contact Centre, 1 Jubilee Court, Hillington Park, Glasgow, Lanarkshire G52 4LB, UK.**

	6			7			8			9			10		
	Monday			**Tuesday**			**Wednesday**			**Thursday**			**Friday**		
UGM 1		**23/08/2010**			**24/08/2010**			**25/08/2010**			**26/08/2010**			**27/08/2010**	

	9.00	Acute Assessment Unit (General)	MC/ RP/SvM	9.00	Critical Care	GHa / CQ	9.00	Coronary Care Unit (CCU)	GHa / CQ	9.00	Inpatient Wards (Haemato-Onc)	NE / RP / SvM	9.00	Decontamination Suite	RP / SvM
	10.00			10.00			10.00			10.00			10.00		
	11.00	Coffee (30 mins)		11.00			11.00			11.00			11.00		
	11.30	Acute Assessment Unit (Sp Clusters)	MC/ RP/SvM	11.30			11.30	Cardiology OPD & Rehab	GHa / CQ	11.30			11.30		
	12.30			12.30			12.30			12.30			12.30		
	13.30	Lunch (30mins)		13.30	Lunch (30mins)		13.30	Lunch (30mins)		13.30	Lunch (30mins)		13.30	Lunch (30mins)	
	14.00	MDU/Clinical Investigations Unit	RP / SvM	14.00	Emergency Department (ED)	GHa / CQ	14.00	Dermatology Ward & OPD	MC / RP	14.00	Pharmacy & Aseptic Suite	NE / RP / SvM	14.00	Endoscopy	RP / SvM
	15.00			15.00			15.00			15.00			15.00		
	15.30			15.30			15.30			15.30			15.30		
	16.30			16.30			16.30			16.30			16.30		
	17.30			17.30			17.30			17.30			17.30		

Group Membership:
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Fiona McCluskey
Karen Connelly
Jackie Stewart

Brookfield :
David Bower

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Rowland Phillips (RP)
Sonja Von Maltzhan (SvM)
Graham Harris (Gha)
Carla Queiroz (CQ)
Neil Evans (NE)

Tribal:
George Illiopoulos (GI)
Peter Lillis (PL)

Doig & Smith
Bill McGaugie

ZBP:
tbc

Adult Design User Group Meetings 5 - 1:50 Room Type Stage (Week Three)

Venue/s: **NHS Contact Centre, 1 Jubilee Court, Hillington Park, Glasgow, Lanarkshire G52 4LB, UK.**

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	Monday			Tuesday			Wednesday			Thursday			Friday		
UGM 1		**28/06/2010**													
	9.00	FM Facilites (Adult & Children's)	RP/ MP												
	10.00														
	11.00														
	11.30														
	12.30														
	12.30	Lunch (30mins)													
	13.00														

	14.00	FM Facilites (Adult & Children's)	**RP/** MP													
	15.00															
	15.30															
	17.00															

Group Membership:
Heather Griffin
Frances Wrath
Fiona McCluskey
Karen Connelly
Jackie Stewart

Brookfield :
David Bower
Phil White (FM tbc)

NA Team:
Rowland Phillips (RP)
Matthias Peretz (MP)

Tribal:
George Illiopoulos (GI)
Peter Lillis (PL)

Doig & Smith
Bill McGaugie

ZBP:
tbc

Children's Design User Group Meetings 5 - 1:50 Room Type Stage (Week Three)

Venue/s: **QMH, Dalnair Street, Glasgow G38SJ.**
RHSC, Dalnair Street, Glasgow G38SJ.

	Monday		Tuesday			Wednesday			Thursday			Friday		
			12			**13**			**14**			**15**		
UGM 1		**30/08/2010**			**31/08/2010**			**01/09/2010**			**02/09/2010**			**03/09/2010**	
	9.00	Bank Holiday		**9.00**	Theatres/Endoscopy & Recovery	**JH** / RP / SvM	**9.00**	Cardiology	**JH** / SvM	**9.00**	Inpatient Wards	**JH**	**9.00**	Emergency Department & Transport Base	**JH**
	10.00			**10.00**			**10.00**			**10.00**			**9.30**		
	11.00			**11.00**			**11.00**			**11.00**			**10.30**		
	12.00			**11.30**			**11.30**	Cardiology & Cardio/Respiratory	**JH** / SvM	**11.30**	Renal Services	**JH**	**11.30**		
	13.00			**12.30**			**12.00**			**12.00**			**12.00**		
	13.30	Lunch (30mins)		**13.30**	Lunch (30mins)		**13.30**	Lunch (30mins)		**12.30**			**13.30**	Lunch (30mins)	
	14.00	Bank Holiday		**14.00**	Theatres/Endoscopy & Recovery	**JH** / RP / SvM	**14.00**	Child Protection	**JH** / SvM	**13.00**	Lunch (30mins)		**13.00**	Observation Ward	**JH**
	15.00			**15.00**			**15.00**			**14.00**	Acute Receiving Unit	**JH**	**14.00**		
	16.00			**15.30**			**15.30**	Medical Illustration (Adults & Childrens)	**JH** / SvM	**15.00**			**15.00**		
	16.30			**16.30**	Day & 23 Hour Unit / Sleep Studies		**16.30**			**16.00**			**16.00**		
	16.30			**17.30**			**17.30**	Hospital At Night		**17.00**			**17.00**		

Group Membership:
Mairi Macleod
Frances Wrath
Fiona McCluskey
Karen Connelly
Jackie Stewart

Brookfield :
David Bower

NA Team:
Jonathan Hendrick (JH)
Rowland Phillips (RP)
Sonja Von Maltzhan (SvM)

Tribal:
George Illiopoulos (GI)
Peter Lillis (PL)

Doig & Smith
David McLeish
Bill McGaugie

ZBP:
tbc

Children's Design User Group Meetings 5 - 1:50 Room Type Stage (Week Four)

Venue/s: **QMH, Dalnair Street, Glasgow G38SJ.**
RHSC, Dalnair Street, Glasgow G38SJ.

16 **17** **18** **19** **20**

	Monday			Tuesday			Wednesday			Thursday			Friday		
UGM 1		**06/09/2010**			**07/09/2010**			**08/09/2010**			**09/09/2010**			**10/09/2010**	
	9.00	Main Entrance & Public Areas	**AB** / CQ	**9.00**	OPD (Generic)	**RP** / SvM	**9.00**	Medical Physics & Bio-Engineering	**RP** / SvM	**9.00**	Radiology/CT/MRI Suite	**MC** / RP / SvM	**9.00**	Nuclear Medicine	**RP** / SvM
	10.00			**10.00**			**10.00**			**10.00**			**10.00**		
	11.00			**11.00**			**11.00**			**11.00**			**11.00**		
	11.30			**11.30**			**11.30**			**12.00**			**12.00**		
	12.30			**12.30**			**12.30**			**12.30**			**12.30**		
	13.30	Lunch (30mins)		**13.30**	Lunch (30mins)		**13.30**	Lunch (30mins)		**13.00**	Lunch (30mins)		**13.30**	Lunch (30mins)	
	14.00	Admin, Training, H Records & Staff Fac	**AB** / CQ	**14.00**	Ophthalmology	**RP** / SvM	**14.00**	Rehabilitation & Therapies	**RP** / SvM	**14.00**	Radiology/CT/MRI Suite	**MC** / RP / SvM	**14.00**	Psychiatry / DCFP	**RP** / SvM
	15.00			**15.00**			**15.00**			**15.00**			**15.00**		
	15.30	Medical Records	**AB** / CQ	**15.30**	Coffee (30 mins)		**15.30**			**16.00**			**16.00**		
	16.30			**16.30**	Audiology	**RP** / SvM	**16.30**			**16.30**			**16.30**		
	17.30			**17.00**			**17.30**			**17.30**			**17.30**		

Group Membership:
Mairi Macleod
Frances Wrath
Fiona McCluskey
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Brookfield :
David Bower

NA Team:
Anna Brown (AB)
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Sonja Von Maltzhan (SvM)
Matt Cromack (MC)

Tribal:
George Illiopoulos (GI)
Peter Lillis (PL)

Doig & Smith
David McLeish
Bill McGaugie

ZBP:
tbc

Children's Design User Group Meetings 5 - 1:50 Room Type Stage (Week Five)

Venue/s: **QMH, Dalnair Street, Glasgow G38SJ.**
RHSC, Dalnair Street, Glasgow G38SJ.

21 **22** **11**

	Monday			Tuesday			Wednesday			Thursday			Friday		
UGM 1		**13/09/2010**			**14/09/2010**			**15/09/2010**							

	9.00	Day Investigation Unit	**JH**	**9.00**	Schiehallion Ward (Haemato - oncology), Day Case & TCT	**JH**		FM Facilites (Adult & Children's)	**RP/** MP						
	10.00			**10.00**											
	11.00			**11.00**											
	11.30			**11.30**											
	12.30			**12.00**											
	13.30	Lunch (30mins)		**12.30**	Lunch (30mins)			Lunch (30mins)							
	14.00	Critical Care (PICU)	**JH**	**13.00**	Schiehallion Ward (Haemato - oncology), Day Case & TCT	**JH**		FM Facilites (Adult & Children's)	**RP/** MP						
	15.00			**14.00**											
	15.30			**15.30**											
	16.30			**16.30**											
	17.00			**17.00**											

Group Membership:
Mairi Macleod
Frances Wrath
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Karen Connelly
Jackie Stewart

Brookfield :
David Bower

NA Team:
Jonathan Hendrick (JH)

Tribal:
George Illiopoulos (GI)
Peter Lillis (PL)

Doig & Smith
David McLeish
Bill McGaugie

ZBP:
tbc

Design User Group Meetings 4 - 1:50 Room Type Stage (Week One)

Venue/s: **NHS Contact Centre, 1 Jubilee Court, Hillington Park, Glasgow, Lanarkshire G52 4LB, UK.**

QMH, Dalnair Street, Glasgow G38SJ.
RHSC, Dalnair Street, Glasgow G38SJ.

	1				2				3				4				5			
	Monday				**Tuesday**				**Wednesday**				**Thursday**				**Friday**			
Date			**14/06/2010**				**15/06/2010**				**16/06/2010**				**17/06/2010**				**18/06/2010**	
			Adult				**Children's**								**Adult**				**Children's**	
	9.00	**1**	Inpatient Wards	**RP /** SvM	**9.00**	**14**	Inpatient Wards	**JH**	**9.00**				**9.00**	**2**	Renal Inpatients & Day Unit	**MD**	**9.00**	**14**	Renal Services	**JH**
	10.00				**10.00**				**10.00**				**10.00**				**10.00**			
	11.00				**11.00**				**11.00**				**11.00**				**11.00**			
	11.30				**11.30**				**11.30**				**11.30**				**11.30**			
	12.00				**12.30**				**12.30**				**12.30**				**12.30**			
	13.00		Lunch (60mins)		**13.30**		Lunch (60mins)		**13.00**				**13.00**		Lunch (60mins)		**13.00**		Lunch (60mins)	
	13.30								**13.30**				**13.30**				**13.30**			
	14.00	**1**	Inpatient Wards	**RP /** SvM	**14.00**	**14**	Inpatient Wards	**JH**	**14.30**				**14.00**	**2**	Renal Dialysis	**MD**	**14.00**	**14**	Renal Services	**JH**
	15.30				**15.30**				**15.30**				**15.00**				**15.00**			
	15.30				**15.30**				**15.30**				**15.30**				**15.30**			
	16.30				**16.30**				**16.30**				**16.00**				**16.30**			
	17.30				**17.30**				**17.30**				**17.00**				**17.30**			
													18.00							

Board Group Membership:
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Brookfield :
David Bower

NA Team:
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Mark Drane (MD)
Matthias Peretz (MP)

Tribal:
George Illiopoulos (GI)
Peter Lillis (PL)

Doig & Smith
Bill McGaugie
David McLeish

ZBP:
tbc

A52787523

Design User Group Meetings 4 - 1:50 Room Type Stage (Week Two)

Venue/s: **NHS Contact Centre, 1 Jubilee Court, Hillington Park, Glasgow, Lanarkshire G52 4LB, UK.**

QMH, Dalnair Street, Glasgow G38SJ.
RHSC, Dalnair Street, Glasgow G38SJ.

			6				7				8				9				10	
	Monday				Tuesday				Wednesday				Thursday				Friday			
Date			21/06/2010				22/06/2010				23/06/2010				24/06/2010				25/06/2010	
			Adult				Children's								Adult				Children's	
	9.00	3	Radiology	MC / MD	9.00	19	Radiology/CT/MRI Suite	MC / RP / SvM	9.00				9.00	7	Critical Care	GHa / CQ	9.00	21	Critical Care (PICU)	JH
	10.00				10.00				10.00				10.00				10.00			
	11.00				11.00				11.00				11.00				11.00			
	11.30				11.30				11.30				11.30				11.30			
	12.30				12.30				12.30				12.30				12.30			
	13.30		Lunch (60mins)		13.30		Lunch (60mins)		13.30				13.30		Lunch (60mins)		13.30		Lunch (60mins)	
	14.00	3	Radiology	MC / MD	14.00	19	Radiology/CT/MRI Suite	MC / RP / SvM	14.00				14.00	8	Critical Care	GHa / CQ	14.00	21	Critical Care (PICU)	JH
	15.00				15.00				15.00				15.00				15.00			
	15.30				15.30				15.30				15.30				15.30			
	16.30				16.30				16.30				16.30				16.30			
	17.30				17.30				17.30				17.30				17.30			

Group Membership:
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ZBP:
tbc

A52787523

Design User Group Meetings 4 - 1:50 Room Type Stage (Week Three)

Venue/s: **NHS Contact Centre, 1 Jubilee Court, Hillington Park, Glasgow, Lanarkshire G52 4LB, UK.**

QMH, Dalnair Street, Glasgow G38SJ.
RHSC, Dalnair Street, Glasgow G38SJ.

			11				12				13				14				15	
	Monday				Tuesday				Wednesday				Thursday				Friday			
Date			28/06/2010				29/06/2010				30/06/2010				01/07/2010				02/07/2010	
			Adult				Children's				Adult				Adult				Adult	
	9.00	5	Operating Theatres, AODOS & Recovery	RP / SvM	9.00	12	Theatres/Endoscopy & Recovery	JH / RP / SvM	9.00	10	Endoscopy	RP / SvM	9.00	4	OPD (Generic)	MC / MD	9.00	4	Ophthalmology	MC/MD
	10.00				10.00				10.00				10.00				10.00		ENT	MC/MD
	11.00				11.00				11.00				11.00				11.00		Orthopaedics	MC/MD
	11.30				11.30				11.30				11.30				11.30		Diabetes	MC/MD
	12.30				12.30				12.30				12.30				12.30		Urology	MC/MD
	13.30		Lunch (60mins)		13.30		Lunch (60mins)		13.30				13.30		Lunch (60mins)		13.30		Lunch (60mins)	
	14.00	5	Operating Theatres, AODOS & Recovery	RP / SvM	14.00	12	Theatres/Endoscopy & Recovery	JH / RP / SvM	14.00				14.00	4	OPD (Generic)	MC / MD	14.00	4		
	15.00				15.00				15.00				15.00				15.00			
	15.30				15.30				15.30				15.30				15.30			
	16.30				16.30		Day & 23 Hour Unit / Sleep Studies		16.30				16.30				16.30			
	17.30				17.30				17.30				17.30				17.30			

Group Membership:
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Tribal:
George Illiopoulos (GI)
Peter Lillis (PL)

Doig & Smith
Bill McGaugie
David McLeish

ZBP:
tbc

A52787523

Design User Group Meetings 4 - 1:50 Room Type Stage (Week Four)

Venue/s: **NHS Contact Centre, 1 Jubilee Court, Hillington Park, Glasgow, Lanarkshire G52 4LB, UK.**

QMH, Dalnair Street, Glasgow G38SJ.
RHSC, Dalnair Street, Glasgow G38SJ.

			16				17				18				19				20	
	Monday				Tuesday				Wednesday				Thursday				Friday			
Date			05/07/2010				06/07/2010				07/07/2010				08/07/2010				09/07/2010	
			Children's				Children's								Adult				Children's	
	9.00	17	OPD (Generic)	RP / SvM	9.00	17	OPD (Specialities)	RP / SvM	9.00				9.00	7	Emergency Department (ED)	GHa / CQ	9.00	17	Emergency Department & Transport Base	JH
	10.00				10.00				10.00				10.00				10.00			
	11.00				11.00				11.00				11.00				11.00			
	11.30				11.30				11.30				11.30				11.30			
	12.30				12.30				12.30				12.30				12.30			
	13.30		Lunch (60mins)		13.30		Lunch (60mins)		13.30				13.30		Lunch (60mins)		13.30		Lunch (60mins)	
	14.00	17	OPD (Generic)	RP / SvM	14.00	17	Audiology	RP / SvM	14.00				14.00	7	Emergency Department (ED)	GHa / CQ	14.00	17	Observation Ward	JH
	15.00				15.00				15.00				15.00				15.00			
	15.30				15.30				15.30				15.30				15.30			
	16.30				16.30		Ophthalmology	RP / SvM	16.30				16.30				16.30			
	17.30				17.30				17.30				17.30				17.30			

Group Membership:
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Matthias Peretz (MP)

Tribal:
George Illiopoulos (GI)
Peter Lillis (PL)

Doig & Smith
Bill McGaugie
David McLeish

ZBP:
tbc

Design User Group Meetings 4 - 1:50 Room Type Stage (Week Five)

Venue/s: **NHS Contact Centre, 1 Jubilee Court, Hillington Park, Glasgow, Lanarkshire G52 4LB, UK.**

QMH, Dalnair Street, Glasgow G38SJ.
RHSC, Dalnair Street, Glasgow G38SJ.

			21				22				23				24				25	
	Monday				Tuesday				Wednesday				Thursday				Friday			
Date			12/07/2010				13/07/2010				14/07/2010				15/07/2010				16/07/2010	
			Adult				Adult													
	9.00	6	Acute Assessment Unit (General)	MC/ RP/SvM	9.00	8	Coronary Care Unit (CCU)	GHa / CQ	9.00	9	Pharmacy & Aseptic Suite (Adult & Children's)	NE / RP / SvM	9.00	11	FM Facilites (Adult & Children's)	RP/ MP	9.00	17	Decontamination	RP / SvM
	10.00				10.00				10.00				10.00				10.00			
	11.00				11.00				11.00				11.00				11.00			
	11.30				11.30				11.30				11.30				11.30			
	12.30				12.30				12.30				12.30				12.30			
	13.30		Lunch (60mins)		13.30		Lunch (60mins)		13.30	13.30	Lunch (60mins)		13.30		Lunch (60mins)		13.30			
	13.00	6	Acute Assessment Unit (Sp Clusters)	MC/ RP/SvM	13.00	8	Coronary Care Unit (CCU)	GHa / CQ	13.00	20	Nuclear Medicine (Adult & Children's)	RP / SvM	13.00	11	FM Facilites (Adult & Children's)	RP/ MP	13.00	17		
	14.00				14.00				14.00				14.00				14.00			
	15.00				15.00				15.00				15.00				15.00			
	15.30				15.30		Cardiology OPD & Rehab	GHa / CQ	15.30				15.30				15.30			
	17.00				17.00				17.00				17.00				17.00			

Group Membership:
Heather Griffin
Mairi Macleod
Frances Wrath
Fiona McCluskey
Karen Connelly
Jackie Stewart

Brookfield :
David Bower

NA Team:
Rowland Phillips (RP)
Sonja Von Maltzhan (SvM)
Graham Harris (Gha)
Jonathan Hendrick (JH)
Anna Brown (AB)
Carla Queiroz (CQ)
Neil Evans (NE)
Matt Cromack (MC)
Mark Drane (MD)
Matthias Peretz (MP)

Tribal:
George Illiopoulos (GI)
Peter Lillis (PL)

Doig & Smith
Bill McGaugie
David McLeish

ZBP:
tbc

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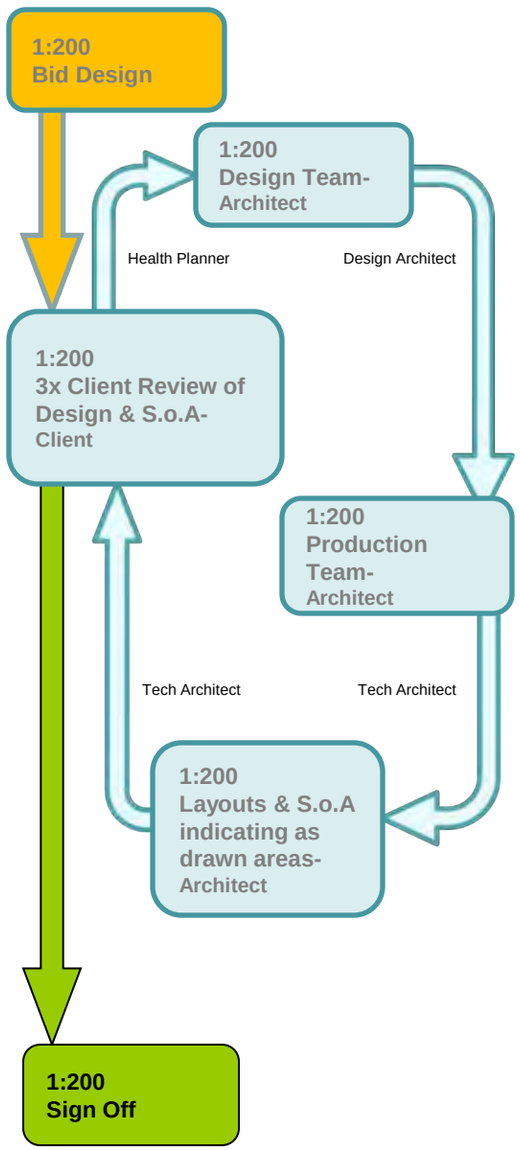
1:200 & 1:50 Design Process

SIGN OFF

	A. 1:200 Departmental Design	A1. S.o.A Management	B. Room Data Sheets	C. 1:50 Room Types	D. 1:50 Department Design
Sign Off Stage					
1 Stage Description	Design Development	Design Development Flow Diagram	Brief Development	Detailed Design	Detailed Design
	Development of 1:200 scale drawings indicating the relationship of rooms within departments.		Development of Room Data Sheets for each room type to serve as detail brief for the 1:50 design stage.	Development of 1:50 Scale Room layouts for each Room Type in the project.	Development of 1:50 Scale Departmental layouts
2 Documents for Sign Off	ADB Room Data Sheet for each Room Type in the project		ADB Room Data Sheet for each Room Type in the project	1:50 scale Room Type layouts incl. Equipment . ADB Room Data Sheet per Room Type	1:50 scale Department layouts. ADB Room Data Sheet per Department Department S.o.A with Area comparison
3 Core Activities	**Core Activities** ▪ Produce 1:200 scale department layouts ▪ Client Review workshops ▪ Review S.o.A & 1:200 design ▪ Design team incorporate comments and update information ▪ Sign Off 1:200 department layouts ▪Sign Off S.o.A		**Core Activities** ▪ Agree list of Room Types & Review sequence ▪ Agree project equipment standards ▪ Health planner produce RDS ▪ Client review workshop ▪ Design team incorporate comments and update information ▪ Sign Off of Room Type Data Sheets ▪ Estimated required equipment list	**Core Activities** ▪ Produce 1:50 Room Type layouts in batches ▪ Client Review workshop ▪ Design Team incorporate comment and update information ▪ Sign Off of 1:50 Room Type layouts and matching RDS's ▪ Design Team import layouts and data into project database ▪ Estimated required equipment list	**Core Activities** ▪ Produce 1:50 Department layouts Based on Room Types (Stage C) ▪ Client Departmental Review workshop ▪ Design Team incorporate comment and update information ▪ Sign Off of 1:50 Departmental layouts, RDS's and S.o.A with area comparison ▪ Estimated designed equipment list
4 Core Team	**Core Team** **Architect- Lead** Health Planners M&E Engineer Project QS Client – Project Team Client – Review Groups		**Core Team** **Health Planners- Lead** Architect M&E Engineer Acoustic Consultant Project QS Client – Project Team Client – Review Groups	**Core Team** **Architect- Lead** Health Planners M&E Engineer Acoustic Consultant Project QS Client – Project Team Client – Review Groups	**Core Team** **Architect- Lead** Health Planners M&E Engineer Acoustic Consultant MEP Subcontractor Project QS Client – Project Team Client – Review Groups
5 Additional Team for Comment/ Advice	**Comment/ Advice** ▪ Contractor ▪ Fire Consultant ▪ Disability Access Consultant ▪ Acoustic Consultant		**Comment/ Advice** ▪ Contractor ▪ MEP Subcontractor	**Comment/ Advice** ▪ Contractor ▪ MEP Subcontractor ▪ Disability Access Consultant	**Comment/ Advice** ▪ Contractor ▪ Disability Access Consultant ▪ Fire Consultant
6 Protocols. Guides and Templates	Relevant Guidance (Refer to compliance schedule) Schedule of Accommodation		Relevant Guidance (Refer to compliance schedule) Project Standardisation Document **Project Equipment Library** **Project Equipment Union Schedule**	Relevant Design Guidance & Regulations (Refer to compliance schedule) Project Standardisation Document **Project Equipment Library** **Project Equipment Union Schedule**	Relevant Design Guidance & Regulations (Refer to compliance schedule) Project Standardisation Document **Project Equipment Library** **Project Equipment Union Schedule**



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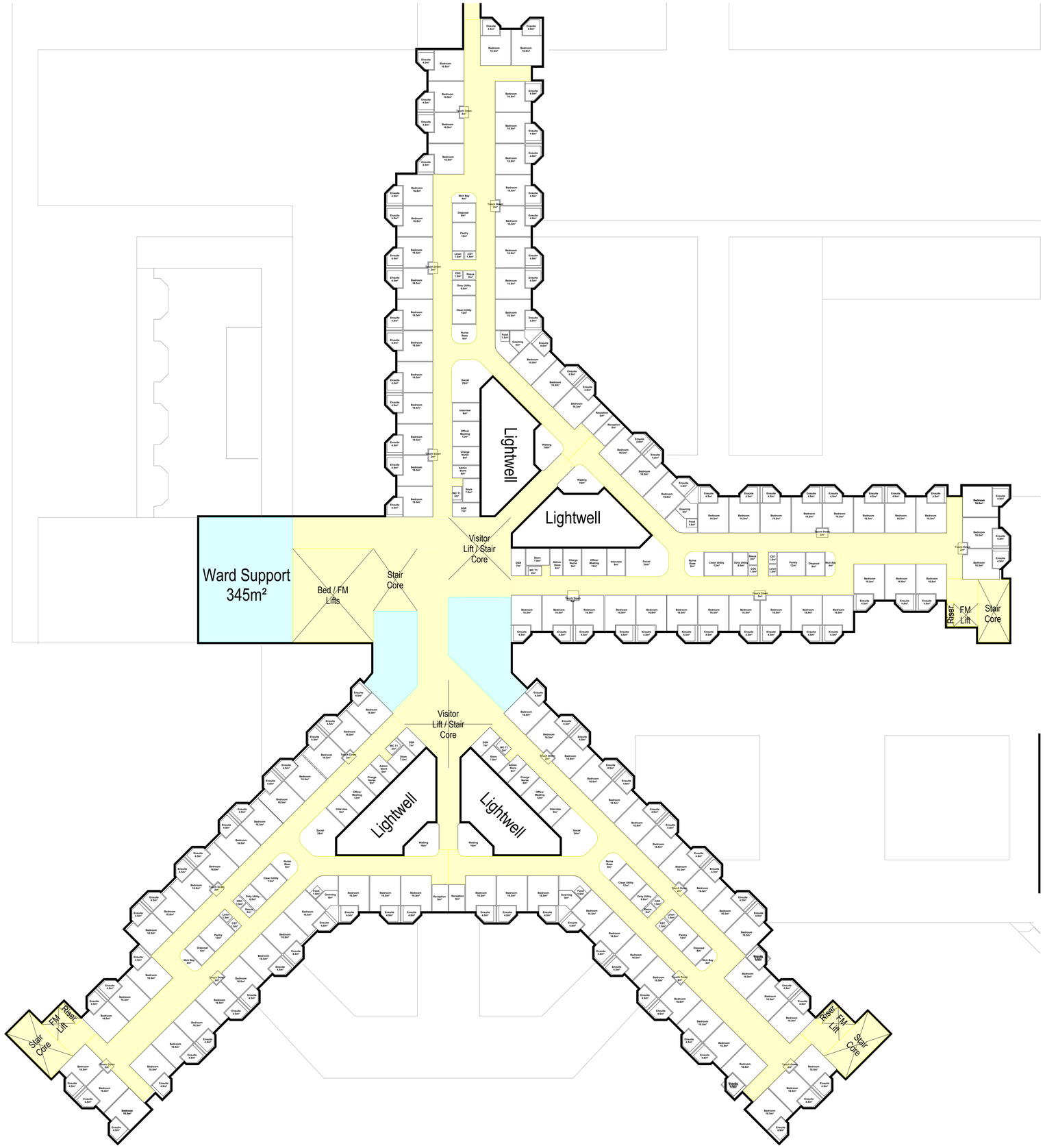

A Colours and text amended. 12/05/2009 SA

Revisions

Project
NEW SOUTH GLASGOW HOSPITAL

Client
NHS GREATER GLASGOW AND CLYDE

Title
GENERIC WARD FLOOR (ADULTS) ROOM ADJANCIES

Drawing No. **PD-HLM-L(00)04-X-WA-001** Revision **A**

Scale @ A0: 1:200
Drawn: AJA
Date: 30/04/2009
Checked: JD

HLM ARCHITECTS

In Association with bmj architects Boswell Mitchell & Johnston

HLM Architects
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LONDON GUILDFORD SHEFFIELD GLASGOW BELFAST CARDIFF PLYMOUTH

Tue Mar 12 15:53:10 2009
Filename: Cartmouth Glasgow Hospital\00 Cartmouth\04PD-HLM-L(00)04-X-WA-001 - Generic Ward Floor (Adults).dwg

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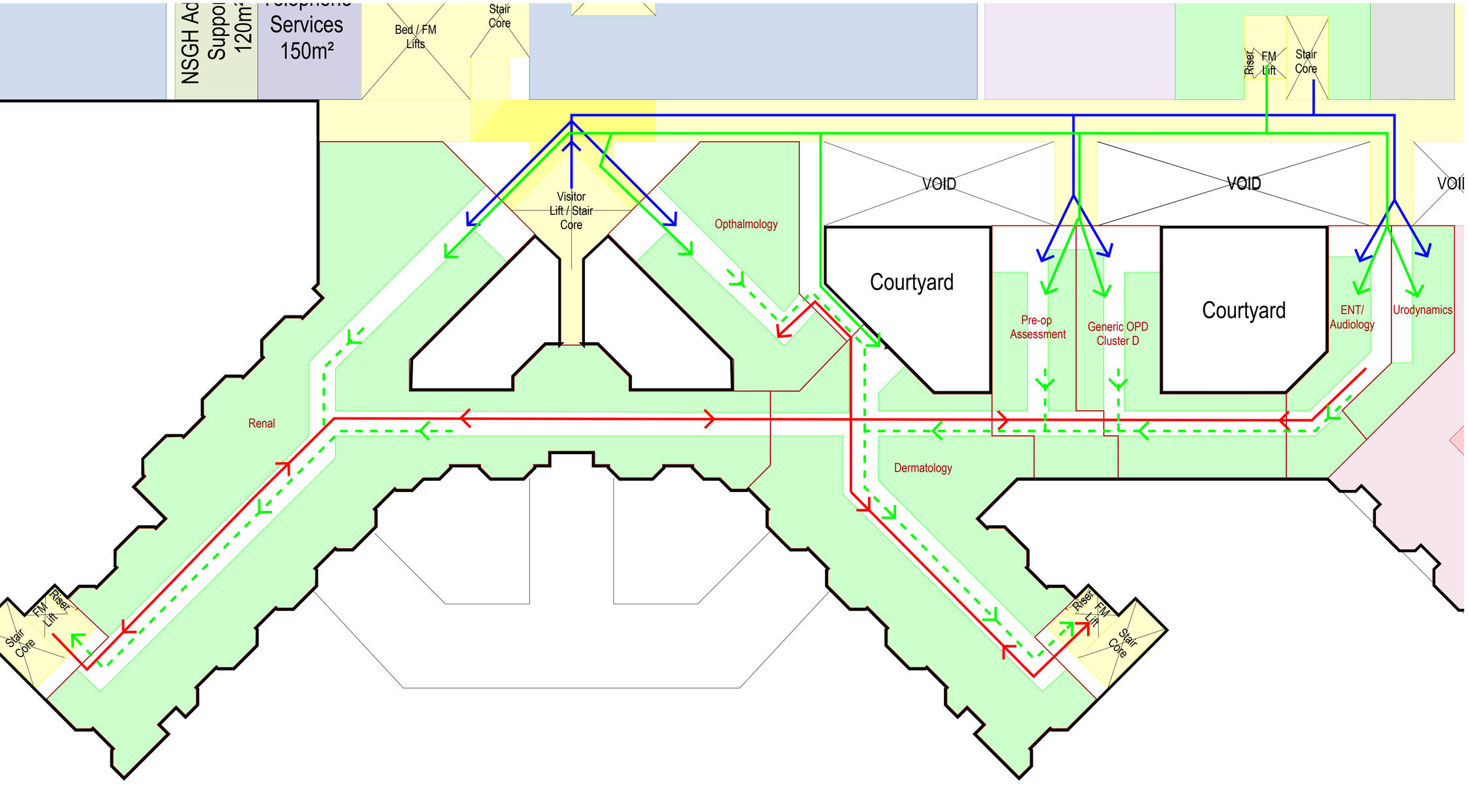
Flow route Key

- Staff / Patients
- AODOS
- Clean FM
- Dirty FM

Draft issue pending review by FM 08/06/09



Revisions

Project
NEW SOUTH GLASGOW HOSPITAL

Client
NHS GREATER GLASGOW AND CLYDE

Title
OPD LEVEL 2 (ADULT) FLOW DIAGRAM

Drawing No. | Revision
PD-HLM-L(00)02-X-OP-002*

Scale @ A1: 1:200
Drawn: DM
Date: 01/06/2009
Checked: HS

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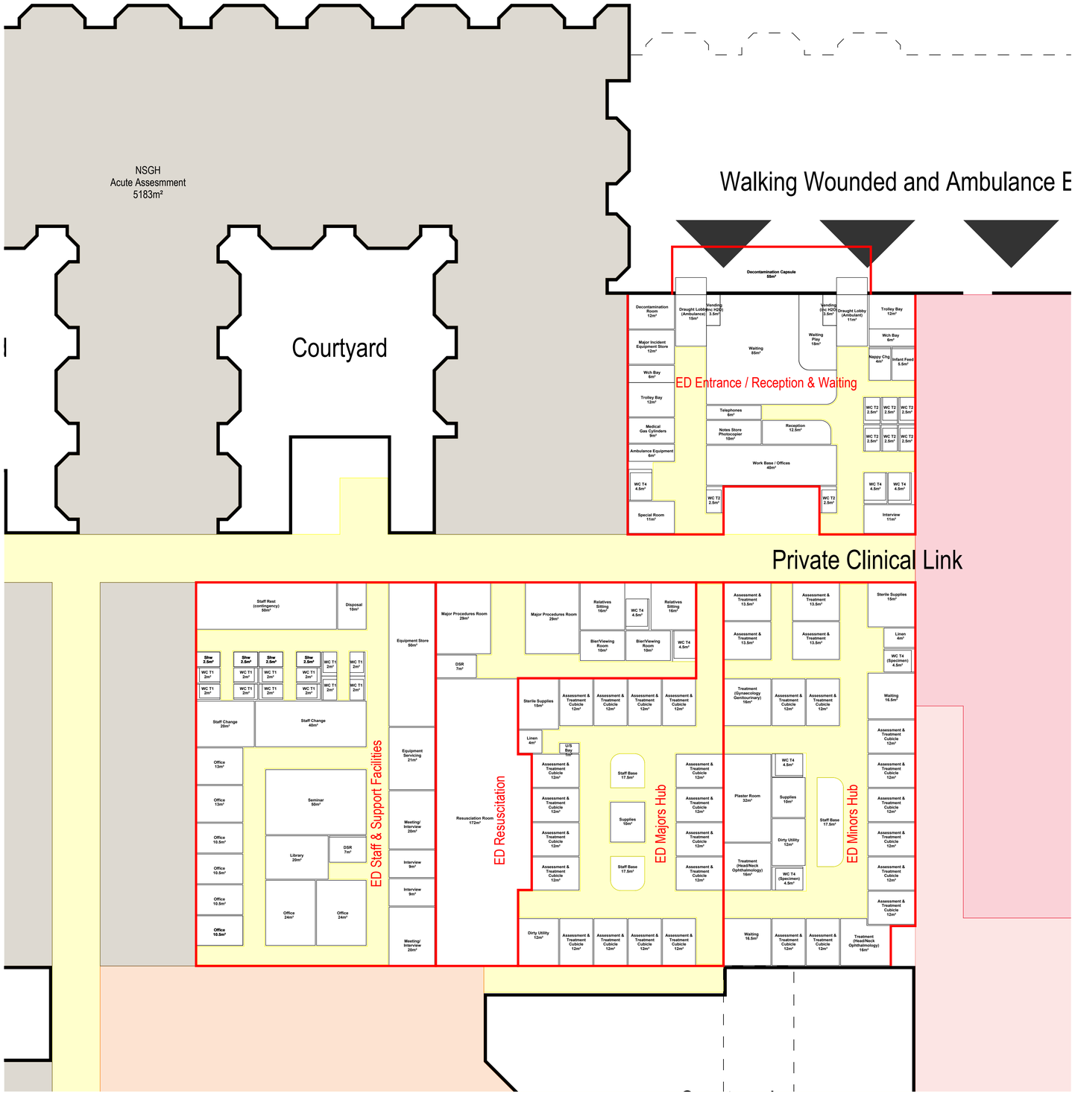

A	Colours and text amended.	12/05/2009 SA

Revisions

Project

NEW SOUTH GLASGOW HOSPITAL

Client

NHS GREATER GLASGOW AND CLYDE

Title

EMERGENCY DEPARTMENT (ADULTS) ROOM ADJANCIES

Drawing No. | Revision

PD-HLM-L(00)00-X-ED-001A

Scale @ A1	Drawn
1:200	AJA
Date	**Checked**
30/04/2009	HS

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M 20 40 60 80 1:250 1:500 1:200 1 2 3 4 1:20

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Tue Mar 12 16:49:15 2009
F:\BB26 - New South Glasgow Hospital\00 Cad\Issue\(3)\PD-HLM-L(00)00-X-ED-001 - Emergency Department Adults.vwd

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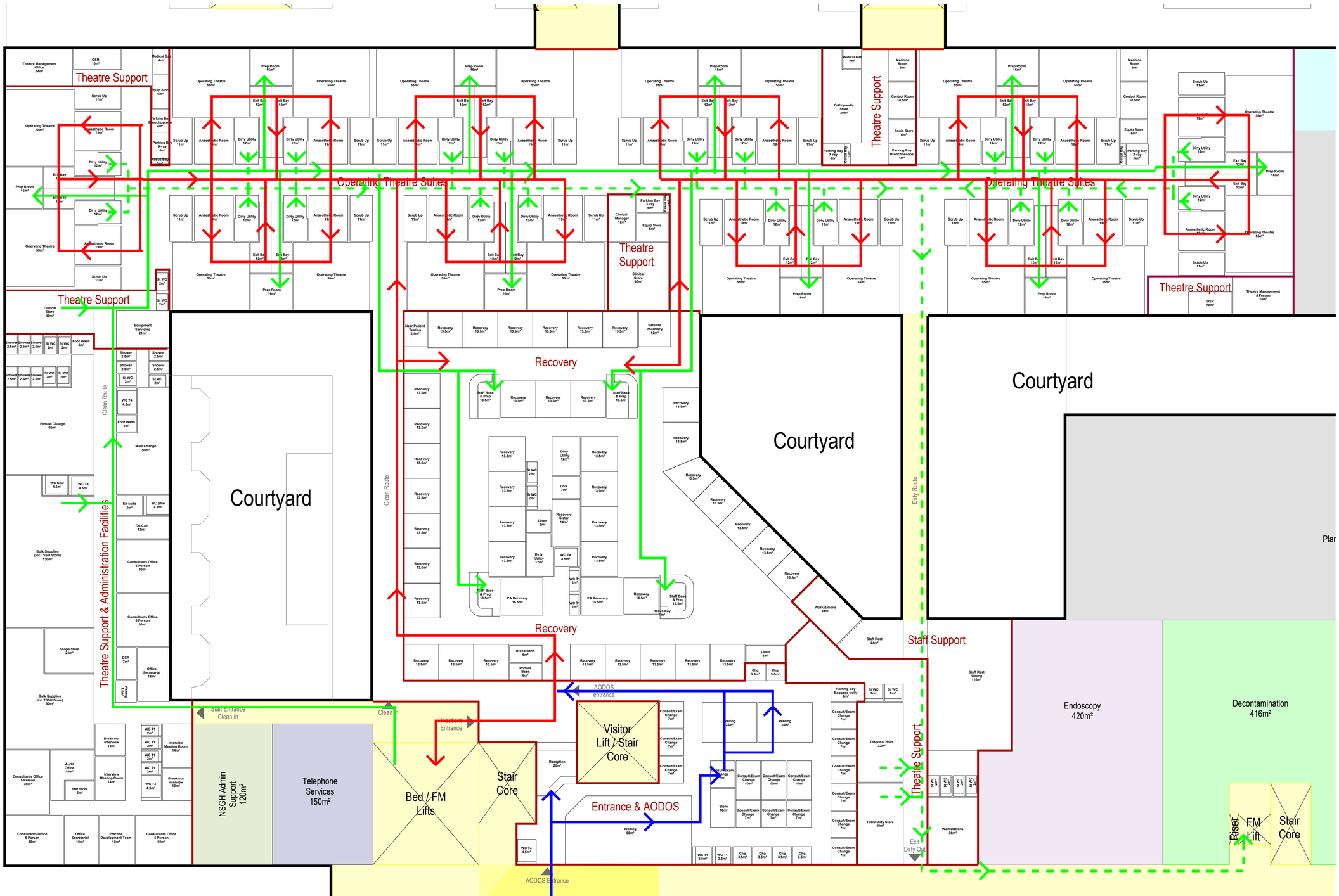
Flow route Key
- Staff / Patients
- AODOS
- Clean FM
- Dirty FM

Draft issue pending review by FM 08/06/09



A	Outpatients key changed to AODOS	04/06/09 dm

Revisions

Project
NEW SOUTH GLASGOW HOSPITAL

Client
NHS GREATER GLASGOW AND CLYDE

Title
OPERATING THEATRES (ADULT) FLOW DIAGRAM

Drawing No. **PD-HLM-L(00)02-X-OT-002 A**

Revision

Scale @ A1: 1:200
Drawn: DM
Date: 01/06/2009
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Flow route Key

- Staff / Inpatients
- Visitors
- Clean FM
- Dirty FM

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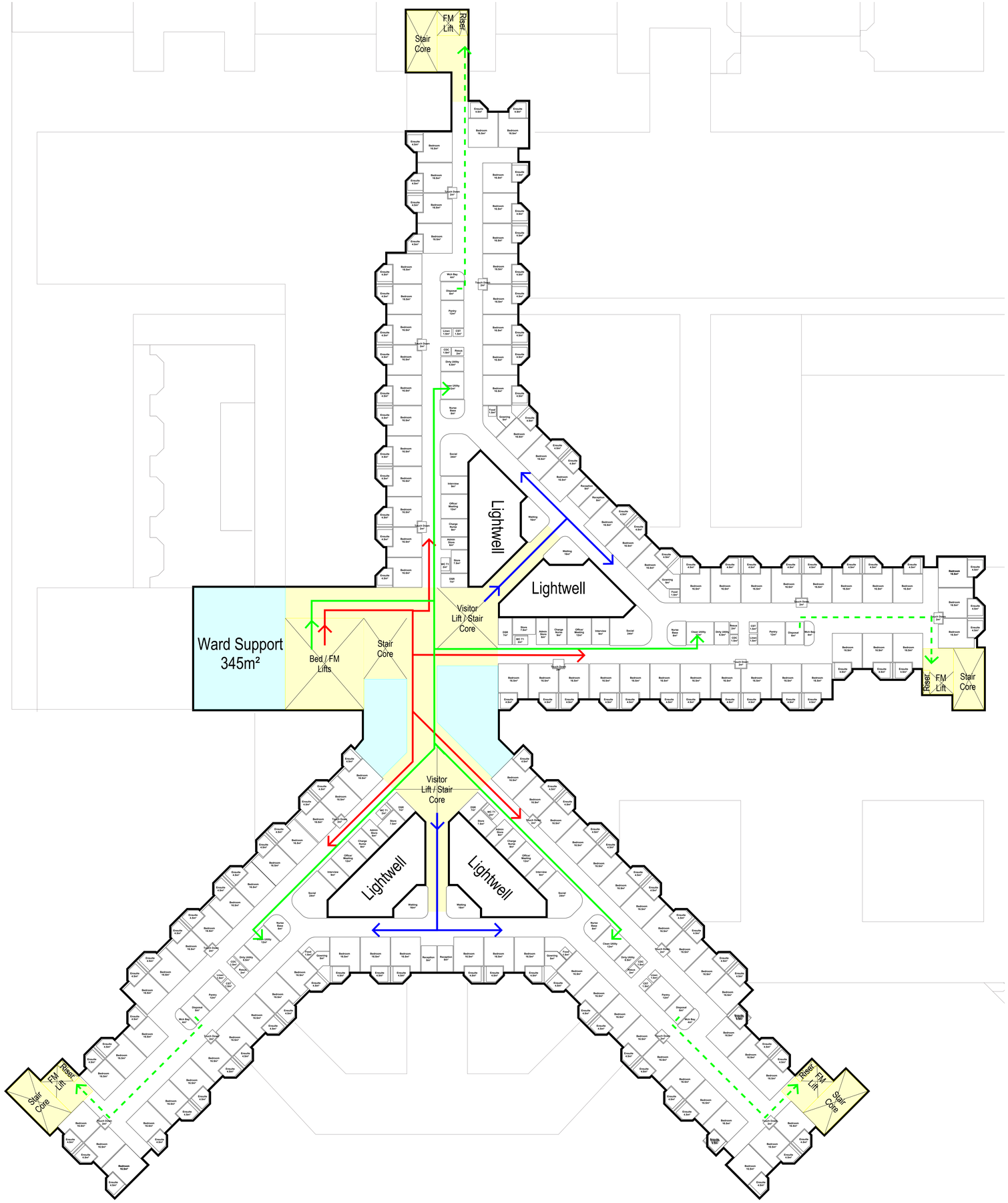

Revisions

Project
NEW SOUTH GLASGOW HOSPITAL

Client
NHS GREATER GLASGOW AND CLYDE

Title
GENERIC WARD (ADULT) FLOW DIAGRAM

Drawing No.	Revision
PD-HLM-L(00)04-X-WA-002	*

Scale @ A0	Drawn
1:200	DM
Date	**Checked**
01/06/2009	*

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NHS Greater Glasgow and Clyde

Bidder B

New South Glasgow Hospitals

Design Dialogue Meeting 2

NHS Greater Glasgow and Clyde

Design Dialogue Meeting Agenda Proposals

Bidder B

DDM 1

Design Dialogue Meeting Agenda Proposals

Design Dialogue Meeting 1
BRIEFING STAGE

Present Proposals for Design Dialogue Meeting (DDM) Format

Proposal of 2xconcurrent separate Workstreams through each DDM

1.1 Design
1.2 Technical

DDM 2

Design Dialogue Meeting Agenda Proposals

Design Dialogue Meeting 2
INITIAL CONCEPT DESIGN STAGE

Design
Review Exemplar Design
Review Masterplan Options
Single Bed Ward Options
Tower & Podium Options
Initial 1:500 Concept Plans
Initial 3D Site Massing

Technical
As Agenda

DDM 3

Design Dialogue Meeting Agenda Proposals

Design Dialogue Meeting 3

Design
Masterplan
1:500 Concept Plans
1:200 Ward Tower Module
3D Site Massing Development
Indicative elevational treatment concepts

Technical
M&E Design Strategy Review
Structural Design Stategy Review
Cladding Design Strategy Review
Fire Strategy Review
Acoustic Strategy Review
Equipment Strategy Review

DDM 4

Design Dialogue Meeting Agenda Proposals

Design Dialogue Meeting 4
DETAILED DESIGN STAGE

Design
Masterplan

Adult Hospital 1:200 Department Design
Accident & Emergency
Adult Theatres

Adult Generic Ward including Generic Core Support
Adult Assessment Ward
Adult Radiology
Adult Critical Care
Adult Cardiology
Adult Outpatients
Adult Main Entrance/Public Areas

Childrens Hospital 1:200 Department Design
Childrens Ward
Childrens Accident & Emergency
Childrens Outpatients
Childrens Main Entrance/Public Areas

Technical
M&E Detail Design
Structural Detail Design
Cladding Detail Design
Fire Strategy Detail Design
Acoustic Strategy Review
Equipment Detail Design

DDM 5

Design Dialogue Meeting Agenda Proposals

Design Dialogue Meeting 5
DETAILED DESIGN STAGE

Design
External Envelope Detailed Design
Elevations
Sections
3D modelling

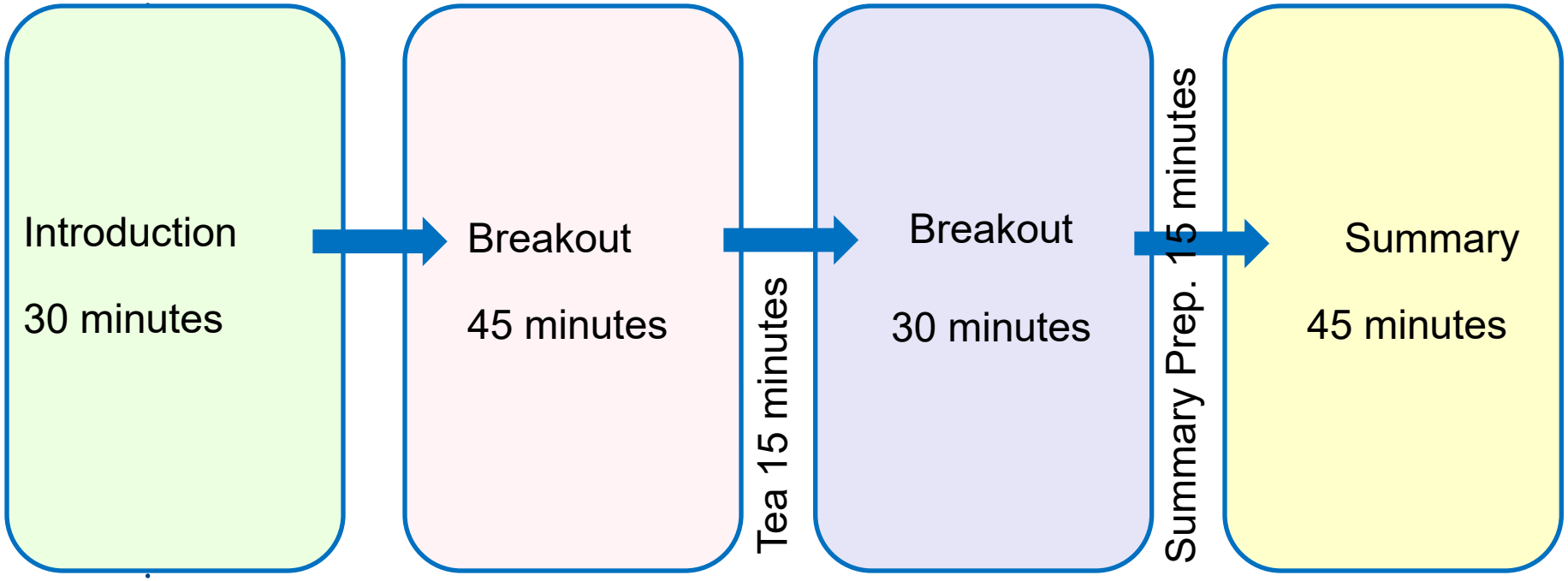
Interiors Detailed Design
1:50 Standard Rooms

Interior Design & Wayfinding Strategy
Main Entrance & Public Areas

Technical
M&E Detail Design
Structural Detail Design
Cladding Detail Design
Fire Strategy Detail Design
Acoustic Strategy Review
Equipment Detail Design

NHS Greater Glasgow and Clyde

Agenda



Breakout Groups

1.Healthcare Planning

2. Masterplanning, Architecture and Civils

3.M & E

Design Dialogue Meeting 2

Design Dialogue Meeting Agenda Proposals

Design Dialogue Meeting 2
INITIAL CONCEPT DESIGN STAGE

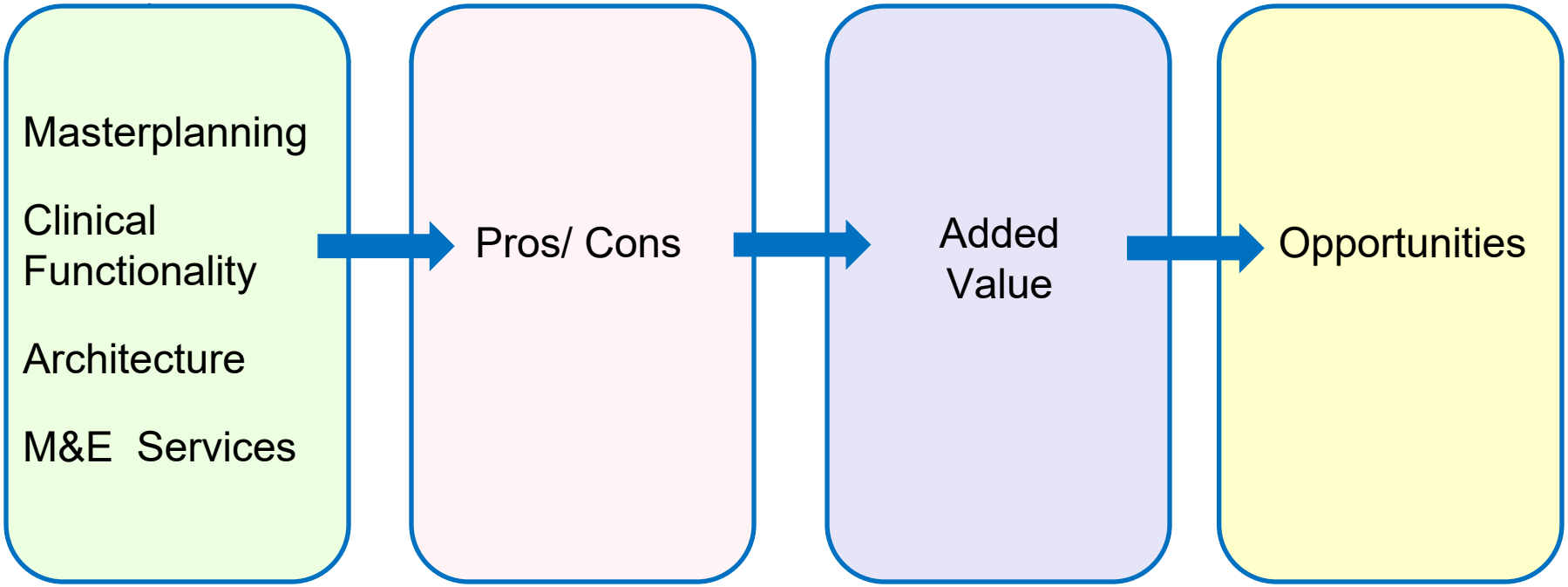
Design

Review Exemplar Design
Review Masterplan Options
Single Bed Ward Options
Tower & Podium Options
Initial 1:500 Concept Plans
Initial 3D Site Massing

Technical

As Agenda

Scheme Review



Establish Fixed Points

1. Circulation/ Wayfinding External & Internal
2. Green Space
3. Car Parking
4. Entrances
5. Science/FM Zone
6. Infrastructure
7. Substation / Services
8. Energy Centre
9. Clinical Planning / Flexibility
10. Daylight / Natural Ventilation
11. BREEAM
12. FM
13. Helipad
14. Building Form / Flexibility
15. Site Handover/Condition

Board / Bidder B

Dialogue

Opportunity A

Opportunity B

Opportunity C

Opportunity D

Board / Bidder B

Dialogue

Board / Bidder B

Added Value

Opportunity

Masterplanning & Landscape Design

Review of exemplar design

Consideration of opportunities

Clarify and agree principles

Prepare proposals

Present and review proposals

Peer Review / Pros & Cons Analysis

Masterplan Exploration

NHS Greater Glasgow and Clyde

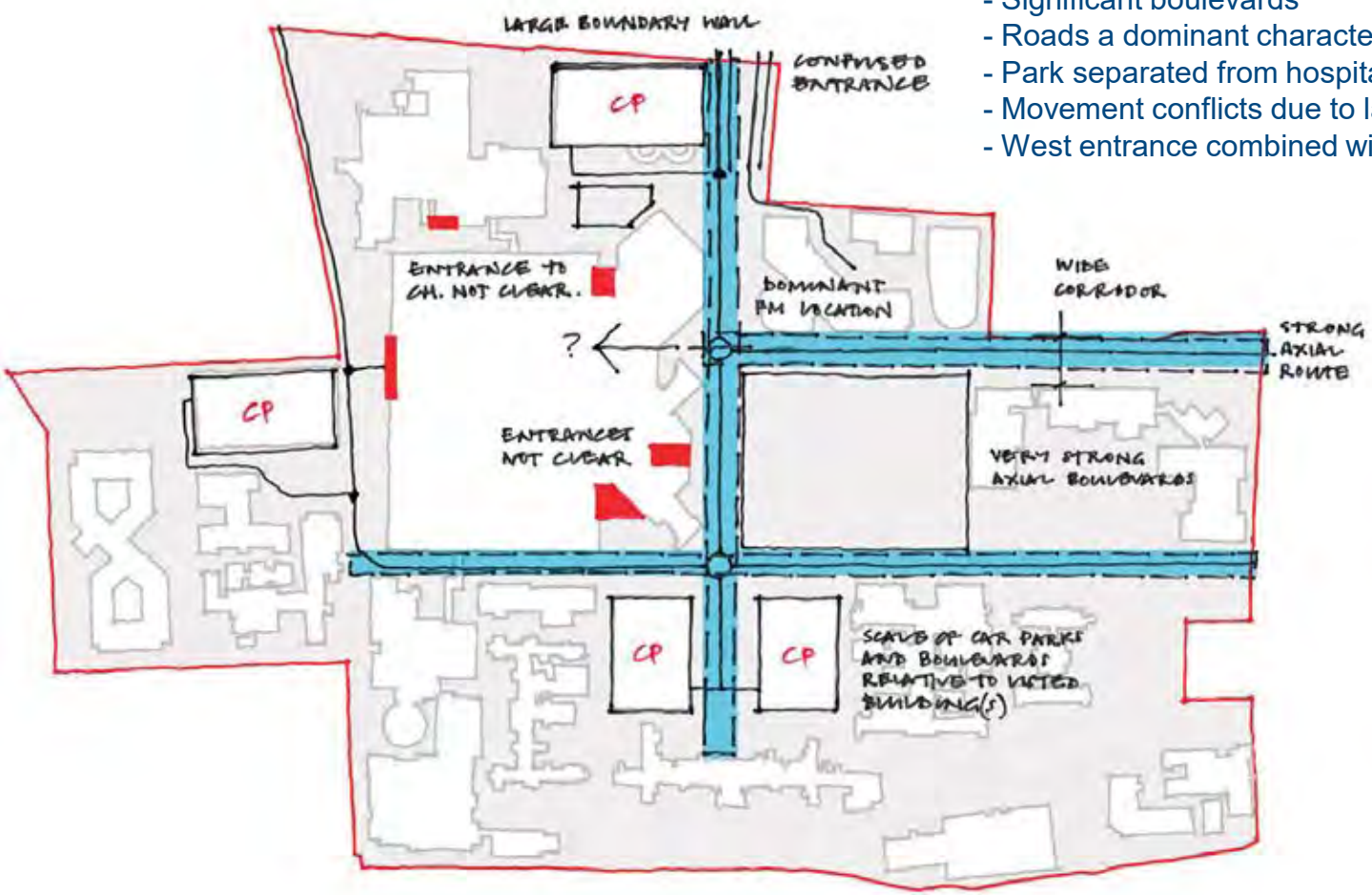
Peer Review / Pros & Cons Analysis

Orientation and way finding

Peer Review / Pros & Cons Analysis

Orientation and way finding

- Road structure dominates
- Significant boulevards
- Roads a dominant characteristic
- Park separated from hospital by roads
- Movement conflicts due to layout
- West entrance combined with FM entry



Peer Review / Pros & Cons Analysis

Character – Contained Green Space

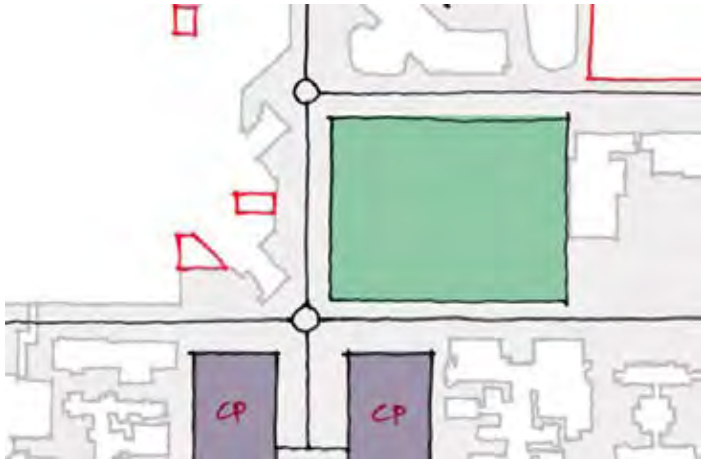
Peer Review / Pros & Cons Analysis

Character – Expansive Green Character

Peer Review / Pros & Cons Analysis

Masterplan Review – Central Park Space Connectivity & Character

Exemplar Scheme



Connected Green Space & Setting

Peer Review / Pros & Cons Analysis

Masterplan Review

Car Park Alignment/Children's Hospital Entrance

- Potential rotation of car park
- Separation of FM access
- Clear identity for Children's hospital

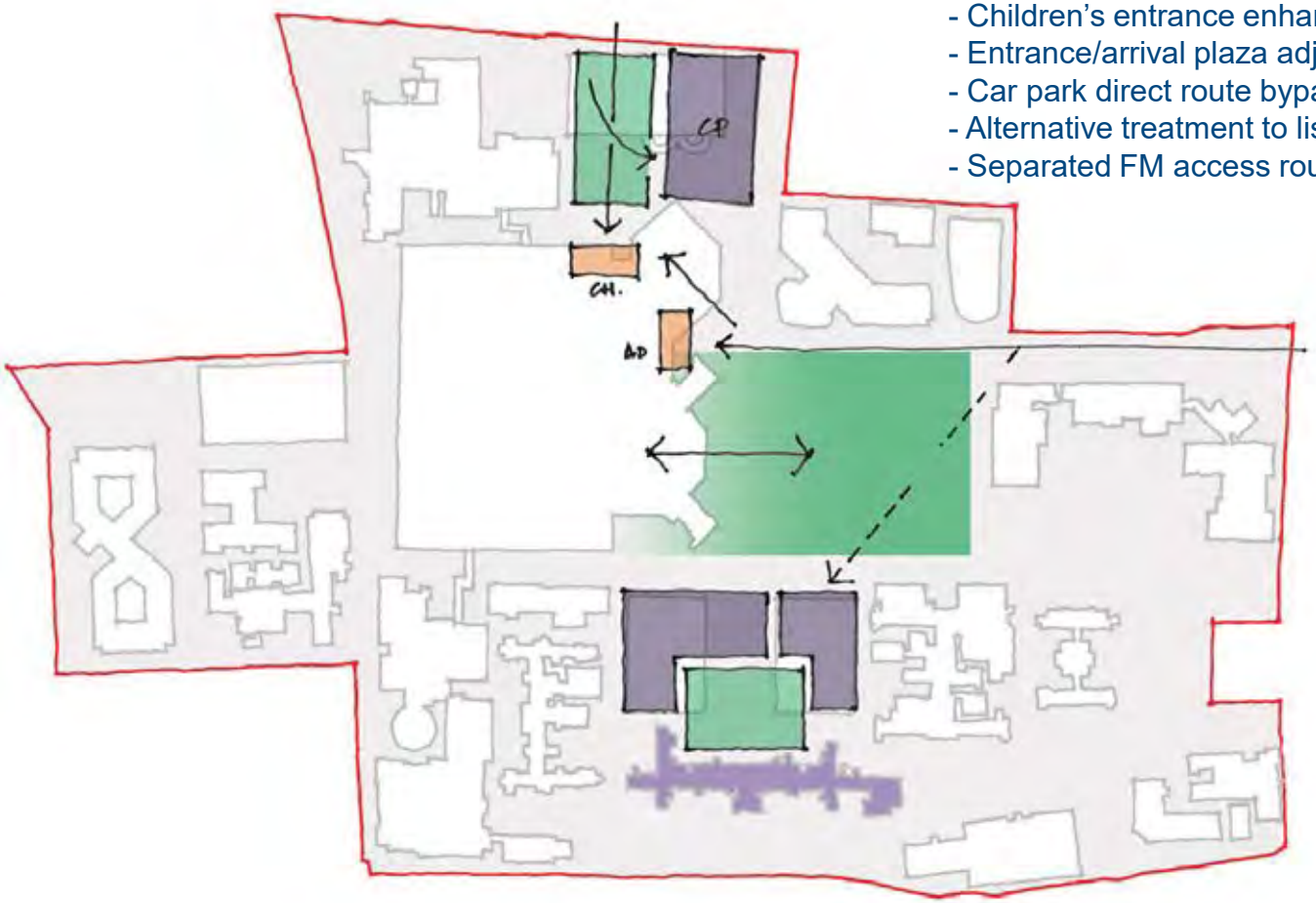
Exemplar Scheme

Green Space & Setting

Peer Review / Opportunities

Orientation and way finding

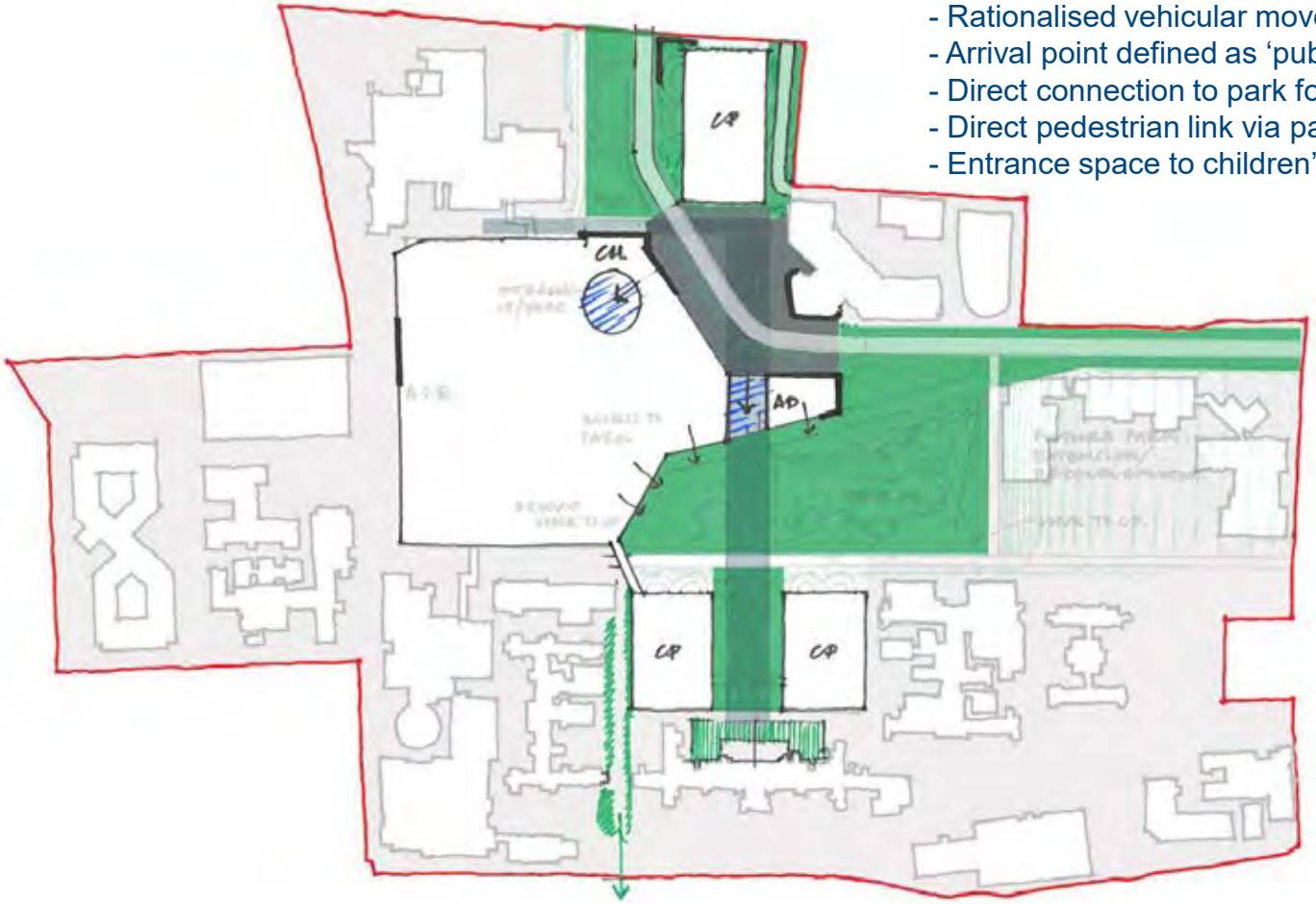
- Axial boulevards aligned with entrances
- Clearer wayfinding
- Hospital in park setting
- Children's entrance enhanced with park
- Entrance/arrival plaza adjacent to FM
- Car park direct route bypasses entrances
- Alternative treatment to listed buildings
- Separated FM access route



Opportunities / Thought Processes

Character & Exploration of Principles

- Clear entrances to two buildings
- Enhanced wayfinding & orientation
- Rationalised vehicular movements
- Arrival point defined as ‘public square’
- Direct connection to park for café etc
- Direct pedestrian link via parkland to entrance
- Entrance space to children’s hospital



- Hierarchy of spaces & circulation
- Welcoming and child-friendly entrance
- Maximise potential of the space

Health Planning

Review of exemplar design

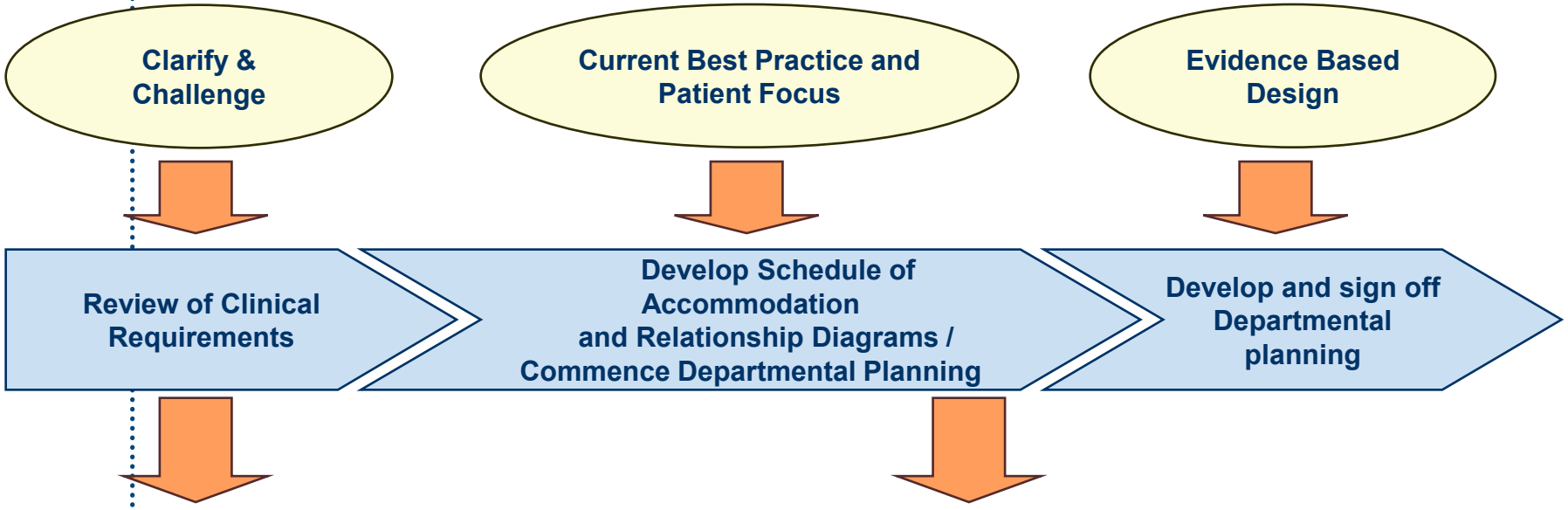
Clarify and agree principles

Prepare proposals

Present and review proposals

NHS Greater Glasgow and Clyde

Healthcare Planning Principles



Development Strategy

- Develop health buildings that encourage modern and forward looking healthcare practice
- Deliver a flexible and adaptable solution
  - Standardised room sizes
  - Ability to flex and adapt flows to change departmental boundaries
- Allow future integration of services / departments while maintaining separation where required

Healthcare Specific Solutions

- Understand needs of different patient groups
- Meet required adjacencies and flows
- Flexible and adaptable rooms and spaces
- Therapeutic benefits of space
- Facilities enhance patient and staff experience

Understand Clinical Vision & Model of Care

- Briefing documentation review
- Clinical output specifications
- Adjacency matrix (project wide)
- Schedule of accommodation
- Design exemplar scheme
    - adjacency requirements
    - best practice / previous experience

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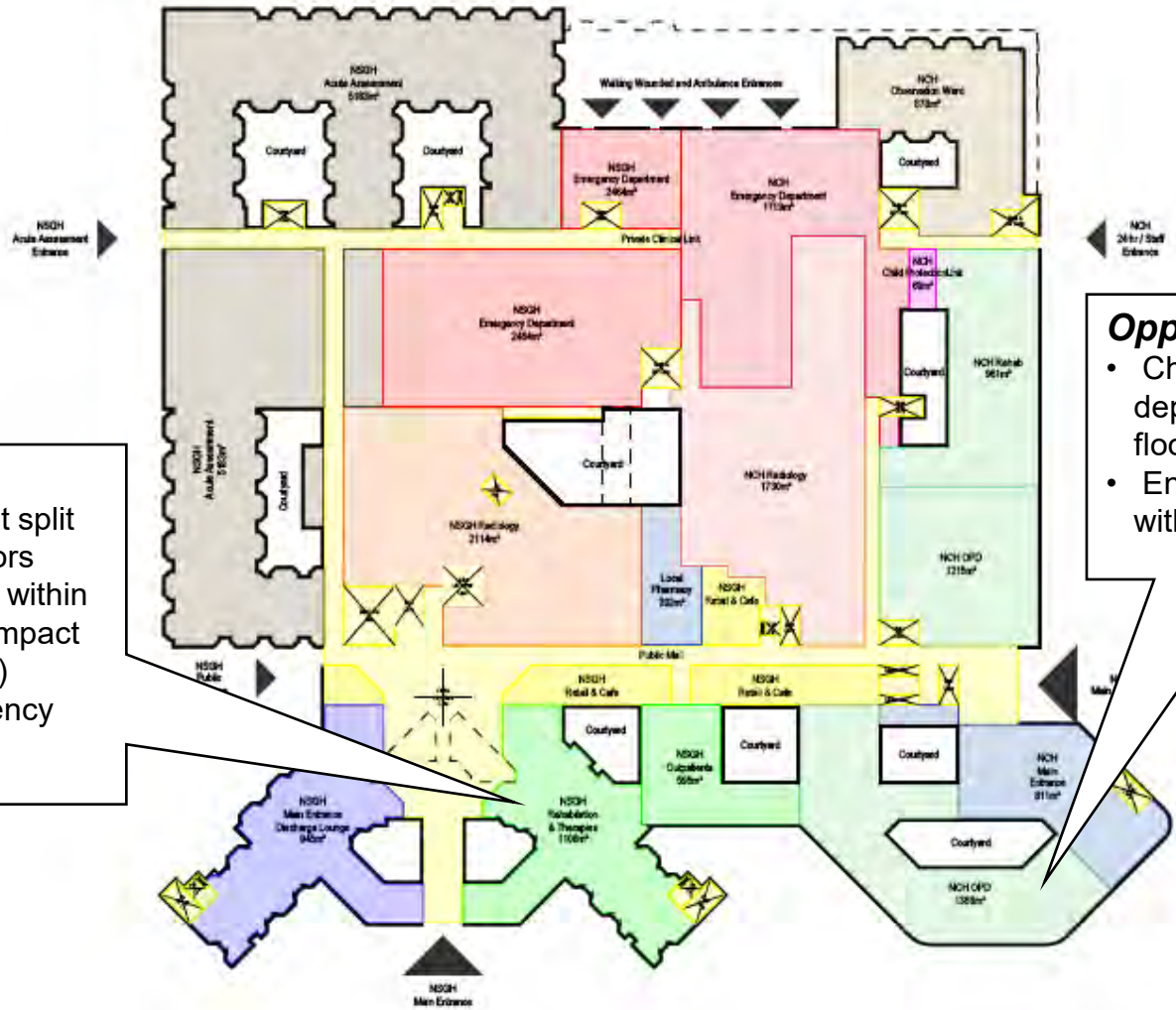
Exemplar vs. Adjacency Requirements

	Generic Wards Surgical	Renal Wards	Generic Wards Medical	Stroke Ward	Critical Care Facility (ICU/HDU/CCU)	Operating Theatres	Endoscopy	Decontamination (scope)	Imaging - (Radiology/X Ray)	Nuclear Medicine (shared)	Pharmacy - Shared Local Dispensing	MDU (Medical Day Area)	Outpatient services	Renal Dialysis	Emergency Department (A&E)	AAU	Main Entrance & Public Areas	NCH Outpatients	NCH Inpatients Schehallion Ward	NCH Neurology Ward	NCH Radiology	NCH Theatres	External Access for Ambulance and PTS	External Pedestrian Access	Neurosciences
Generic Wards Surgical					3	2	3		3	3					3	3	3								
Renal Wards					2	3			3					2	3	3	3								
Generic Wards Medical					3		3		3	3					3	3	3								
Stroke Ward					3	2			1						2	2									2
Critical Care Facility (ICU/HDU/CCU)	3	2	3	3		2			1						2	2									
Operating Theatres	2	3		2	2		1	3	2						2	2									
Endoscopy	3		3			1		1																	
Decontamination (scope)						3	1															3			
Imaging -(Radiology/X Ray)	3	3	3	1	1	2				1		3	1		1	1									
Nuclear Medicine - Shared	3		3						1			3	2					3	2	3	2	1			
Pharmacy - Shared Local Dispensing												2	1					1	2						
MDU (Medical Day Unit)									3	3	2		1											2	
Outpatient services									1	2	1	1					2							2	
Renal Dialysis		2															3							2	
Emergency Department (A&E)	3	3	3	2	2	2			1							1							1	1	
AAU	3	3	3	2	2	2			1						1								1	2	
Main Entrance & Public Areas	3	3	3										2	3											
NCH Outpatients										3	1														
NCH Inpatients Schehallion Ward										2	2														
NCH Neurology Ward										3															
NCH Radiology										2															
NCH Theatres								3		1															
External Access for Ambulance and PTS															1	1									
External Pedestrian Access												2	2	2	1	2									
Neurosciences				2																					

Exemplar Review – How we might try to enhance



Opportunity

- Outpatients dept split over multiple floors
- Content located within ward template (impact on functionality?)
- Enhance adjacency with Imaging

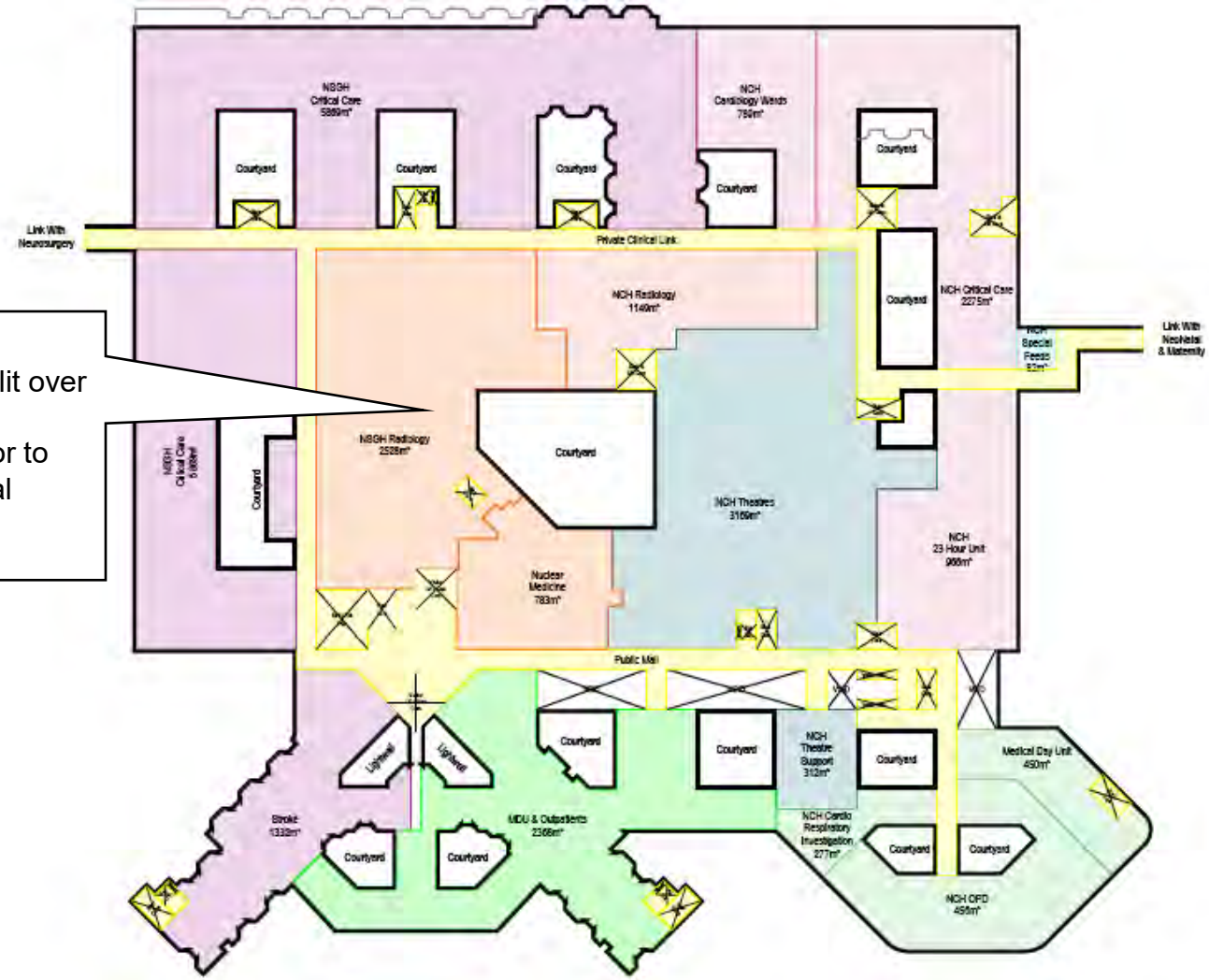
Opportunity

- Children's Outpatients dept split over multiple floors
- Enhance adjacency with Imaging

Exemplar Review – Opportunities (Level 1)

Opportunity

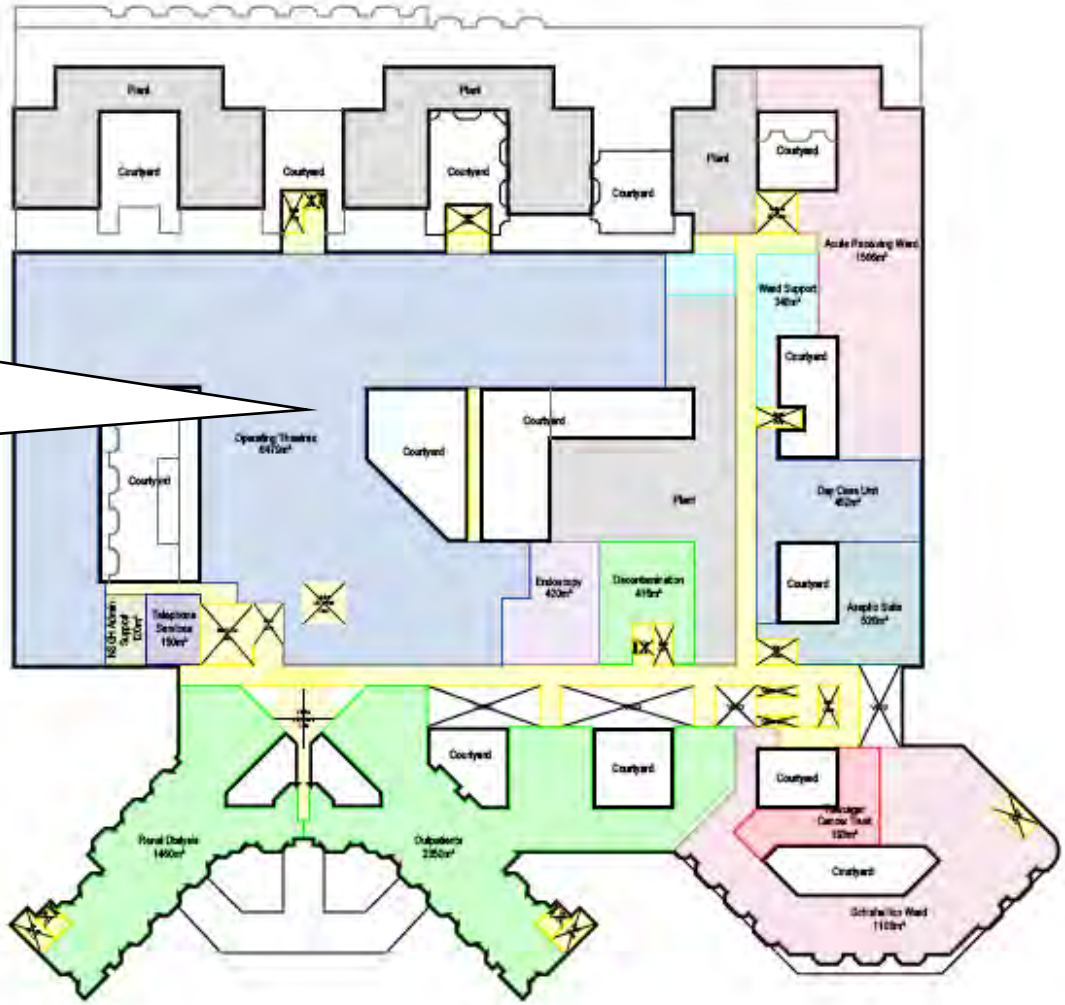
- Radiology dept split over two floors floors
- Locate on one floor to enhance operational efficiency?



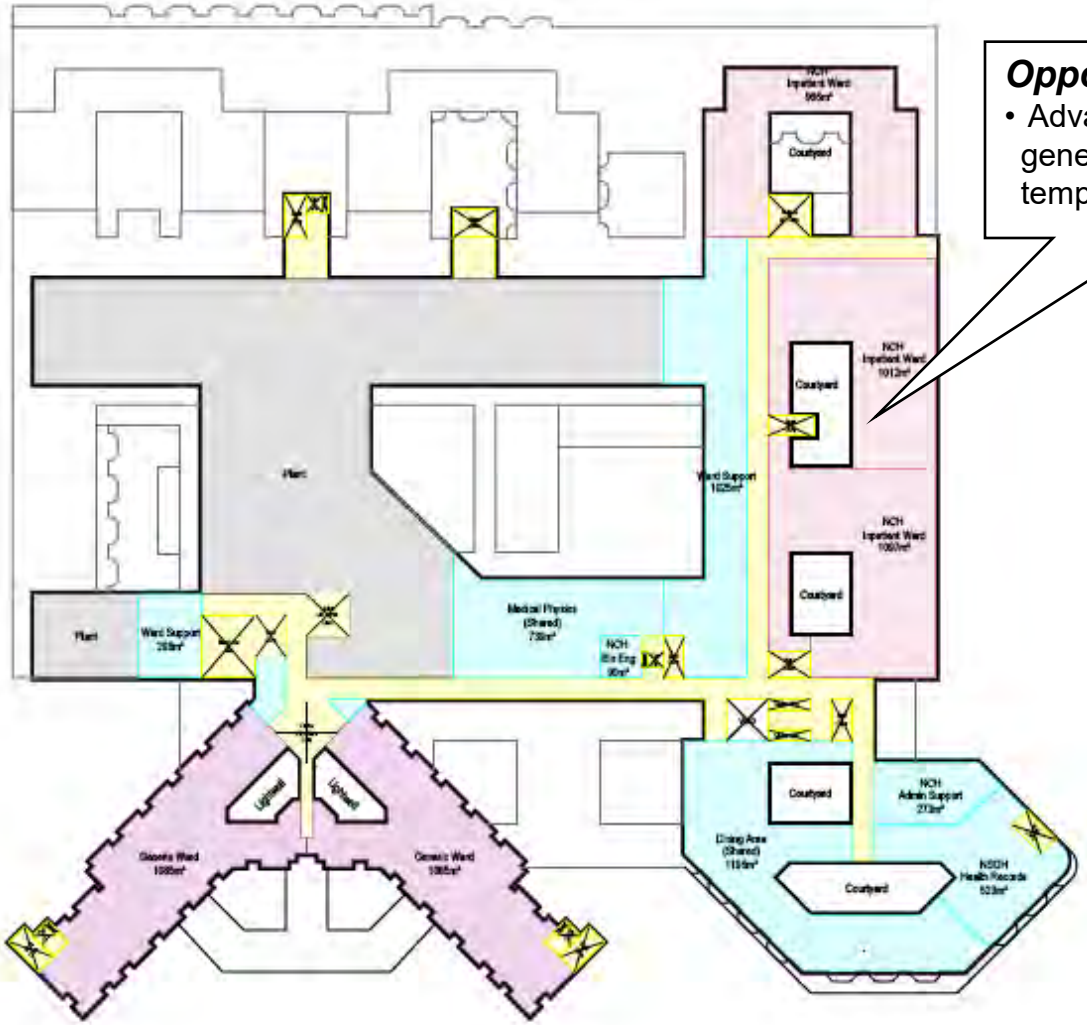
Exemplar Review – Opportunities (Level 2)

Opportunity

- Adult theatres and Children's theatres located on different floors
- Locate on one floor to enhance operational efficiency?



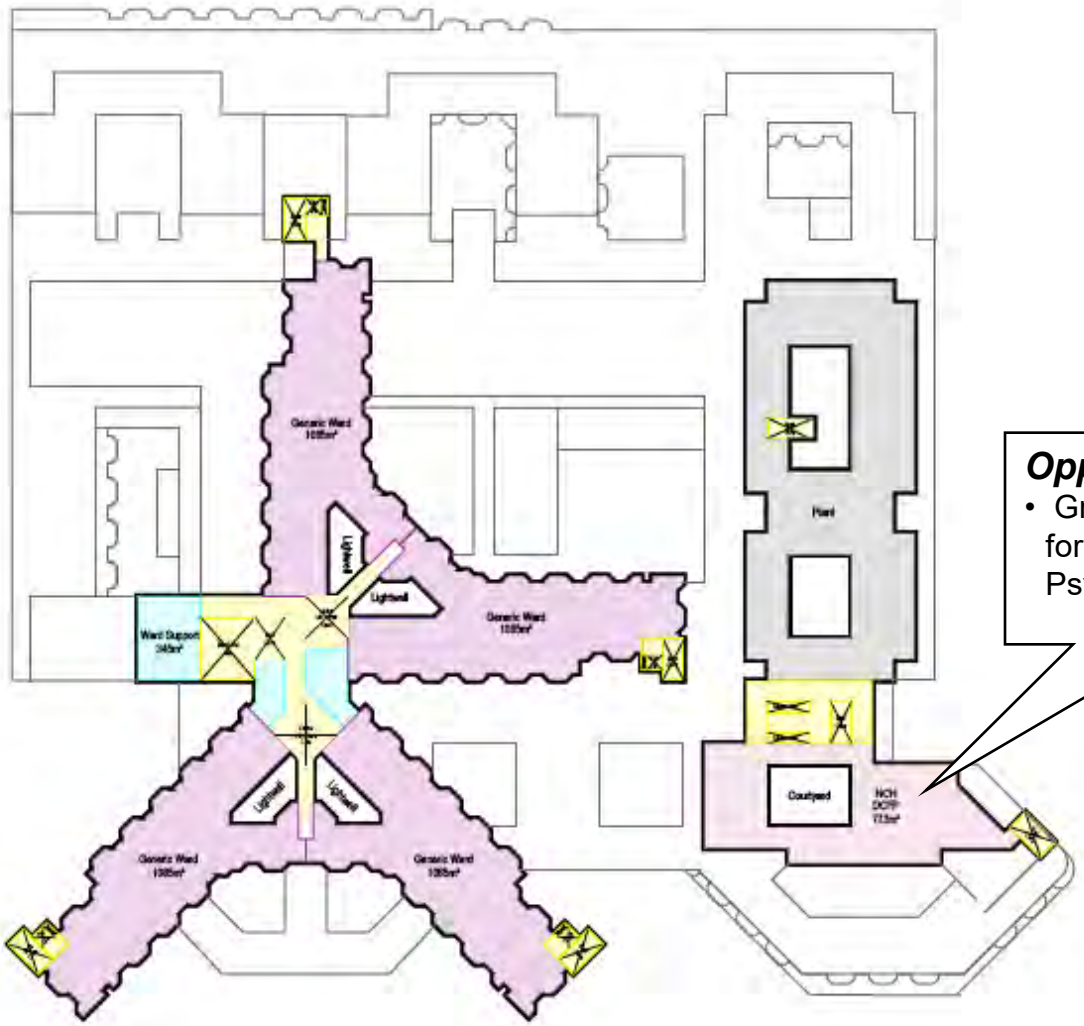
Exemplar Review – Opportunities? (Level 3)



Opportunity

- Advantages of a more generic Children's ward template?

Exemplar Review – Opportunities (Level 4)

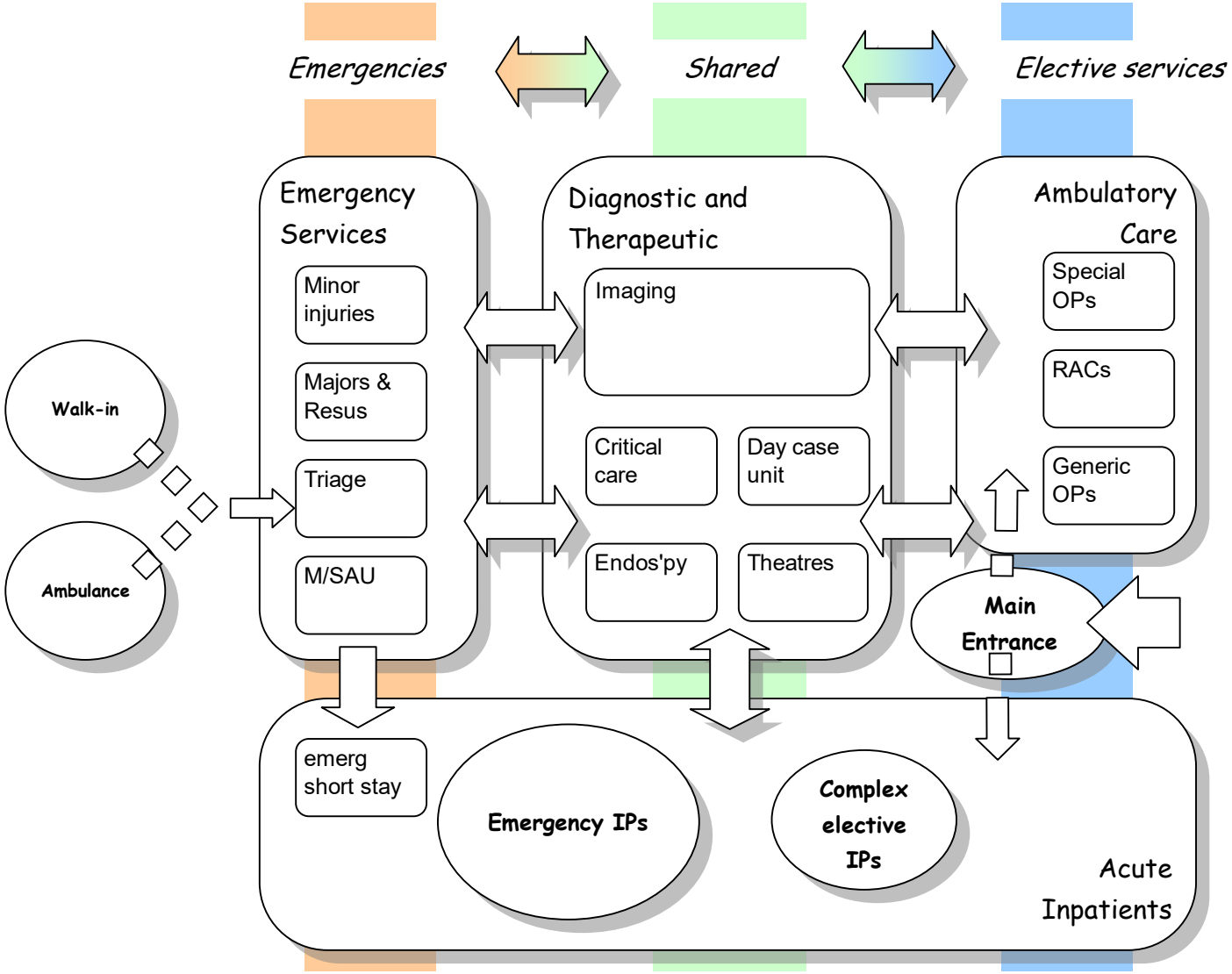


Opportunity

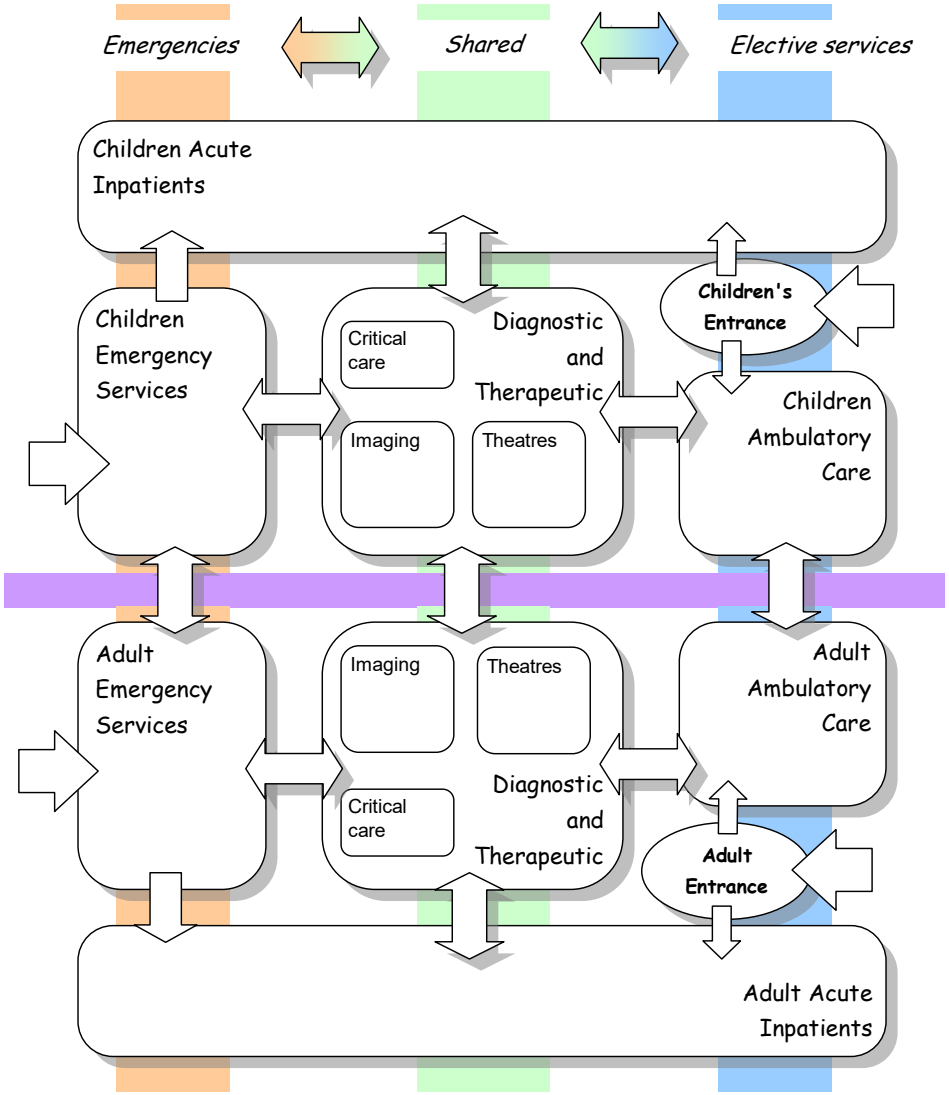
- Ground floor location for Dept Child Forensic Psychology?

NHS Greater Glasgow and Clyde

Understanding Whole Hospital Adjacencies & Flows



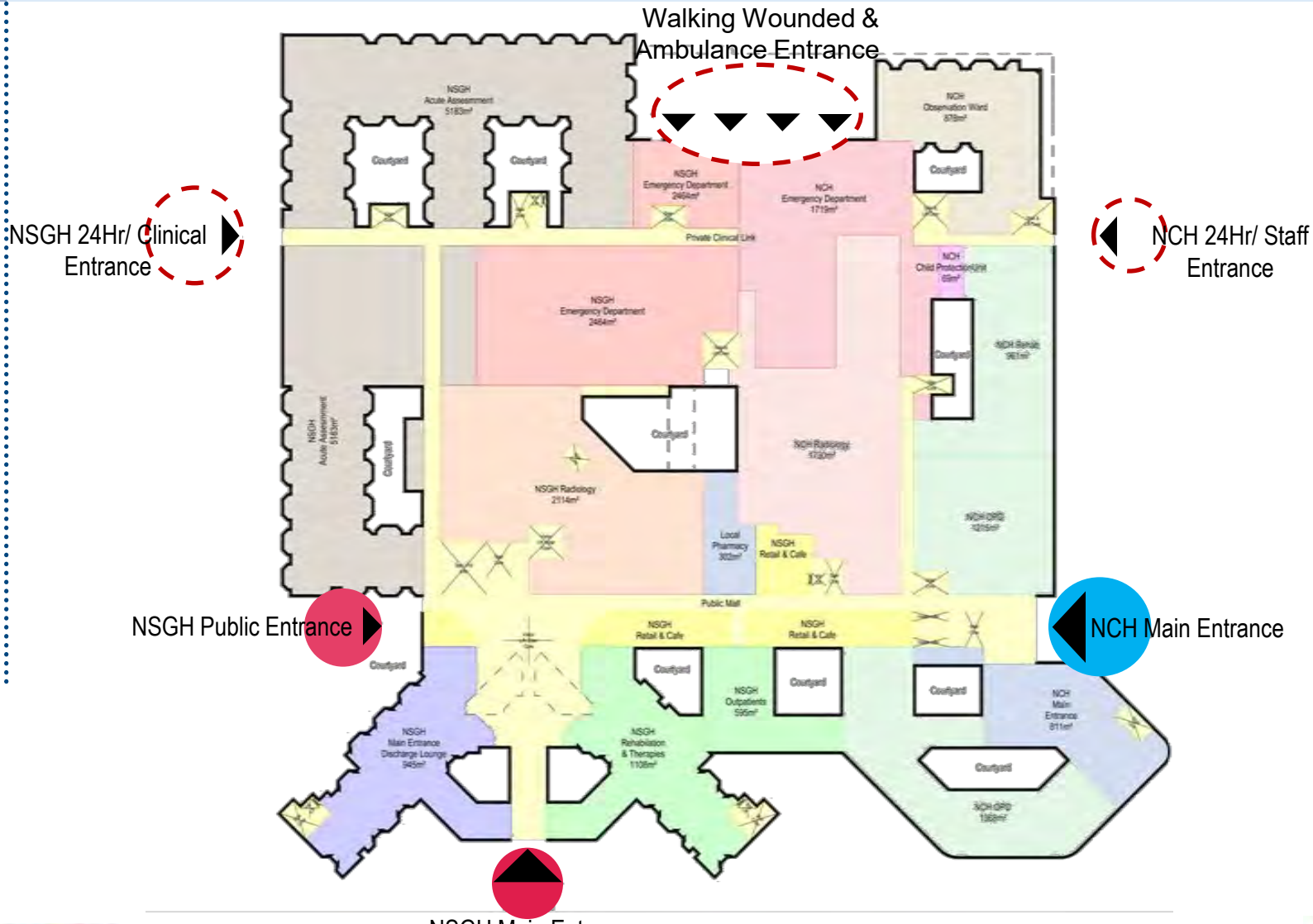
Understanding Inter-Hospital Relationships



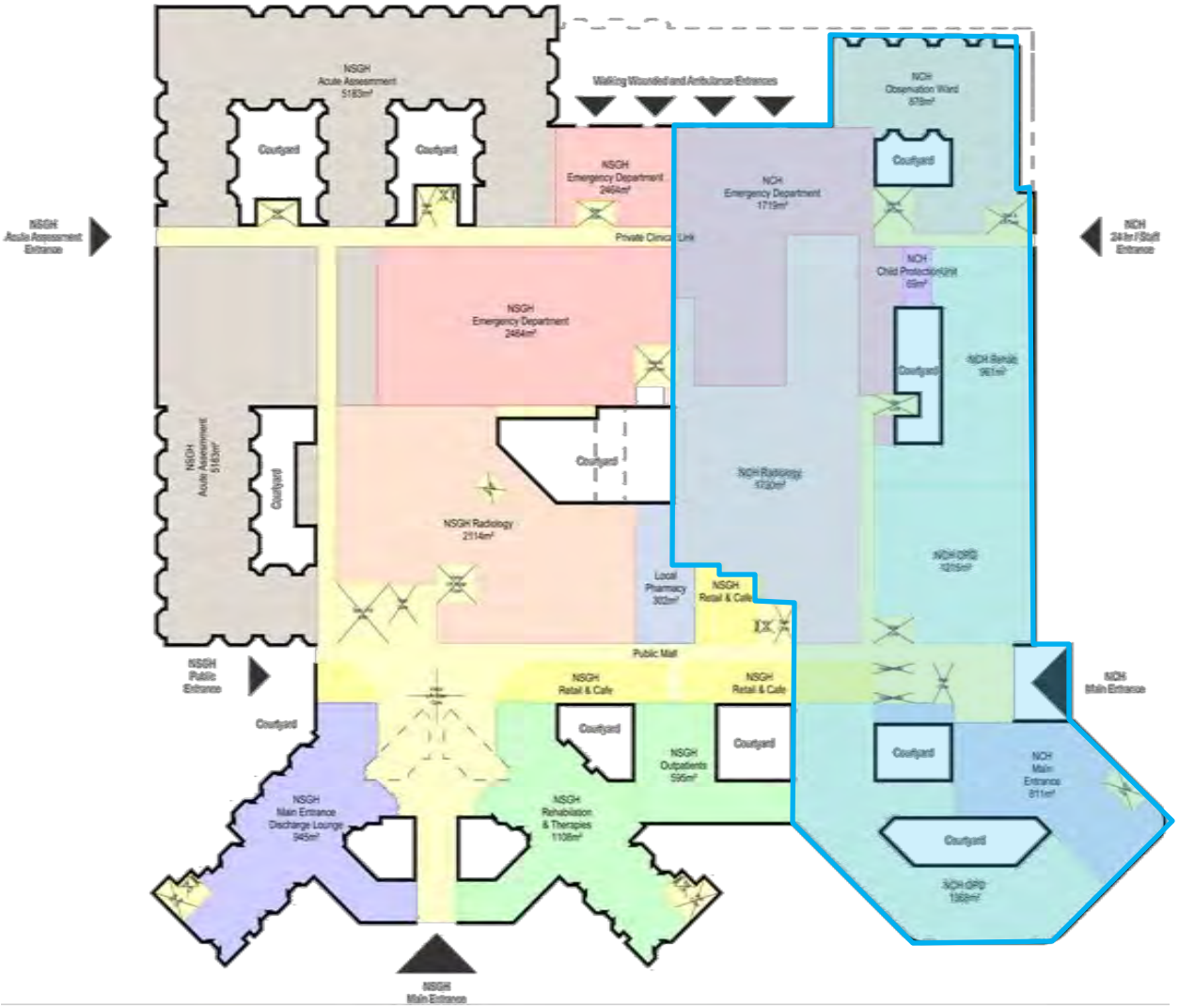
Architectural Design

- Review of exemplar design
- Clarify and agree principles
- Prepare proposals
- Present and review proposals

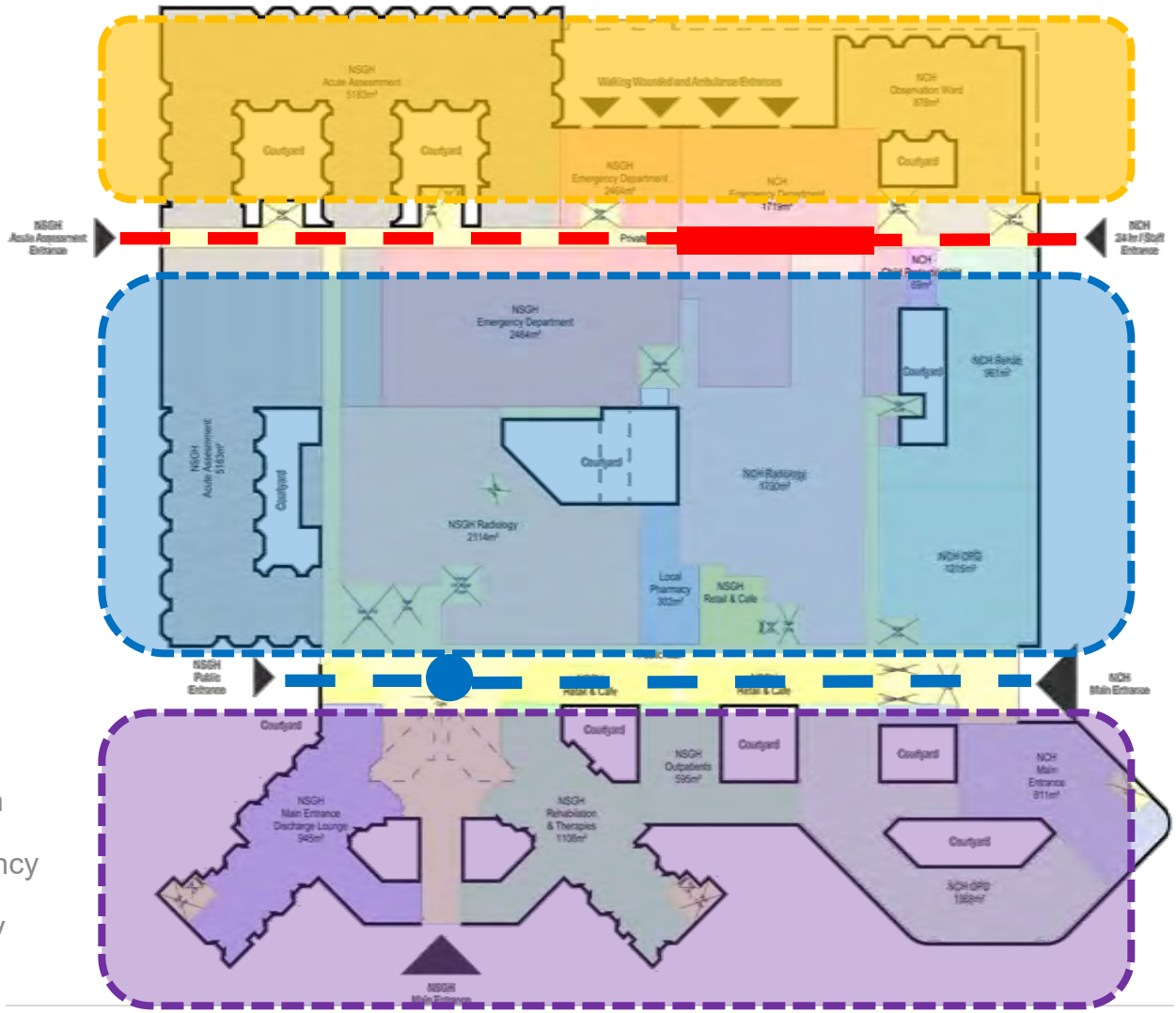
Entrances – Clear/Identifiable/hierarchy



Integration and Identity

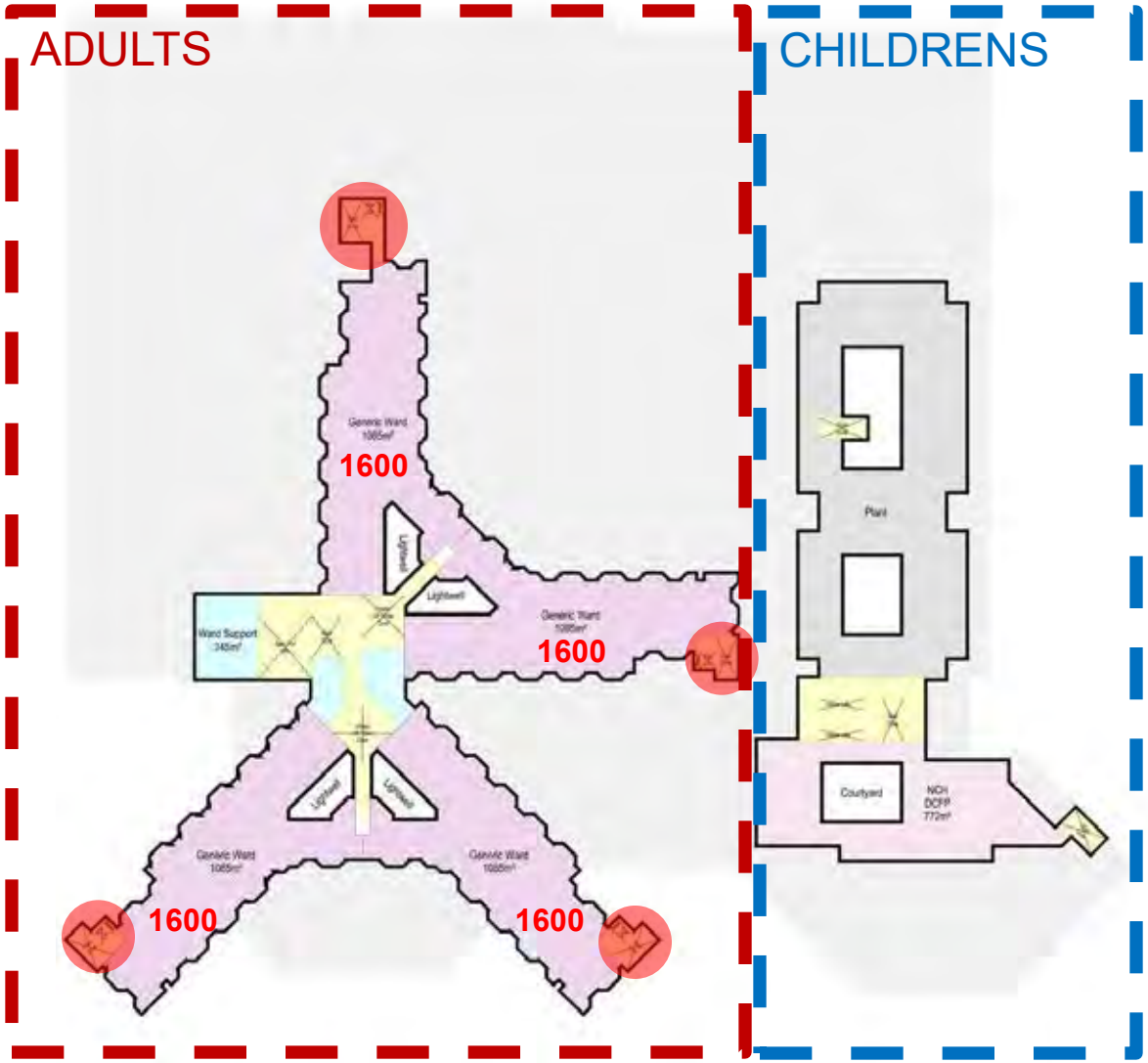


Organisation/Connectivity/Circulation



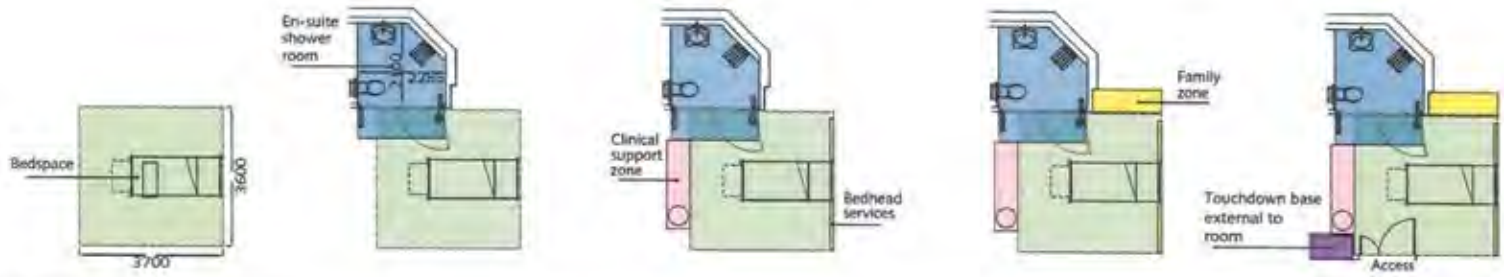
- Organisation of plan & function
- Improve connectivity & adjacency
- Reinforce primary & secondary circulation routes

Ward Design – Opportunities & Challenges



- Single room type
- Observation
- Daylight Factor/ environment
- Area & function
- Flexibility
- Flows

HBN Single Bed Example



Bedspace
This is the clear space required for access around the bed for:
- moving and handling of patients
- patient transfers into and out of bed (including ceiling-mounted hoists)
- clinical activity including resuscitation
- bed making
- manoeuvring the bed in and out of the room
- manoeuvring equipment

Note: It does not include space for built-in or fixed furniture. It does include space for door swings.

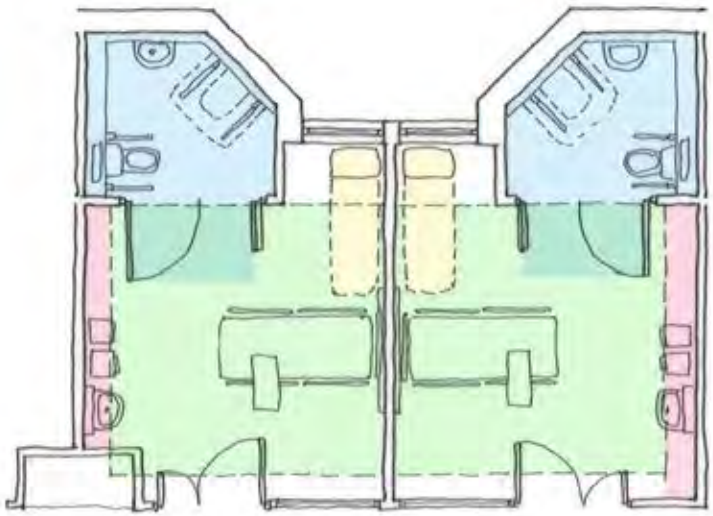
En-suite shower room
The space required for the en-suite includes not only the enclosed area but also the temporary manoeuvring space for assisting a patient on both sides of the WC which overlaps the bed space.

Clinical support zones
This includes space for clinical support, hand-washing, built-in storage and space for movable equipment such as supply or disposal trolleys.
Note: This space does not overlap the clear bed space.

Social (family) support zone
Space can be provided for overnight stay either as built-in furniture or space for demountable bed or recliner. This should not impede access to the bedside or into the room. The illustration shows one of the options. Alternatives include window seat and wall-mounted fold-down bed settee.

Touchdown base (nurses' workstation)
Clinical nursing stations or "touchdown" bases will be provided adjacent to individual rooms, paired rooms or clusters of rooms. These are best located near to room entrances so that it is possible to observe the patient from outside the room. The location of these workstations should not obstruct the primary circulation space and will be dependent on the location of the room entrance.

Single Bedroom Exemplar Analysis



Core Bed Space

Ensuite Shower Room

Clinical Support Zone

Social (Family) Support Zone

Internal Ensuite Bedroom = 16.8-17.4 m^2 Ensuite Shower Room = 4.5 m^2

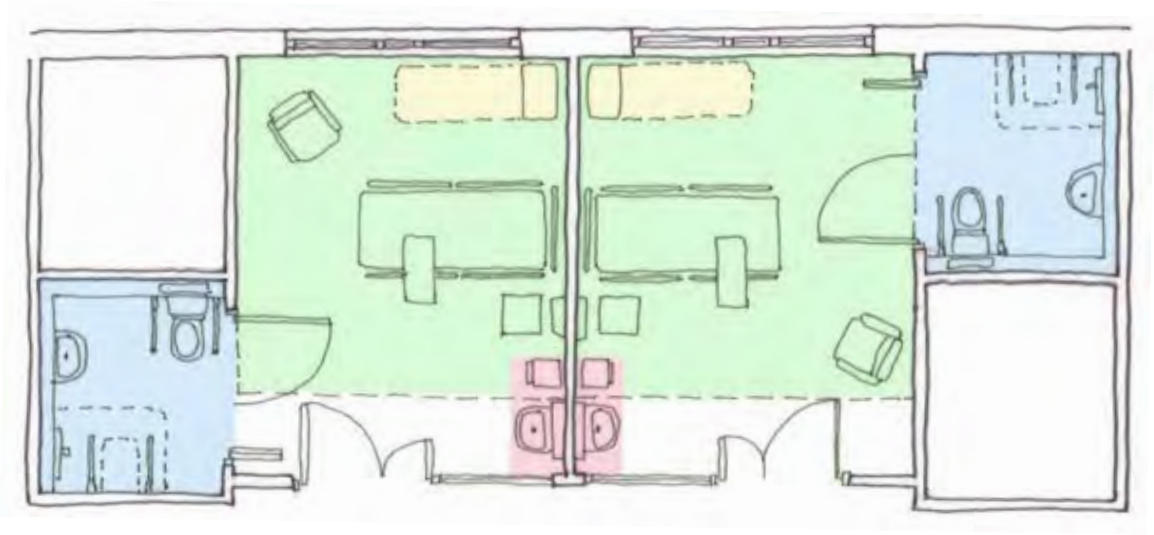
Advantages

- Maximum Observation From Corridor

Disadvantages

- insufficient Natural Light/ Views/ Ventilation
- Daylight Factor approximately 1% at Bed Head
- External Ensuite – remote services
- External Ensuite ‘Short Circuits’ Natural Ventilation
- Reduced room Area Compromises Functional Zones
- Mirrored Room Layout (not repeated)
- Ensuite & WHB opposite Bed Head
- Projecting Ensuite has Structural and Affordability Implications

Single Bed Opportunity A



Core Bed Space

Ensuite Shower Room

Clinical Support Zone

Social (Family) Support Zone

Back to Back Ensuite Bedroom = 16.5 m^2 Ensuite Shower Room = 4.5 m^2

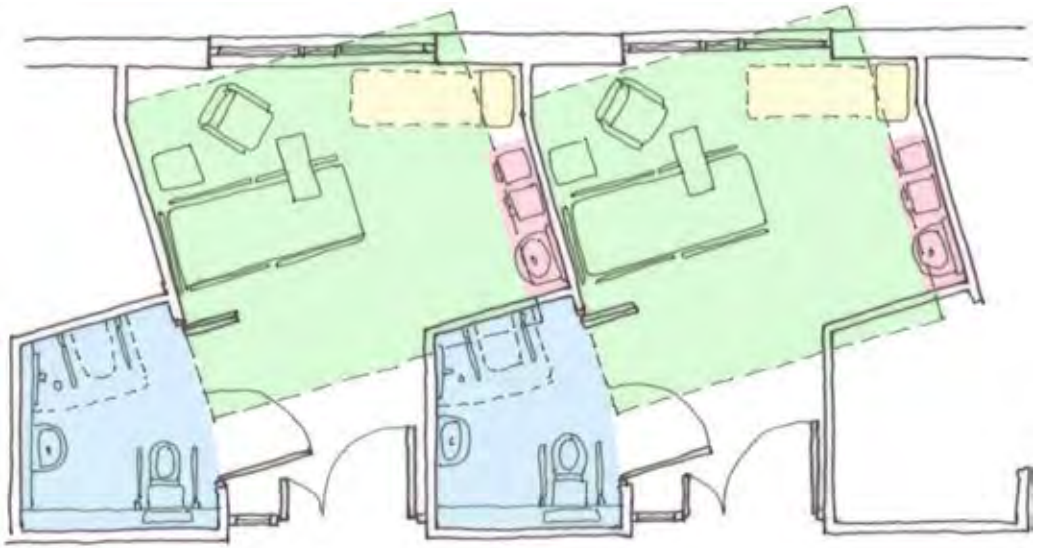
Advantages

- Maximum Observation from Corridor
- Potential for borrowing light in Corridor
- Efficiency of servicing with back to back ensuite
- Easily adapted for isolation lobby
- WHB on Bedhead Wall
- Uniform Façade

Disadvantages

- Mirrored Room Layout (Not repeated)
- Bedhead Opposite Ensuite Potential for Trips/ Falls
- Reduced room area compromise

Single Bed Opportunity B



Core Bed Space

Ensuite Shower Room

Clinical Support Zone

Social (Family) Support Zone

Internal Ensuite

Bedroom = 16.5 m^2

Ensuite Shower Room = 4.5 m^2

Advantages

- Maximum Natural Light / Ventilation/ Views
- Repeated Room Layout
- Ensuite on Bedhead Wall
- Uniform Façade
- Ease of Service Access from Corridor

Disadvantages

- Observation from corridor restricted
- Potential for borrowed light in corridor restricted
- Horizontal Bedhead Services Required
- Reduced room area compromises functional Zones
- Does not easily adapt for isolation room
- WHB opposite Bedhead
- Ensuite Door Potential Conflict with Bedroom Door

Single Bed Opportunity C

Core Bed Space

Ensuite Shower Room

Clinical Support Zone

Social (Family) Support Zone

External Ensuites

Bedroom = 16.5 m^2

Ensuite Shower Room = 4.5 m^2

Advantages

- Maximum Observation from Corridor
- Adequate National Light / Views Ventilation at Bedhead
- Repeated Room Layout
- Ensuite on Bedhead Wall for ease of Transfer
- Uniform Facade

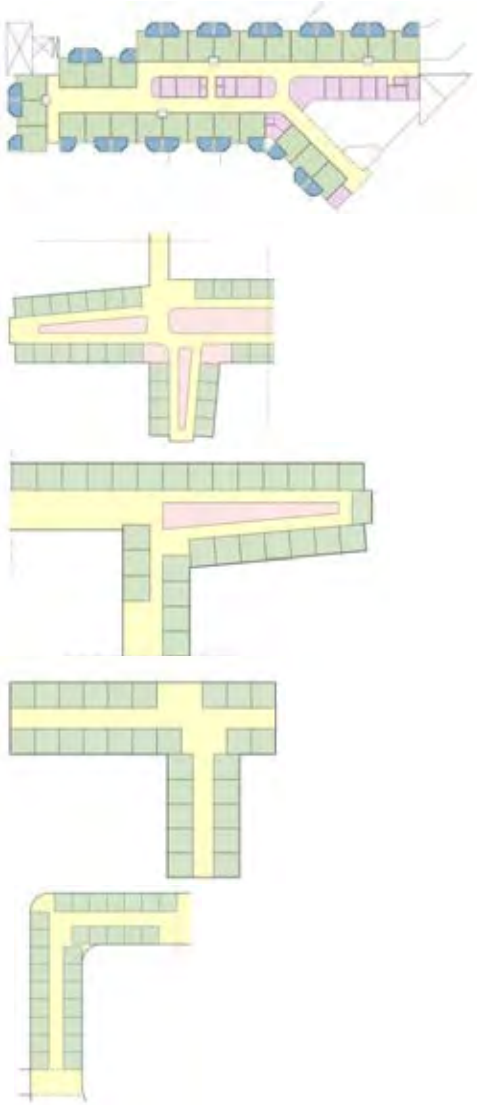
Disadvantages

- External Ensuite Remote servicing
- Ensuite 'short circuits' Natural Ventilation
- Reduced Room Area Compromises Functional Zones
- Does not easily adapt for isolation room
- WHB opposite Bed Head

Ward Analysis

GENERIC WARD SCHEDULED AREA

=1085m^2



Exemplar Ward

1600m^2

Opportunity B

1700m^2

Opportunity D

1350m^2

Opportunity A

1100m^2

Opportunity C

1100m^2

NOT TO SCALE

Engineering Services

Review of exemplar design

Clarify and agree principles

Prepare proposals

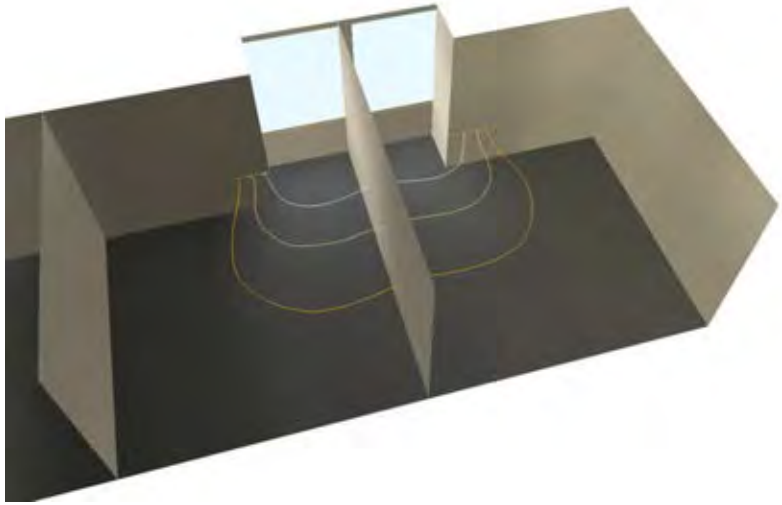
Present and review proposals

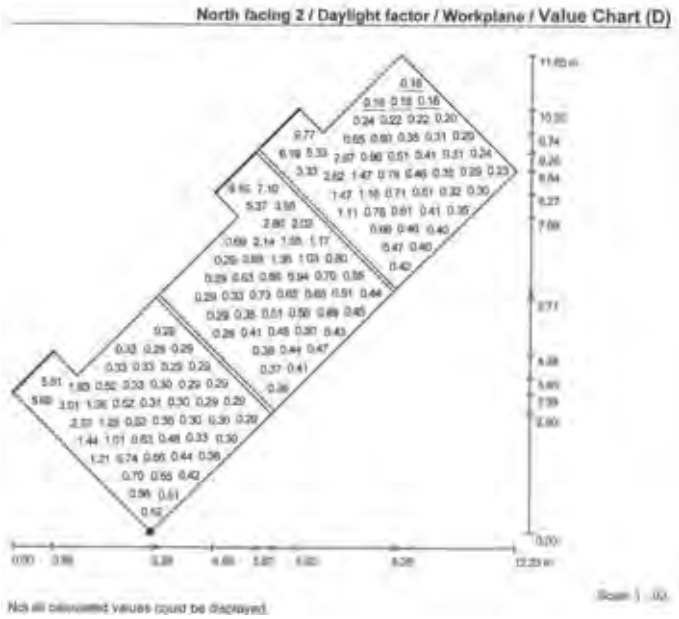
Agenda Items

- Sustainability
- Energy
- Energy centre
- Resilience & Redundancy
- Flexibility
- Some miscellaneous queries

BREEAM – Daylight Analysis of Exemplar Design

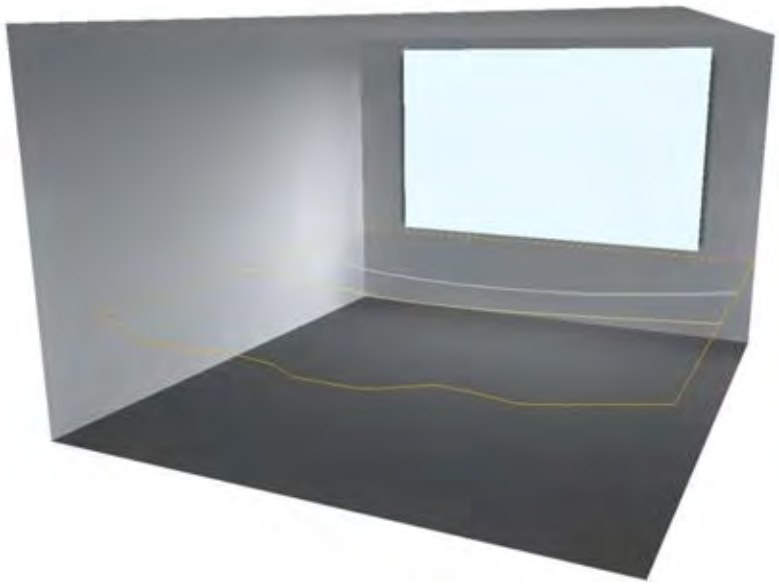
- BREEAM target for daylight 3%
- Review investigations into Exemplar design daylight
- Alternative solutions





BREEAM – Daylight Analysis of Opportunity A

- Daylight Levels approximately 5%



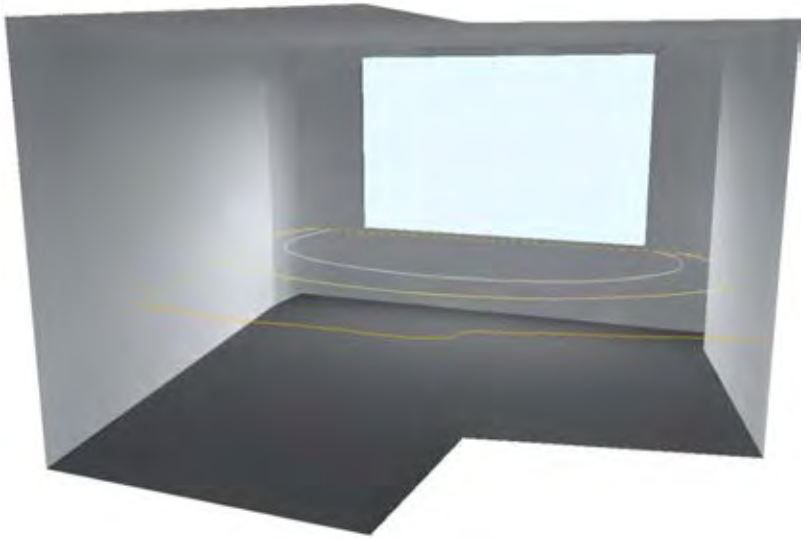
Single bed option 1 / Daylight scene / Workplane / Value Chart (D)

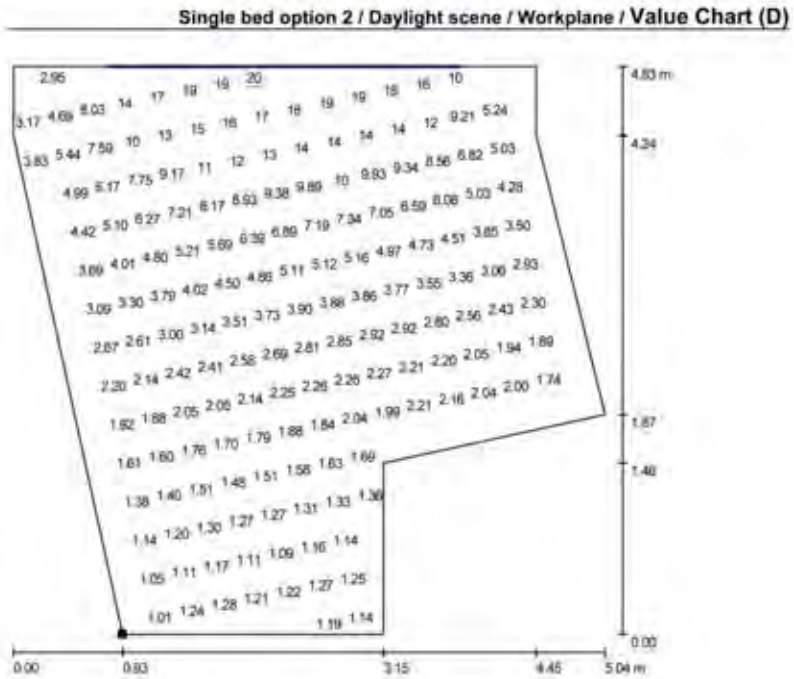
5.45	5.45	12	12	14	14	15	15	15	15	14	14	11	11	5.05	5.05
5.45	5.45	12	12	14	14	15	15	15	15	14	14	11	11	5.05	5.05
5.97	5.97	9.24	9.24	11	11	12	12	12	12	11	11	9.12	9.12	5.87	5.87
5.97	5.97	9.24	9.24	11	11	12	12	12	12	11	11	9.12	9.12	5.87	5.87
4.48	4.48	5.81	5.81	6.86	6.86	7.42	7.42	7.37	7.37	6.84	6.84	5.68	5.68	4.40	4.40
4.48	4.48	5.81	5.81	6.86	6.86	7.42	7.42	7.37	7.37	6.84	6.84	5.68	5.68	4.40	4.40
3.27	3.27	3.68	3.68	4.27	4.27	4.57	4.57	4.61	4.61	4.24	4.24	3.78	3.78	3.33	3.33
3.27	3.27	3.68	3.68	4.27	4.27	4.57	4.57	4.61	4.61	4.24	4.24	3.78	3.78	3.33	3.33
2.32	2.32	2.51	2.51	2.63	2.63	2.84	2.84	2.83	2.83	2.61	2.61	2.55	2.55	2.37	2.37
2.32	2.32	2.51	2.51	2.63	2.63	2.84	2.84	2.83	2.83	2.61	2.61	2.55	2.55	2.37	2.37
1.73	1.73	1.93	1.93	2.04	2.04	2.08	2.08	2.04	2.04	2.04	2.04	1.95	1.95	1.78	1.78
1.73	1.73	1.93	1.93	2.04	2.04	2.08	2.08	2.04	2.04	2.04	2.04	1.95	1.95	1.78	1.78
1.52	1.52	1.71	1.71	1.71	1.71	1.76	1.76	1.73	1.73	1.64	1.64	1.74	1.74	1.55	1.55
1.52	1.52	1.71	1.71	1.71	1.71	1.76	1.76	1.73	1.73	1.64	1.64	1.74	1.74	1.55	1.55
1.31	1.31	1.39	1.39	1.34	1.34	1.36	1.36	1.52	1.52	1.29	1.29	1.41	1.41	1.31	1.31
1.31	1.31	1.39	1.39	1.34	1.34	1.35	1.36	1.52	1.52	1.29	1.29	1.41	1.41	1.31	1.31

4.30 m
0.00
0.00
4.00 m

BREEAM – Daylight Analysis of Opportunity B

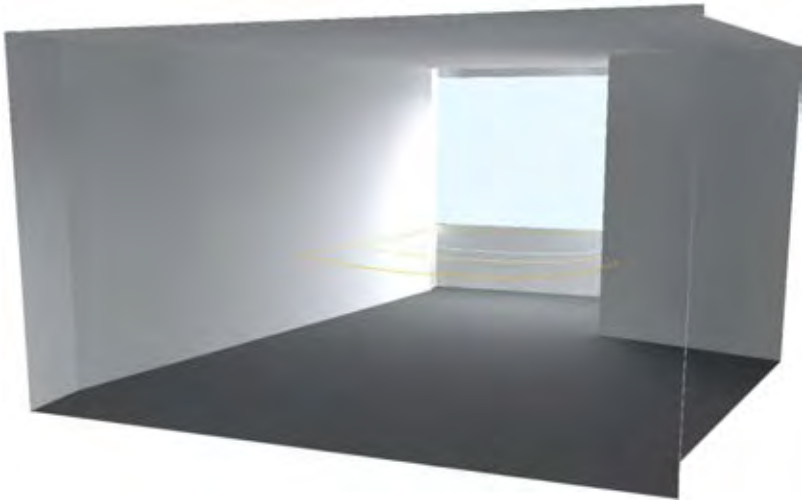
- Daylight Levels approximately 5%

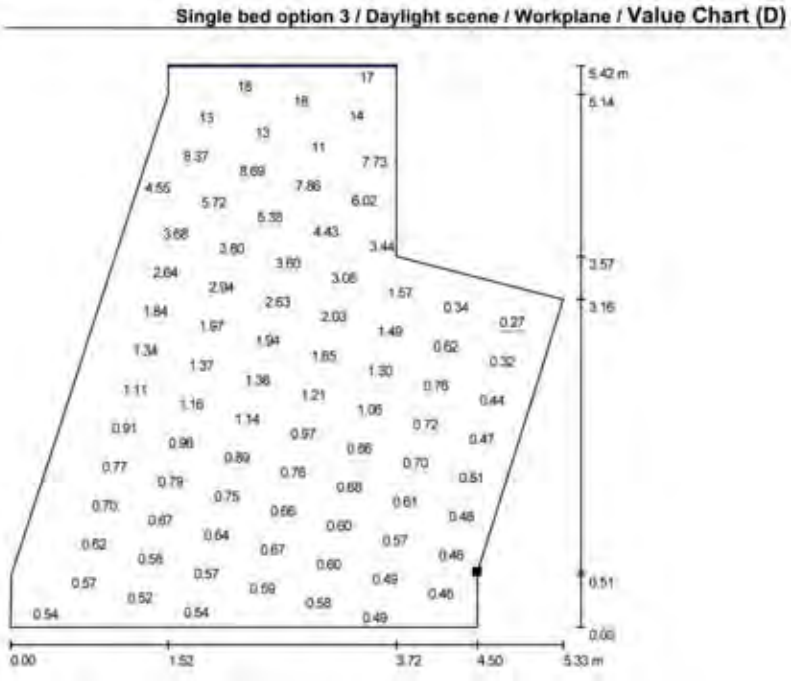




BREEAM – Daylight Analysis of Opportunity C

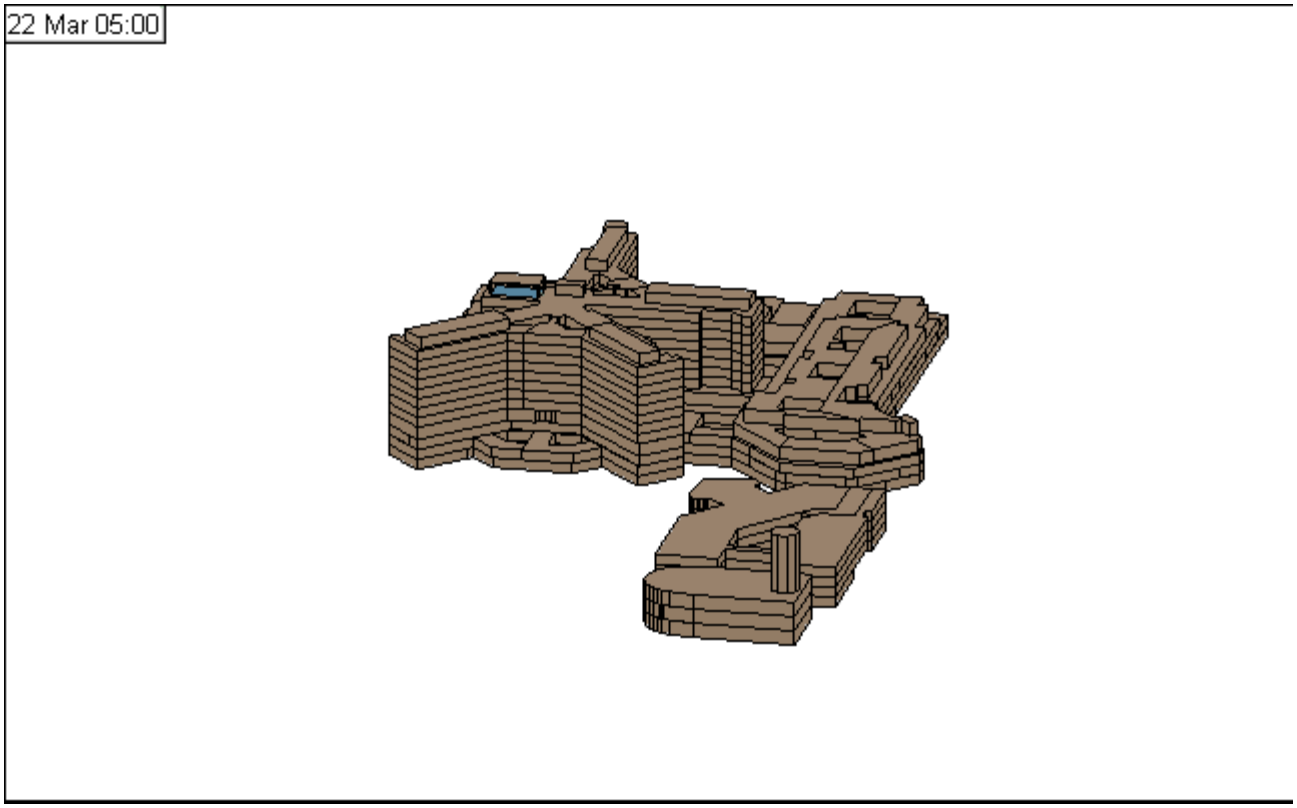
- Daylight Levels approximately 3%





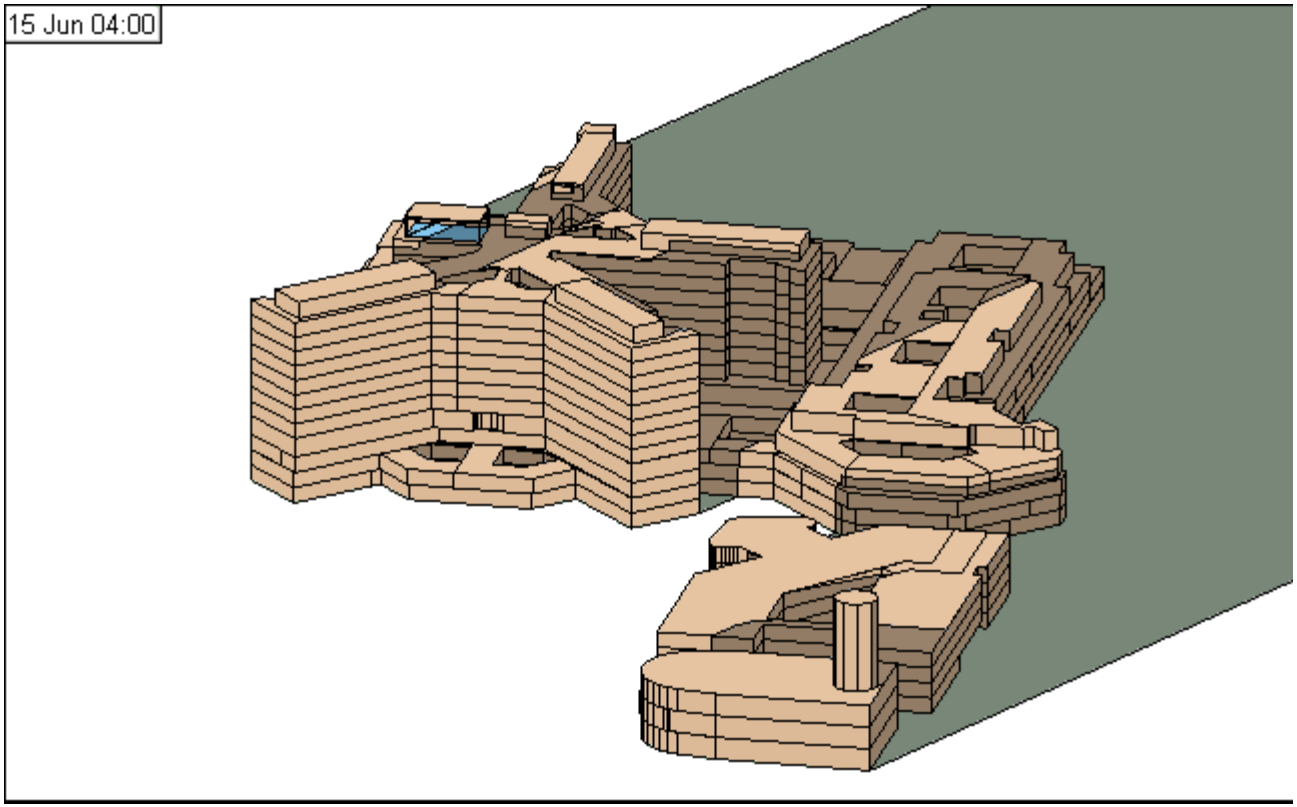
Masterplan - Shading

- Review of building mass on site shading



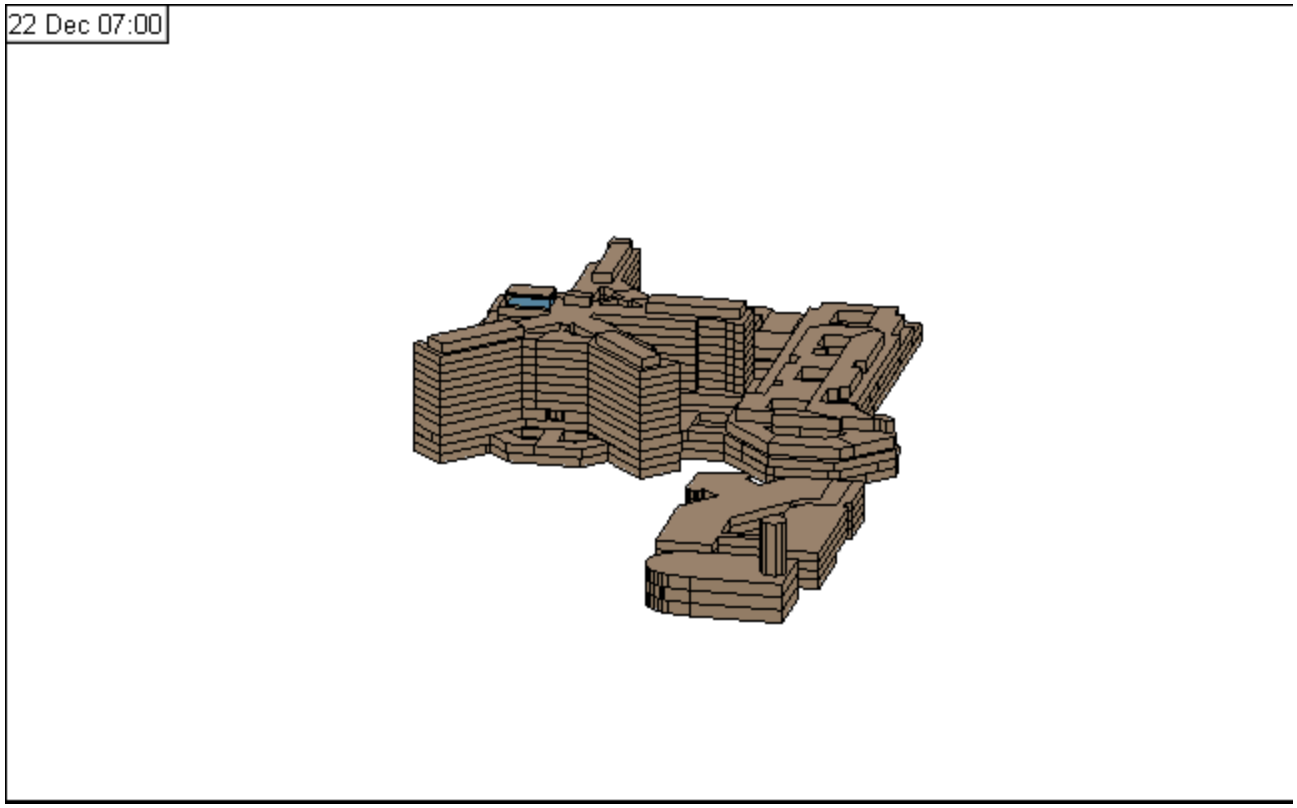
Masterplan - Shading

- Review of building mass on site shading

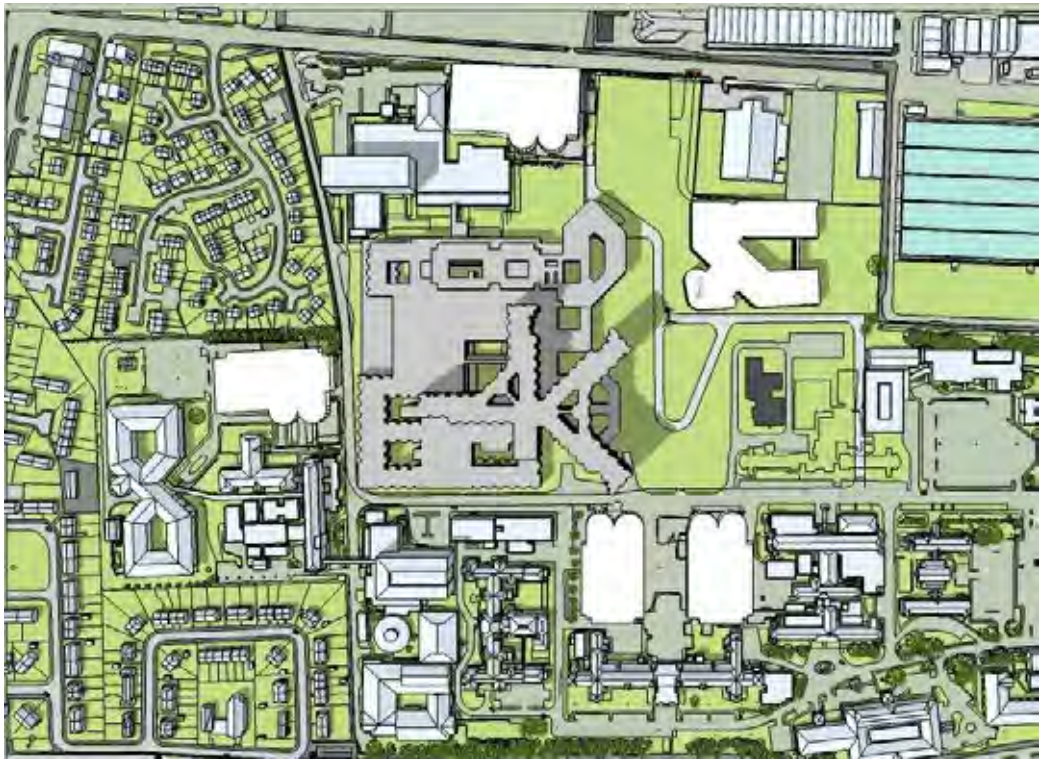


Masterplan - Shading

- Review of building mass on site shading



Exemplar



Master Plan

Main Entrance

Children's Entrance

Isometric

Ground Floor

First Floor

Second Floor

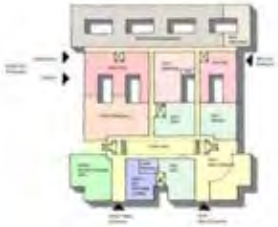
Third Floor

Fourth Floor

Opportunity A

Master Plan

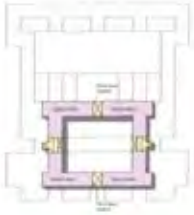
Ground Floor



First Floor

Second Floor

Fourth Floor



Main Entrance

Children's Entrance

Isometric

Opportunity B

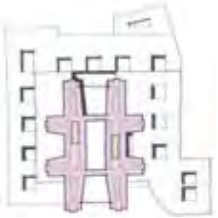
Master Plan

Ground Floor

First Floor

Second Floor

Fourth Floor

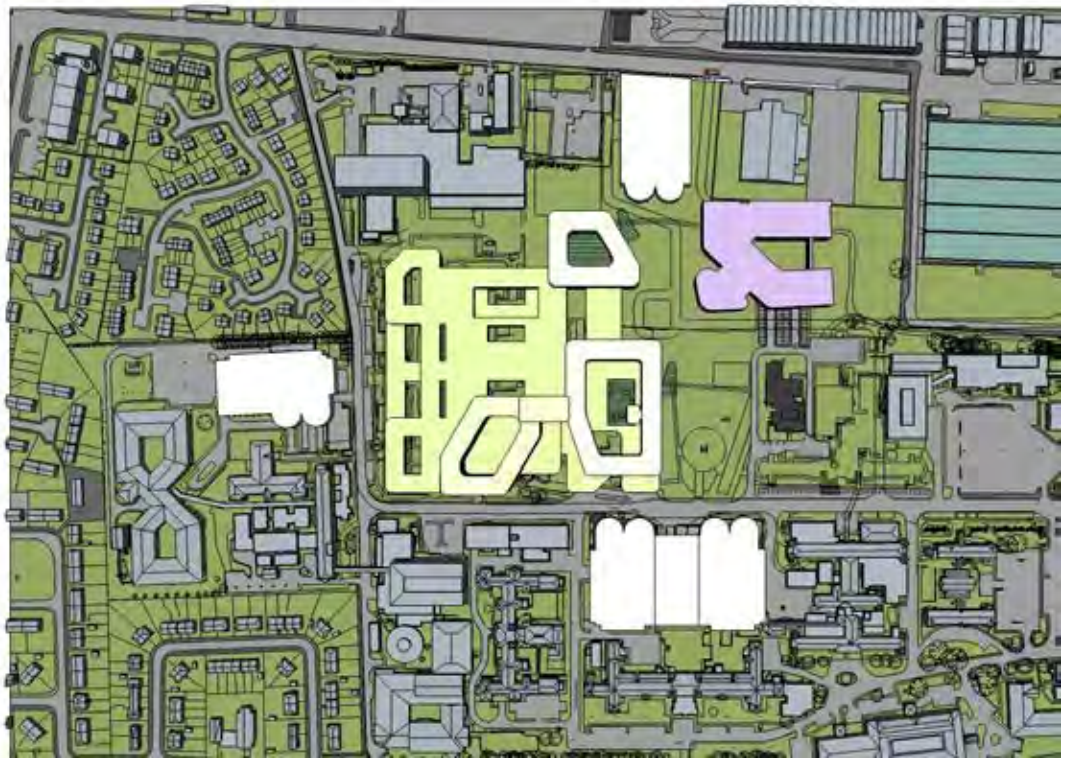


Main Entrance

Children's Entrance

Isometric

Opportunity C



Master Plan

Main Entrance

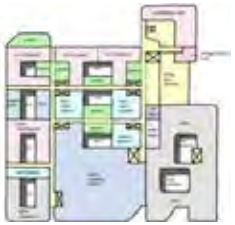
Children's Entrance

Isometric

Ground Floor

First Floor

Second Floor



Fourth Floor

Opportunity D

Master Plan

Main Entrance

Children's Entrance

Isometric

Ground Floor

First Floor

Second Floor

Fourth Floor

Opportunity A

Opportunity B

Opportunity C

Opportunity D

NOTES
Check all dimensions on site. Do not scale from this drawing
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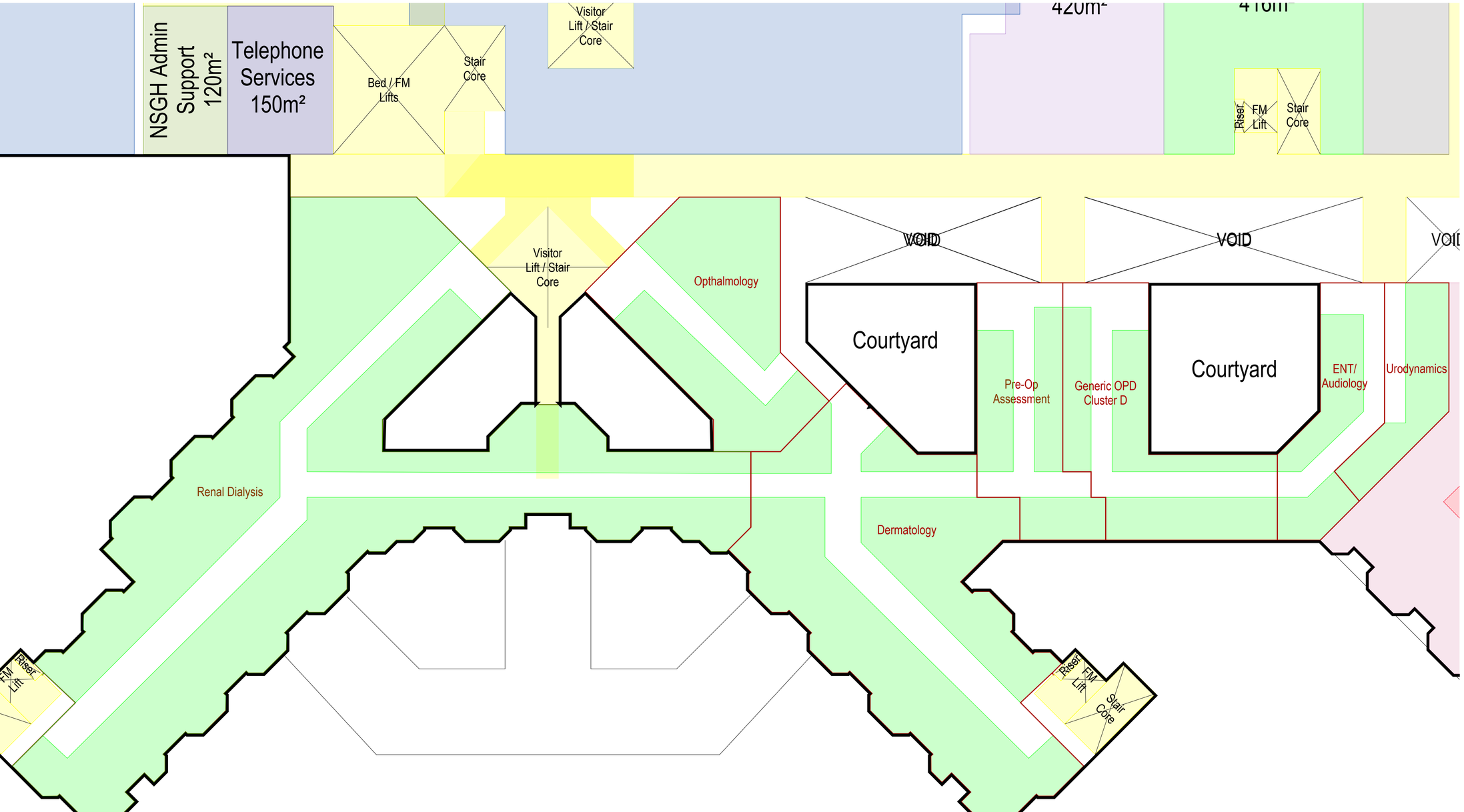

Revisions

Project
NEW SOUTH GLASGOW HOSPITAL

Client
NHS GREATER GLASGOW AND CLYDE

Title
OUTPATIENT (ADULTS) CLINIC ADJACENCIES

Drawing No. Revision
PD-HLM-L(00)02-X-OP-001*

Scale @ A1: 1:200
Drawn: DM
Date: 02/06/2009
Checked: *

HLM ARCHITECTS

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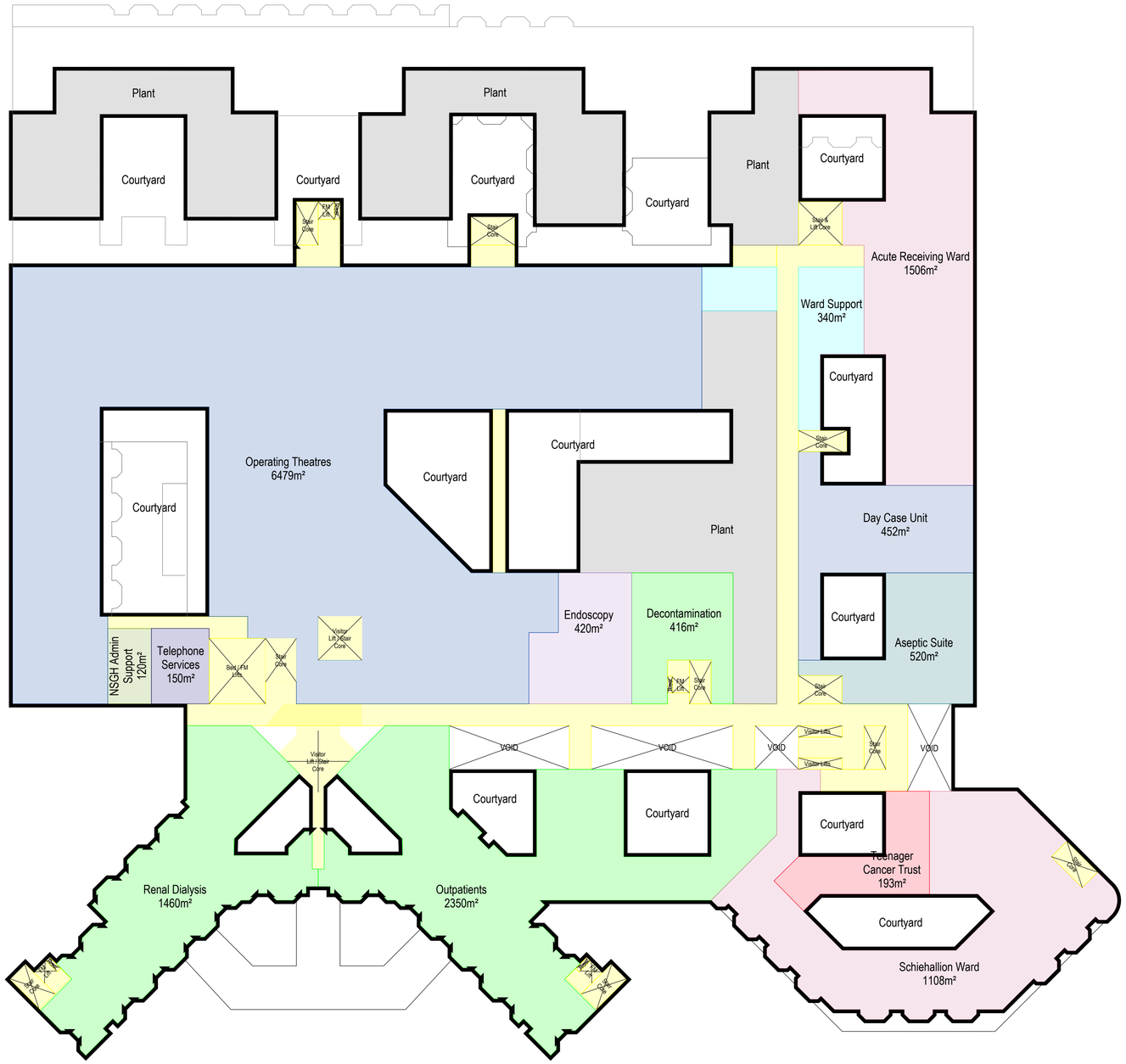

A	Day Case Unit Added	08/05/09	JD

Revisions

Project

NEW SOUTH GLASGOW HOSPITAL

Client

NHS GREATER GLASGOW AND CLYDE

Title

DEPARTMENTAL ADJANCIES LEVEL 02

Drawing No. Revision

PD-HLM-L(00)02-X-XX-001A

Scale @ A1	Drawn
1:500	JCD
Date	Checked
28/04/2009	HS

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A52787523

NHS Greater Glasgow and Clyde

- Bidder B
- New South Glasgow Hospitals
- Design Dialogue Meeting 5

NHS Greater Glasgow and Clyde

Design Dialogue Meeting Agenda Proposals

DDM 1

Design Dialogue Meeting Agenda Proposals

Design Dialogue Meeting 1

Present Proposals for Design Dialogue Meeting (DDM) Format

Proposal of 2xconcurrent separate Workstreams through each DDM

1.1 Design
1.2 Technical

DDM 2

Design Dialogue Meeting Agenda Proposals

Design Dialogue Meeting 2
INITIAL CONCEPT DESIGN STAGE

Design
Review Exemplar Design
Review Masterplan Options
Single Bed Ward Options
Tower & Podium Options
Initial 1:500 Concept Plans
Initial 3D Site Massing

Technical
As Agenda

DDM 3

Design Dialogue Meeting Agenda Proposals

Design Dialogue Meeting 3

Design
Masterplan
1:500 Concept Plans
1:200 Ward Tower Module, Single Bedroom
3D Site Massing Development
Indicative elevational treatment concepts

Technical
M&E Design Strategy Review
Structural Design Stategy Review
Cladding Design Strategy Review
Fire Strategy Review
Acoustic Strategy Review
Equipment Strategy Review

DDM 4

Design Dialogue Meeting Agenda Proposals

Design Dialogue Meeting 4
DETAILED DESIGN STAGE

Design
Masterplan
Architectural Concept

Whole Hospital 1:500 Concept

1:200 Ward Plans

Single Bed Ensuites

Adult Hospital 1:200 Department Design
Accident & Emergency
Adult Theatres
Adult Assessment Ward
Adult Radiology
Adult Critical Care

Childrens Hospital 1:200 Department Design
Childrens Ward
Childrens Accident & Emergency
Childrens Radiology
Children's Observation Ward
Children's Theatres

Technical
Sustainability
Energy Centre
Resilience
Security
Fire
Acoustics
Facilities M anagement

DDM 5

Design Dialogue Meeting Agenda Proposals

Design Dialogue Meeting 5

Design
Masterplan
Architectural Concept/ Scale/ Character

Whole Hospital 1:500 Concept

Adult Hospital 1:200 Department Design
-Adult Ward
-Adult A&E
-Adult Theatres
-Adult Radiology
-Adult Critical Care
Architectural Vision

Children's Hospital 1:200 Department Design
-Children's Ward
-Children's Ground Floor OPD/Atrium
-Children's Theatres
-Children's Radiology
Architectural Vision

Art
RFI's

Technical
M&E Detail Design
- BREEAM
- Engineering principles/ distribution
- Energy Centre Strategy/ Distribution
- Environment
- RFI's

Structural Detail Design
- Framing
- Civil Works

Fire
- Strategy
- Engineering

FM
Strategy Review

MAY	June	2 Weeks July

Design Dialogue Meeting 5

Design Dialogue Meeting Agenda Proposals

Design Dialogue Meeting 5
DETAILED DESIGN STAGE

Design
Masterplan
Architectural Concept/ Scale/ Character

Whole Hospital 1:500 Concept

Adult Hospital 1:200 Department Design
-Adult Ward
-Adult A&E
-Adult Theatres
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Children's Hospital 1:200 Department Design
-Children's Ward
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-Children's Radiology
Architectural Vision

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M&E Detail Design
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- Engineering priciples/ distribution
- Energy Centre Strategy/ Dristibution
- Environment
- RFI's

Structural Detail Design
- Framing
- Civil Works

Fire
- Strategy
- Engineering

FM
Strategy Review

Agenda

Overview

Agenda Items

Approx 30 mins

Breakout 1.

Masterplanning, Architecture,, 1:500 & 1:200 Reviews, Art, RFI's

Breakout 2

BREEAM, Energy Centre, Engineering, Structure, Fire, FM

Approx. 3 hours

Summary

Dialogue, Process, Board/ Brookfield Scheme to date

Approx. 30 mins

Masterplanning & Landscape Design

Master Plan Concept Plan

The Arrival Square

The Children's Park

Views and Entrances

Public Art and Cultural Strategy

NHS Greater Glasgow and Clyde

Architecture and Health Planning

Architectural Concept

1:500 Concept Plans

1:200 Adult and Children's Ward Plans

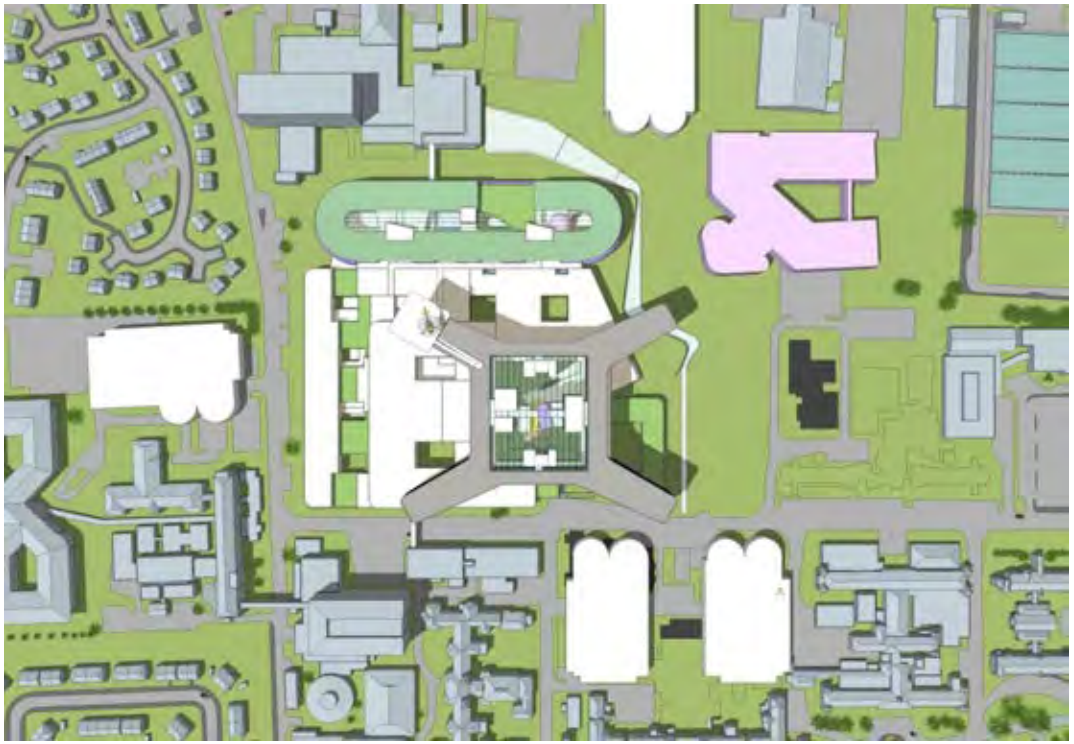
Children's Hospital 1:200 Departmental Layouts

Adults Hospital 1:200 Departmental Layouts

Models

Art Strategy

Proposed Design



Master Plan

Main Entrance

Children's Entrance

Isometric

Ground Floor

First Floor

Second Floor

Third Floor

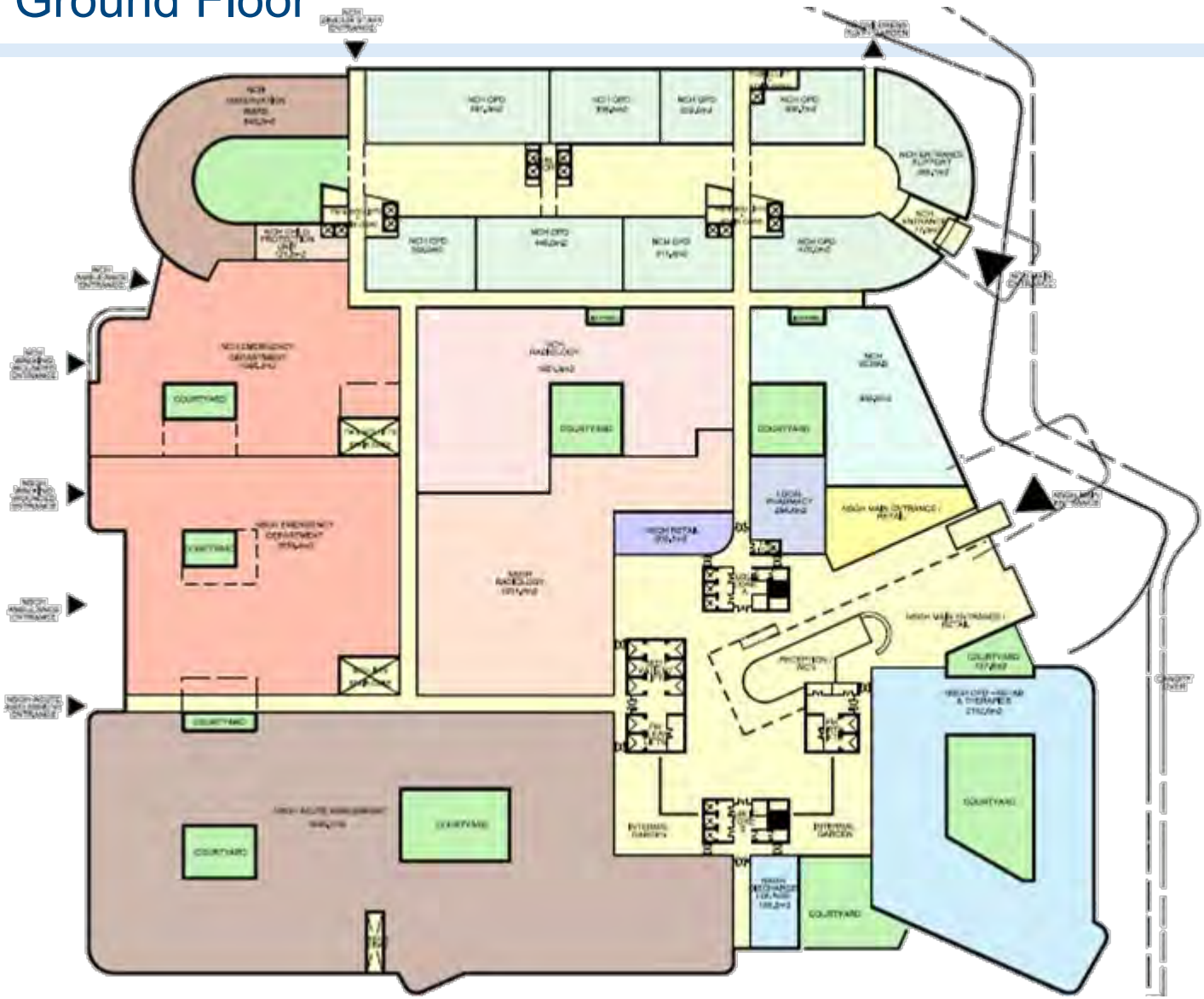
Fourth Floor

3D Main Entrance

3D Section

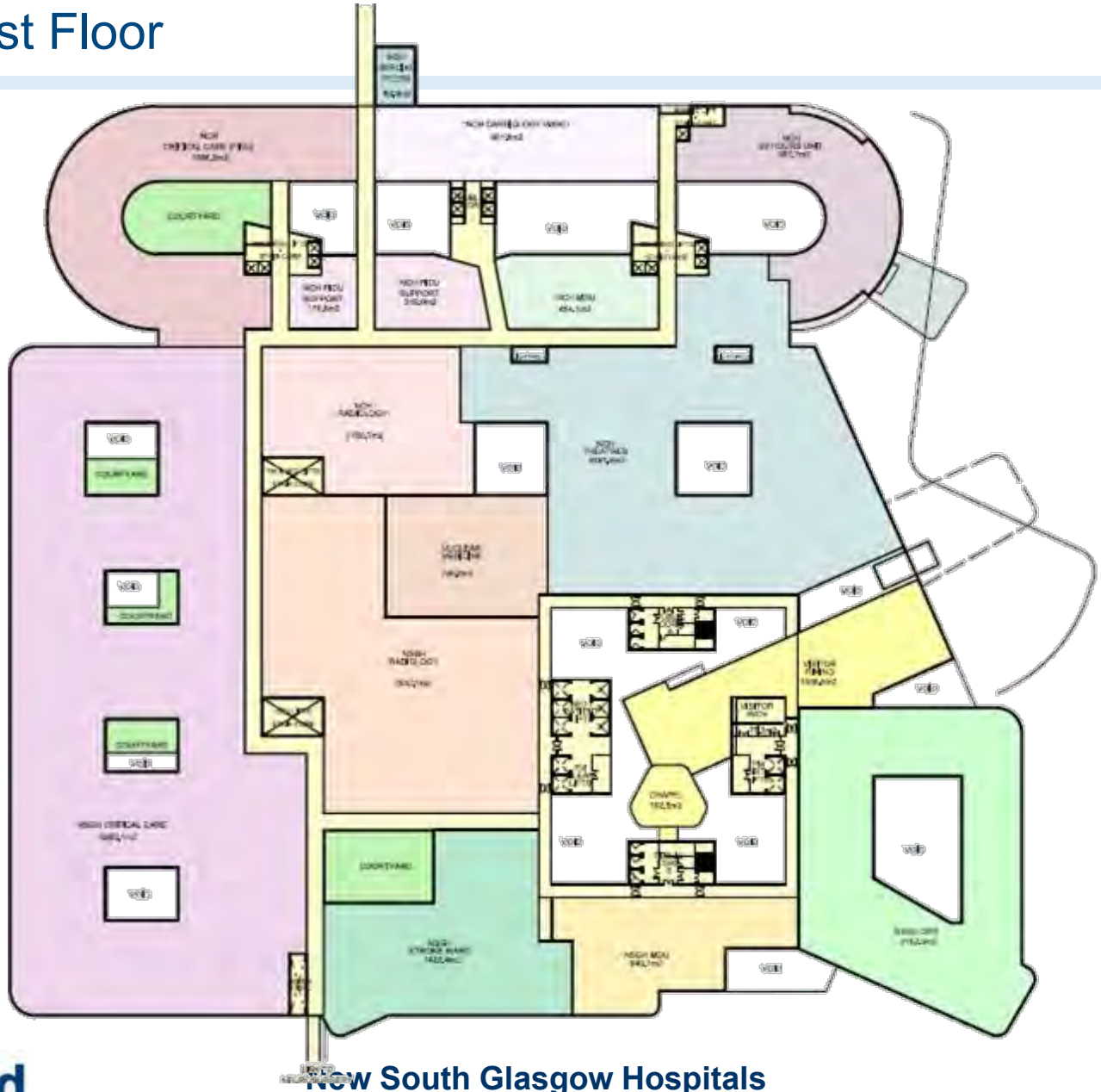
NHS Greater Glasgow and Clyde

Ground Floor



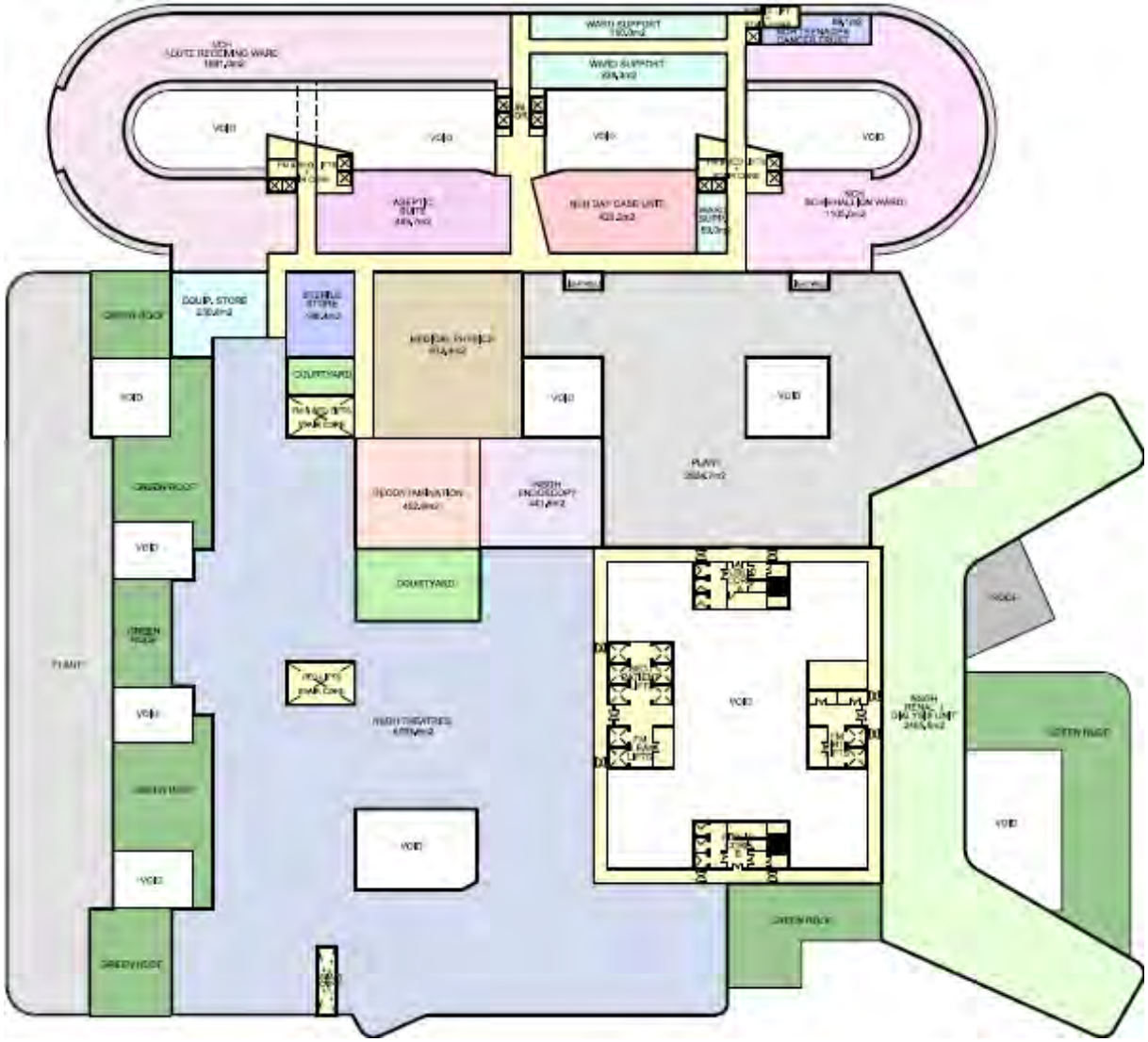
NHS Greater Glasgow and Clyde

First Floor



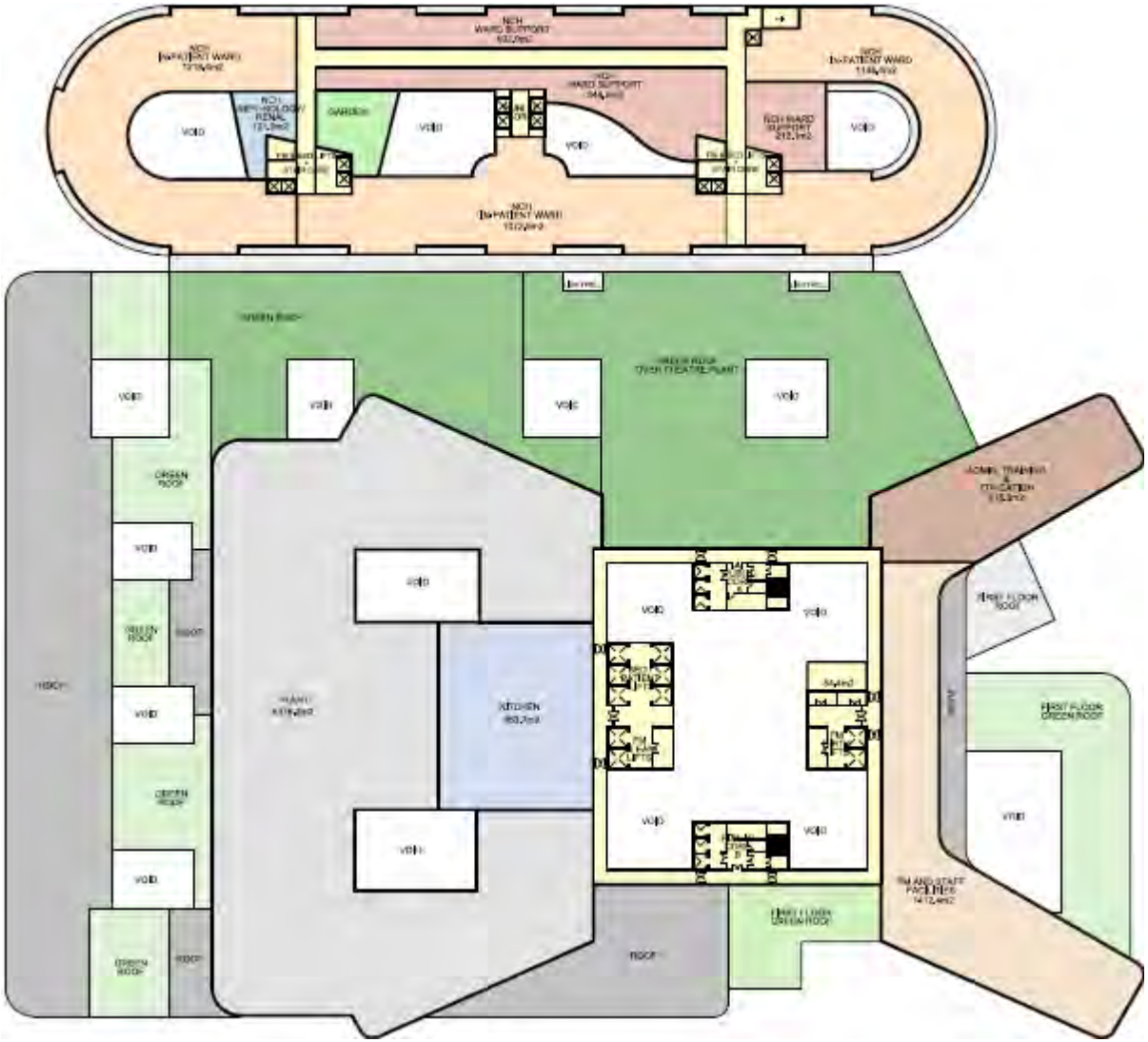
NHS Greater Glasgow and Clyde

Second Floor



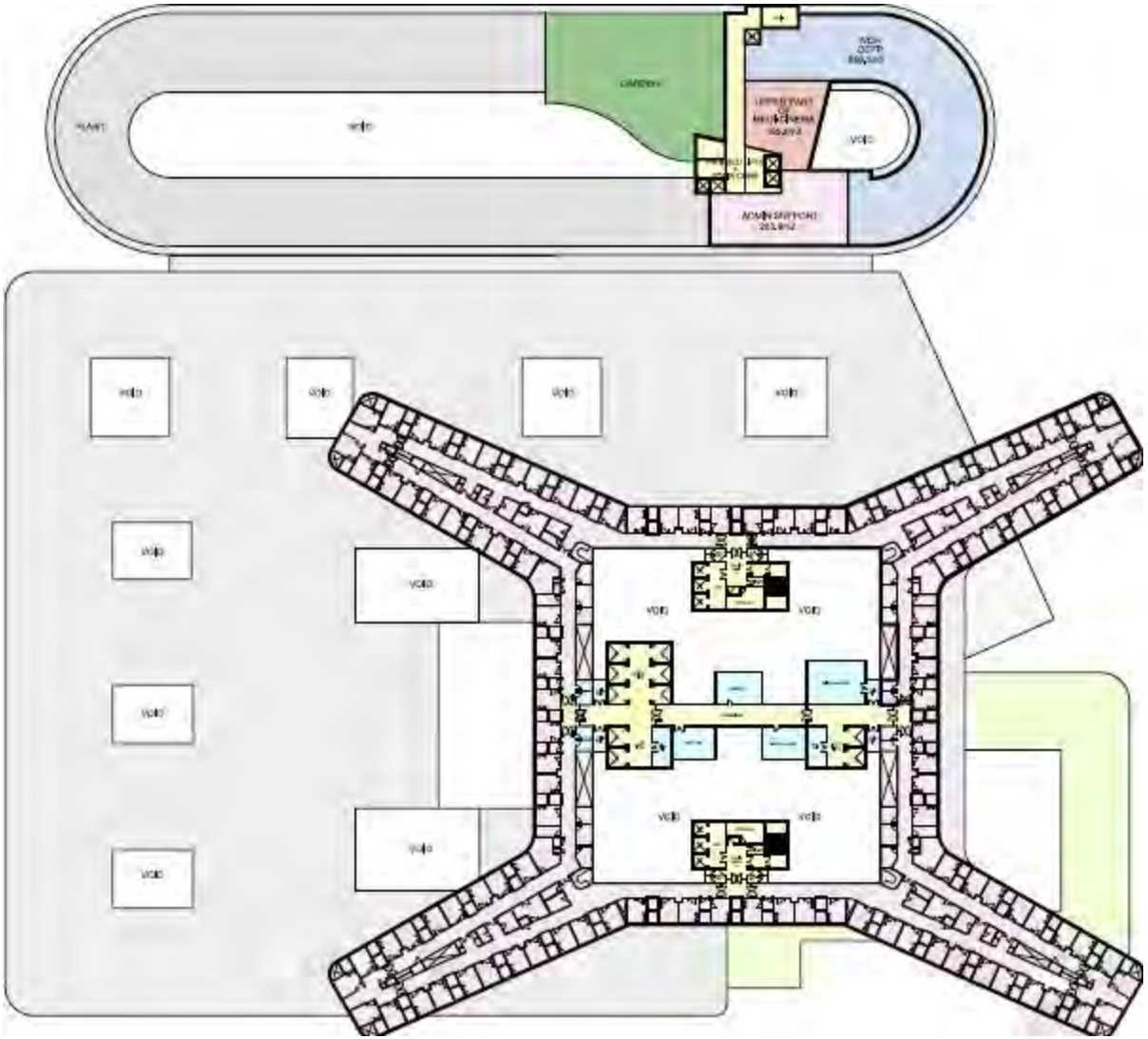
NHS Greater Glasgow and Clyde

Third Floor

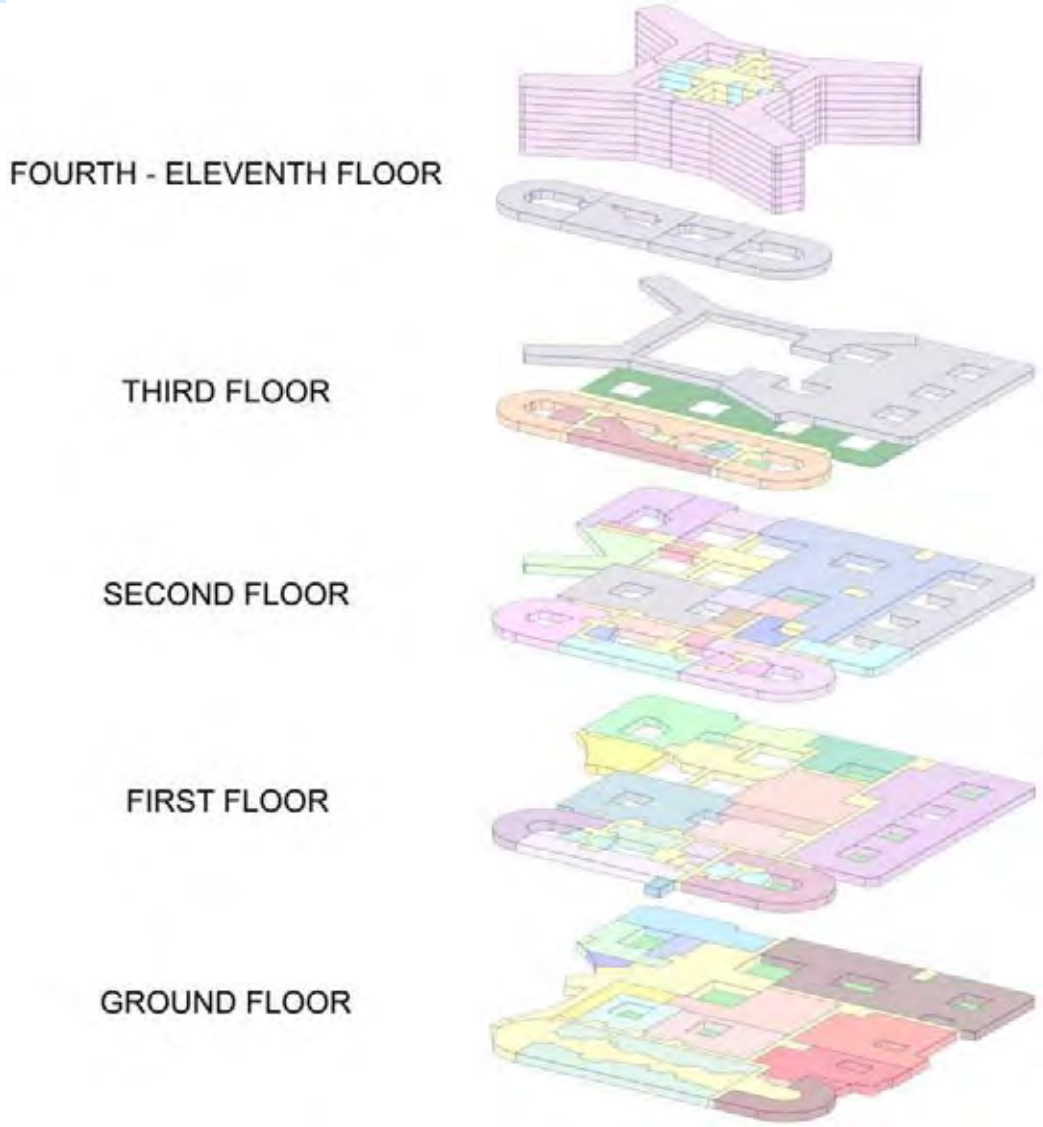


NHS Greater Glasgow and Clyde

Fourth Floor



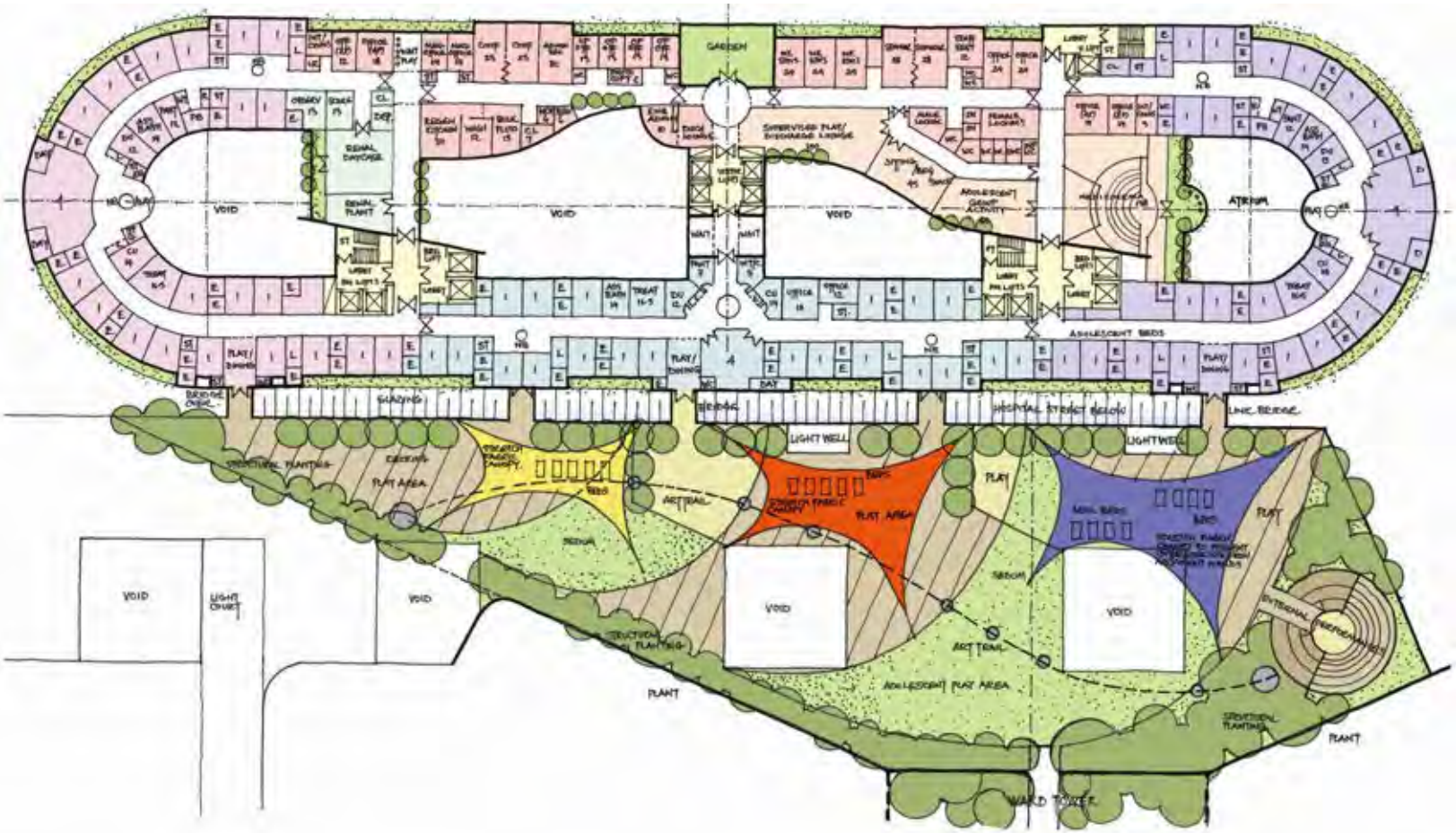
Stacking Diagram



NHS Greater Glasgow and Clyde

Children's Hospital 1:200 Planning

Roof Access



Children's Hospital 1:200 Planning

OPD

NHS Greater Glasgow and Clyde

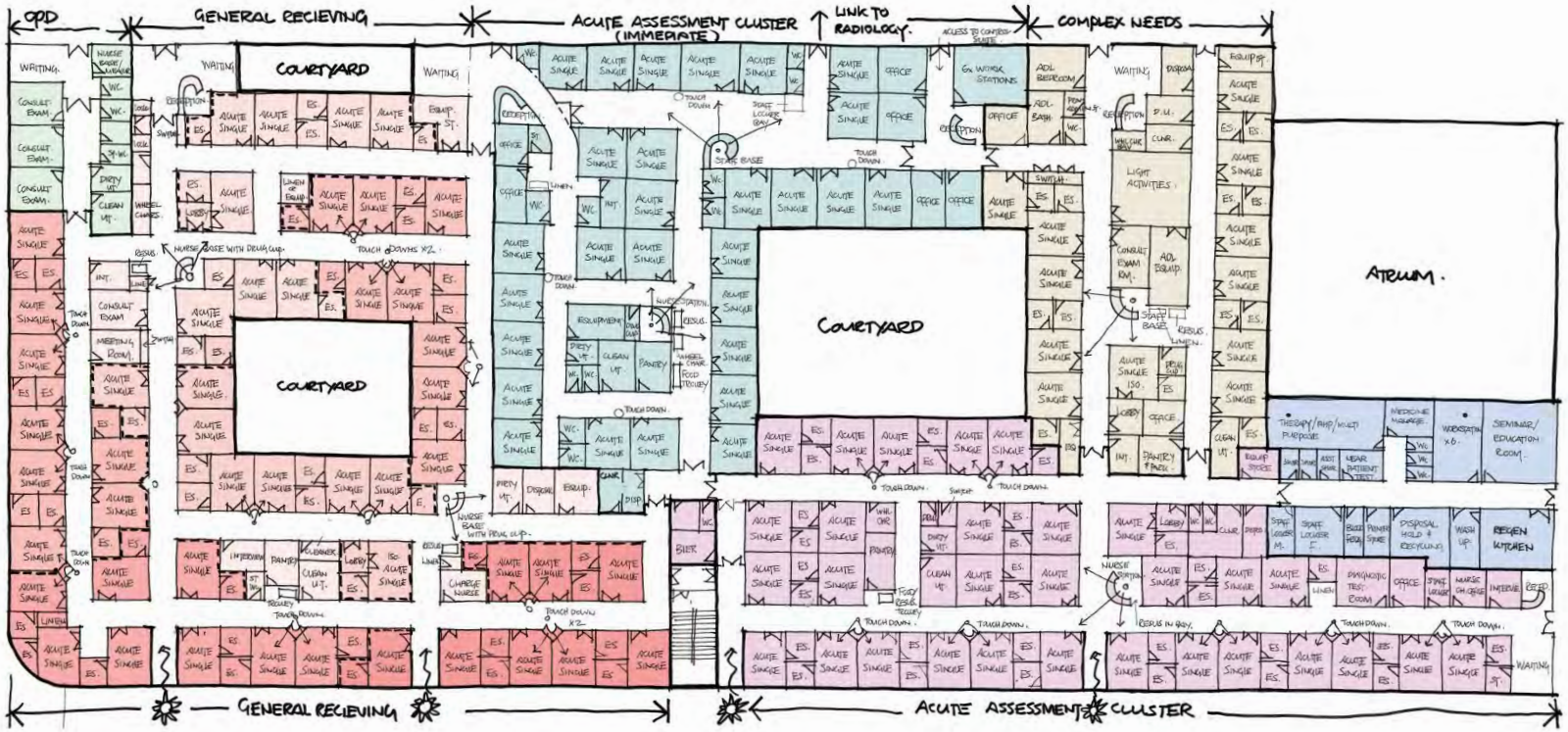
Children's Hospital 1:200 Planning

Roof Access

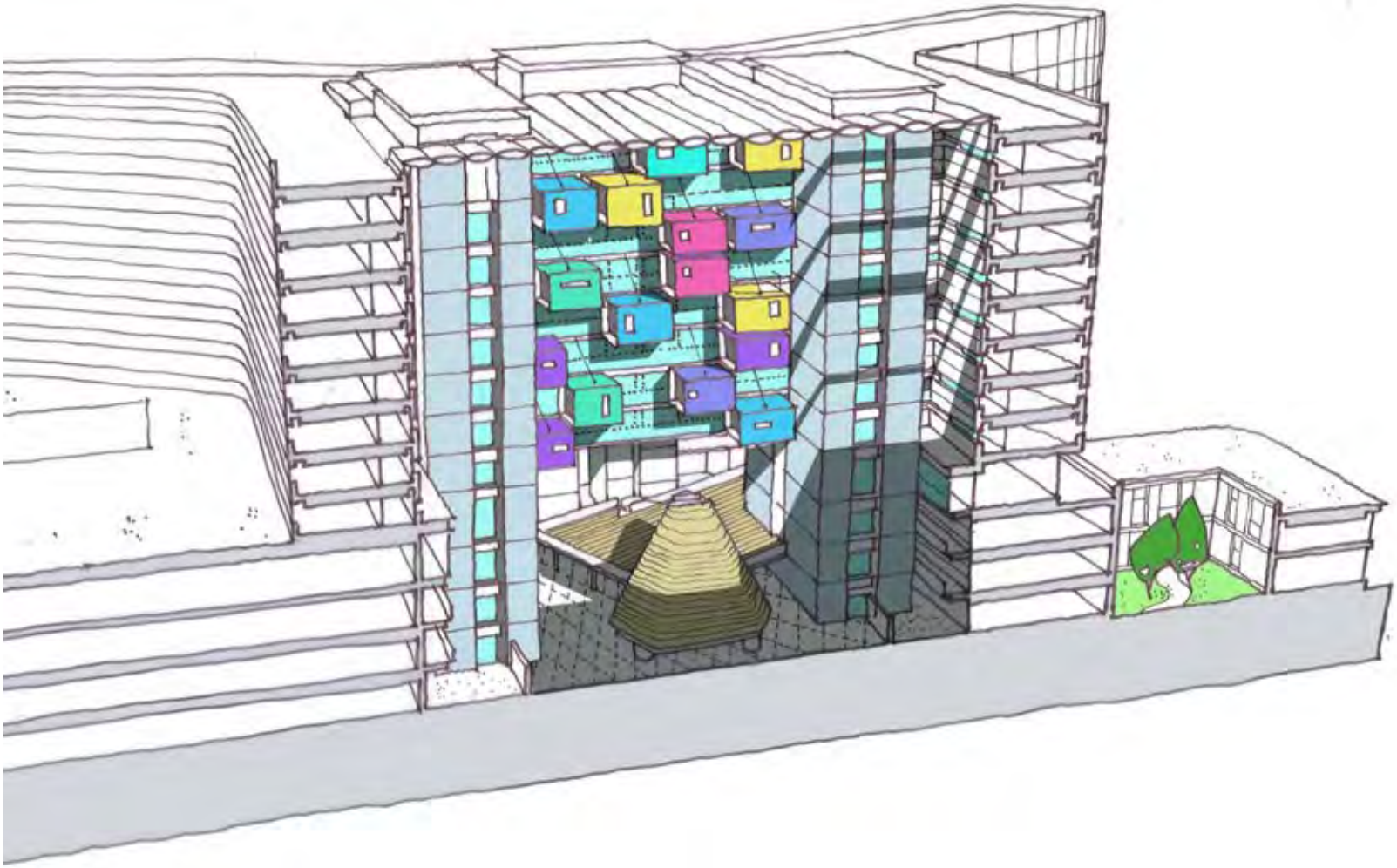
OPD

Adult Hospital 1:200 Planning

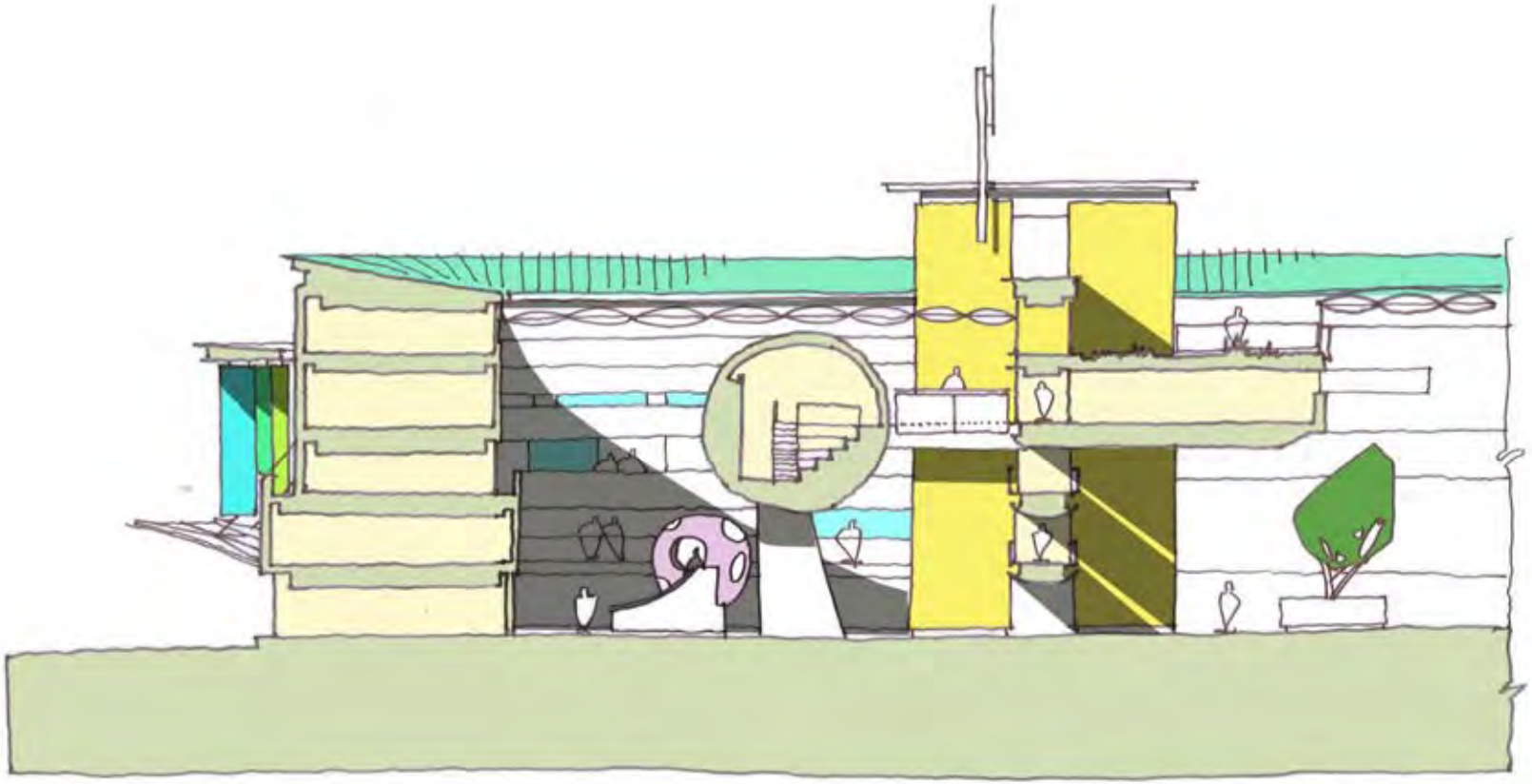
Acute Assessment



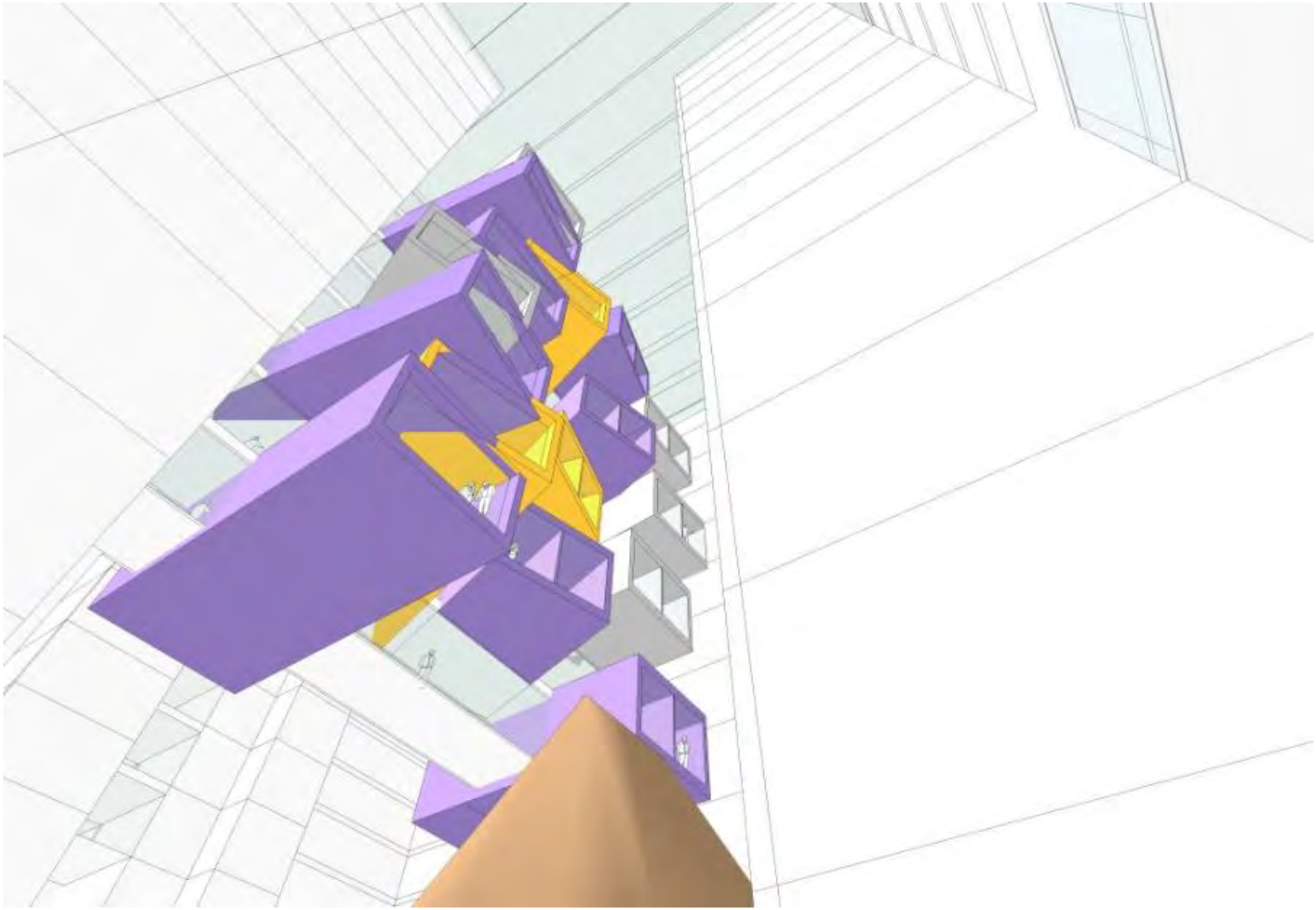
3D Sections Main Atrium



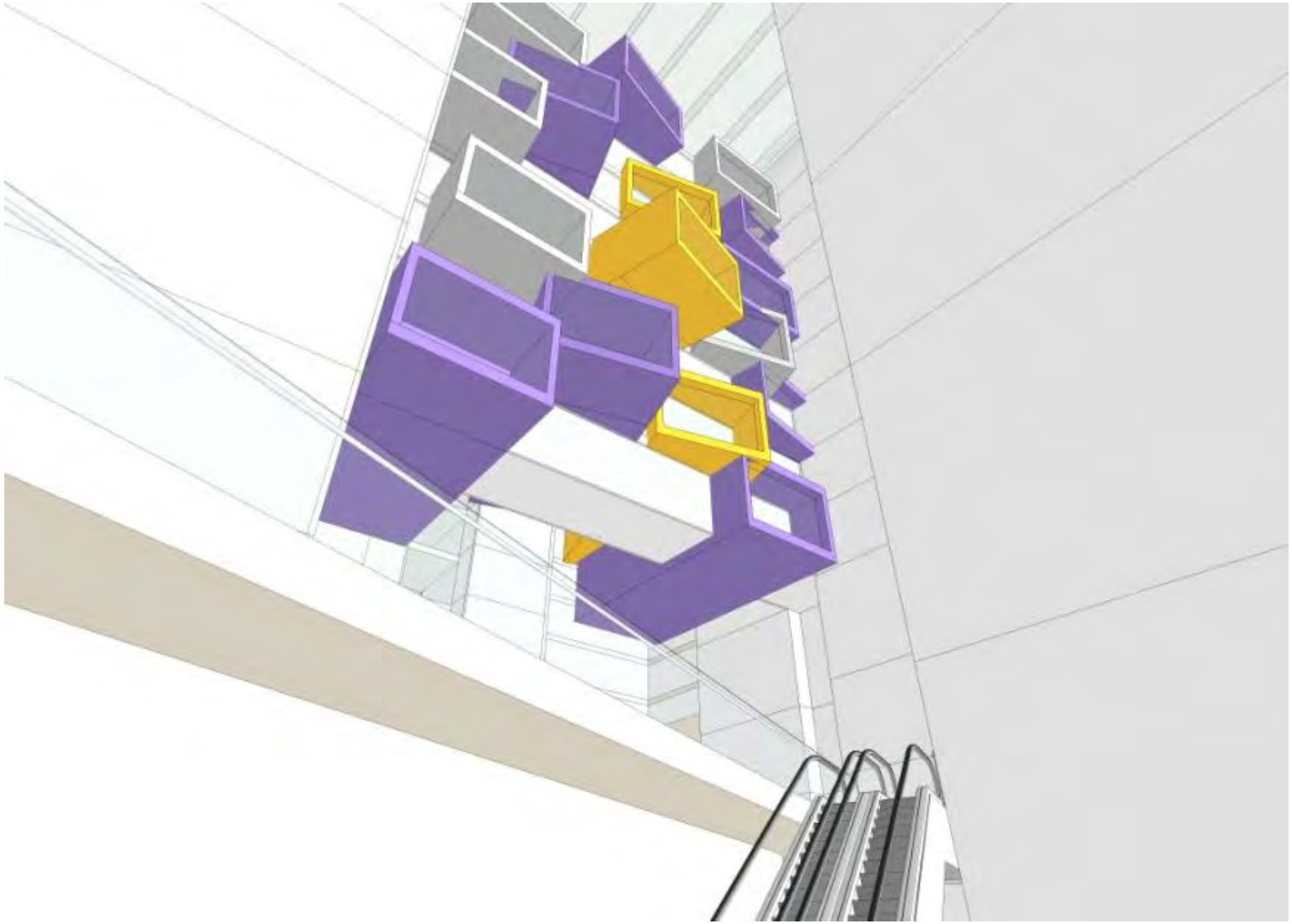
3D Sections – Children's Atrium



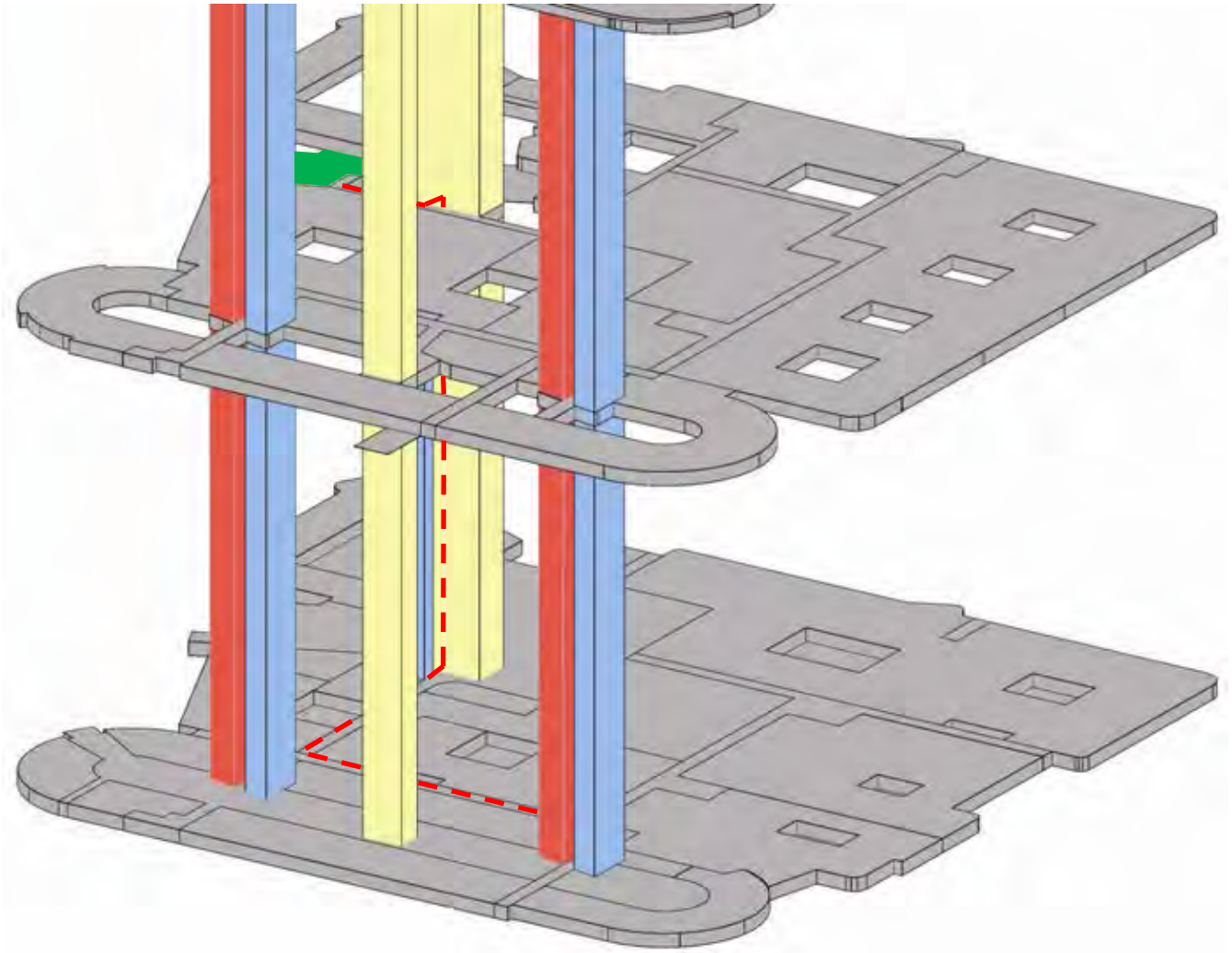
3D Images of Bridge Link Support Pods



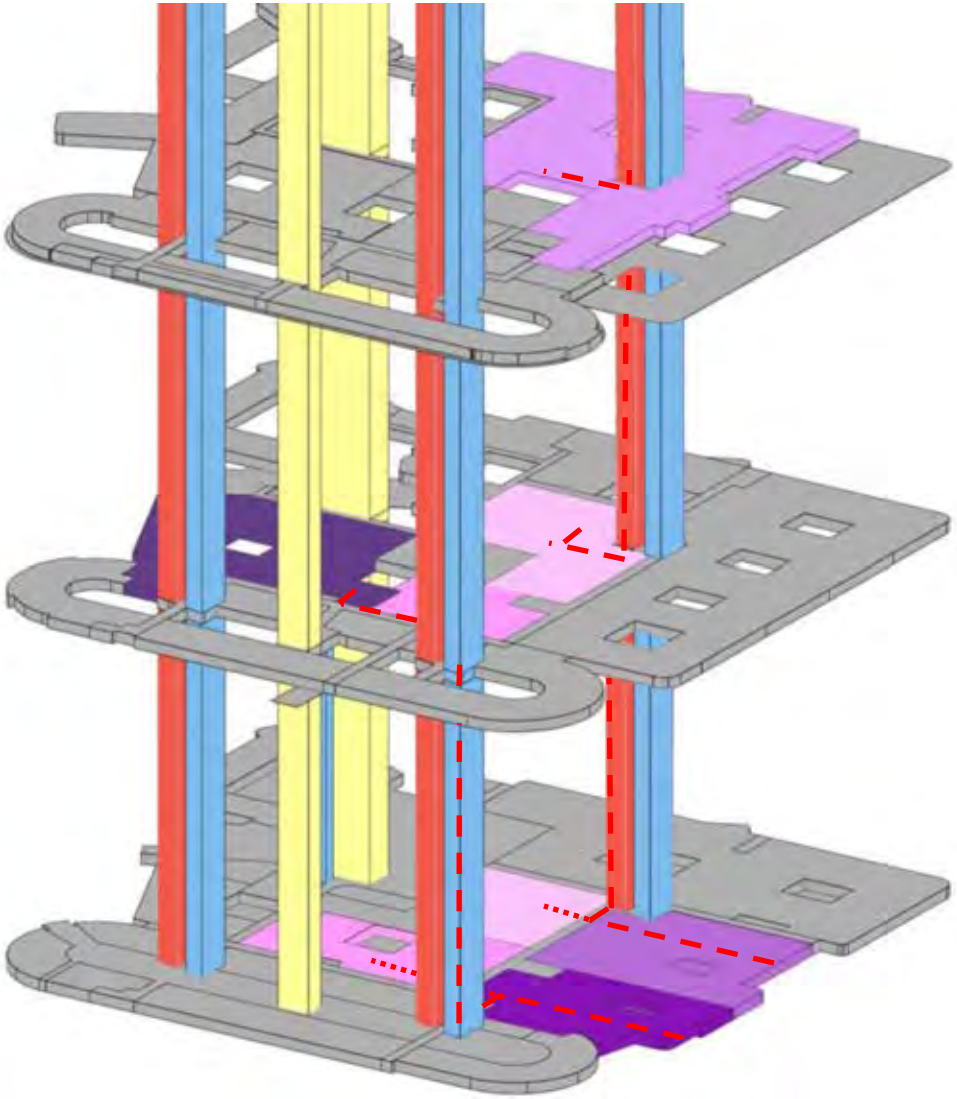
3D Images of Bridge Link Support Pods



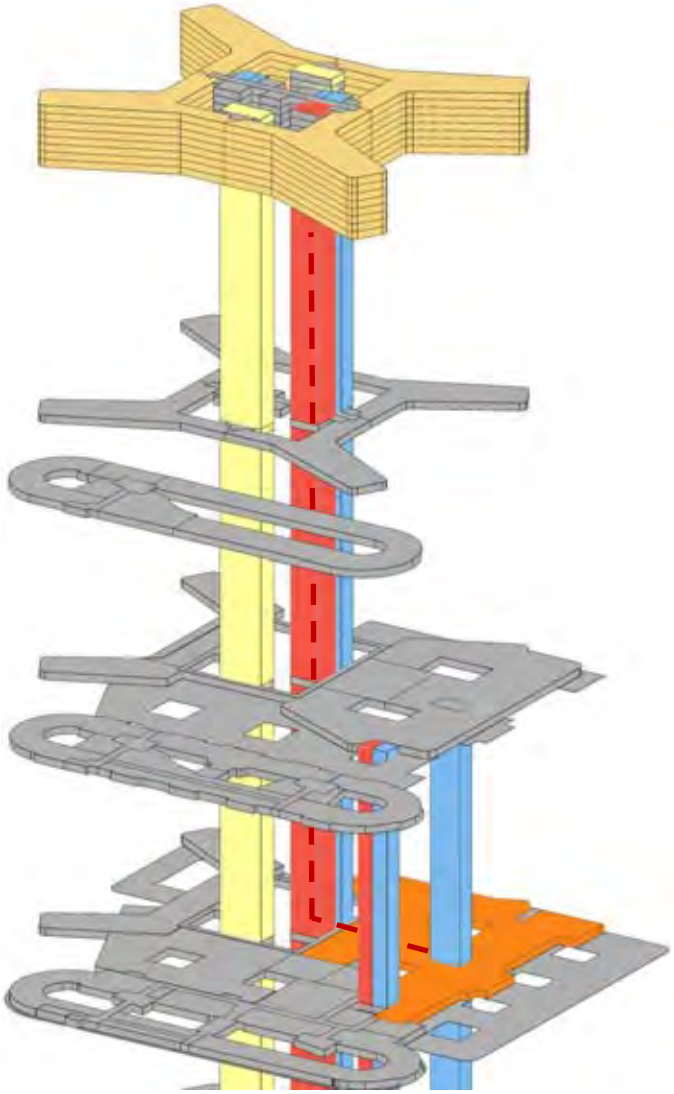
Circulation Flow – Children's/ Staff/ Visitors to Restaurant



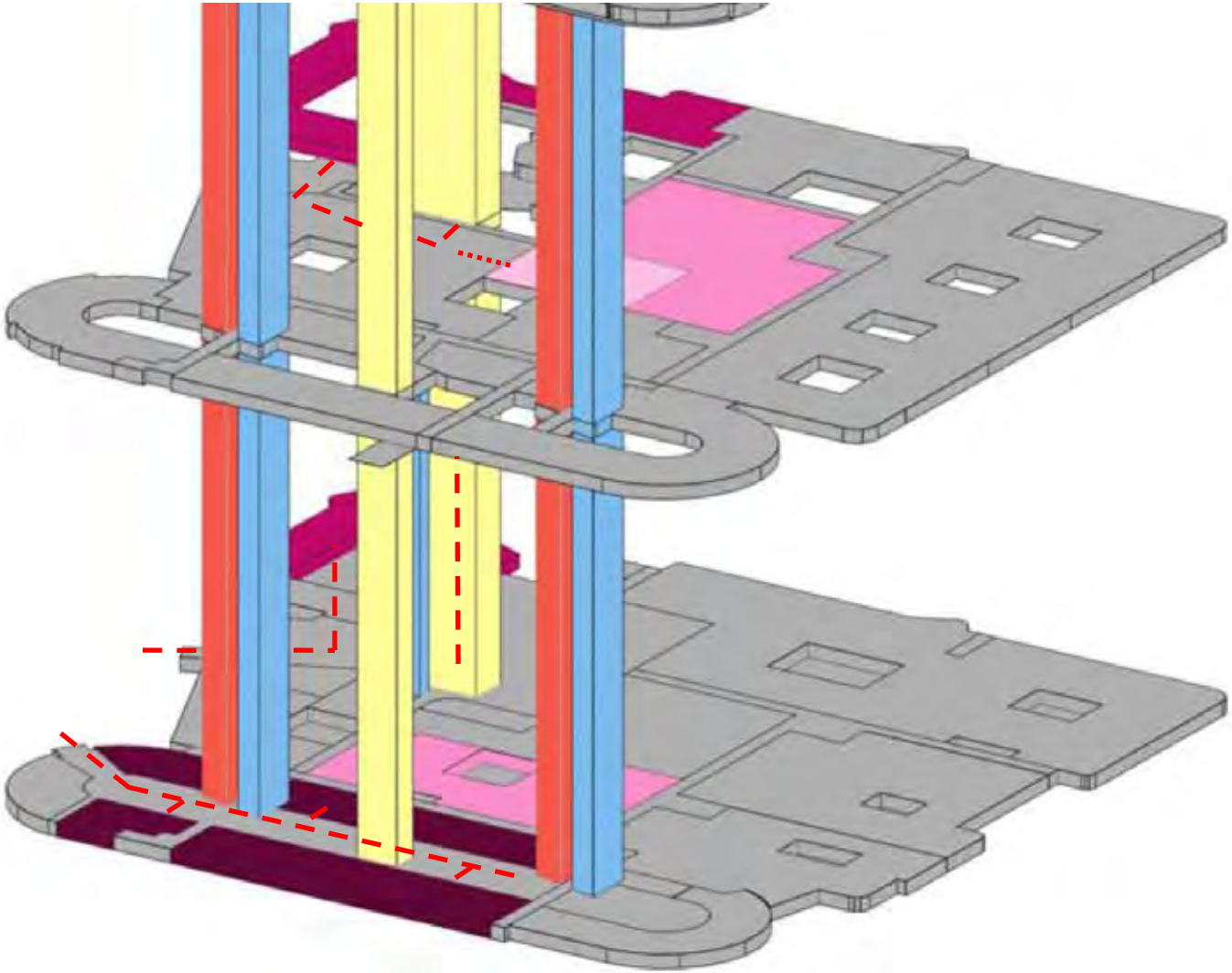
Circulation Flow – A&E to Theatre



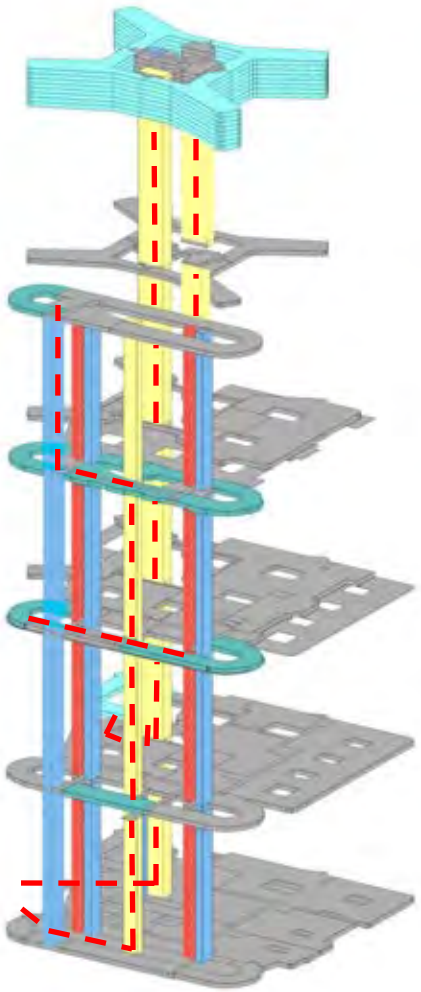
Circulation Flow – Inpatients to/ From Theatres



Circulation Flow – Access to OPD



Circulation Flow– Public Access to Inpatient Wards



Models

NHS Greater Glasgow and Clyde

Art – Public Art

"…the arts can be used to:

- ***Create local distinctiveness***
- ***Ensure that the built environment reflects individual human scale.***
- ***Meet the spiritual and emotional needs of patients and staff.***
- ***Support and improve wayfinding, for example by creating***

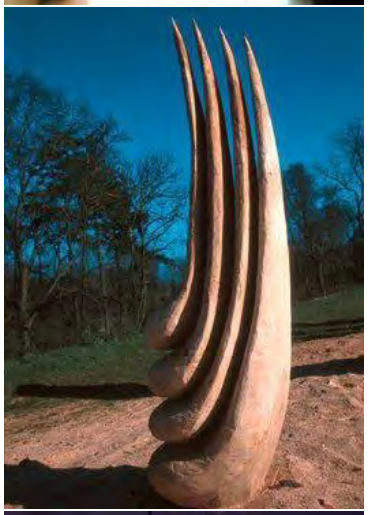
  landmarks at entrances and in key public spaces.
- ***Enhance landscaping and interior design through creative***

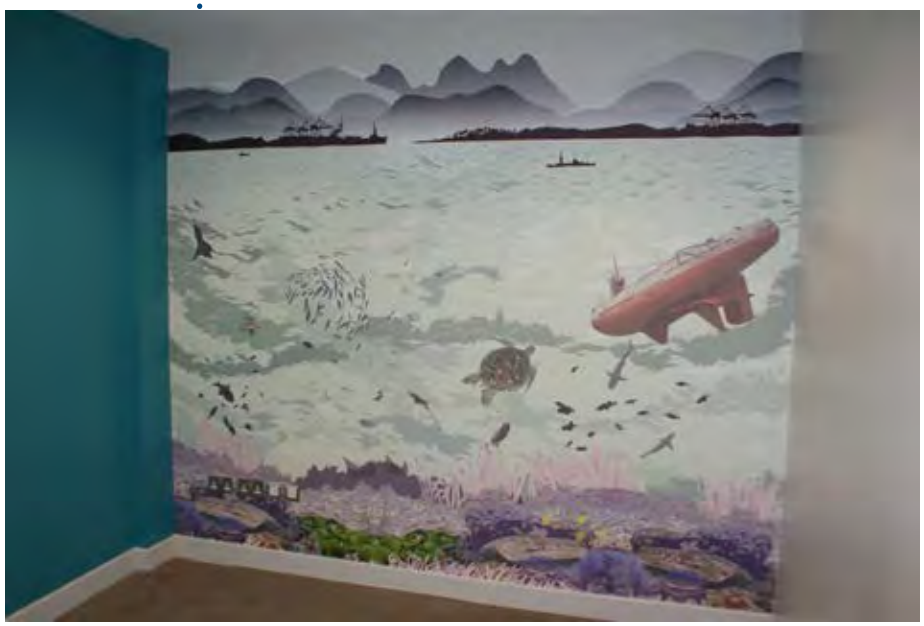
  use of materials and finishes.
- ***Enhance the prestige and reputation of the NHS trust***

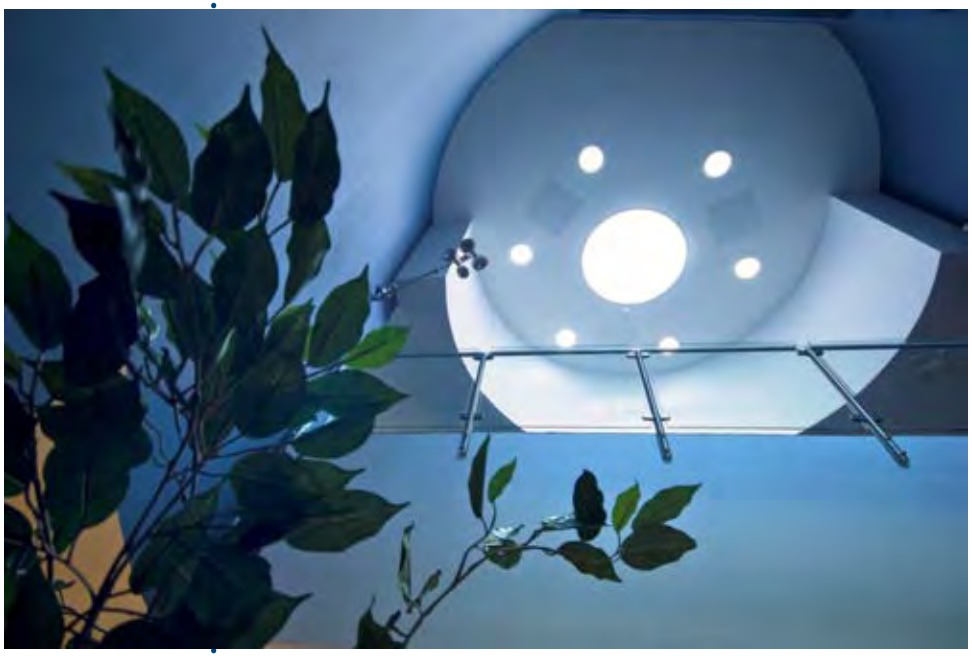
  during the redevelopment process."

'IMPROVING THE PATIENT EXPERIENCE. THE ART OF GOOD HEALTH
A PRACTICAL HANDBOOK.'

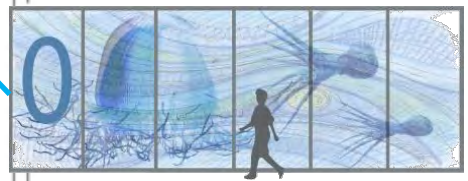
NHS ESTATES

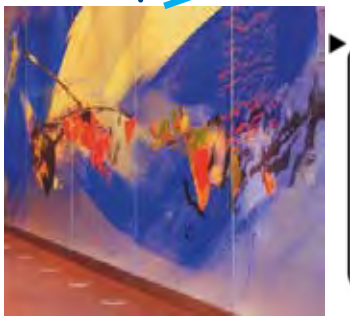


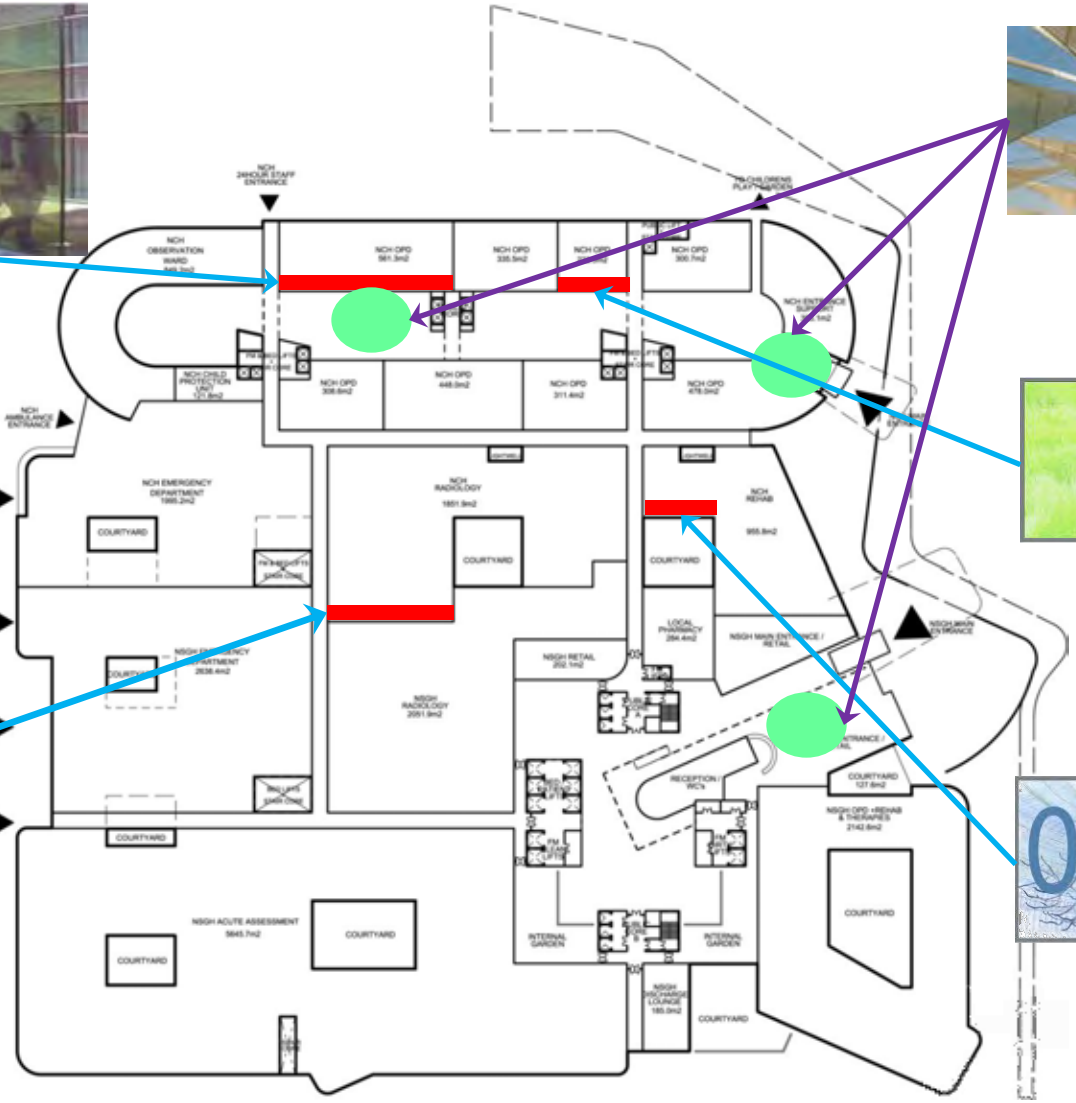




Architectural Integration – Wayfinding/ Human Scale and Healing Environment







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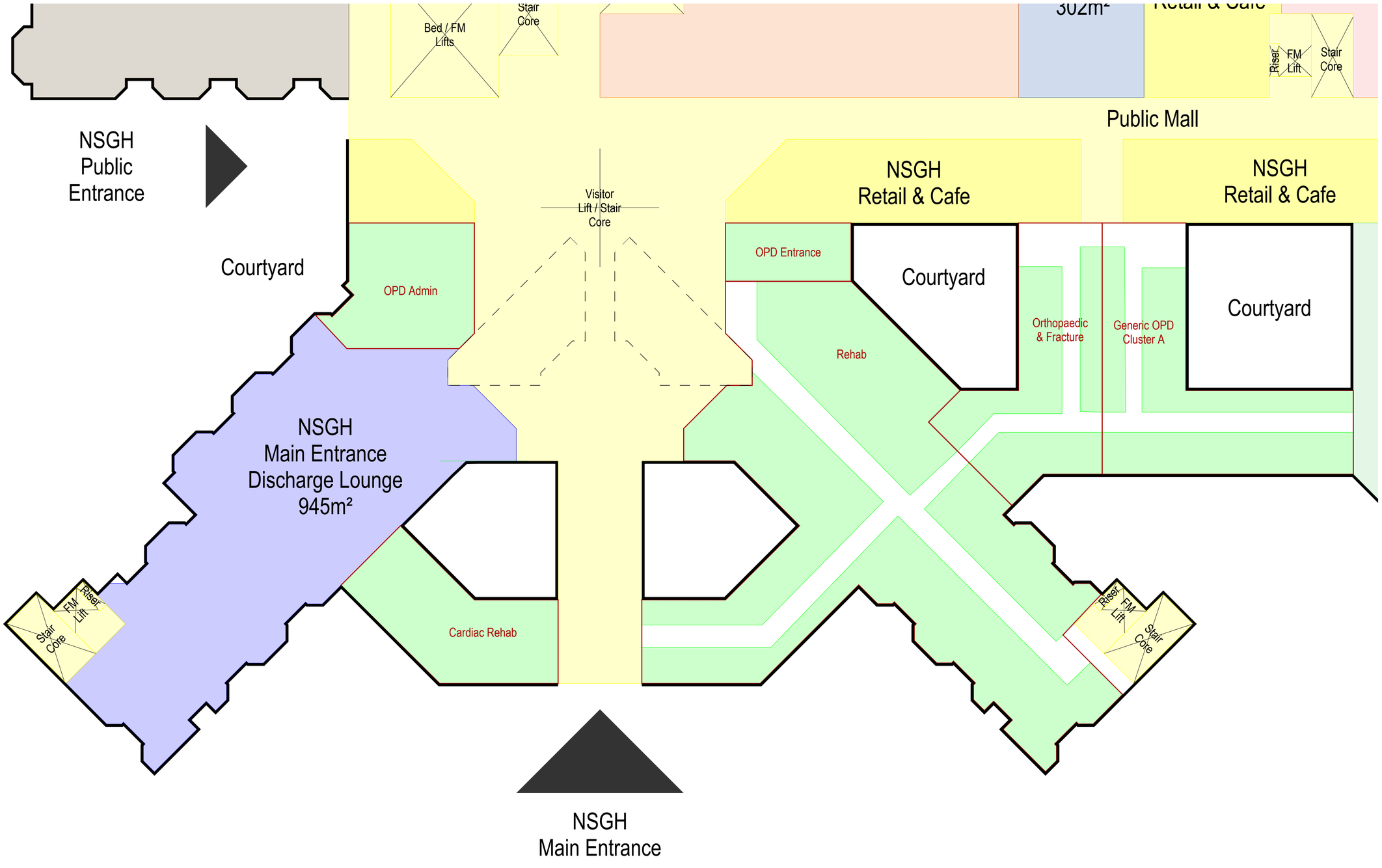

Revisions

Project
NEW SOUTH GLASGOW HOSPITAL

Client
NHS GREATER GLASGOW AND CLYDE

Title
OUTPATIENT (ADULTS) CLINIC ADJACENCIES

Drawing No. Revision
PD-HLM-L(00)00-X-OP-001*

Scale @ A1: 1:200
Drawn: DM
Date: 02/06/2009
Checked: *

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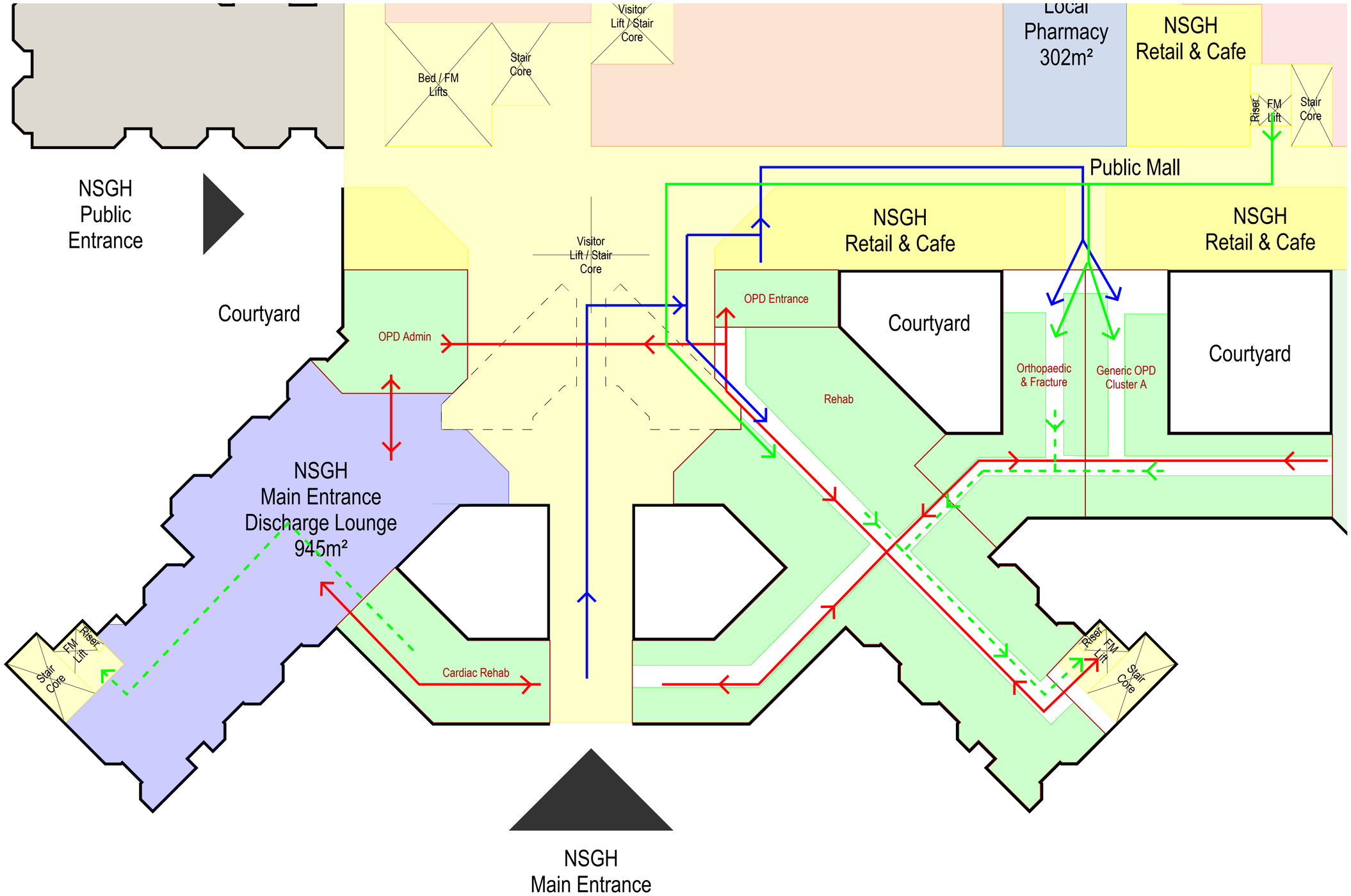
Flow route Key

- Staff / Inpatients
- Outpatients
- Clean FM
- Dirty FM

Draft issue pending review by FM 08/06/09



Revisions

Project
NEW SOUTH GLASGOW HOSPITAL

Client
NHS GREATER GLASGOW AND CLYDE

Title
OPD LEVEL 0 (ADULT) FLOW DIAGRAM

Drawing No.	Revision
PD-HLM-L(00)00-X-OP-002*	

Scale @ A1	Drawn
1:200	DM
Date	**Checked**
01/06/2009	HS

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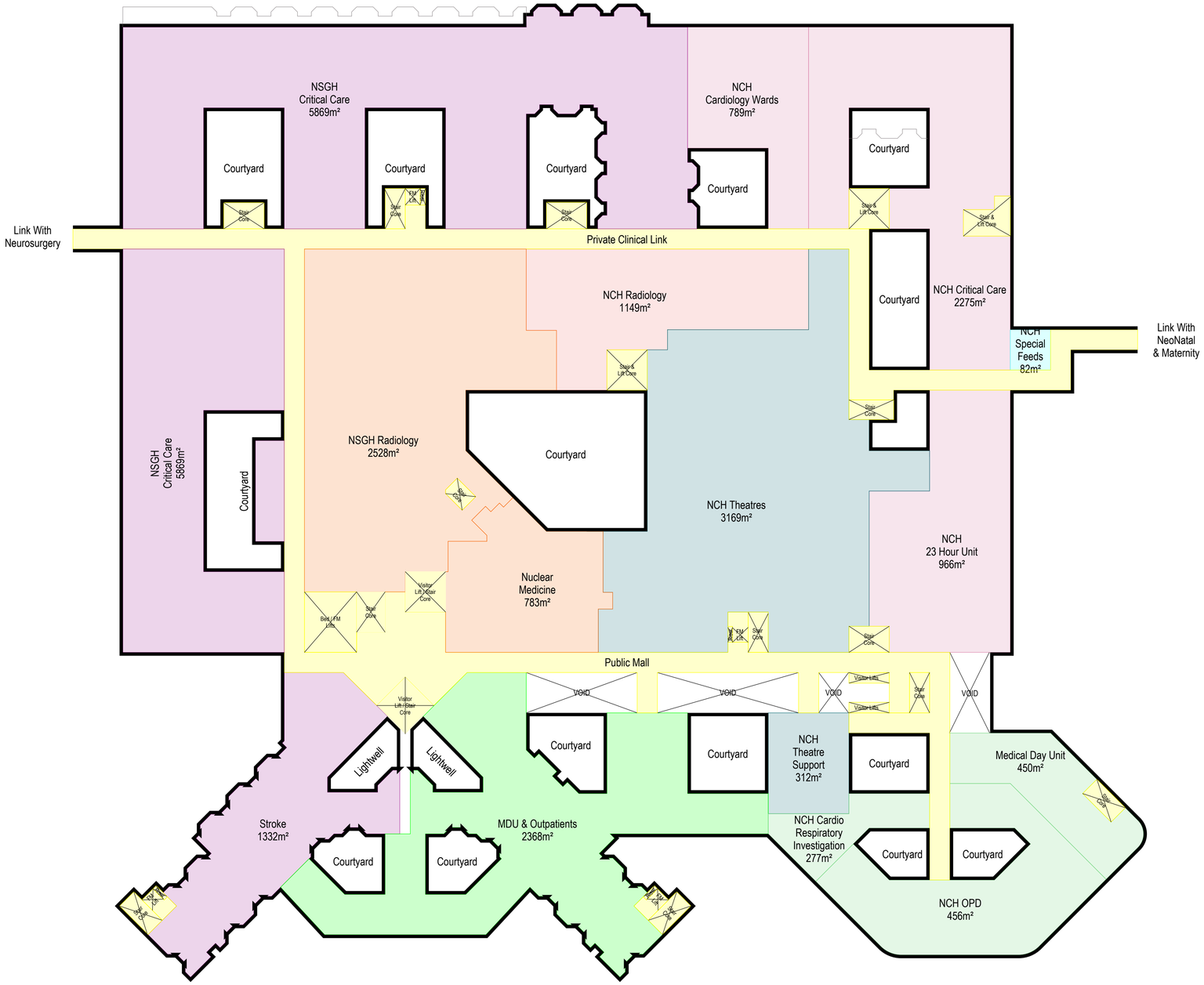

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A	Day Case Unit Removed	08/05/09	JD

Revisions

Project

NEW SOUTH GLASGOW HOSPITAL

Client

NHS GREATER GLASGOW AND CLYDE

Title

DEPARTMENTAL ADJANCIES LEVEL 01

Drawing No. Revision

PD-HLM-L(00)01-X-XX-001A

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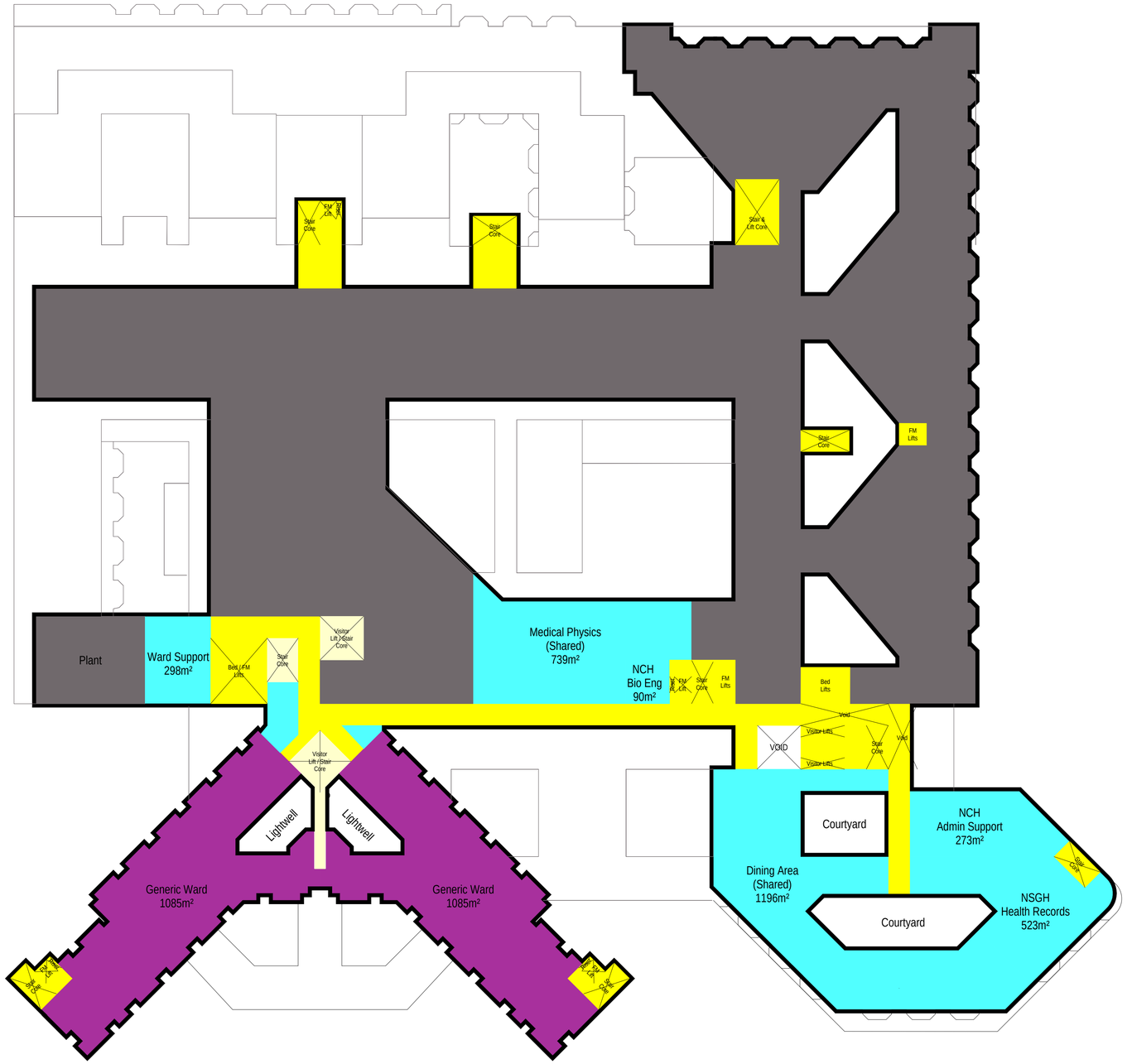

A	Generic Wards & Ward Support Relocated to L4	12/06/09	JD

Revisions

Project
NEW SOUTH GLASGOW HOSPITAL

Client
NHS GREATER GLASGOW AND CLYDE

Title
DEPARTMENTAL ADJANCIES LEVEL 03

Drawing No. | Revisio
PD-HLM-L(00)03-X-XX-001A

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A52787523

NHS Greater Glasgow and Clyde

- Bidder B
- New South Glasgow Hospitals
- Design Dialogue Meeting 3

NHS Greater Glasgow and Clyde

Design Dialogue Meeting Agenda Proposals

Bidder B

DDM 1

Design Dialogue Meeting Agenda Proposals

Design Dialogue Meeting 1
BRIEFING STAGE

Present Proposals for Design Dialogue Meeting (DDM) Format

Proposal of 2xconcurrent separate Workstreams through each DDM

1.1 Design
1.2 Technical

DDM 2

Design Dialogue Meeting Agenda Proposals

Design Dialogue Meeting 2
INITIAL CONCEPT DESIGN STAGE

Design
Review Exemplar Design
Review Masterplan Options
Single Bed Ward Options
Tower & Podium Options
Initial 1:500 Concept Plans
Initial 3D Site Massing

Technical
As Agenda

DDM 3

Design Dialogue Meeting Agenda Proposals

Design Dialogue Meeting 3
DETAILED CONCEPT DESIGN STAGE

Design
Masterplan
1:500 Concept Plans
1:200 Ward Tower Module, Single Bedroom
3D Site Massing Development
Indicative elevational treatment concepts

Technical
M&E Design Strategy Review
Structural Design Stategy Review
Cladding Design Strategy Review
Fire Strategy Review
Acoustic Strategy Review
Equipment Strategy Review

DDM 4

Design Dialogue Meeting Agenda Proposals

Design Dialogue Meeting 4
DETAILED DESIGN STAGE

Design
Masterplan

Adult Hospital 1:200 Department Design
Accident & Emergency
Adult Theatres

Adult Generic Ward including Generic Core Support
Adult Assessment Ward
Adult Radiology
Adult Critical Care
Adult Cardiology
Adult Outpatients
Adult Main Entrance/Public Areas

Childrens Hospital 1:200 Department Design
Childrens Ward
Childrens Accident & Emergency
Childrens Outpatients
Childrens Main Entrance/Public Areas

Technical
M&E Detail Design
Structural Detail Design
Cladding Detail Design
Fire Strategy Detail Design
Acoustic Strategy Review
Equipment Detail Design

DDM 5

Design Dialogue Meeting Agenda Proposals

Design Dialogue Meeting 5

Design
External Envelope Detailed Design
Elevations
Sections
3D modelling

Interiors Detailed Design
1:50 Standard Rooms

Interior Design & Wayfinding Strategy
Main Entrance & Public Areas

Technical
M&E Detail Design
Structural Detail Design
Cladding Detail Design
Fire Strategy Detail Design
Acoustic Strategy Review
Equipment Detail Design

Agenda

Overview

Agenda Items

15 minutes

Breakout 1.
Masterplanning, Architecture, Health Planning, Structure/ Civil and Cladding

Breakout 2
M&E, Fire Engineering Acoustic Strategy Principles FM

2 hours 30 minutes

Summary

15 Minutes

Design Dialogue Meeting 2

Design Dialogue Meeting Agenda Proposals

Design Dialogue Meeting 3
DETAILED CONCEPT DESIGN STAGE

Design

Masterplan
1:500 Concept Plans
1:200 Ward Tower Module, Single Bedroom
3D Site Massing Development
Indicative elevational treatment concepts

Technical

M&E Design Strategy Review
Structural Design Stategy Review
Cladding Design Strategy Review
Fire Strategy Review
Acoustic Strategy Review
Equipment Strategy Review

Key Issues From Design Dialogue Meeting 2

Masterplanning

Orientation and Wayfinding

Site Circulation Landscape

Scale and Character

Masterplan Options

Architecture/ Health Planning Clinical Adjacency Diagrams

1:500 Concept (Circulation flows/ Adjacencies)

Ward Tower
Single Bedrooms
Childrens Hospital
(Circulation Flows/ Adjacencies)

M&E

Sustainability
Energy Centre

Fire Engineering
Acoustics

FM

NHS Greater Glasgow and Clyde

Masterplanning & Landscape Design

Orientation & Wayfinding

Site Circulation, Pedestrian Vehicular, Blue Light

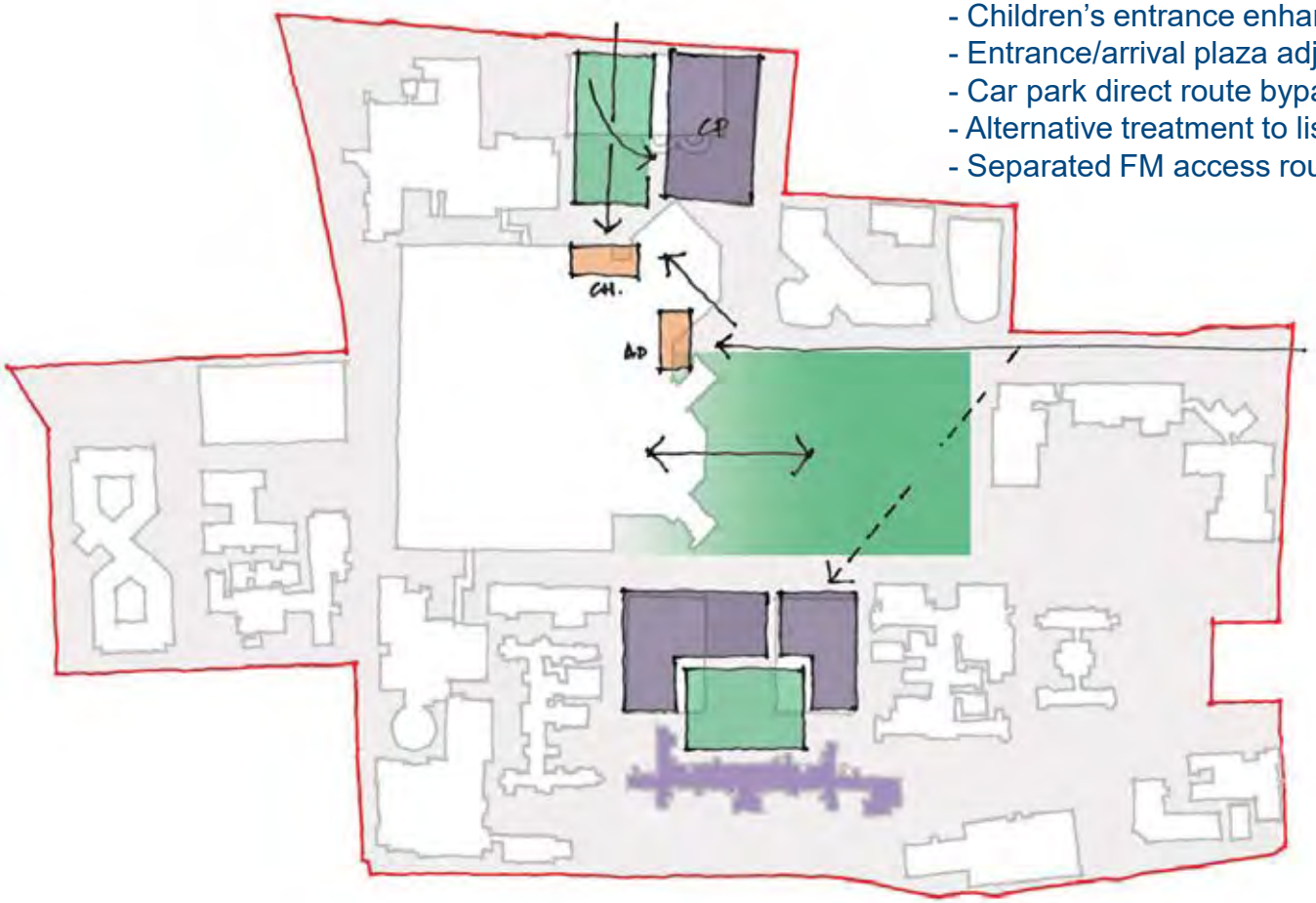
Landscape Scale and Character

Masterplan Options

Peer Review / Opportunities

Orientation and way finding

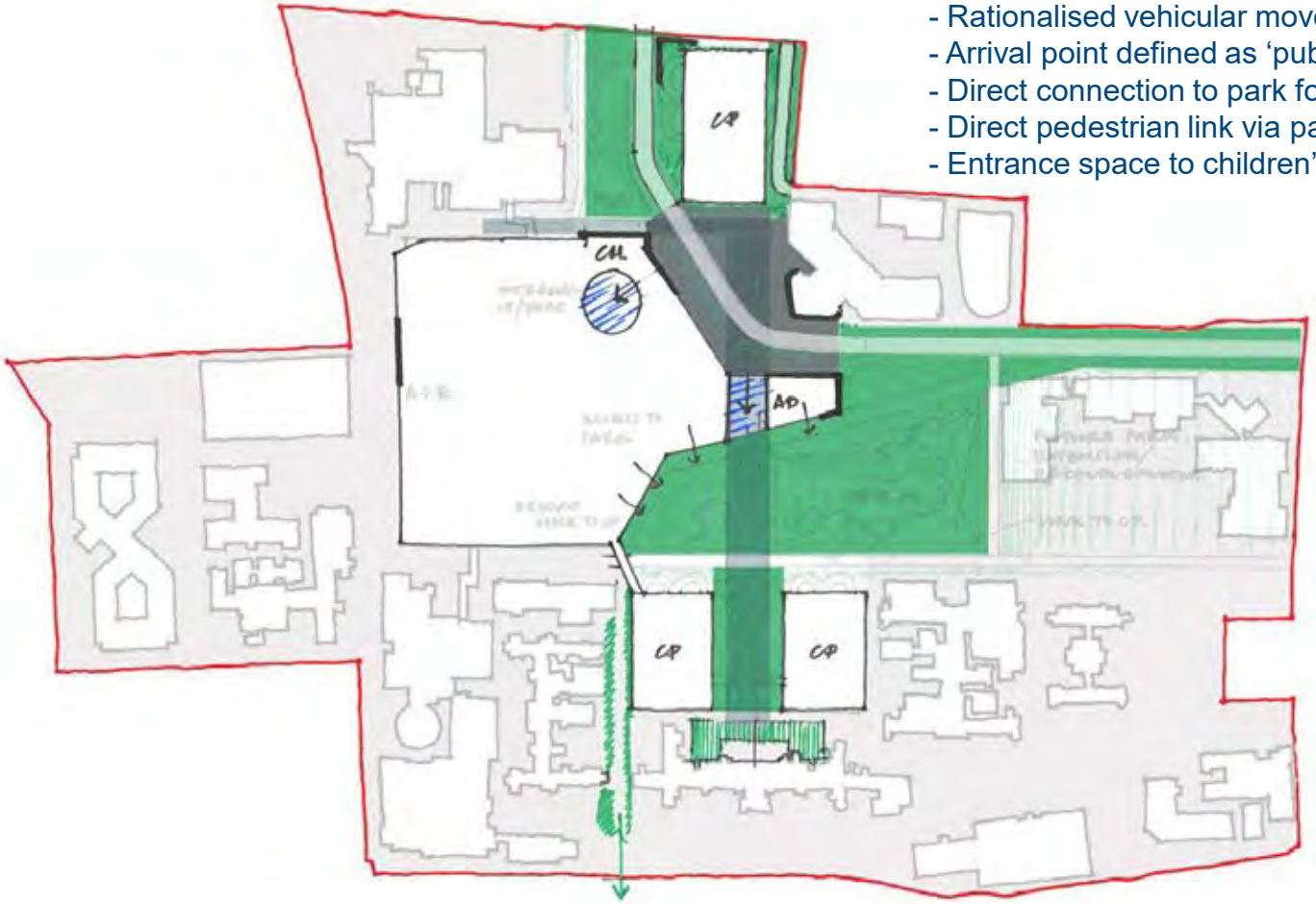
- Axial boulevards aligned with entrances
- Clearer wayfinding
- Hospital in park setting
- Children's entrance enhanced with park
- Entrance/arrival plaza adjacent to FM
- Car park direct route bypasses entrances
- Alternative treatment to listed buildings
- Separated FM access route



Opportunities / Thought Processes

Character & Exploration of Principles

- Clear entrances to two buildings
- Enhanced wayfinding & orientation
- Rationalised vehicular movements
- Arrival point defined as ‘public square’
- Direct connection to park for café etc
- Direct pedestrian link via parkland to entrance
- Entrance space to children’s hospital



- Hierarchy of spaces & circulation
- Welcoming and child-friendly entrance
- Maximise potential of the space

Design Team & Masterplan Development

Function & Masterplan Structure

Building Locations & Relationships

External Character & Hierarchy

Masterplan Design Development

NHS Greater Glasgow and Clyde

Health Planning

Clinical Adjacency Diagrams

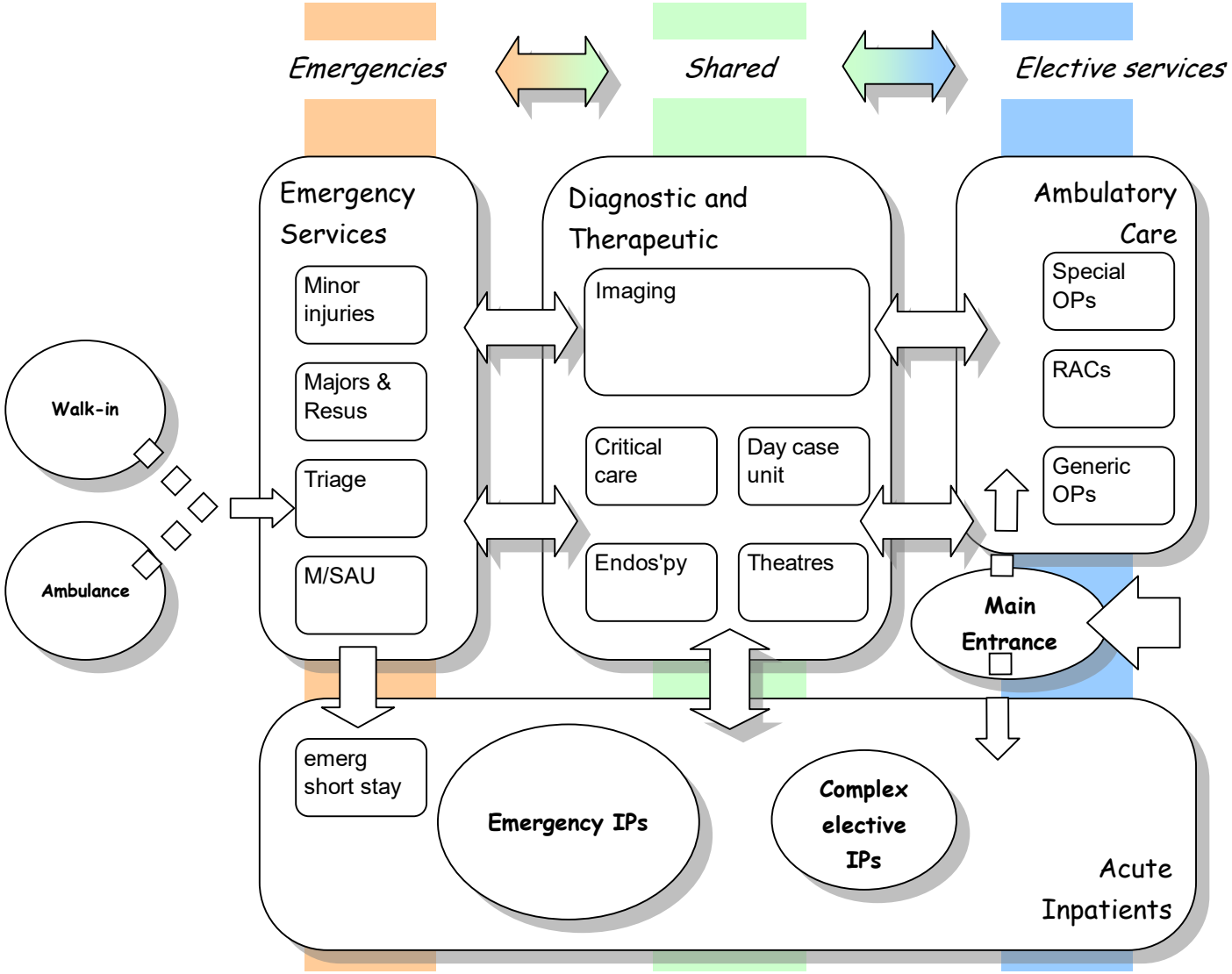
1:500 Department Adjacencies

Main Circulation Flows

Separation of flows

NHS Greater Glasgow and Clyde

Understanding Whole Hospital Adjacencies & Flows



Ground Floor Ward Adjacencies

NHS Greater Glasgow and Clyde

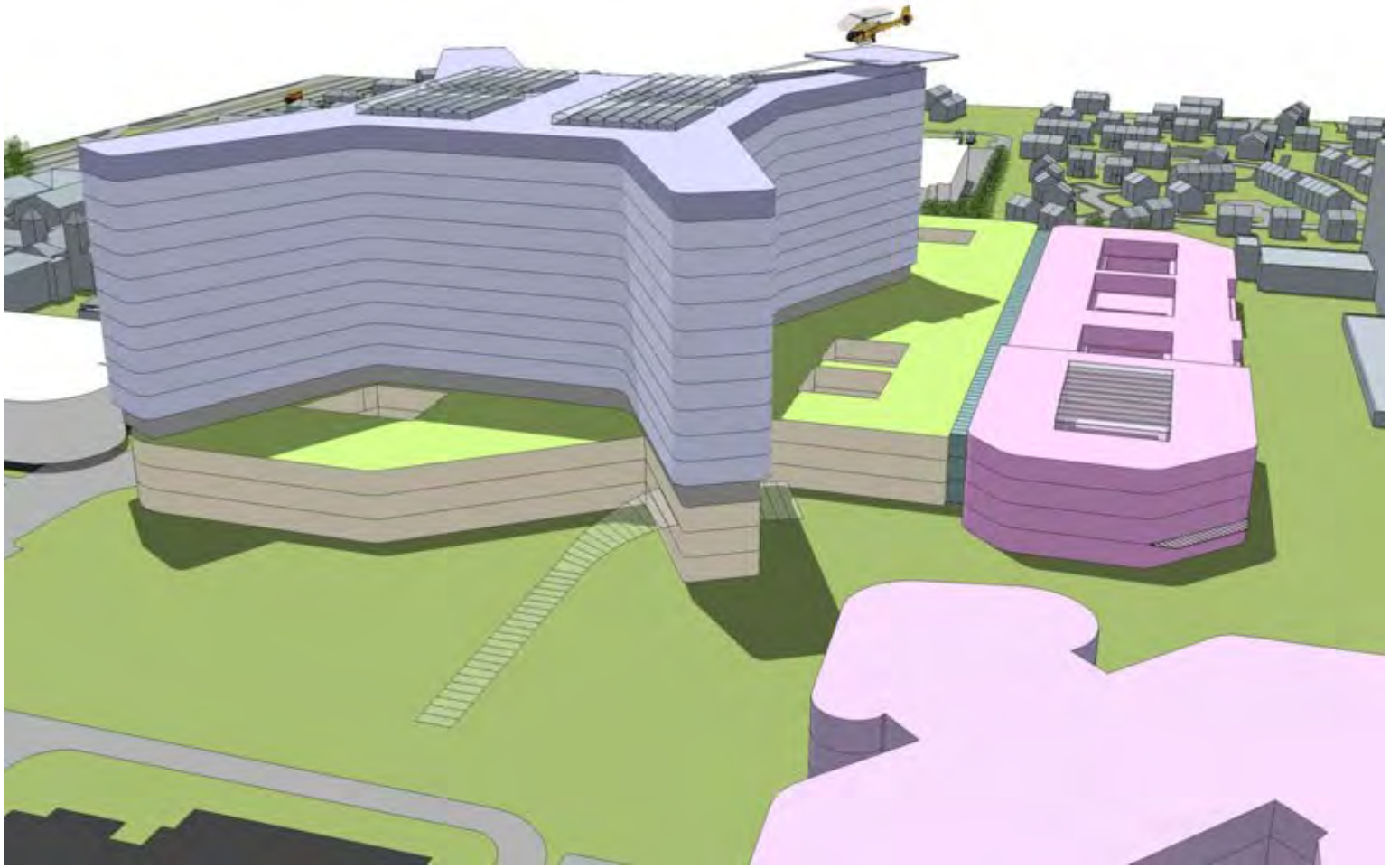
Architectural Design

- 1:500 Concept Plans
- Ward Tower
  - Tower Location
  - Architectural Concept
  - 1:200 Ward Plans
  - Separation of flows
  - Travel Distances
- Single Bedroom Layout
- Children's Hospital
  - Identity
  - Children's Ward Tower
  - Architectural Concept
  - 1:200 Ward Plans
  - Separation of Flows
  - Travel Distances
  - External Spaces

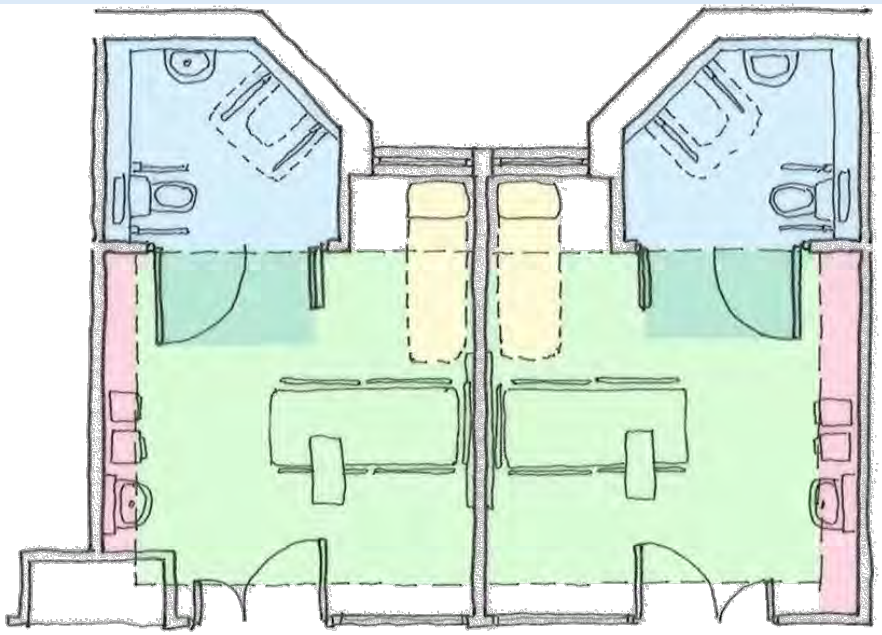
Opportunity C

Opportunity D

Opportunity E2



Room Layout Options



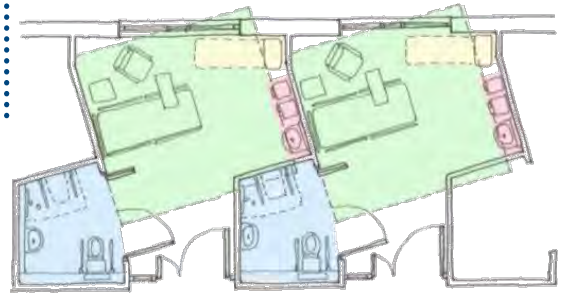
Exemplar

Core Bed Space

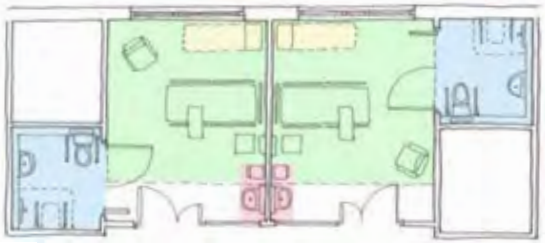
Ensuite Shower Room

Clinical Support Zone

Social (Family) Support Zone



Option A



Option B

Option C

3d Ward Model

Ward Layout Options

NHS Greater Glasgow and Clyde

Masterplanning & Landscape Design

Orientation & Wayfinding

Site Circulation, Pedestrian Vehicular, Blue Light

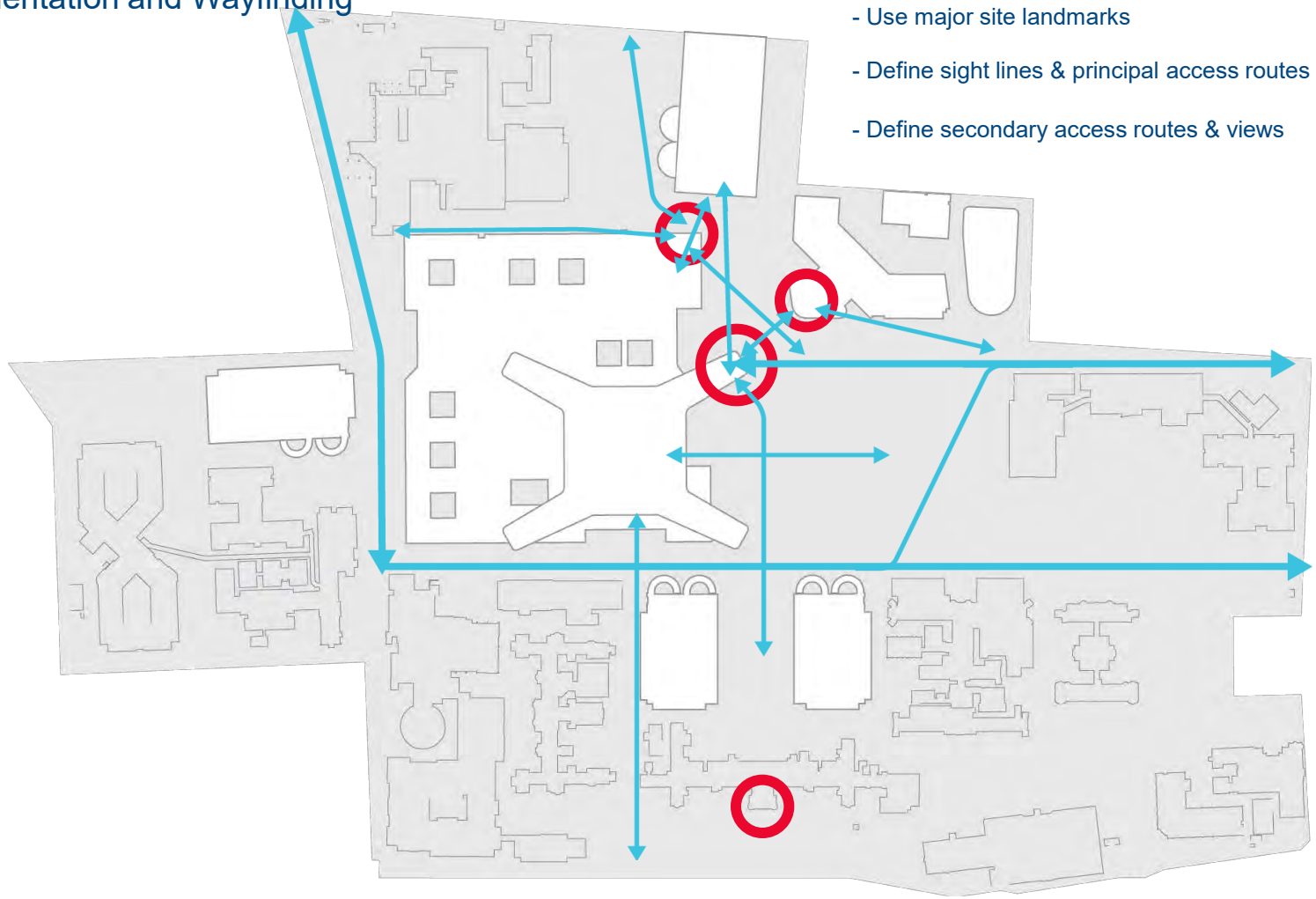
Landscape Scale and Character

Masterplan Options

Orientation & Wayfinding

Orientation and Wayfinding

- Use major site landmarks
- Define sight lines & principal access routes
- Define secondary access routes & views



Masterplan Structure Principles

Orientation and Wayfinding

- Two distinctive hospital identities

Masterplan Structure Principles

Orientation and Wayfinding

- Direct route to main entrance(s)
- Landmarks & focal points
- Clear functional structure

Masterplan Structure Principles

Orientation and Wayfinding

- Access to car parking

Masterplan Structure Principles

Orientation and Wayfinding

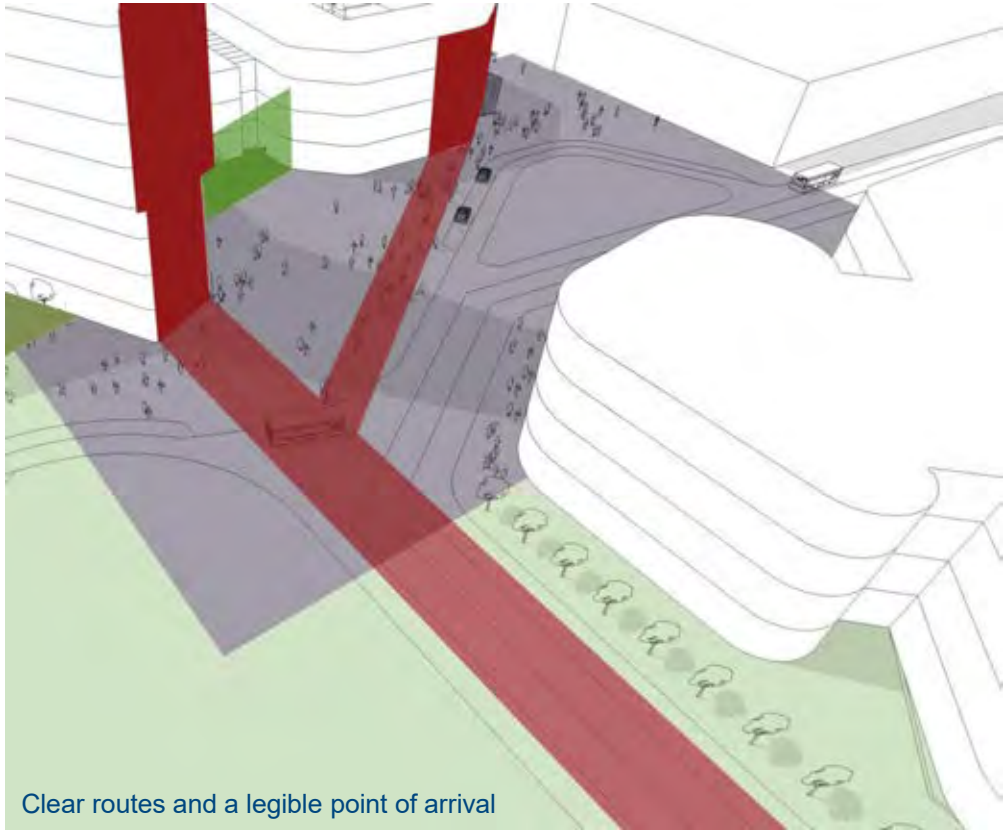
- Creation of clear point of arrival
- Functional and appropriately scaled square
- Serves all main entrances

Masterplan Structure Principles

Orientation and Wayfinding

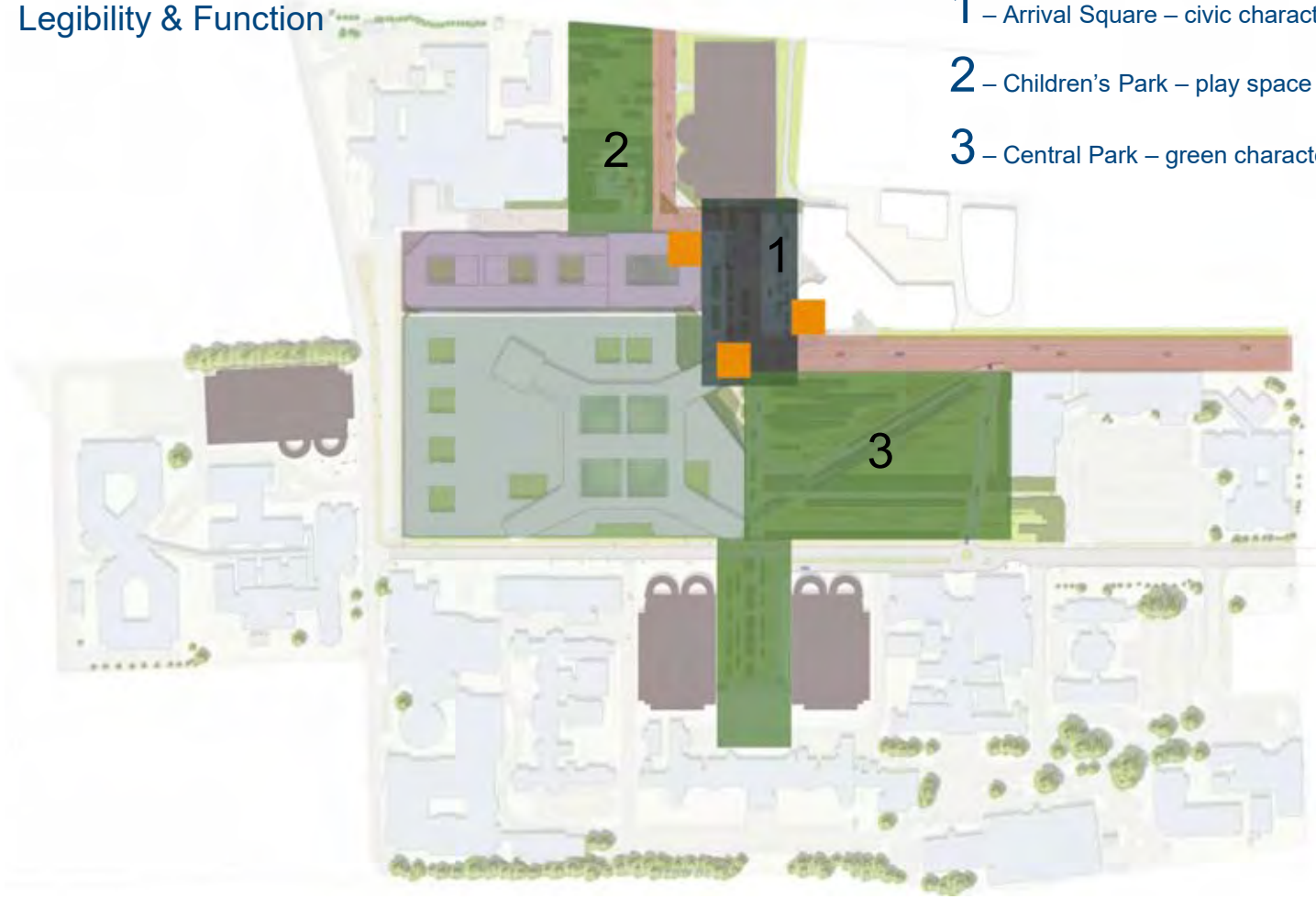
Visibility of main entrance from avenue

Visibility of both buildings


Clear routes and a legible point of arrival

Masterplan Structure Principles

Definition of Character Areas
Legibility & Function



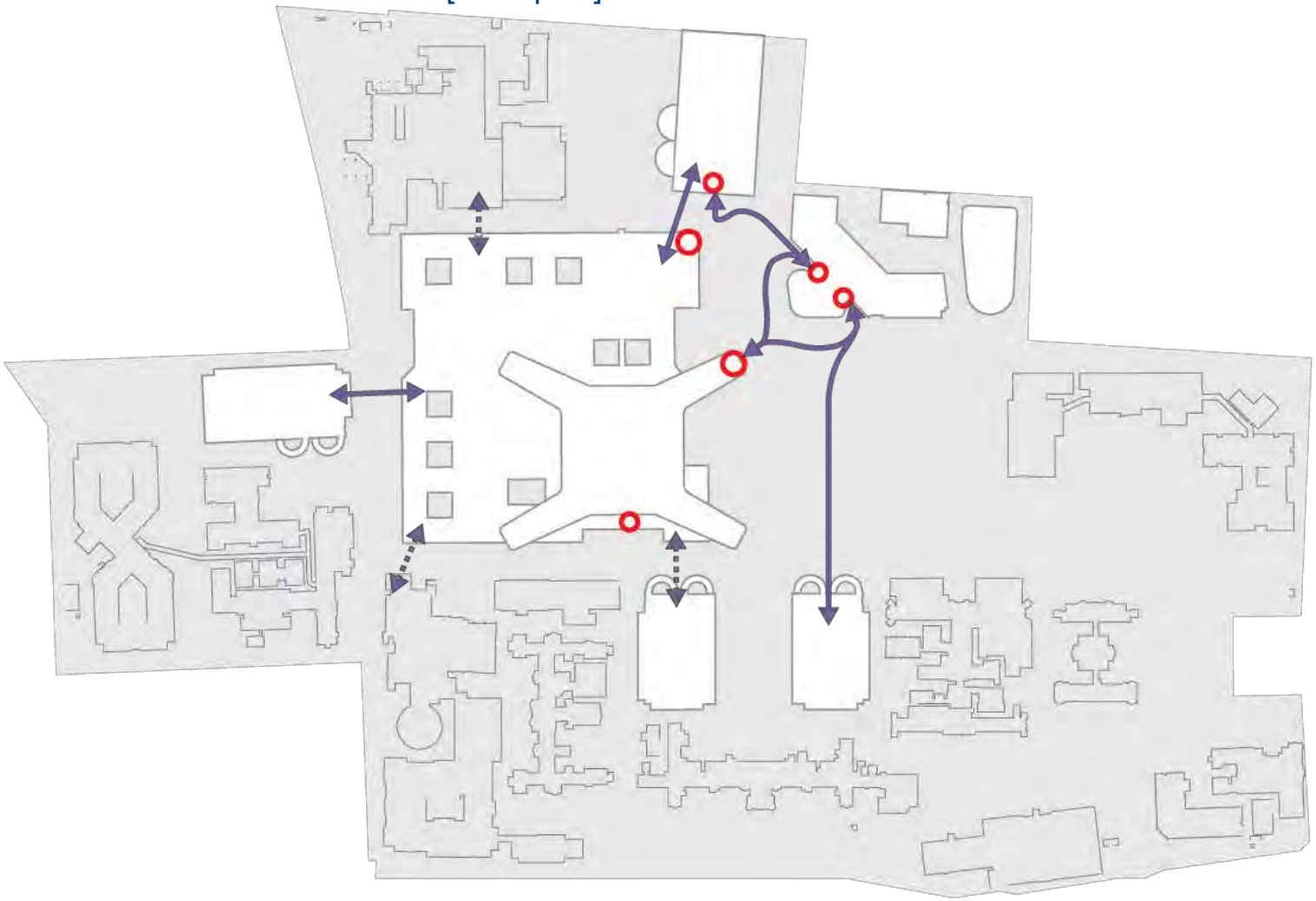
1 – Arrival Square – civic character

2 – Children's Park – play space

3 – Central Park – green character & variety

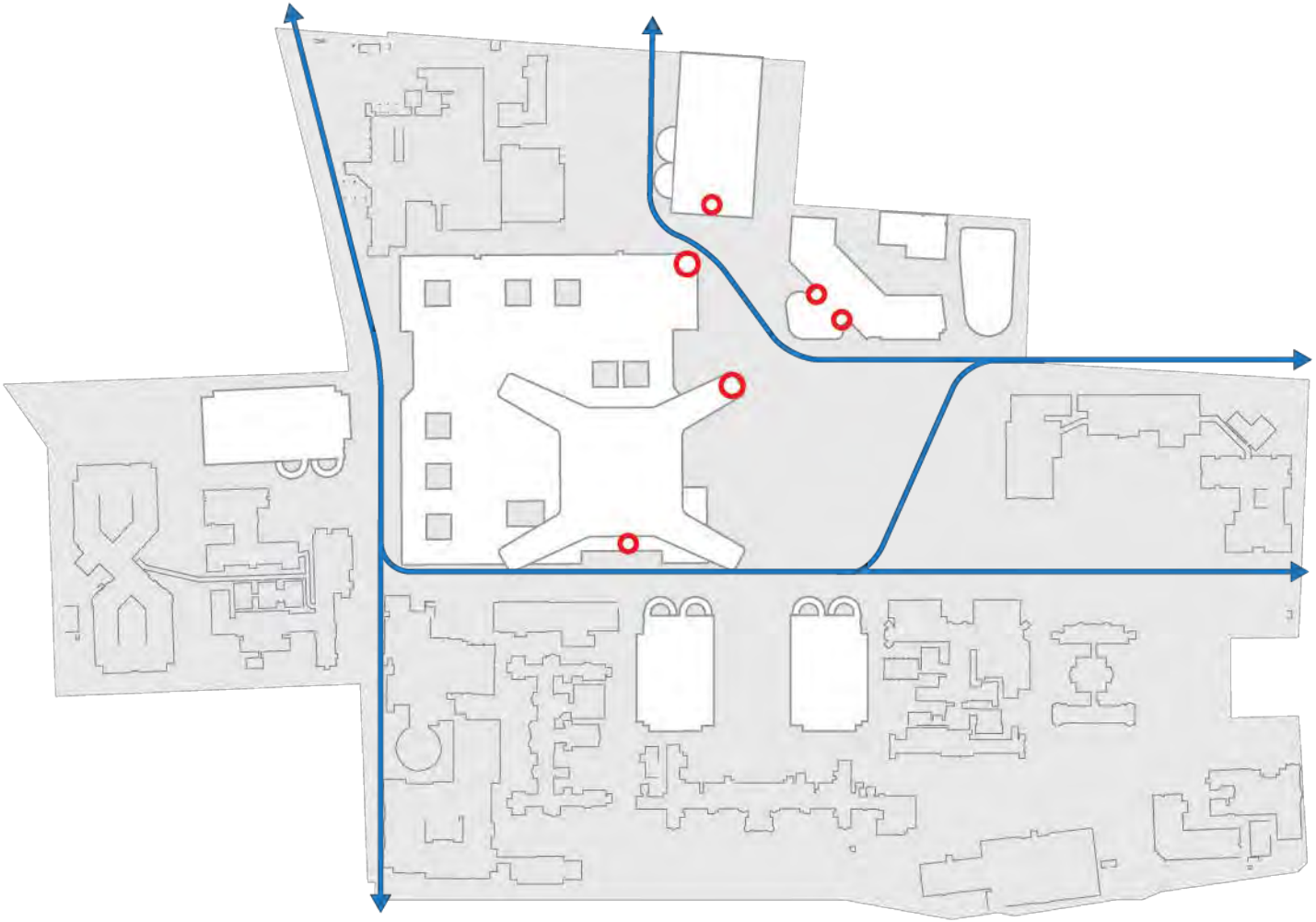
Movement & Function

Pedestrian Movements – Staff [examples]



Movement & Function

Movement Principles – Cycle Routes

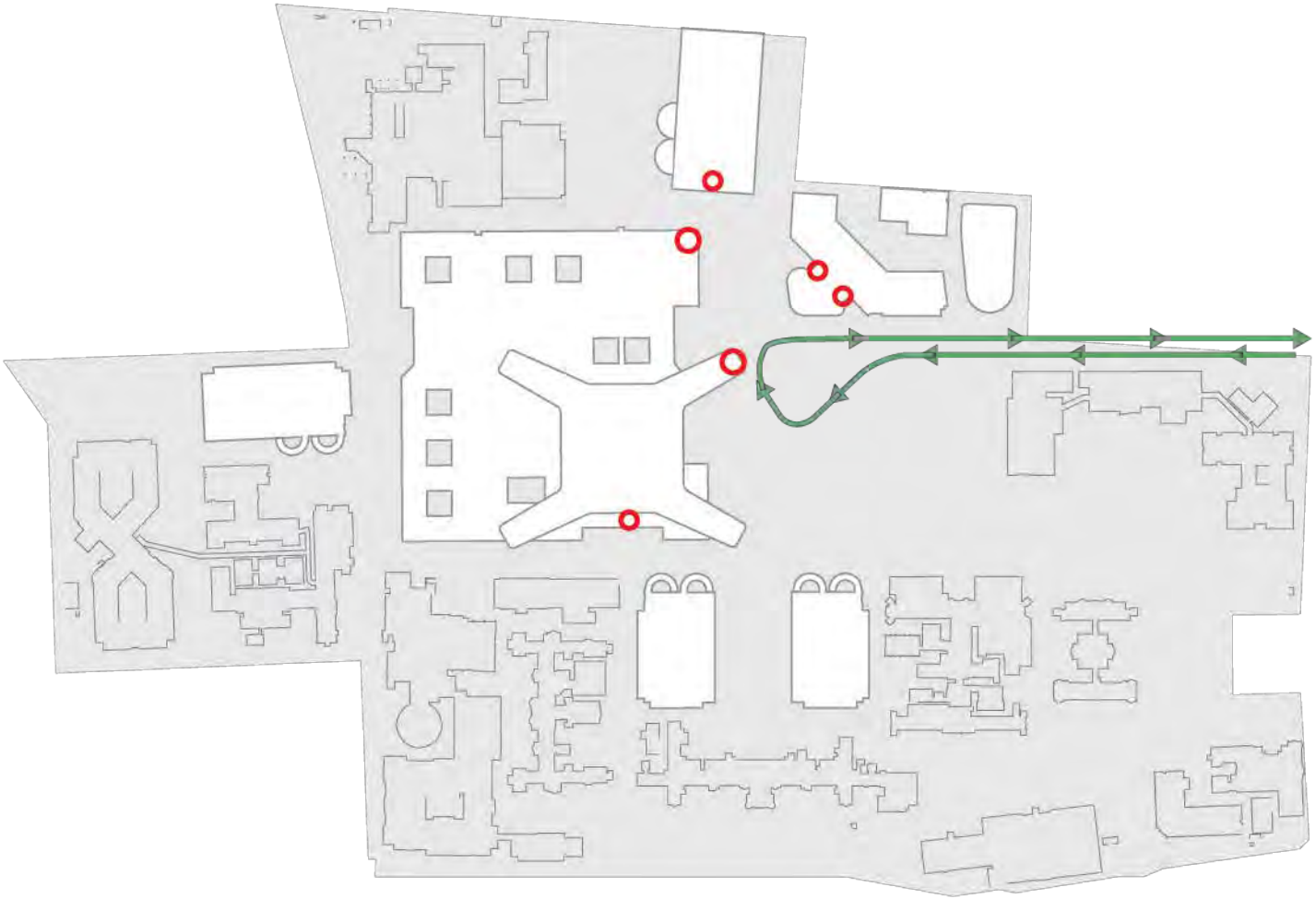


Movement & Function

Movement Principles – Blue Light Route

Movement & Function

Movement Principles – Fastlink Bus Loop



Movement & Function

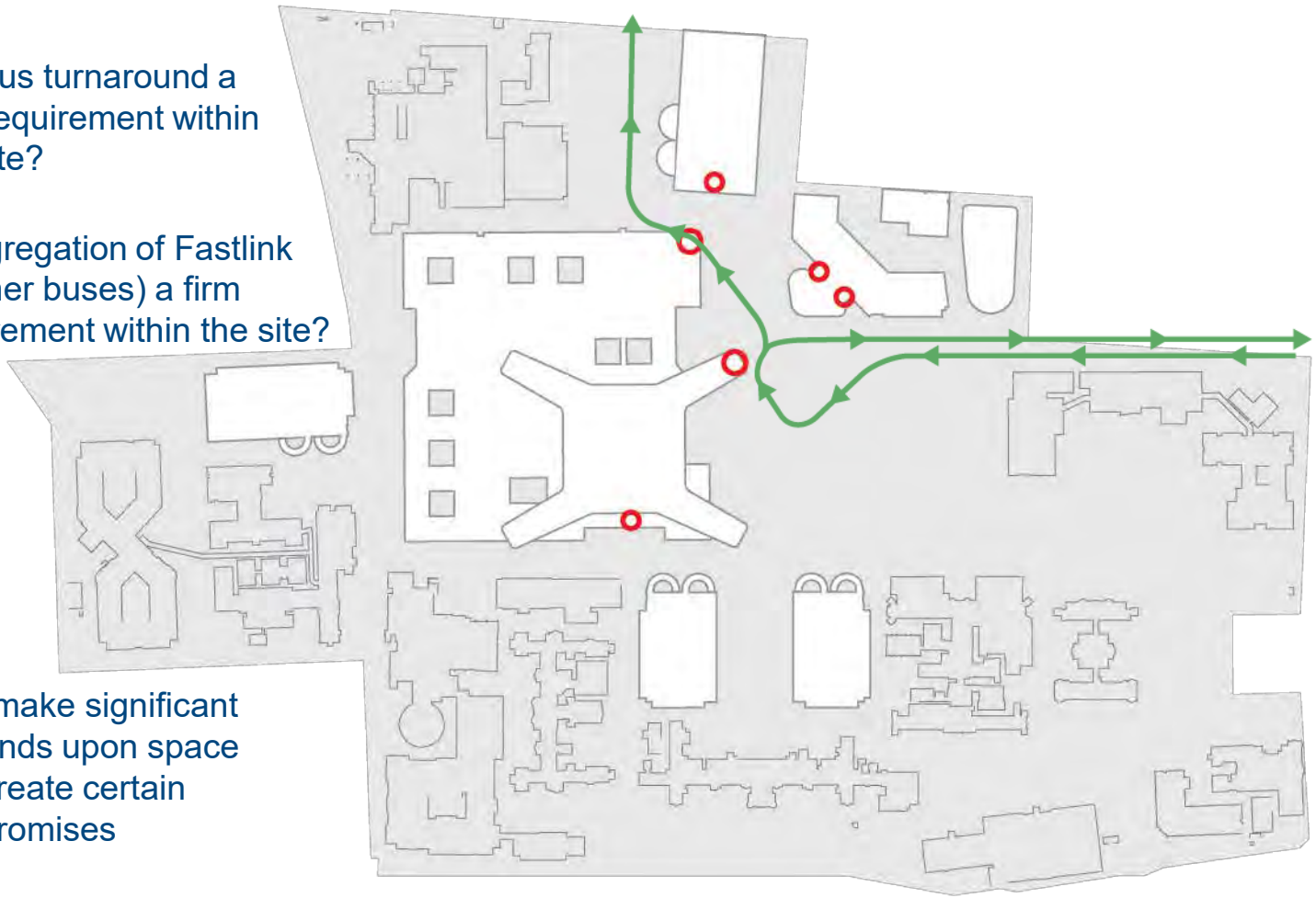
Movement Principles – Bus Through Site

Movement & Function

Movement Principles – Combined Bus Movements

Q:
Is a bus turnaround a firm requirement within the site?

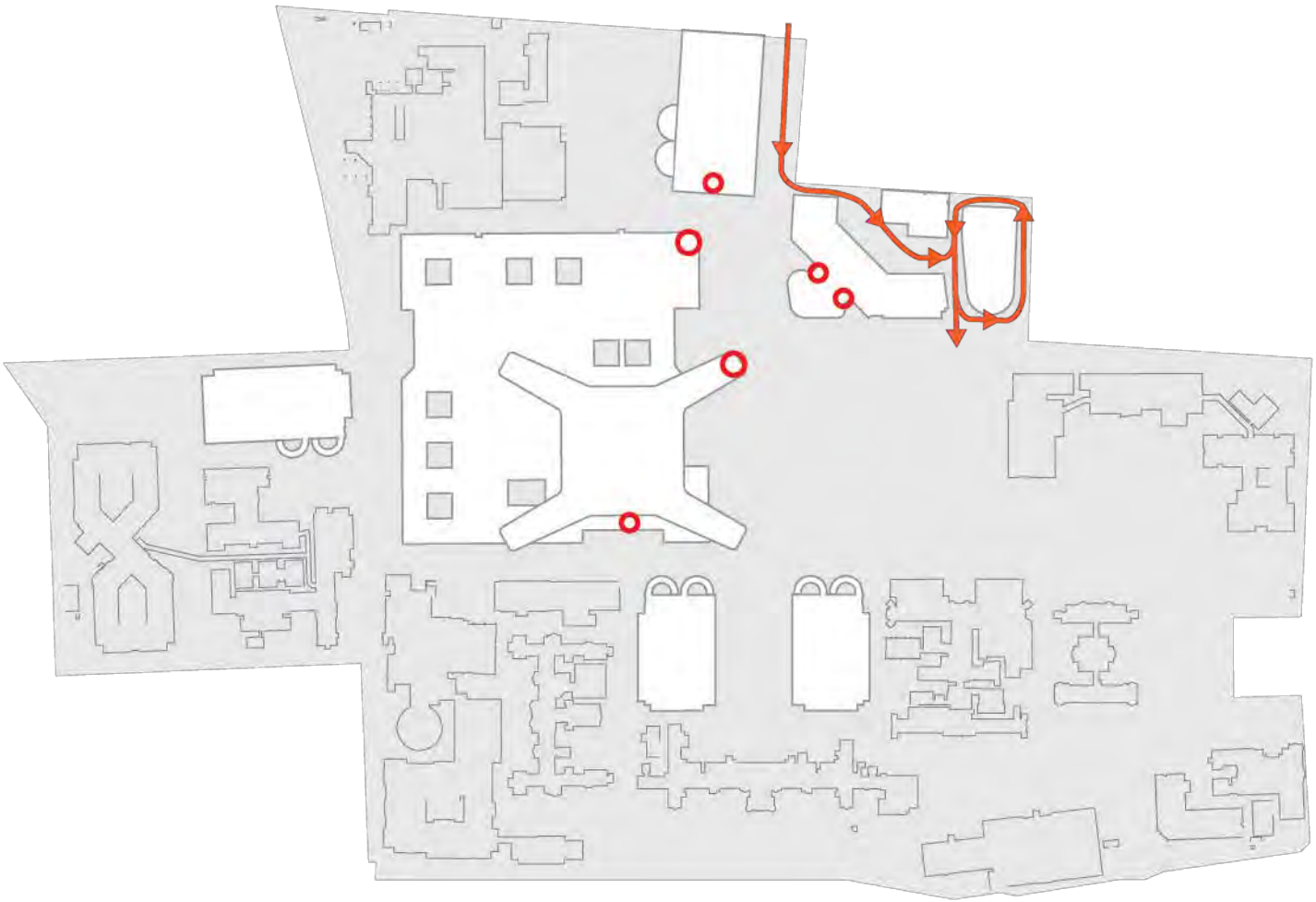
Q:
Is segregation of Fastlink (& other buses) a firm requirement within the site?



NB:
Both make significant demands upon space and create certain compromises

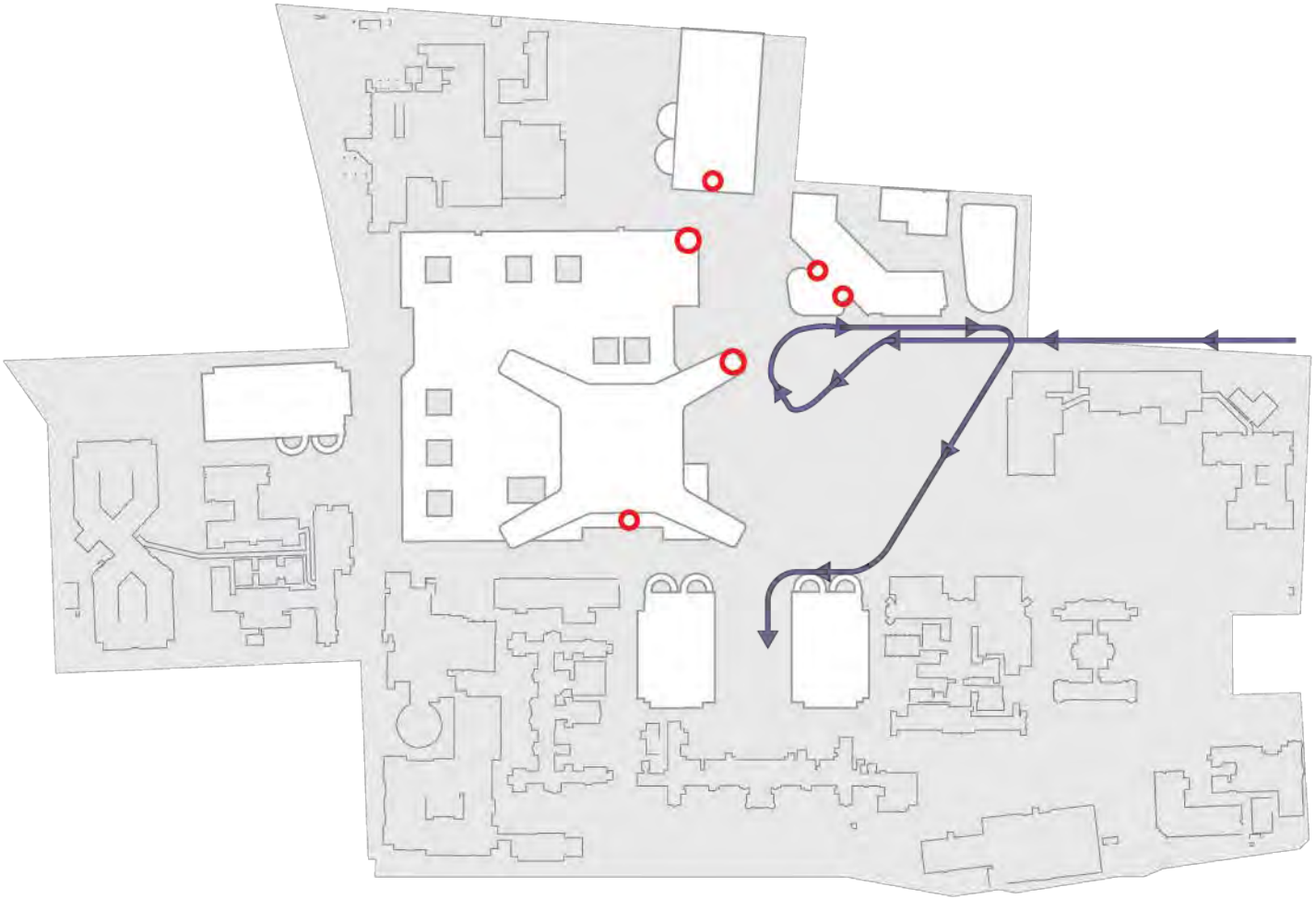
Movement & Function

Movement Principles – FM/Labs Servicing



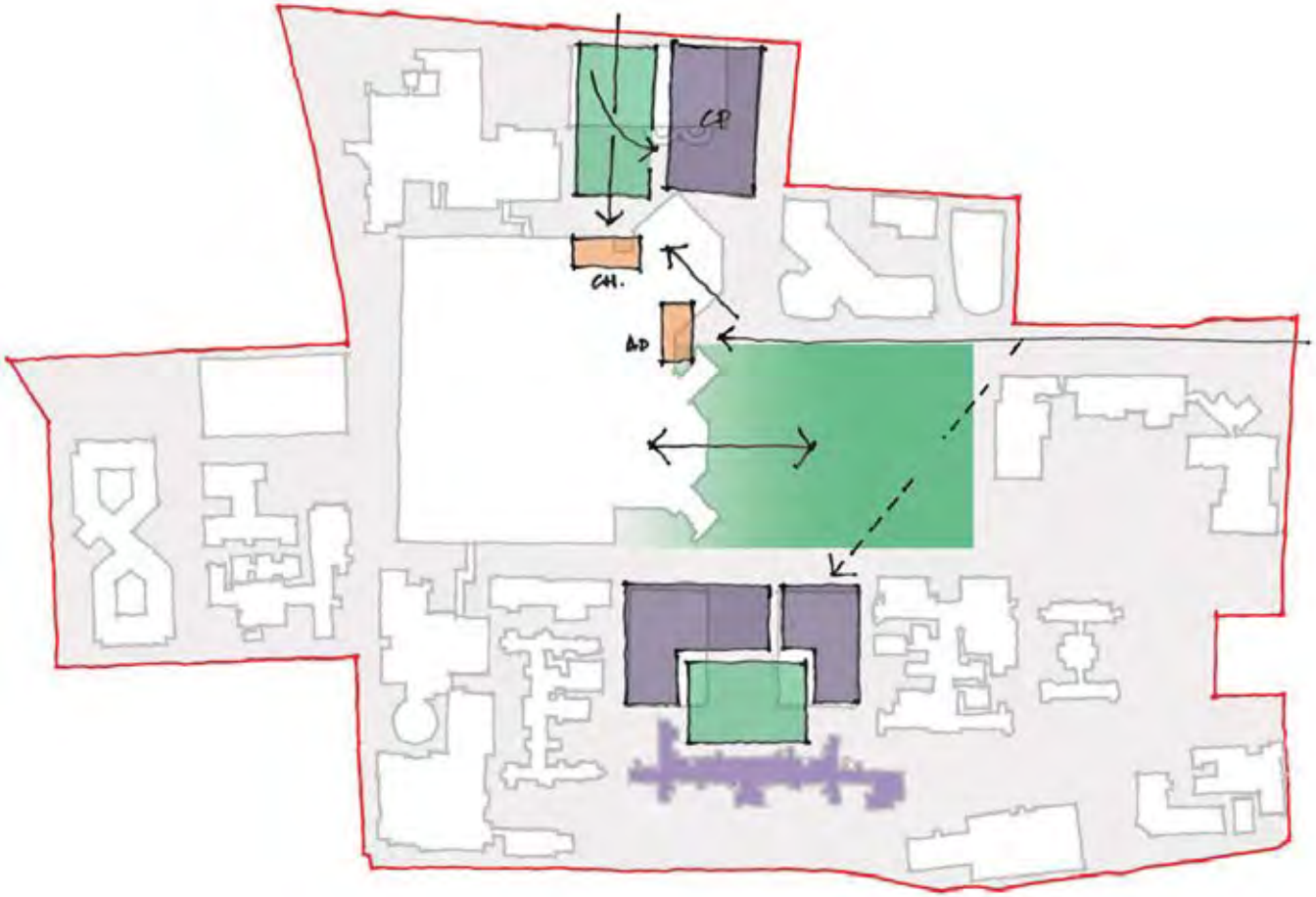
Movement & Function

Movement Principles – Vehicular Drop Off Loop – Acute Entrance



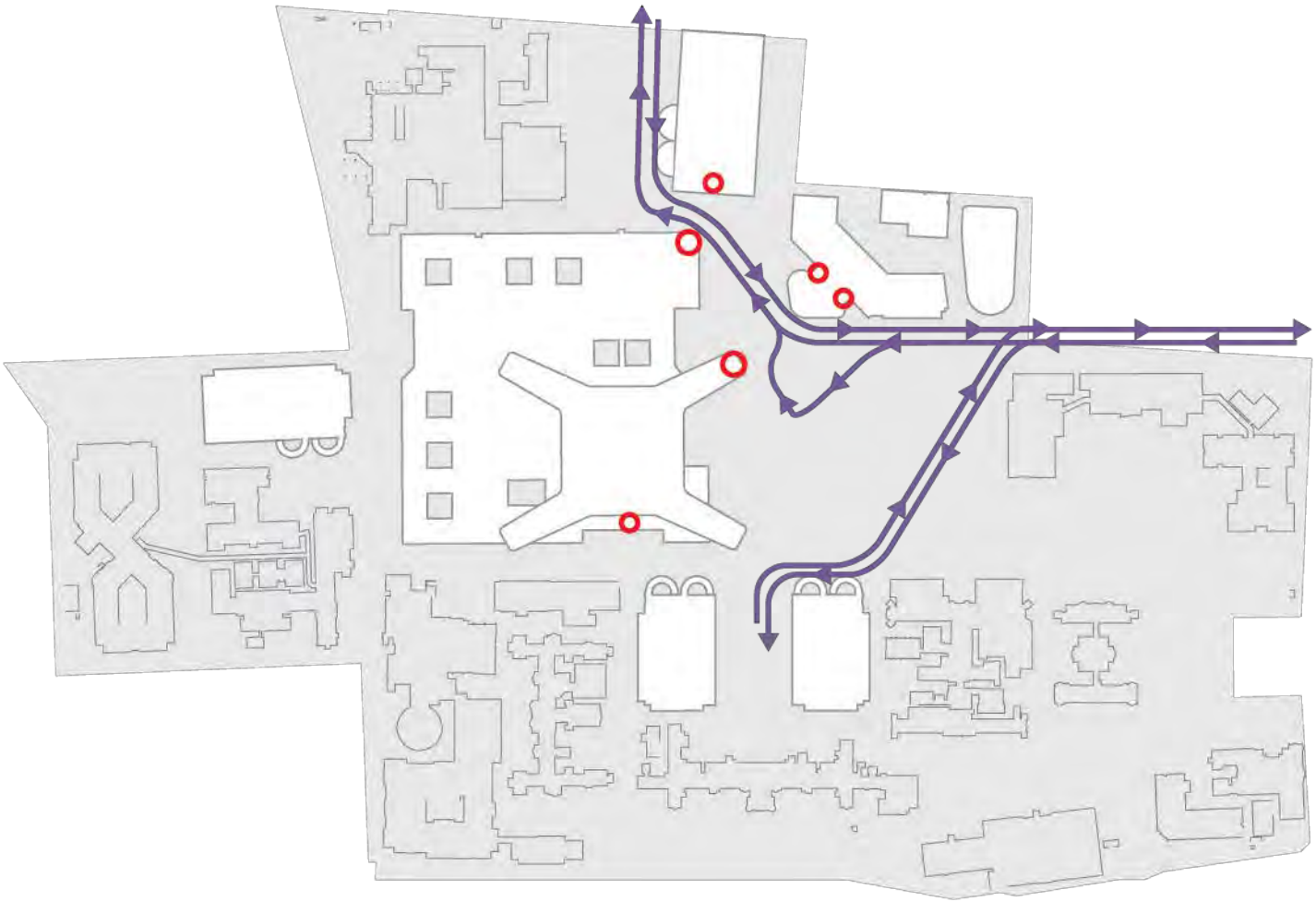
Peer Review / Opportunities (DD2)

Orientation and way finding



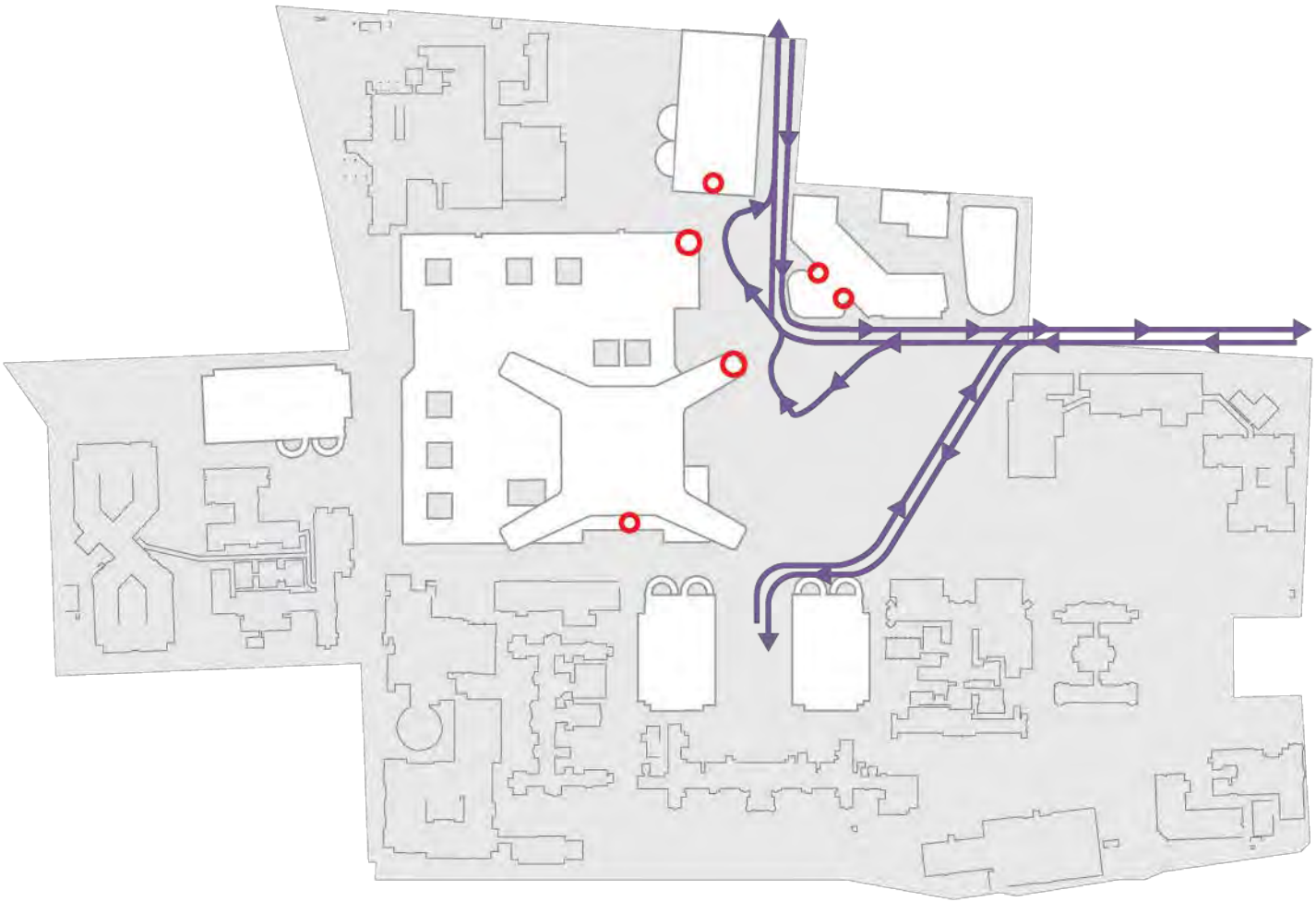
Movement & Function

Movement Principles – Vehicular Drop Off Loop – Opt 1



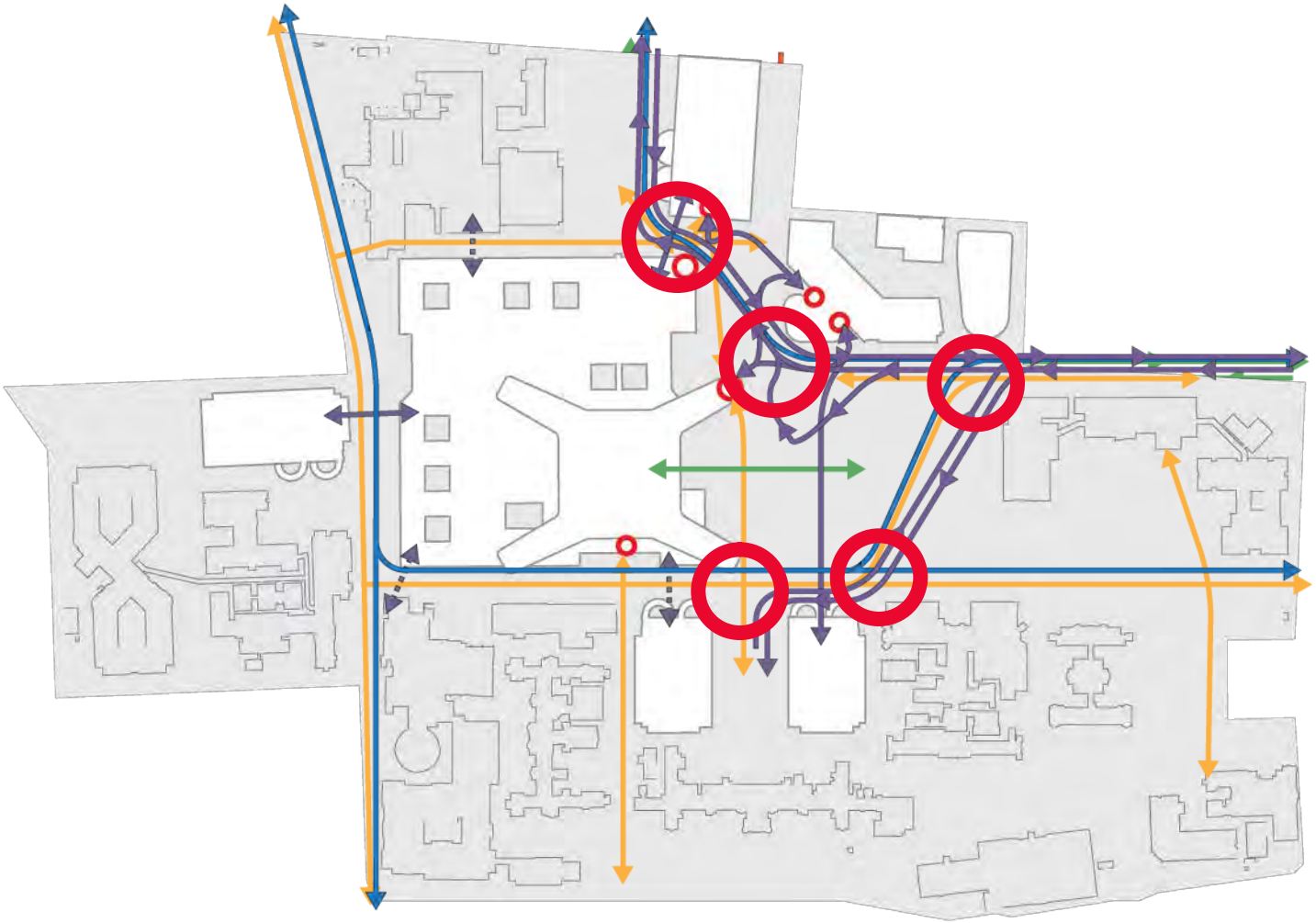
Movement & Function

Movement Principles – Vehicular Drop Off Loop – Opt 2



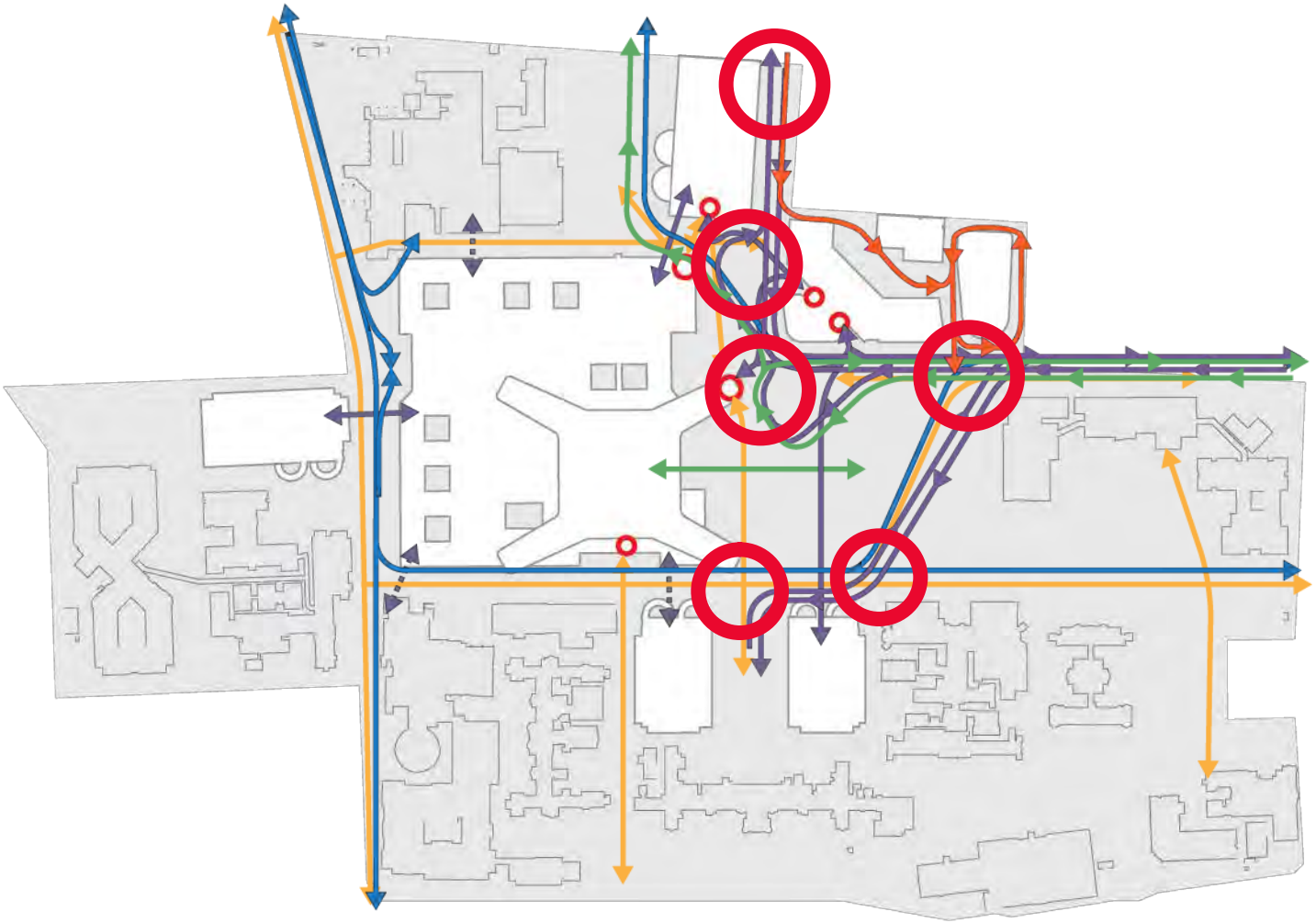
Movement & Function

Exploration of Movement Conflicts – Opt 1



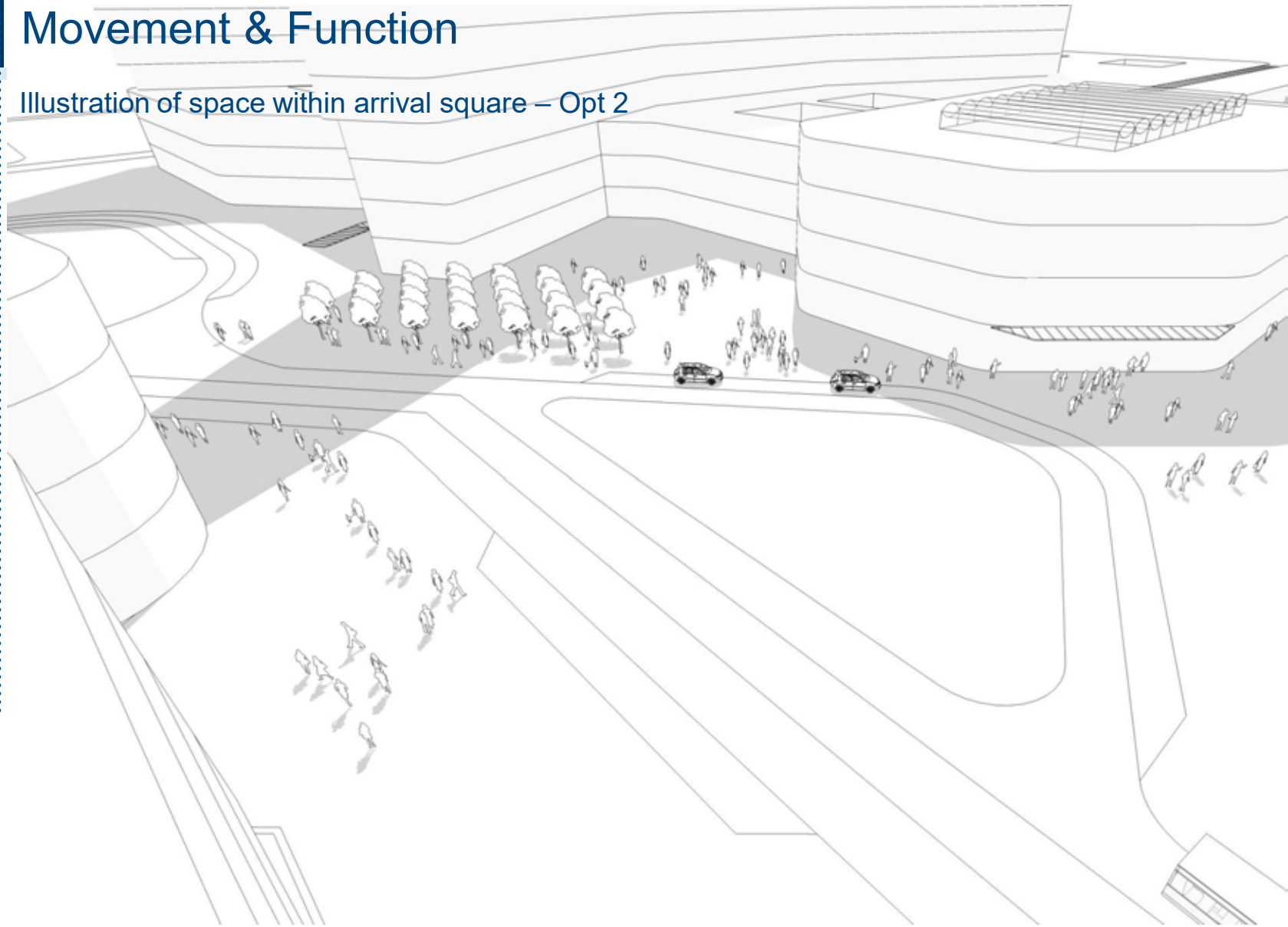
Movement & Function

Exploration of Movement Conflicts – Opt 2



Movement & Function

Illustration of space within arrival square – Opt 2

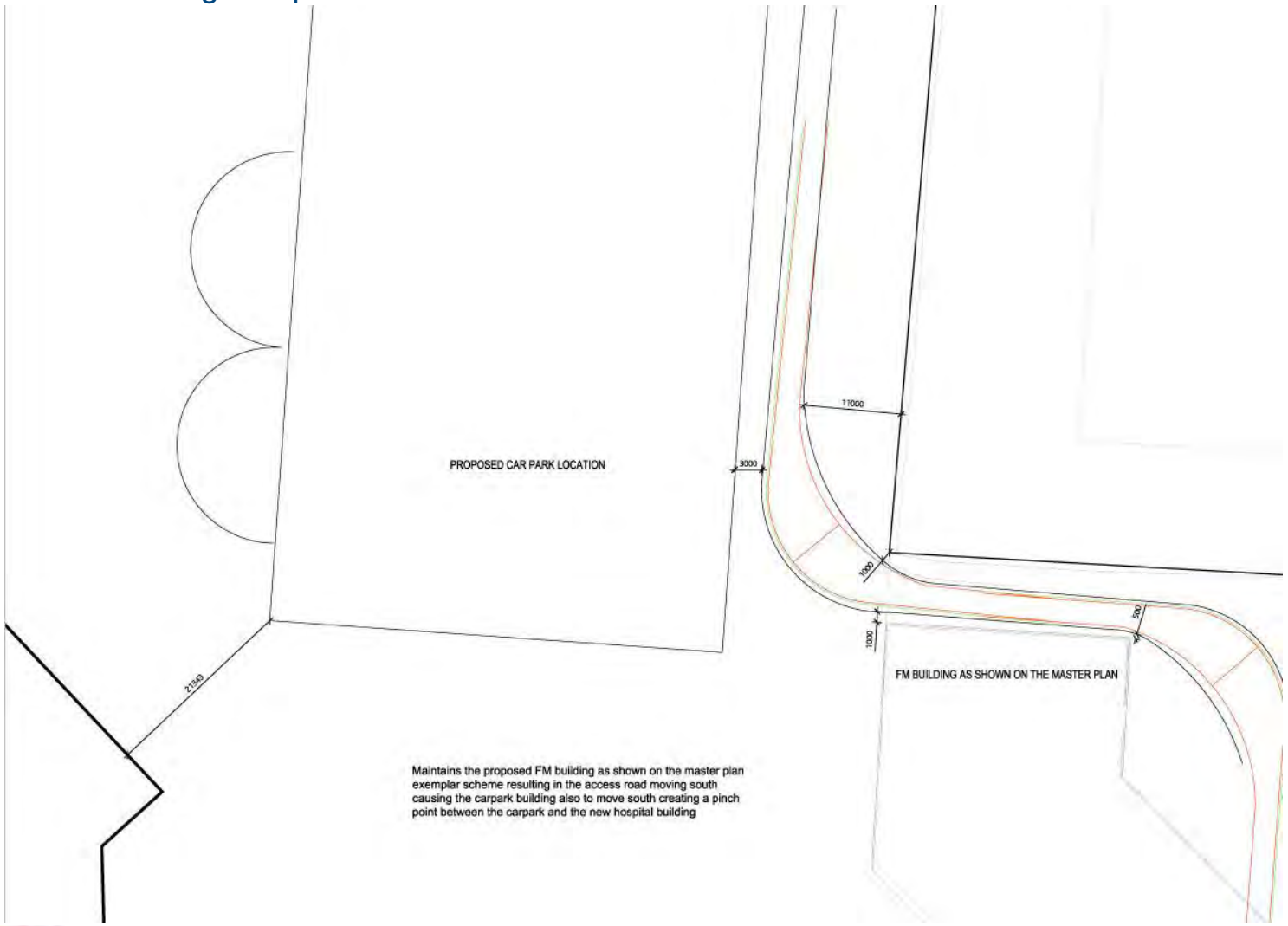


Movement & Function

FM/Labs Building Footprint & Access

Movement & Function

FM/Labs Building Footprint & Access



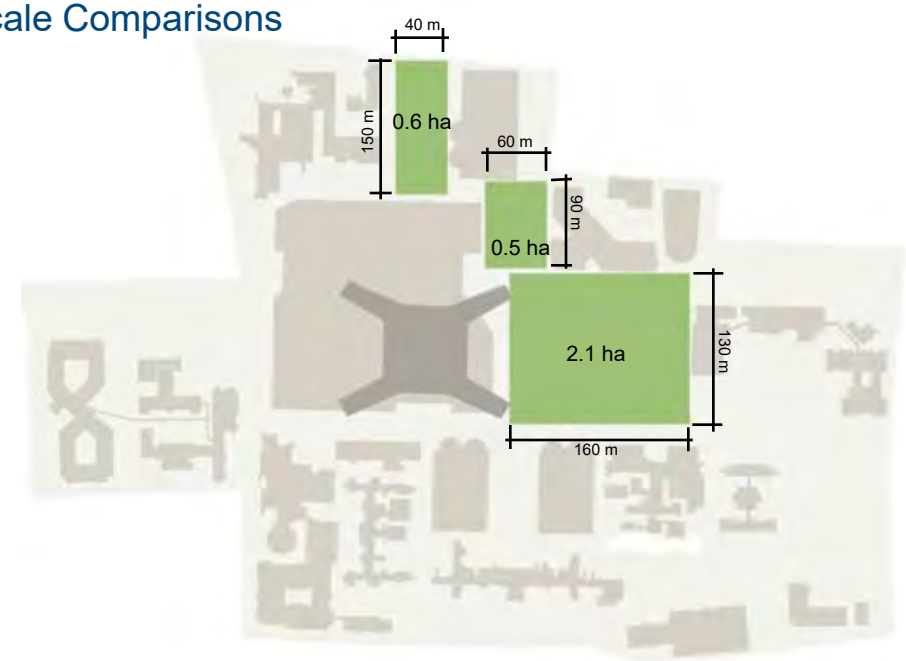
Movement & Function

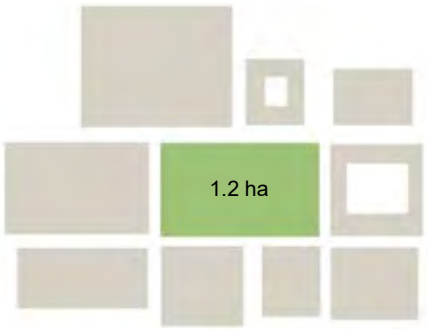
FM/Labs Building Footprint & Access

Blow up of URS drawing SK-01 Rev 0

Environmental Character

Scale Comparisons

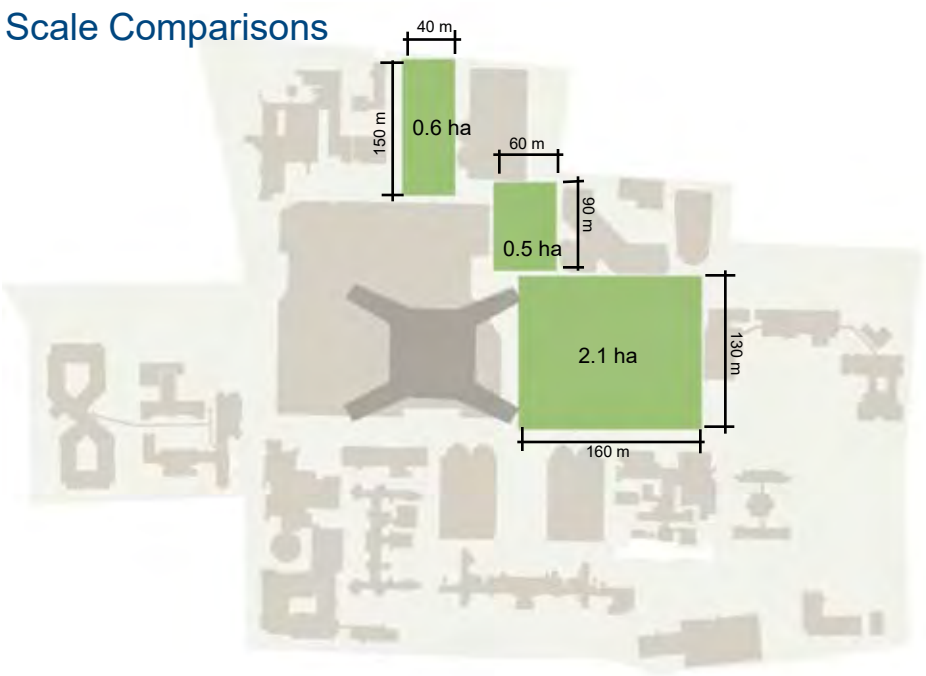


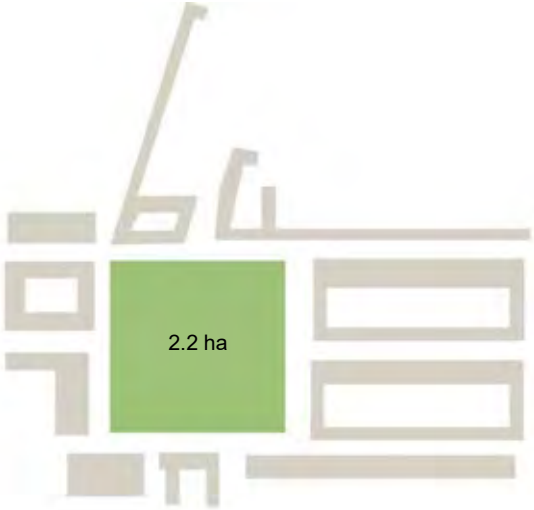


St George Square - Glasgow

Environmental Character

Scale Comparisons

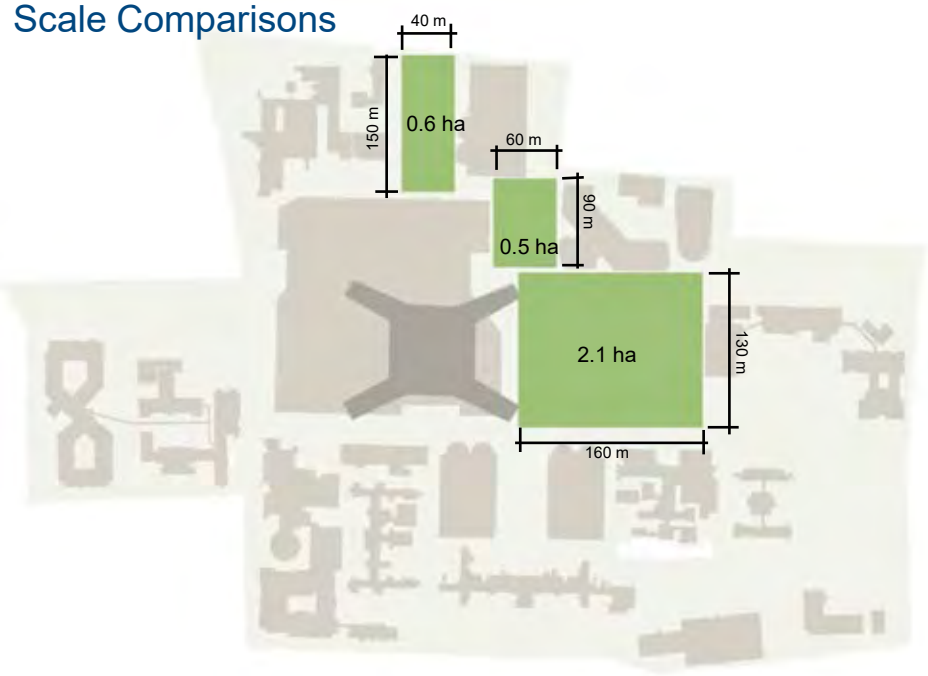




Russel Square - London

Environmental Character

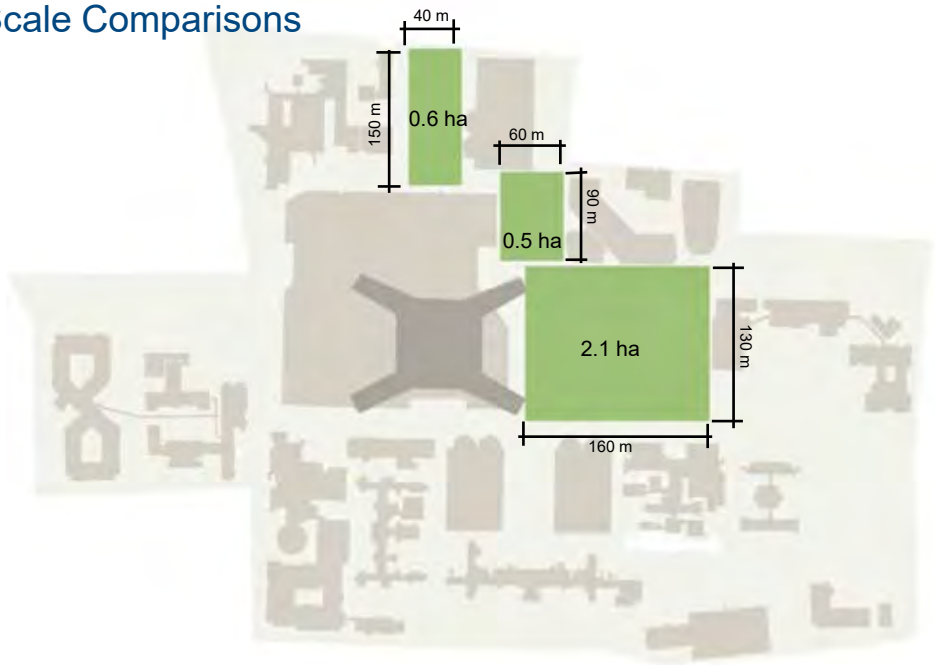
Scale Comparisons

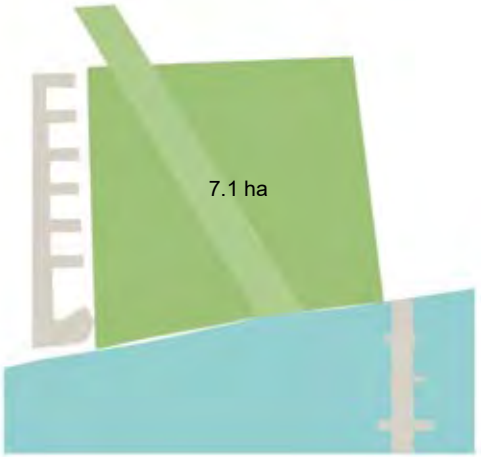


Trafalgar Square

Environmental Character

Scale Comparisons





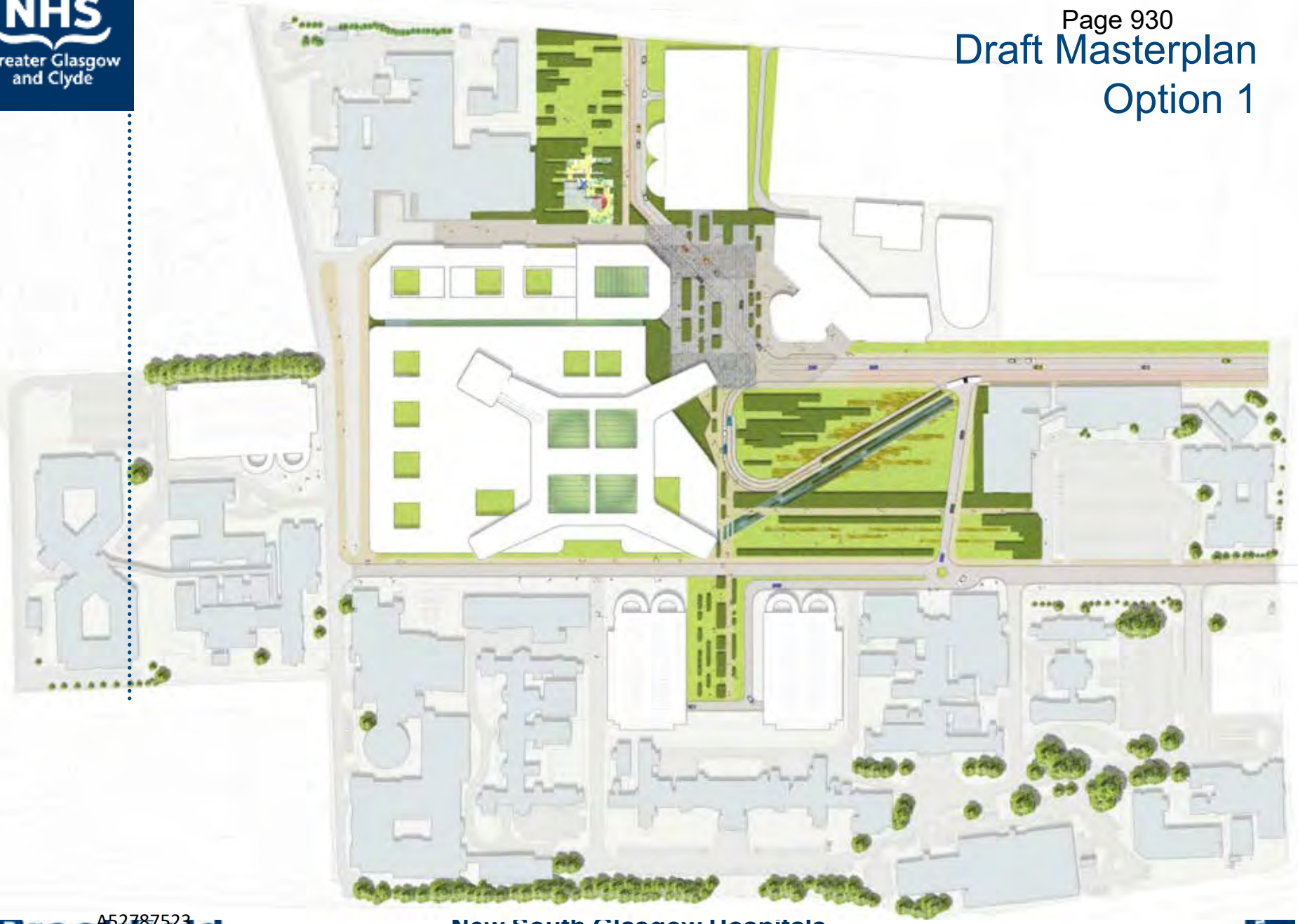
Thames Barrier Park

Environmental Character

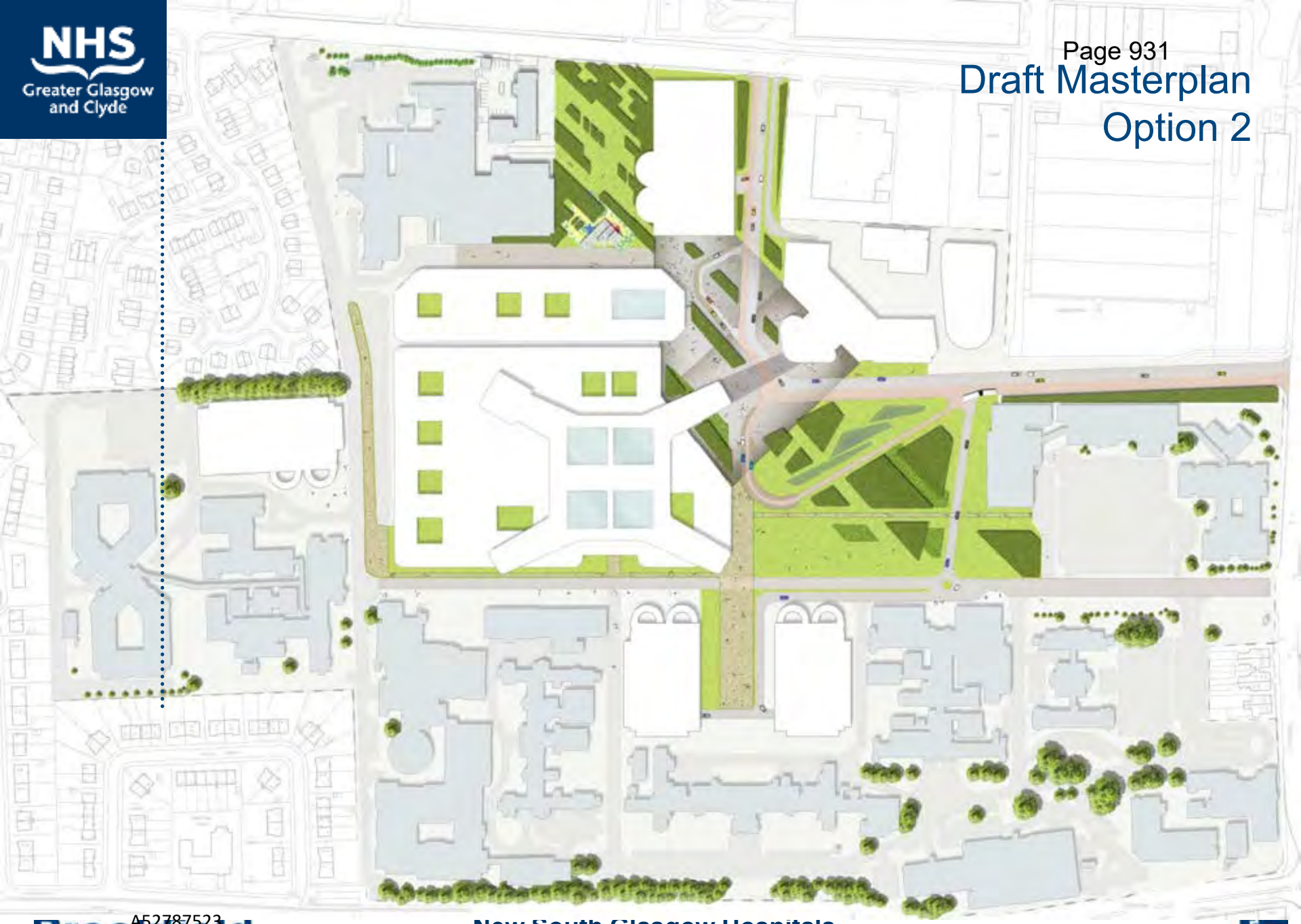
Landscape Function & Overview

- Integrate the existing and proposed Buildings
- Screen and protect proposed spaces
- Increase site biodiversity
- Integrate SUDs – sustainable water management
- Create a space accessible for all
- Minimize conflicts between pedestrians and vehicles
- Define a strong site identity
- Support the healing and therapeutic processes of the hospital
- Create a pleasant and relaxing environment for staff, patients and visitors
- Generate opportunities for staff social and physical activities

Draft Masterplan Option 1



Draft Masterplan Option 2



Design Intent

Arrival Square

- Human scale
- Clear routes
- Comfort
- Seasonal variety
- Containment to moderate scale & exposure

Design Intent

Arrival Square

- Attractive & distinctive
- Civic character & public focus

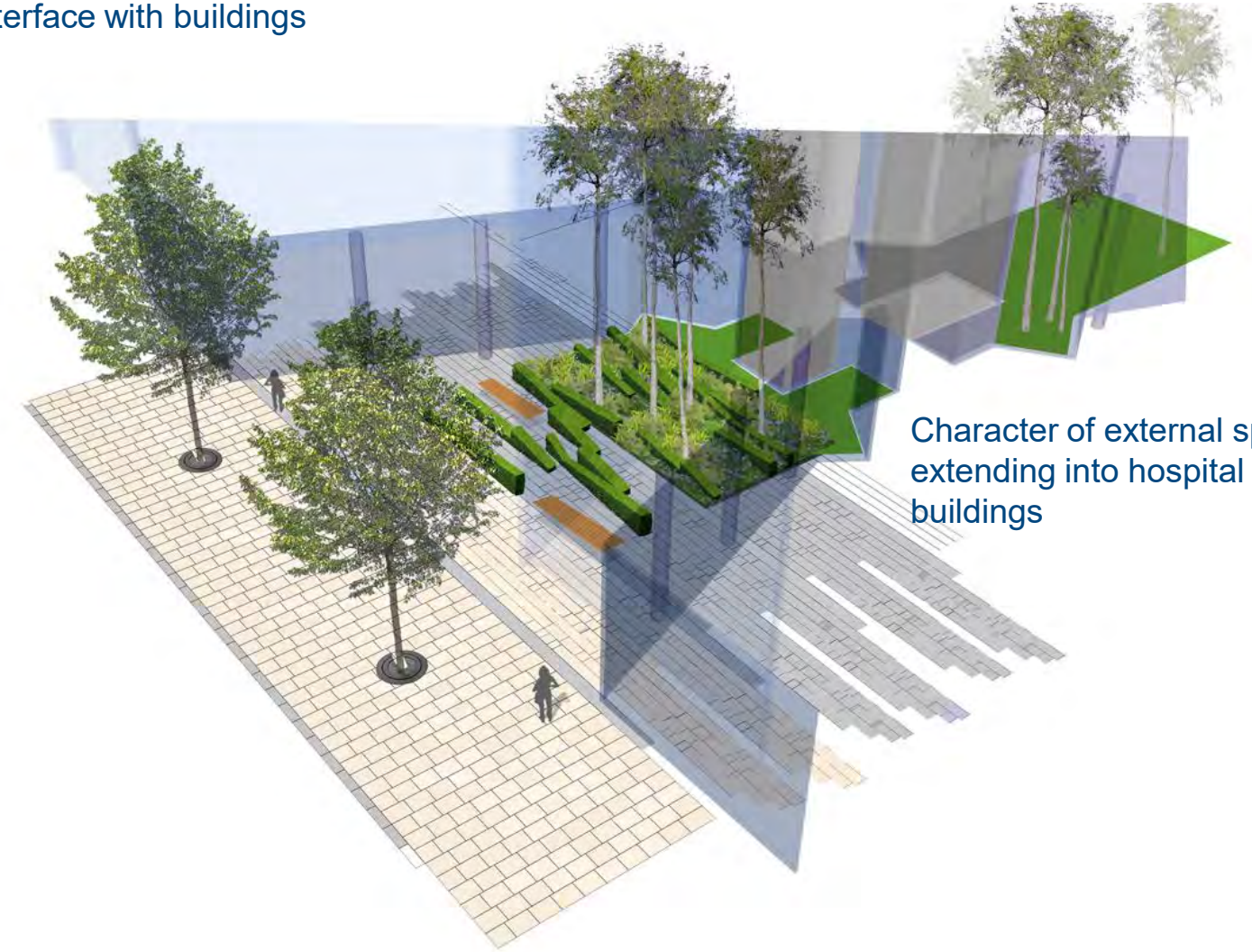
- Other areas legible & routes clear
- Appropriate quality

Design Intent

Interface with buildings

Design Intent

Interface with buildings



Character of external spaces extending into hospital buildings

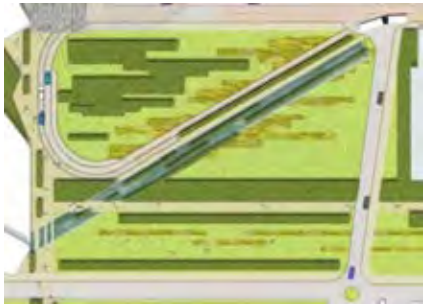
Design Intent

Children's Park

- Interesting elements
- Variety
- Covered play areas
- Space for flexible uses
- Colour
- Interactivity

Design Intent

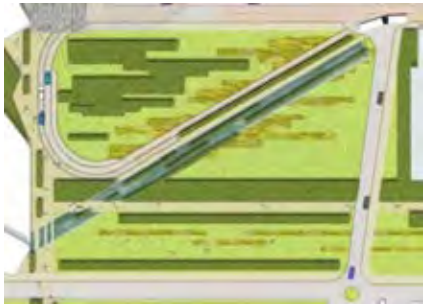
Central Park



- Simple materials
- Predominantly grass & trees
- Seasonal character
- Blossom
- Shelter
- Sports/recreation

Design Intent

Central Park



- Inviting
- Potential undulations
- Links to external café?
- Largely informal
- Legible network of paths
- Clear wayfinding
- Visibility of key buildings

Design Intent

Central Park

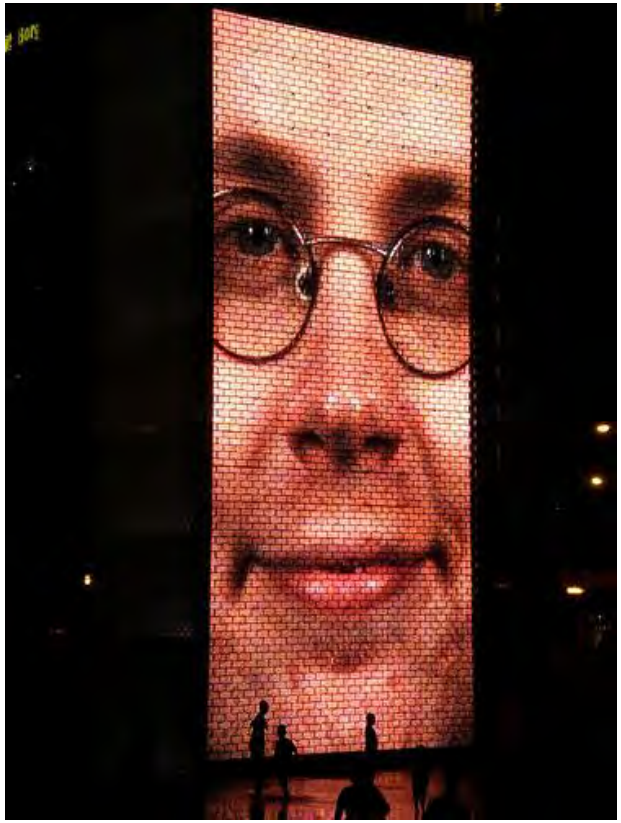
Design Intent

Central Park

- Plus shelter for when the sun does not shine and wind blows hard!

Design Intent

Clear and safe routes by night – effective wayfinding



Design Precedents

Courtyards & Green Roof Potential

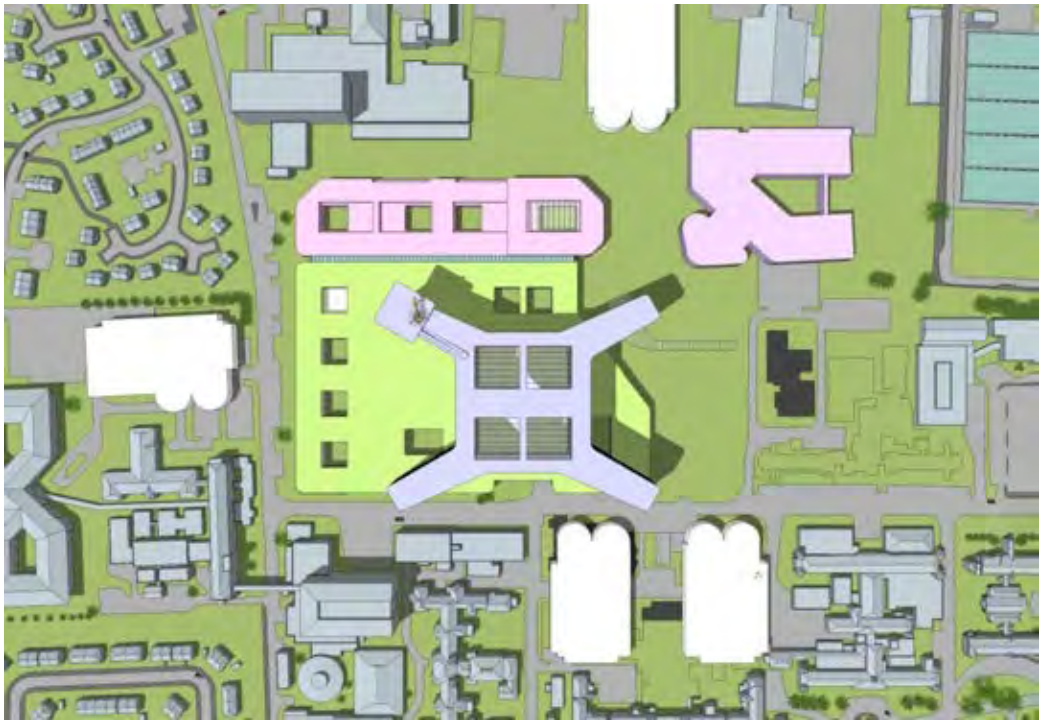
Design Intent

Screens & edges

Design Intent

Sustainable Urban Drainage & Water Management

Opportunity E



Master Plan

Ground Floor

First Floor

Second Floor

Fourth Floor

Main Entrance

Children's Entrance

Isometric

Opportunity E1

Master Plan

Main Entrance

Children's Entrance

Isometric

Opportunity E2

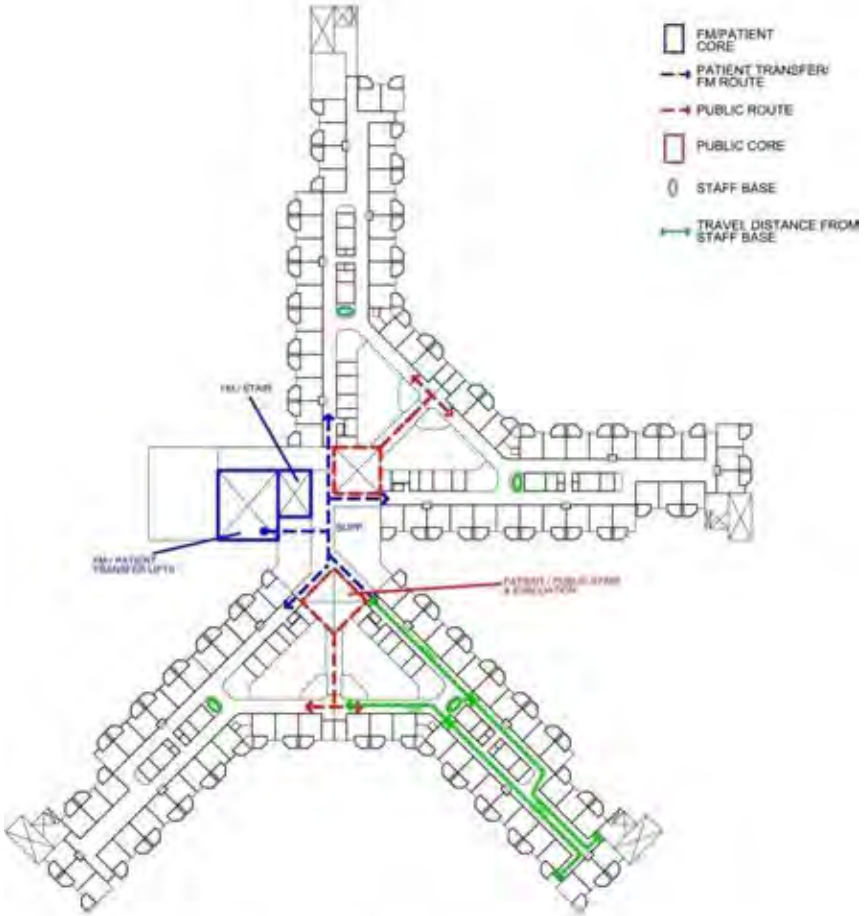
Master Plan

Main Entrance

Children's Entrance

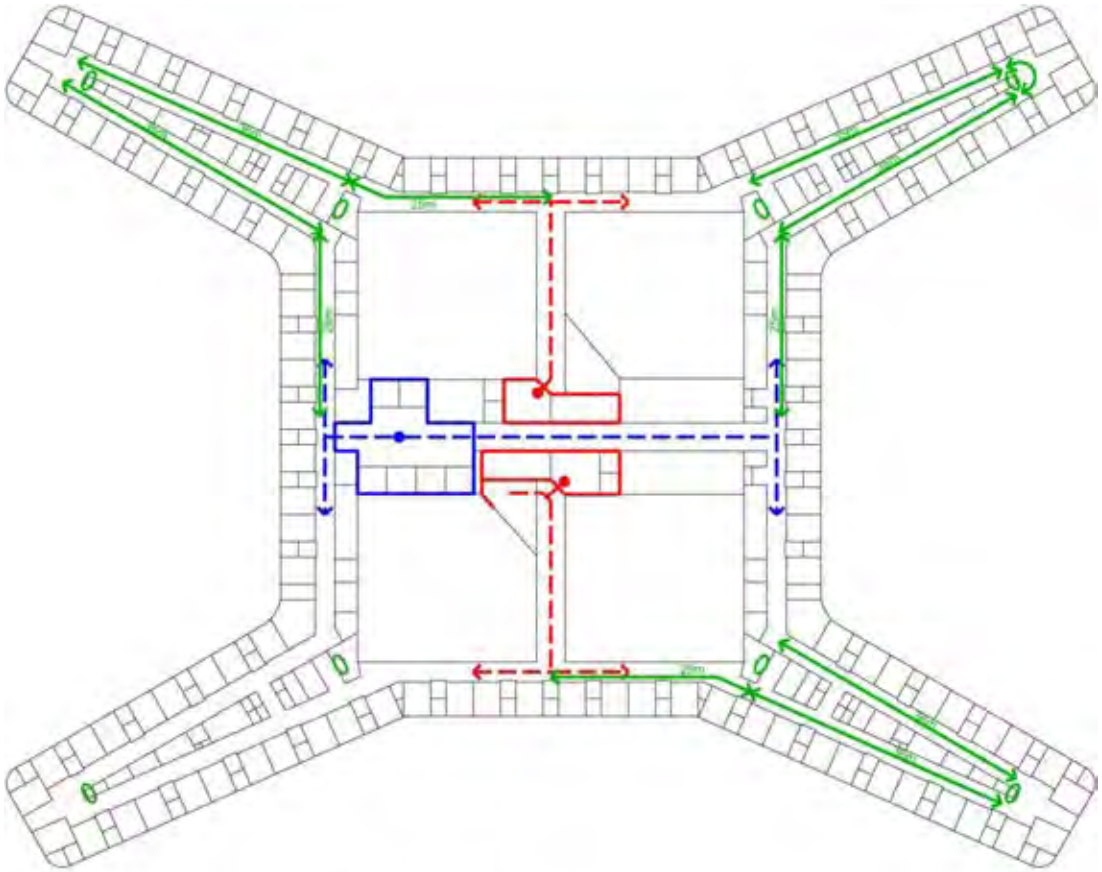
Isometric

Exemplar Ward



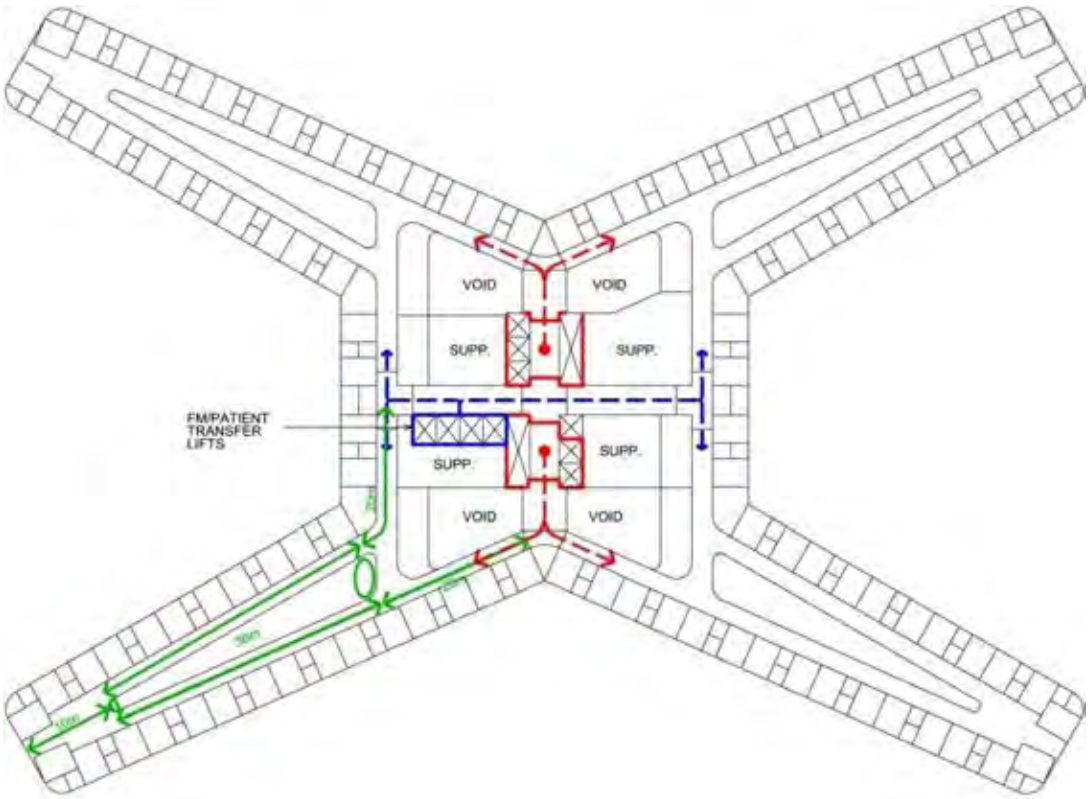
Exemplar Design

Circulation Flows



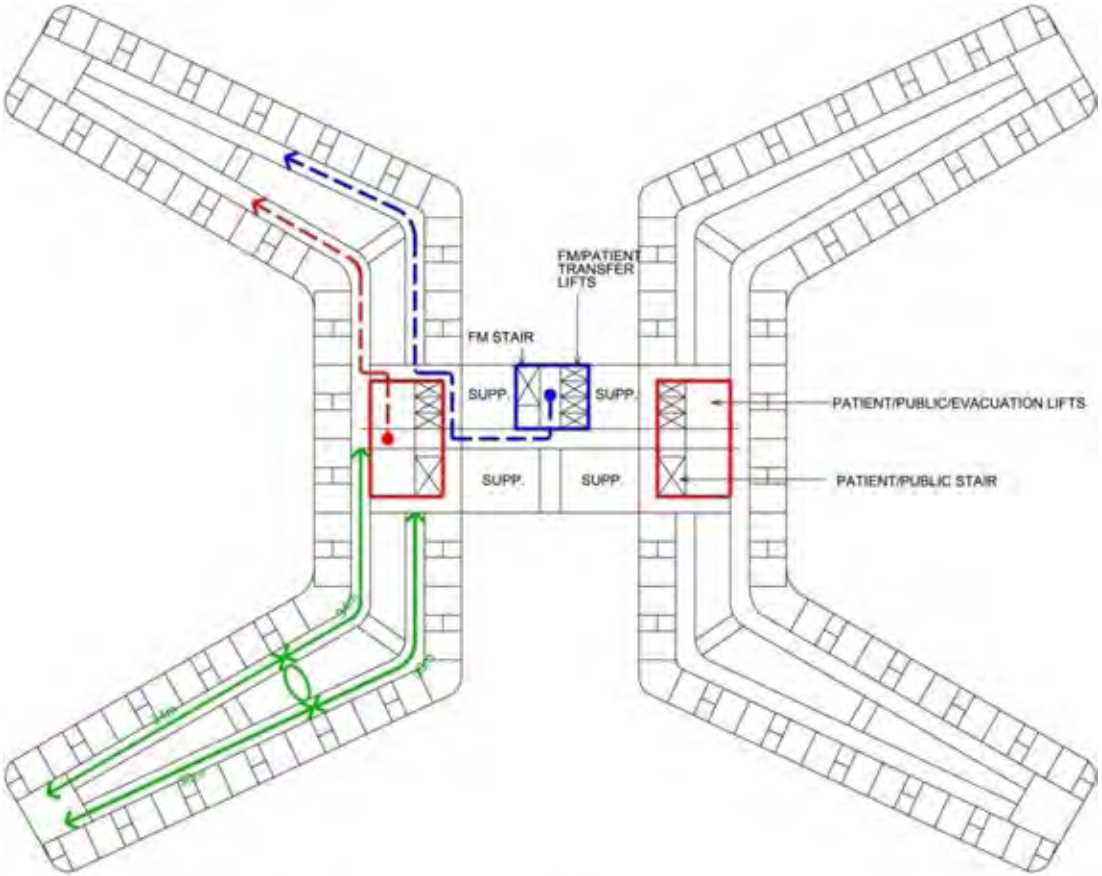
Opportunity 'E'

Circulation Flows



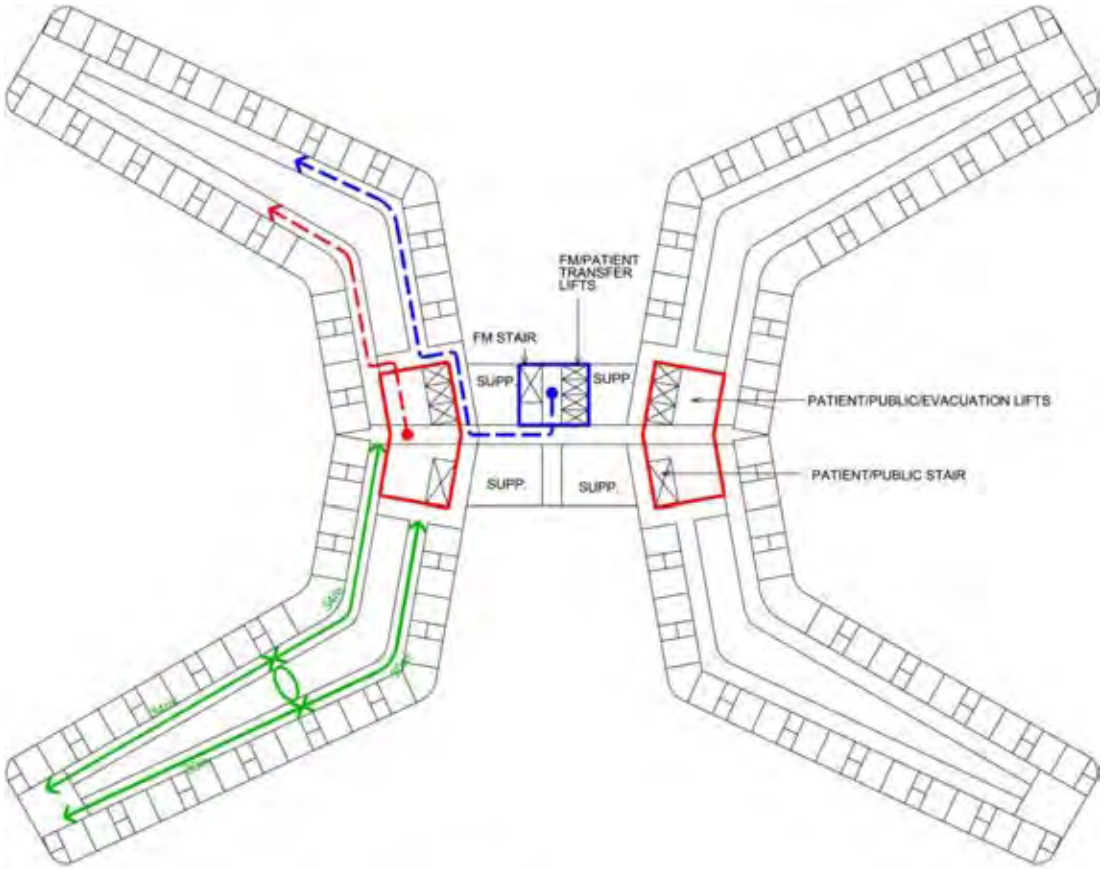
Opportunity 'E1'

Circulation Flows



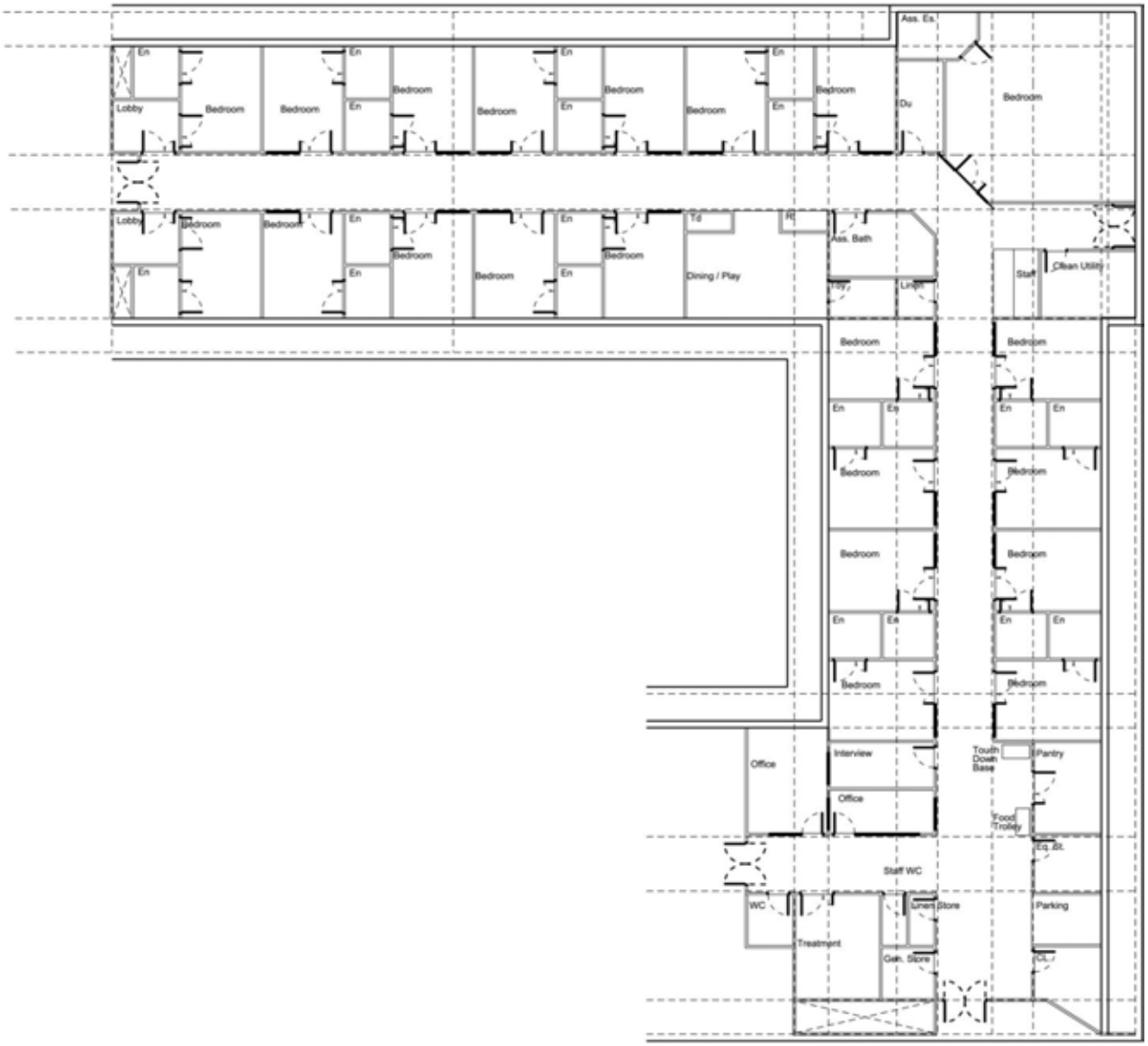
Opportunity 'E2'

Circulation Flows

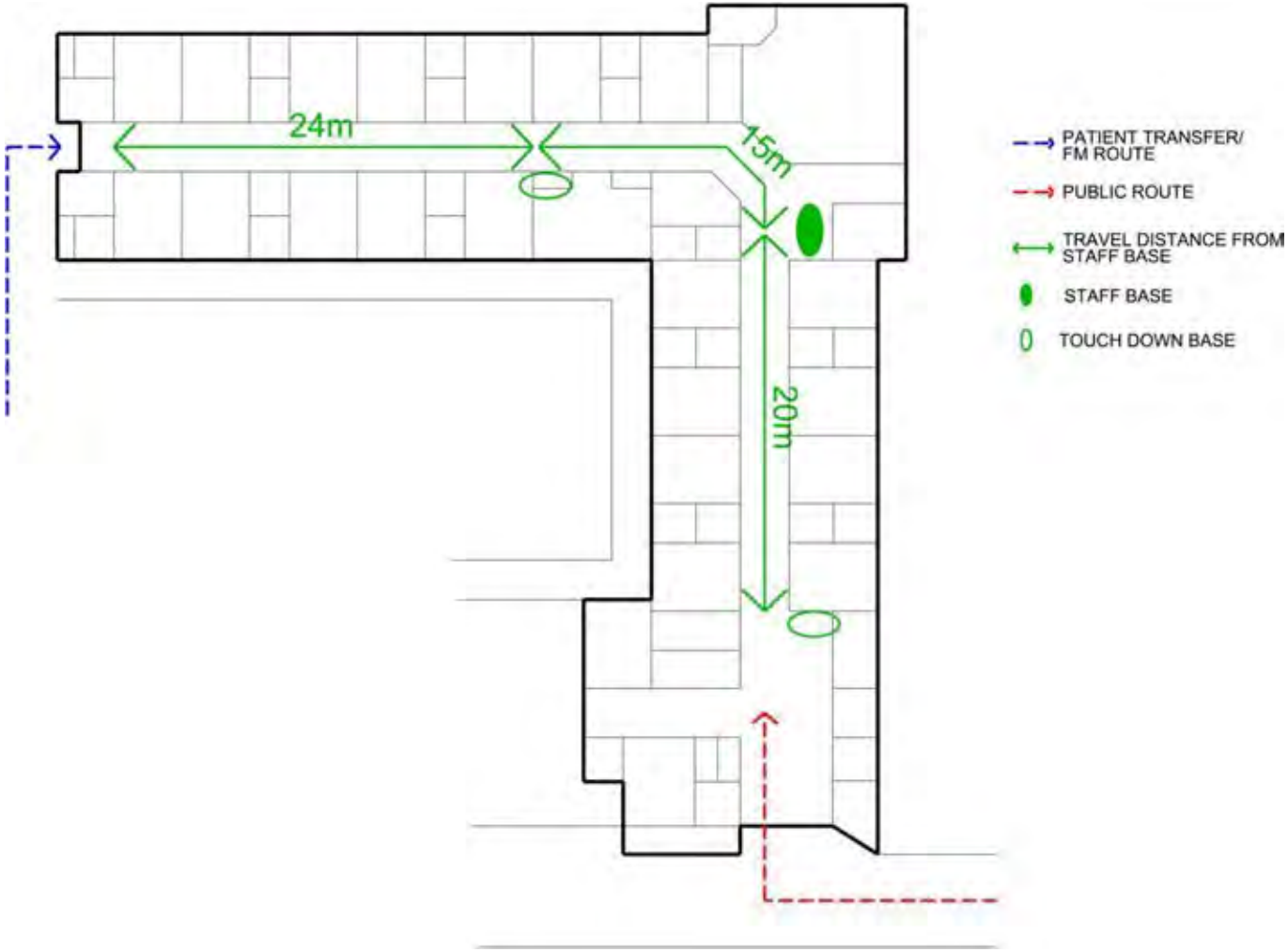


Opportunity 'E3'

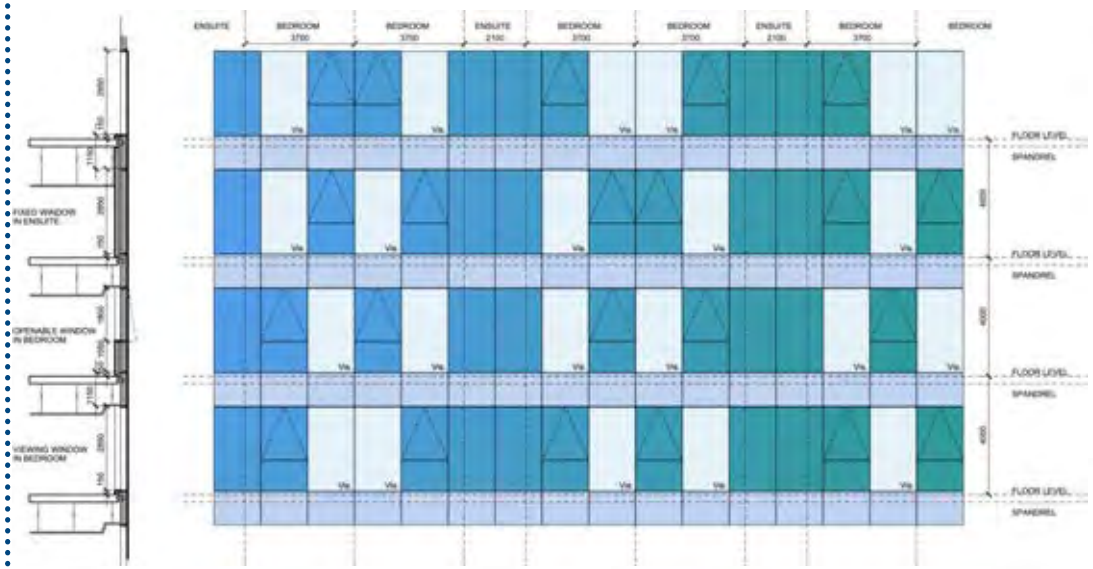
Children's Ward

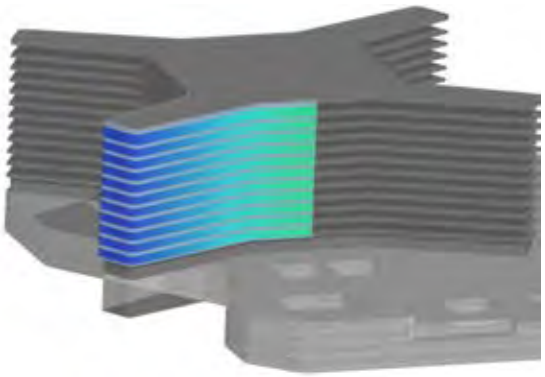


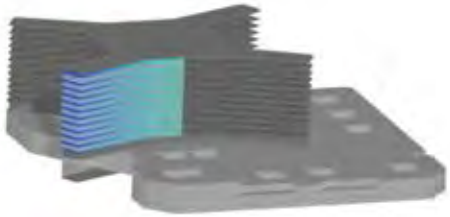
Children's Ward Circulation Flows

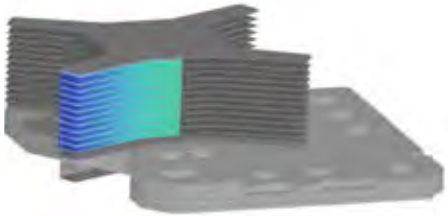


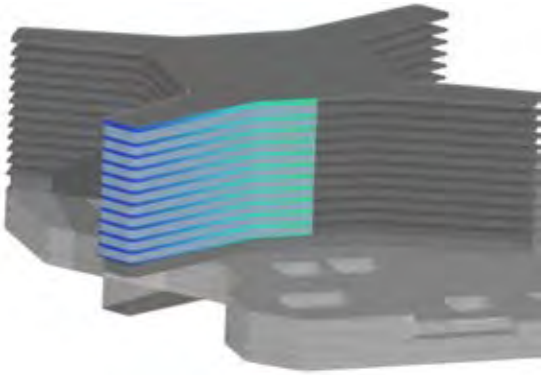
Cladding Option



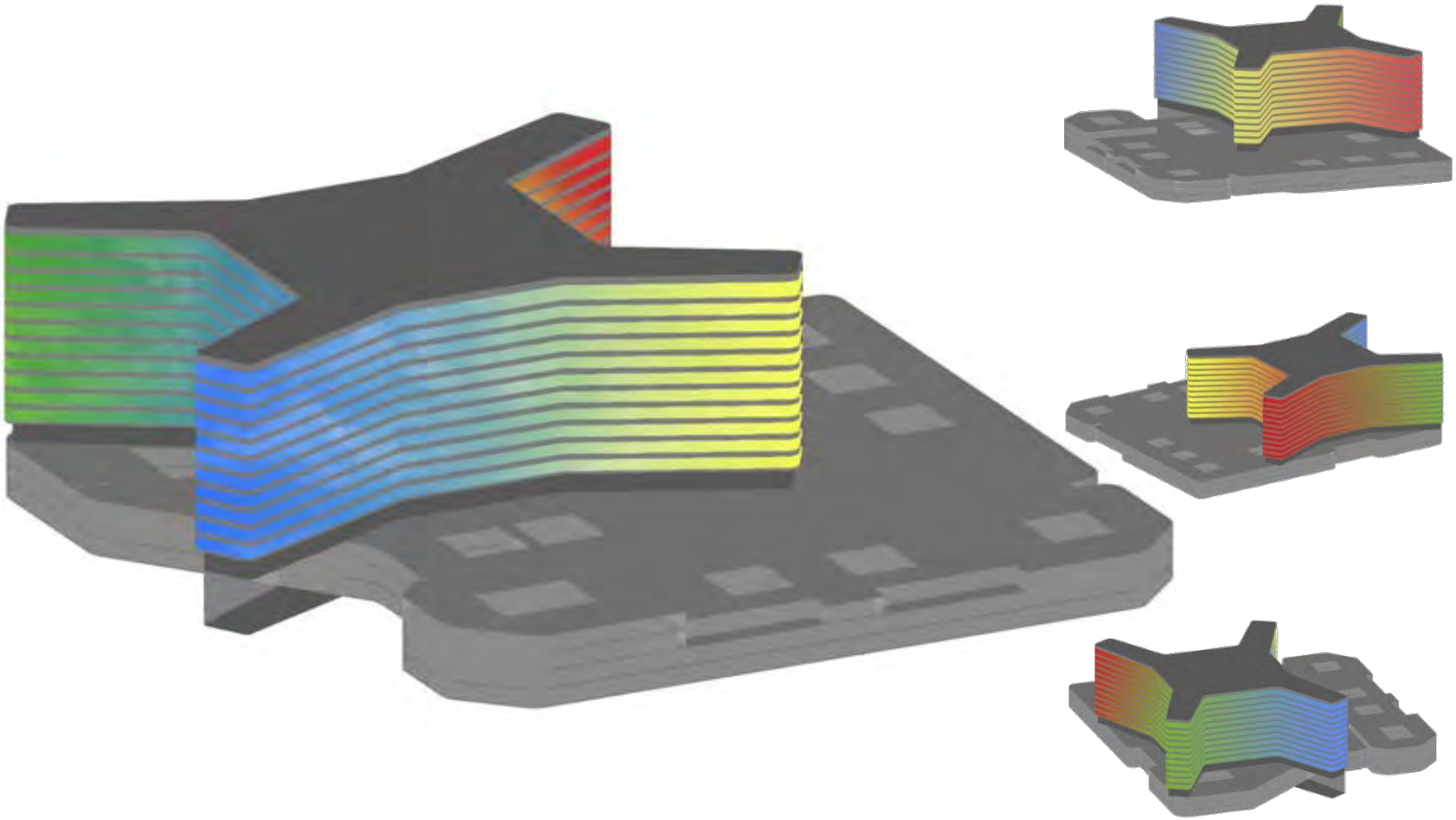


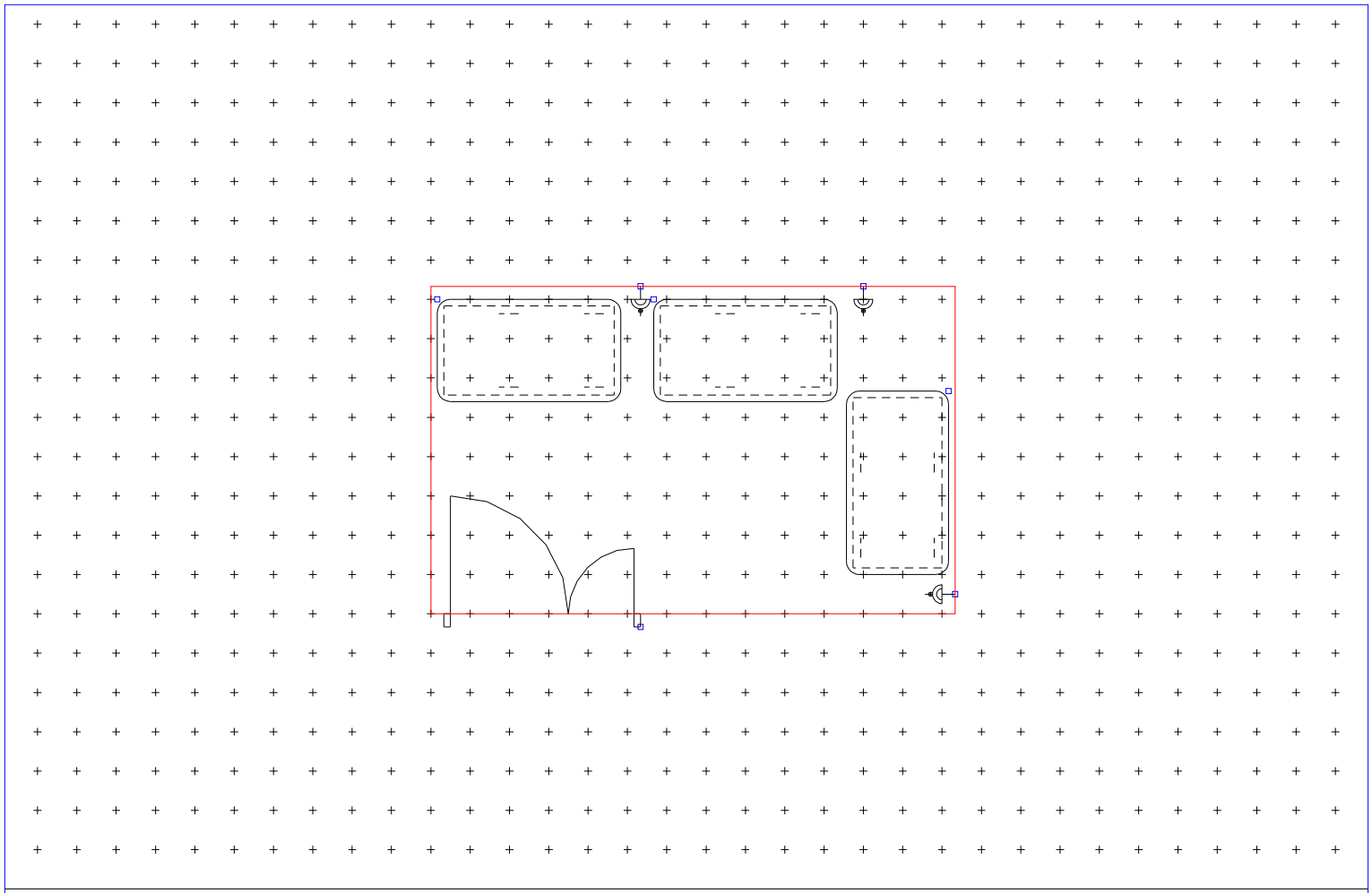






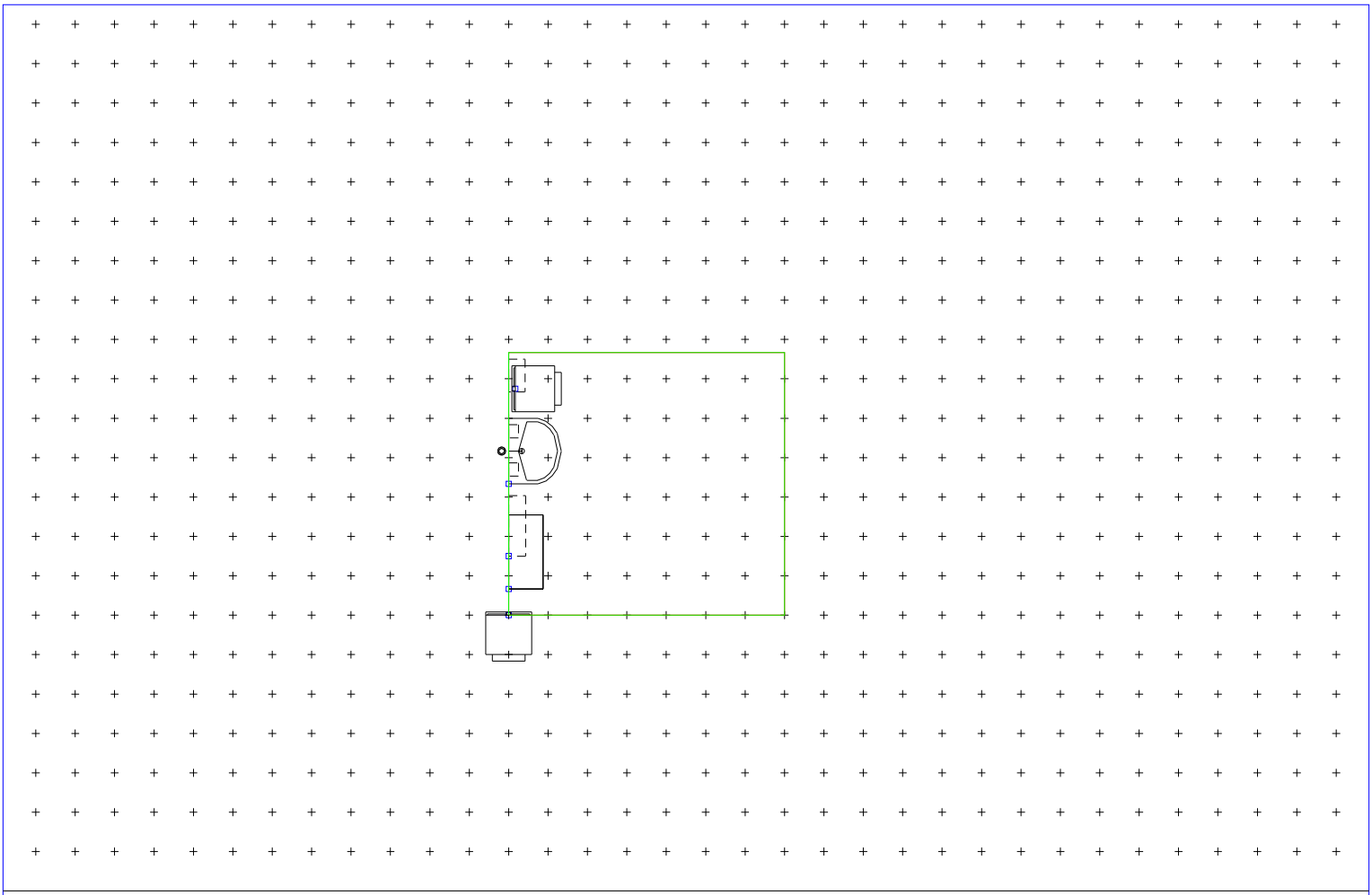
Cladding Option





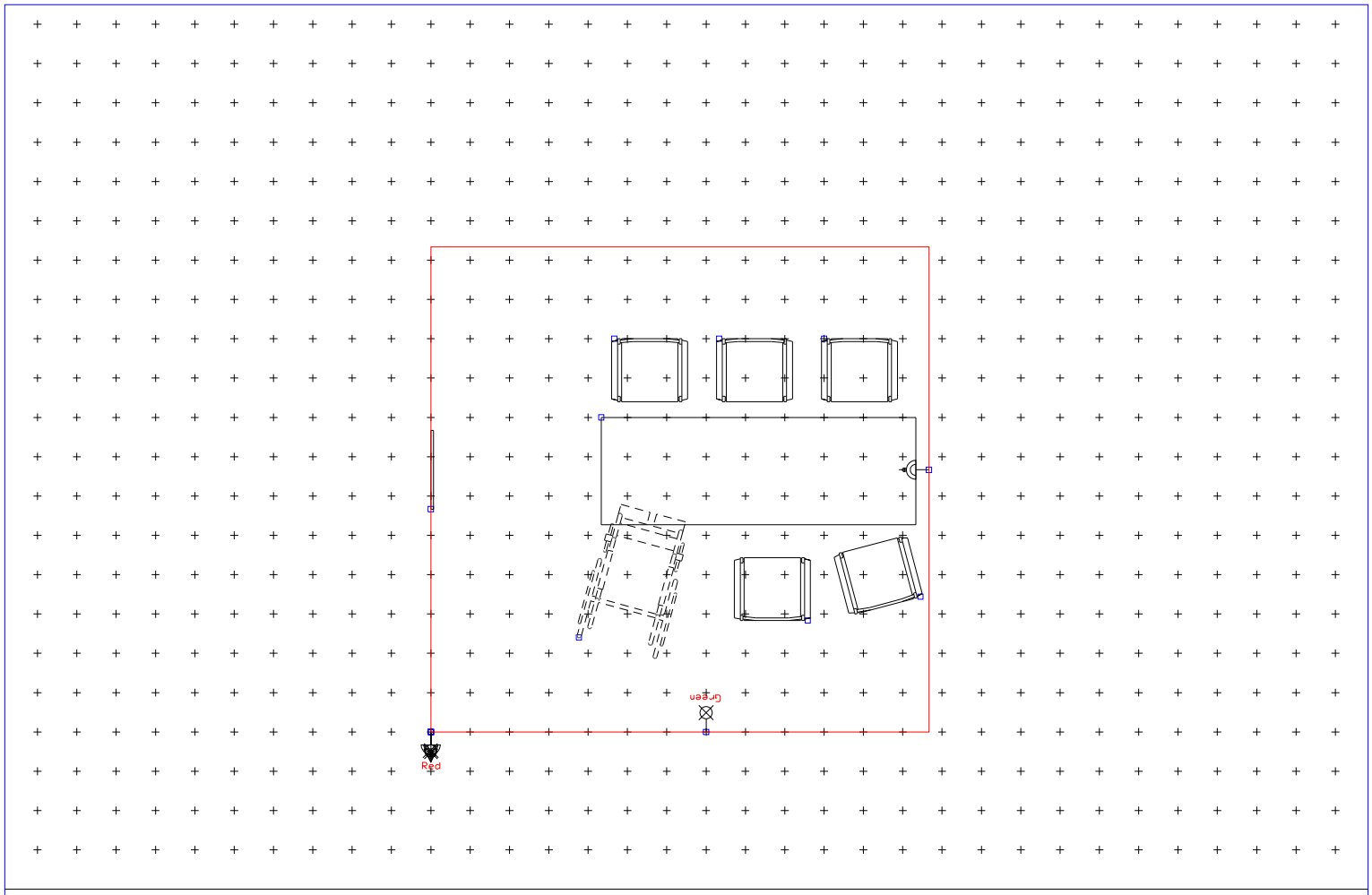
Servery serving central dining room

F0308 Grid:300 (mm) 05/05/2009



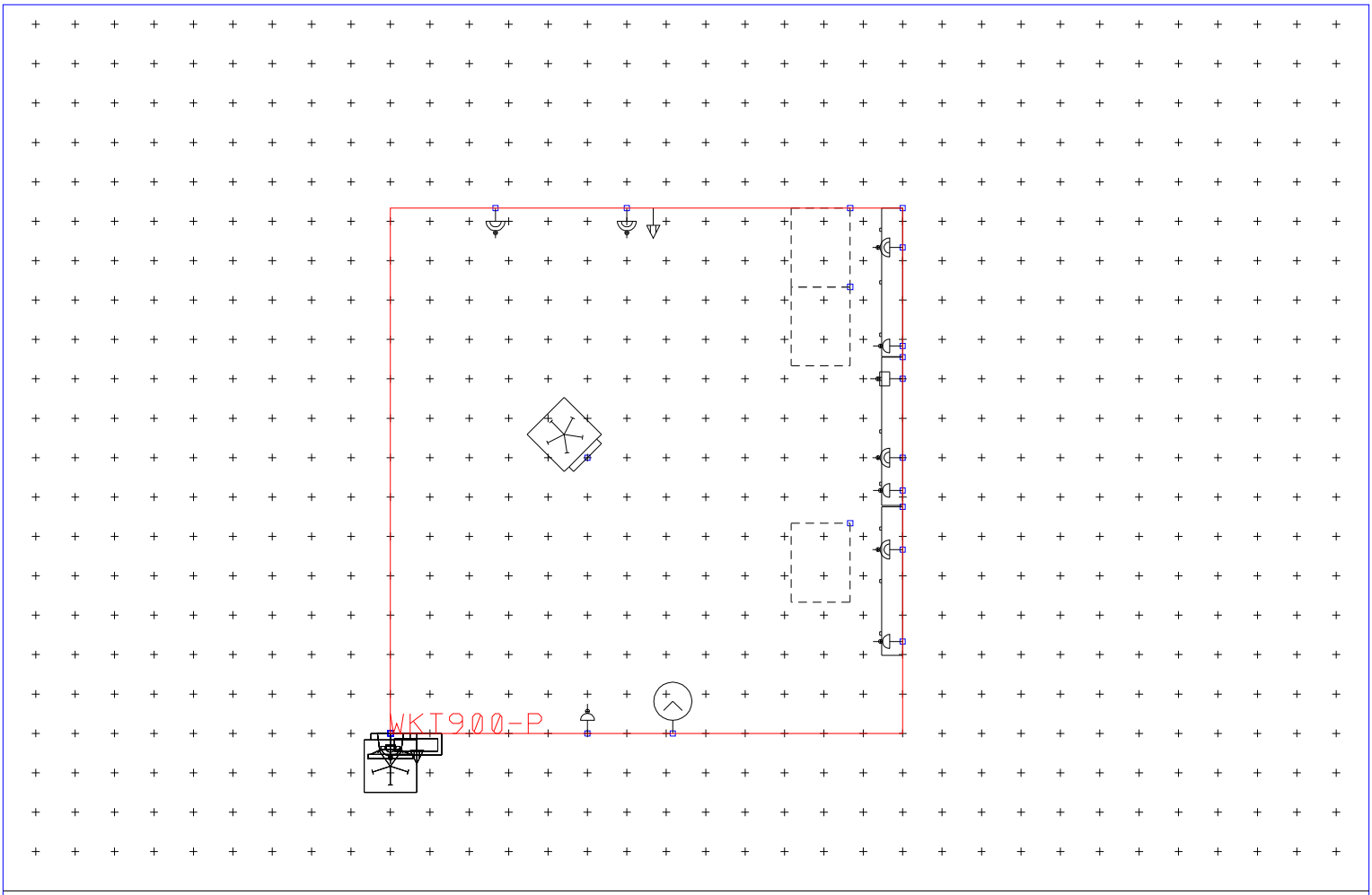
Lobby: gowning (isolation room)

G0507 Grid:300 (mm) 07/04/2009



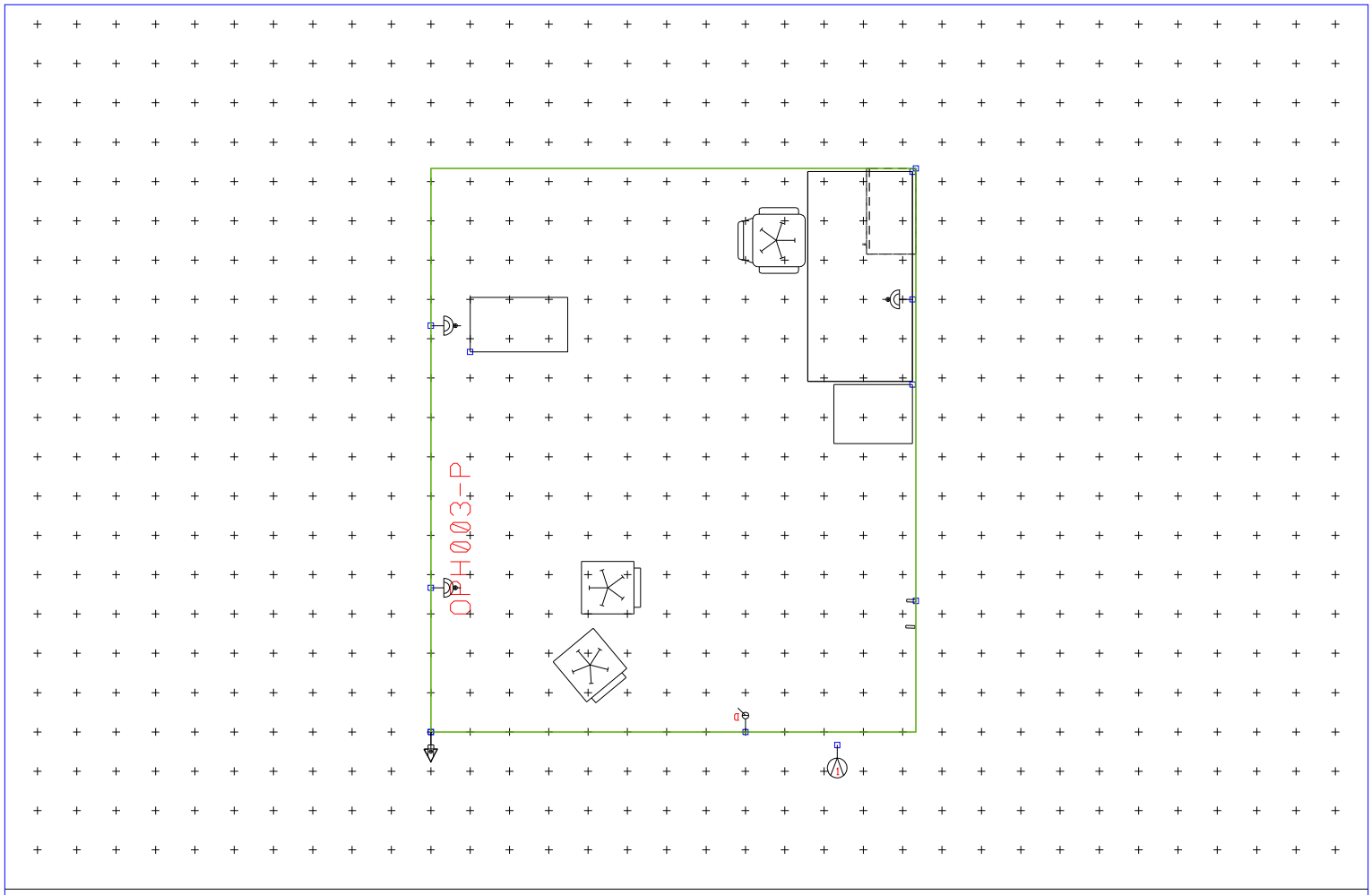
Interview/meeting room: 6 persons

M0713 Grid:300 (mm) 05/05/2009



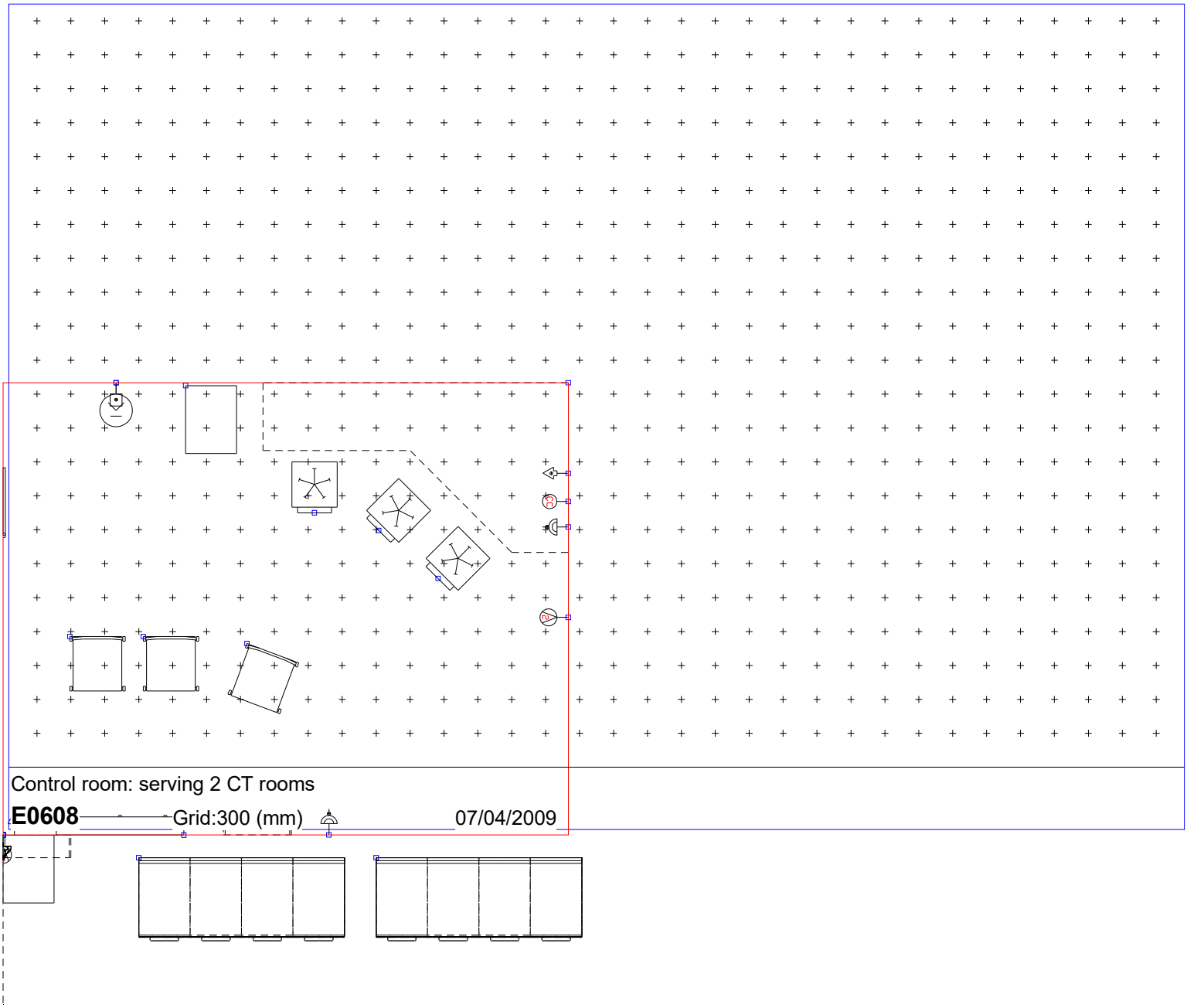
Reporting room: 4 workstations

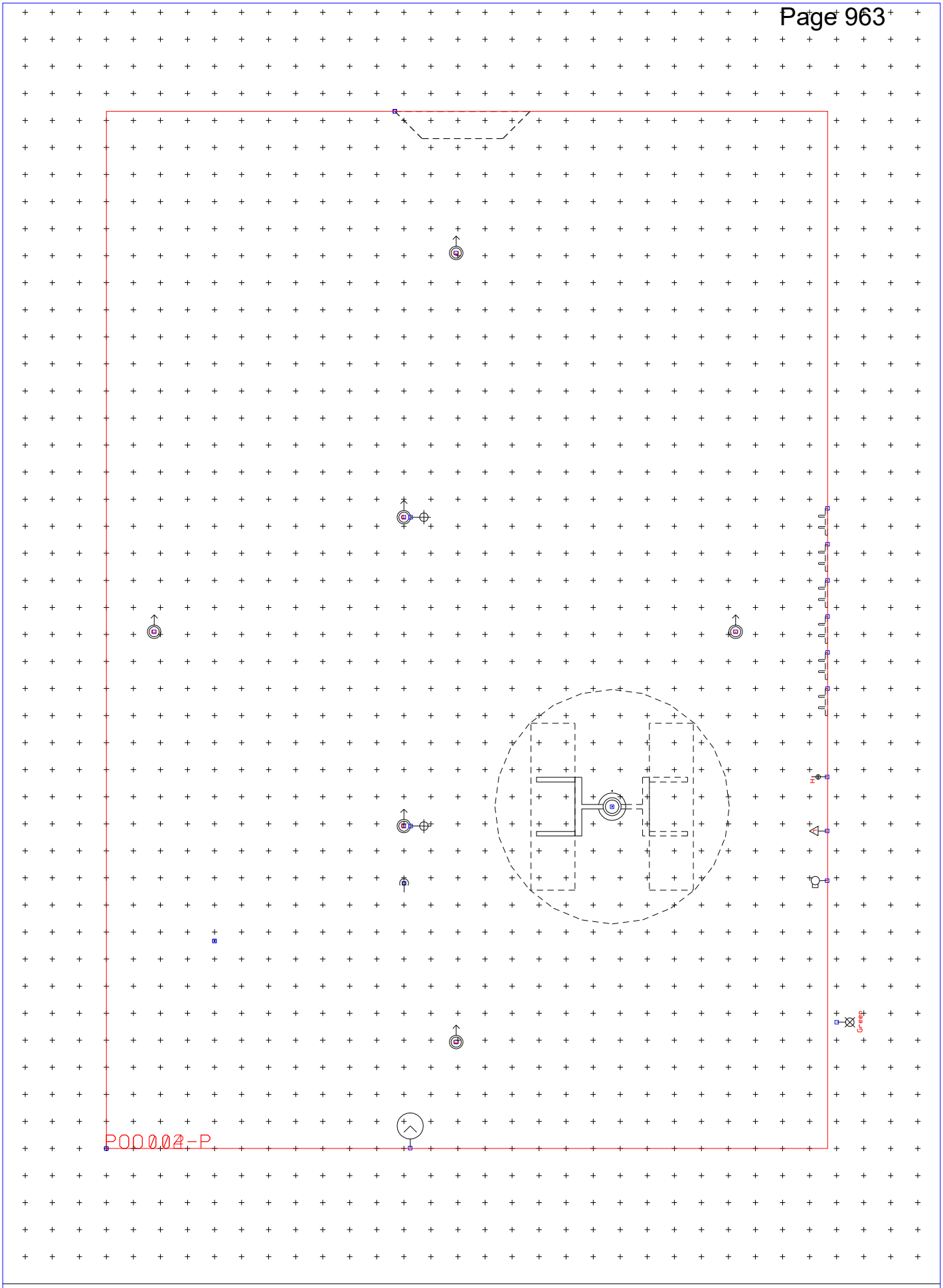
E0534 Grid:300 (mm) 07/04/2009



Examination room: visual fields test

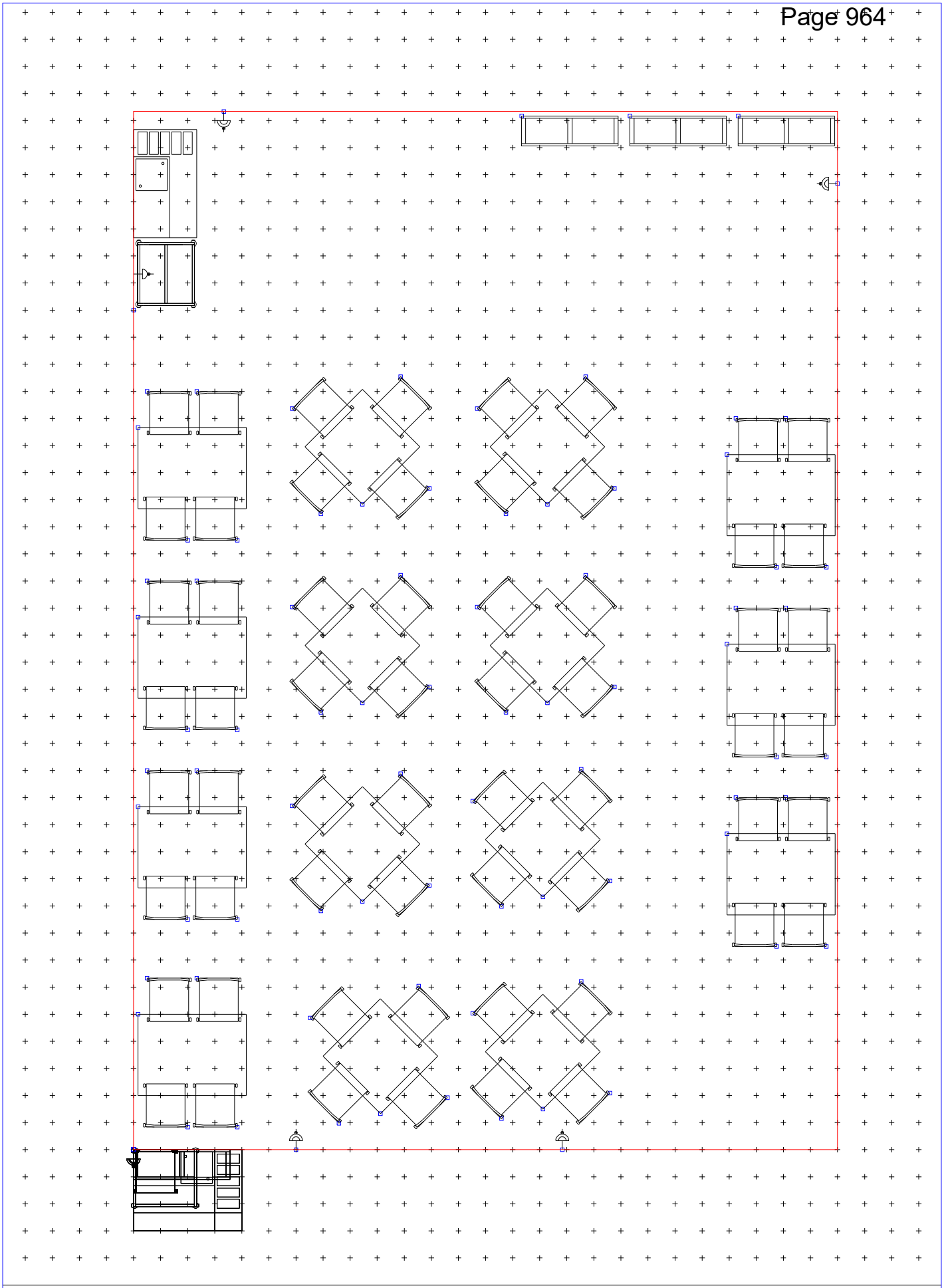
C1020 Grid:300 (mm) 19/10/2006


Control room: serving 2 CT rooms
E0608
Grid:300 (mm)
07/04/2009



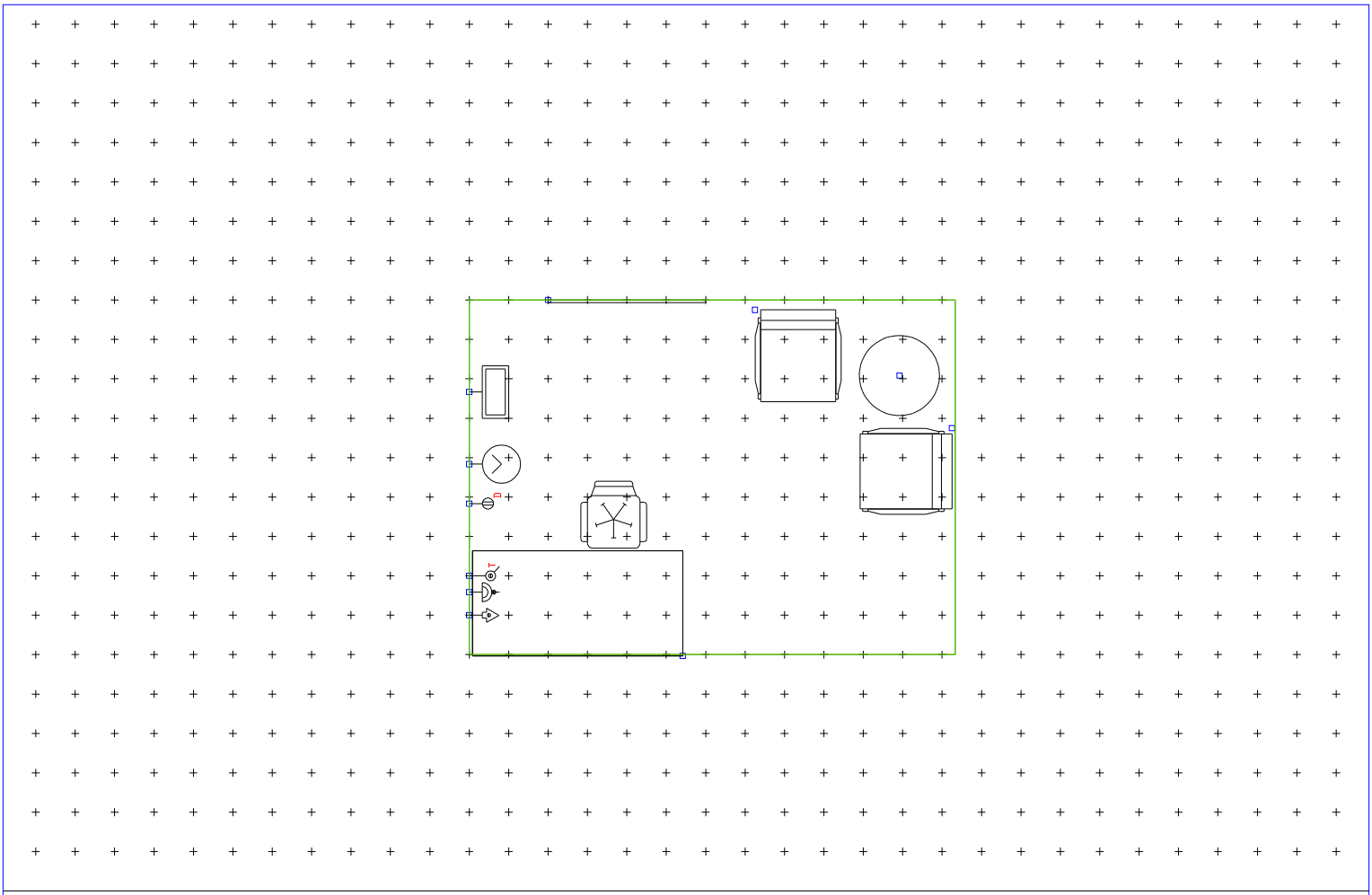
Hydrotherapy pool hall

Q0519 A52787523 Grid:300 (mm) 23/04/2009



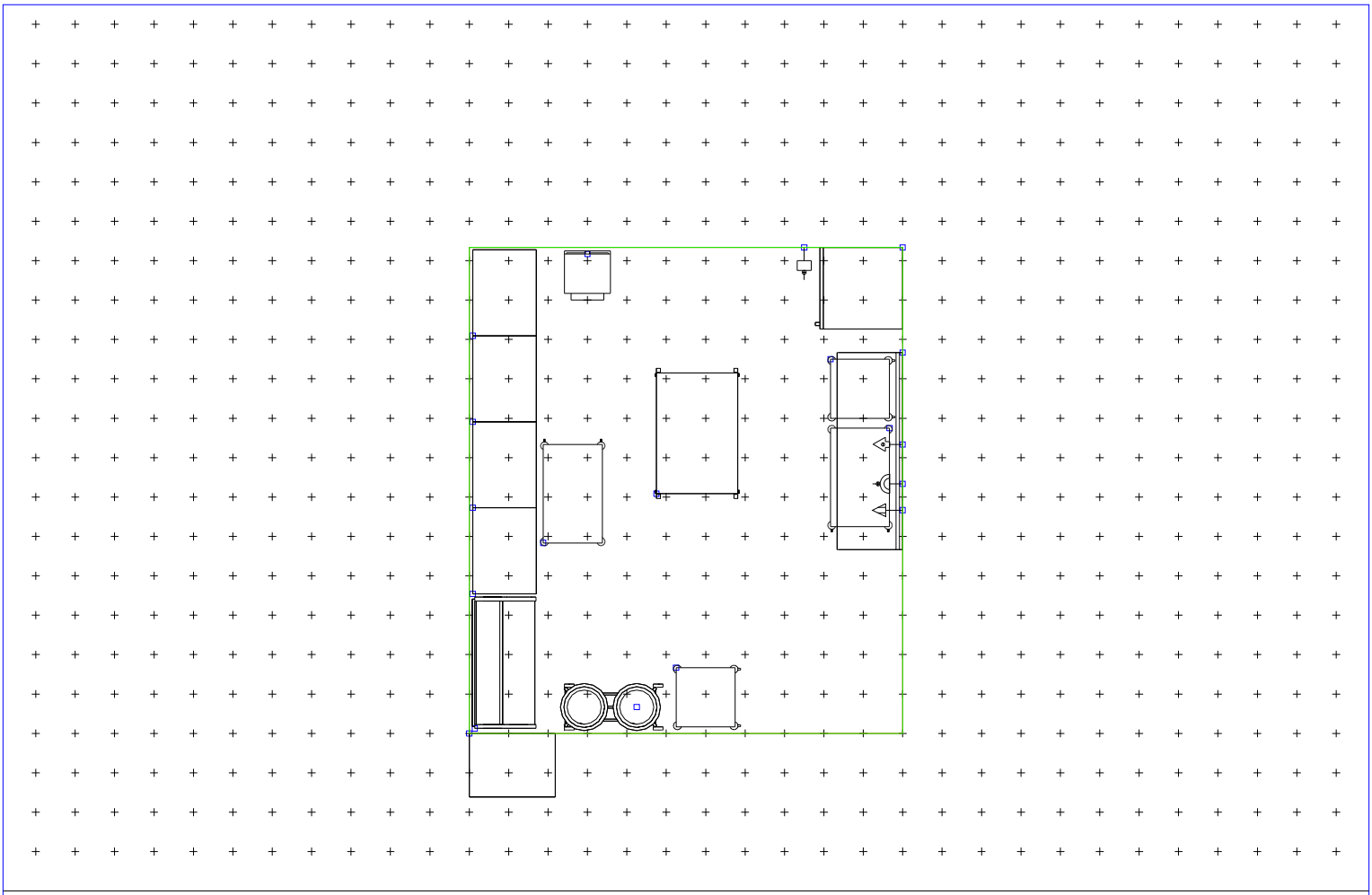
Restaurant: 240 places

F0612 A52787523 Grid:300 (mm) 05/05/2009



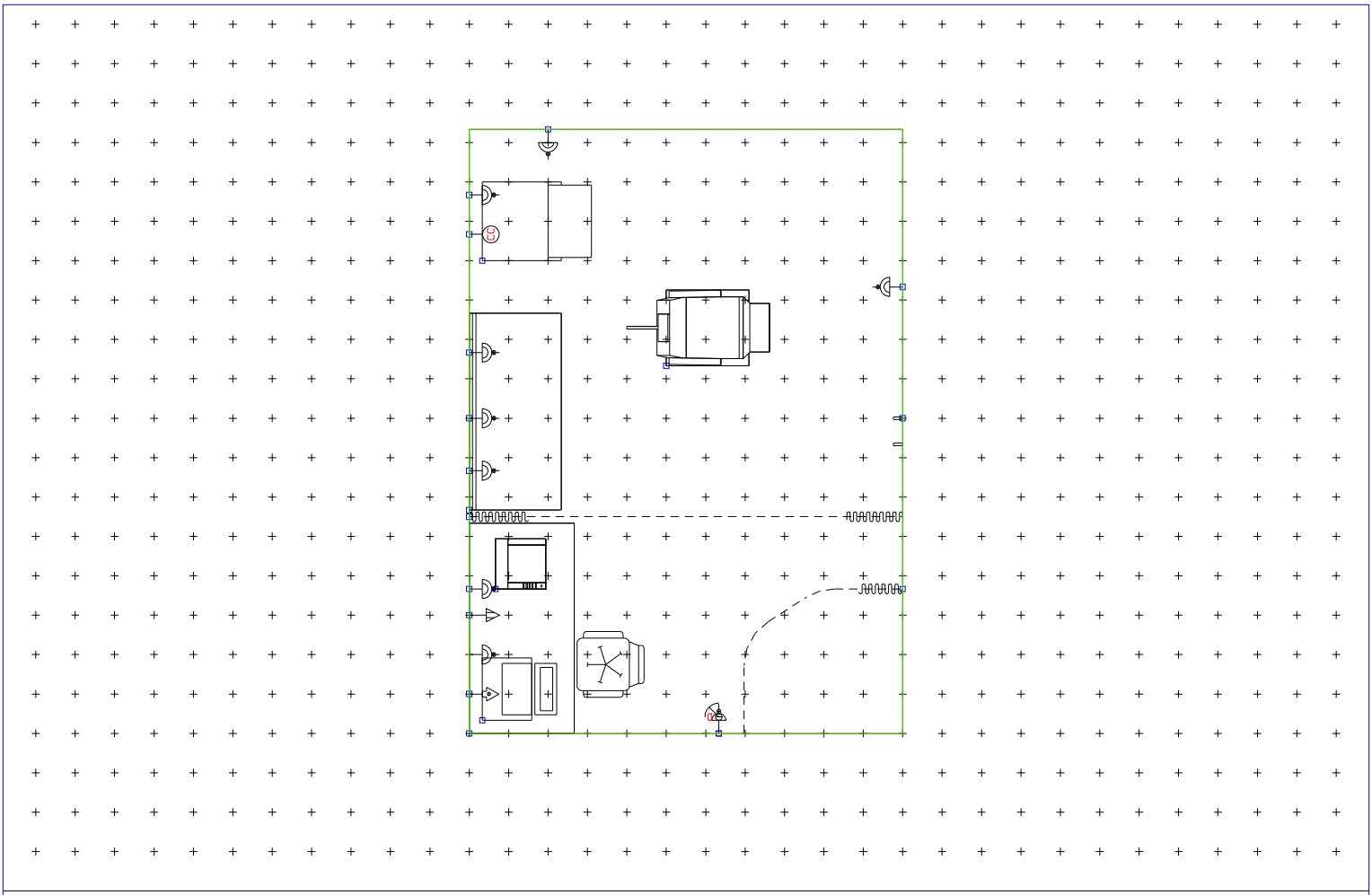
Staff base: 3 staff, ward

T0106 Grid:300 (mm) 07/04/2009



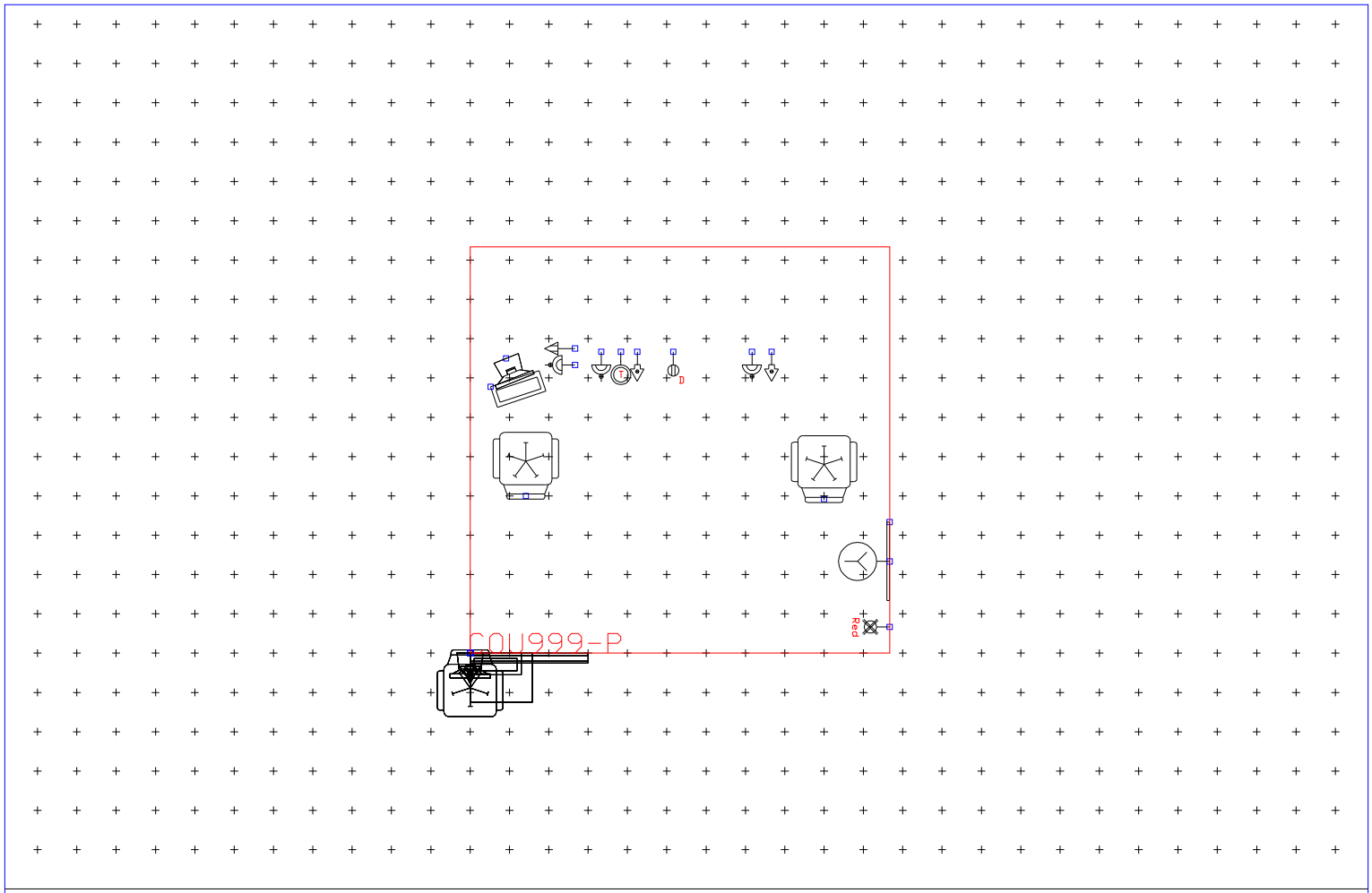
Preparation room

T0526 Grid:300 (mm) 07/04/2009



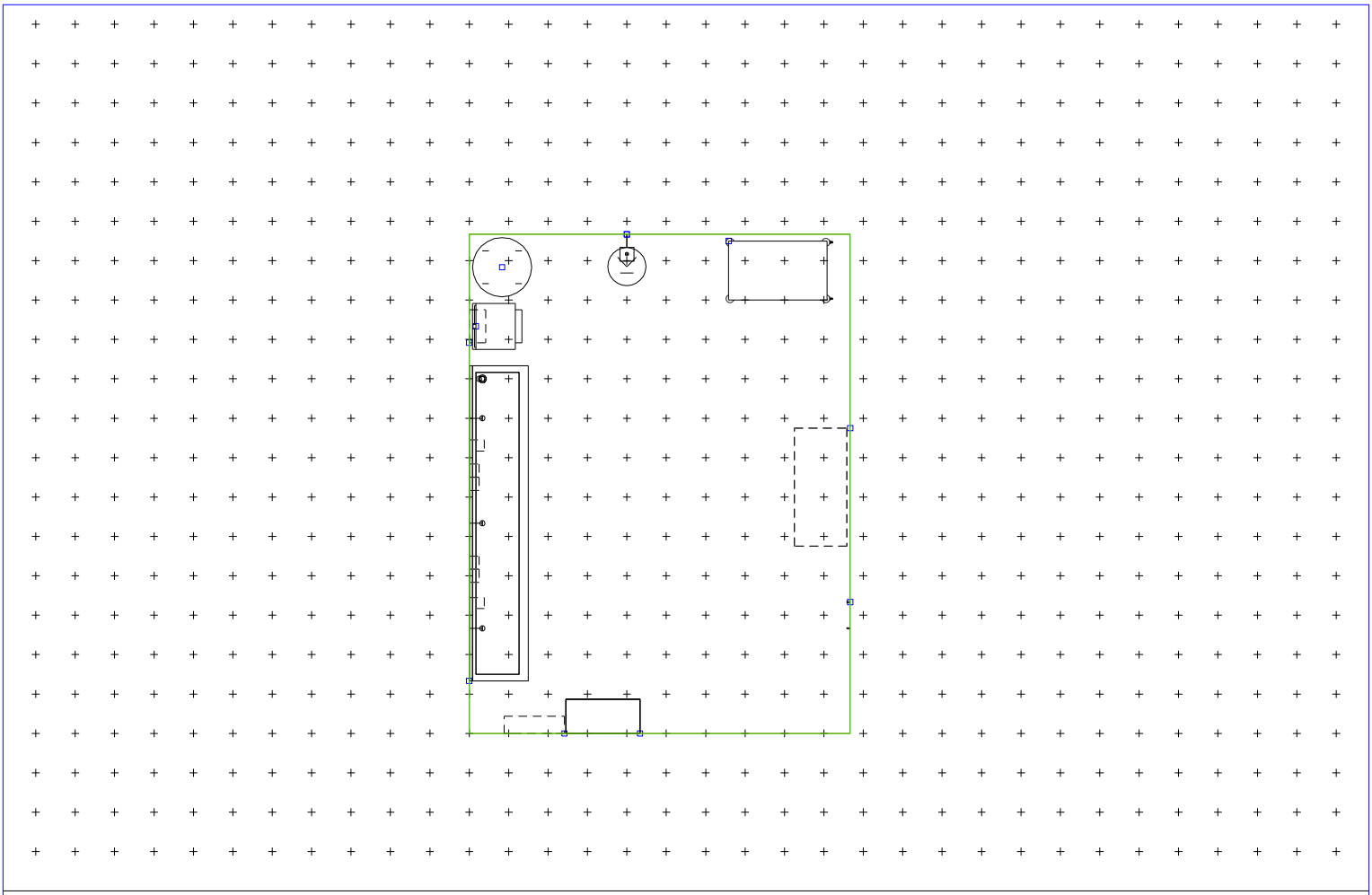
Test room: psychophysical, electrophysiology

C1027 Grid:300 (mm) 23/04/2009



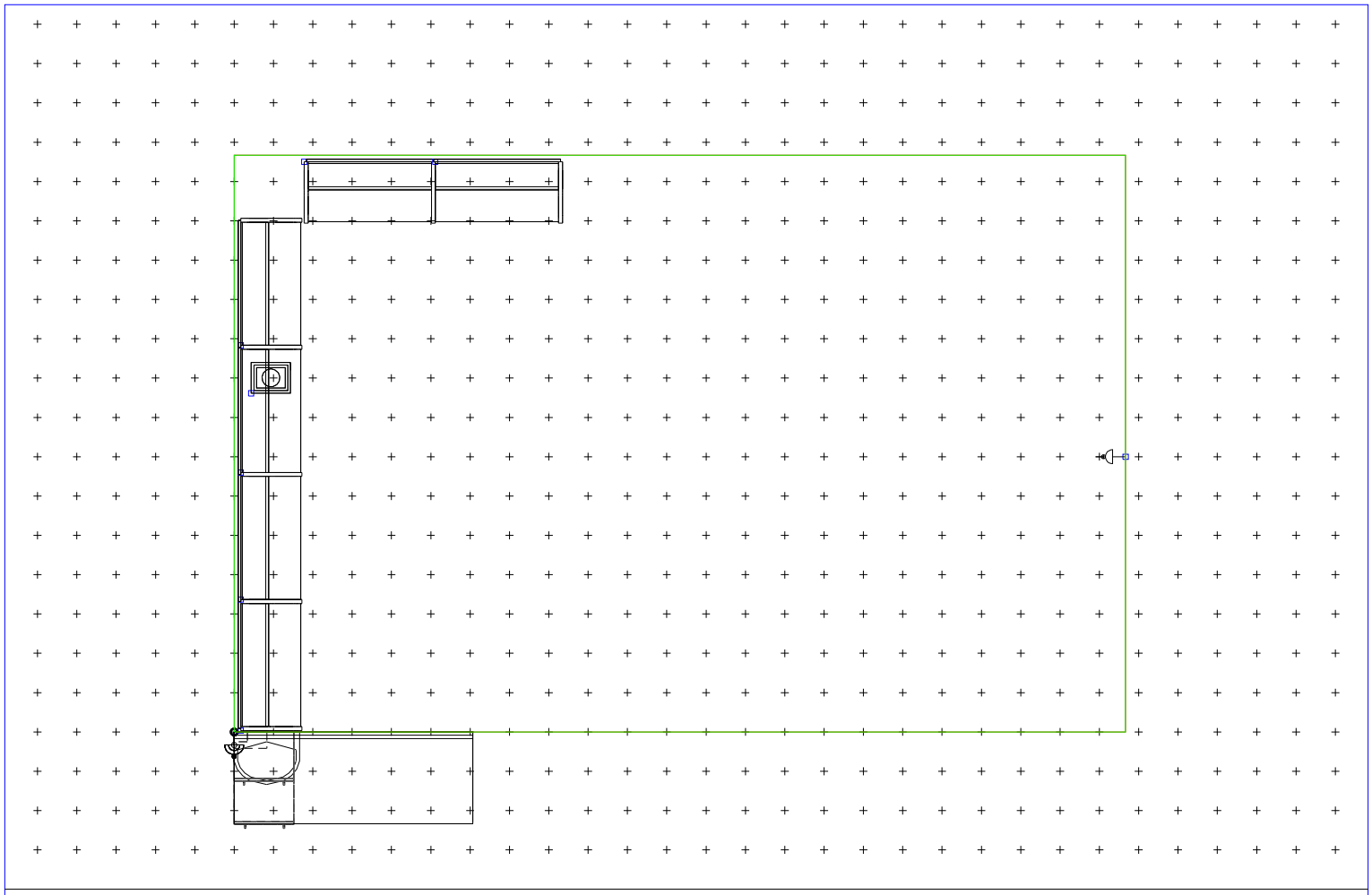
Staff communication base: 15 staff

T0212A Grid:300 (mm) 08/04/2009



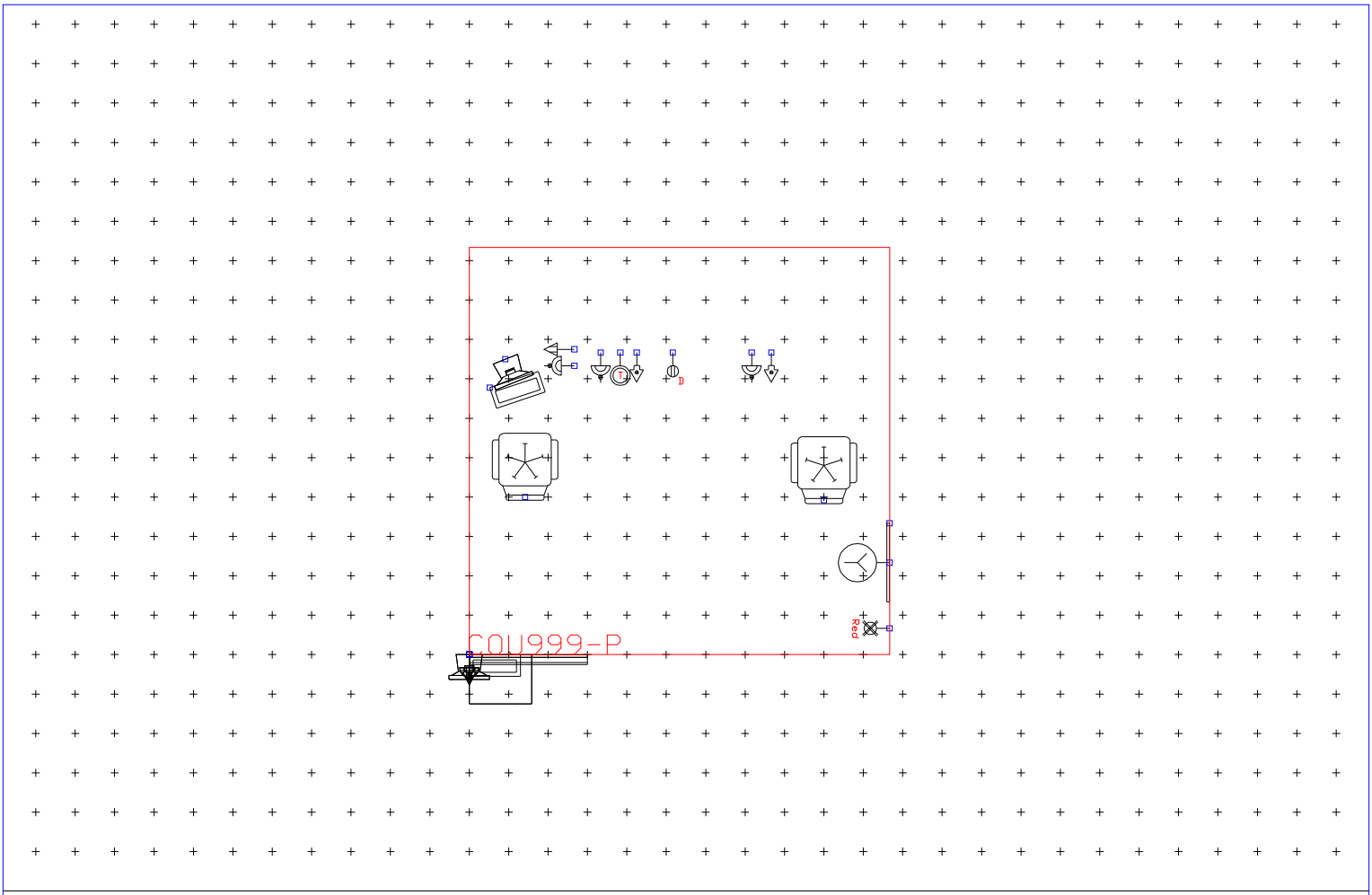
Scrub-up and gowning room: 3 places

N0216 Grid:300 (mm) 07/04/2009



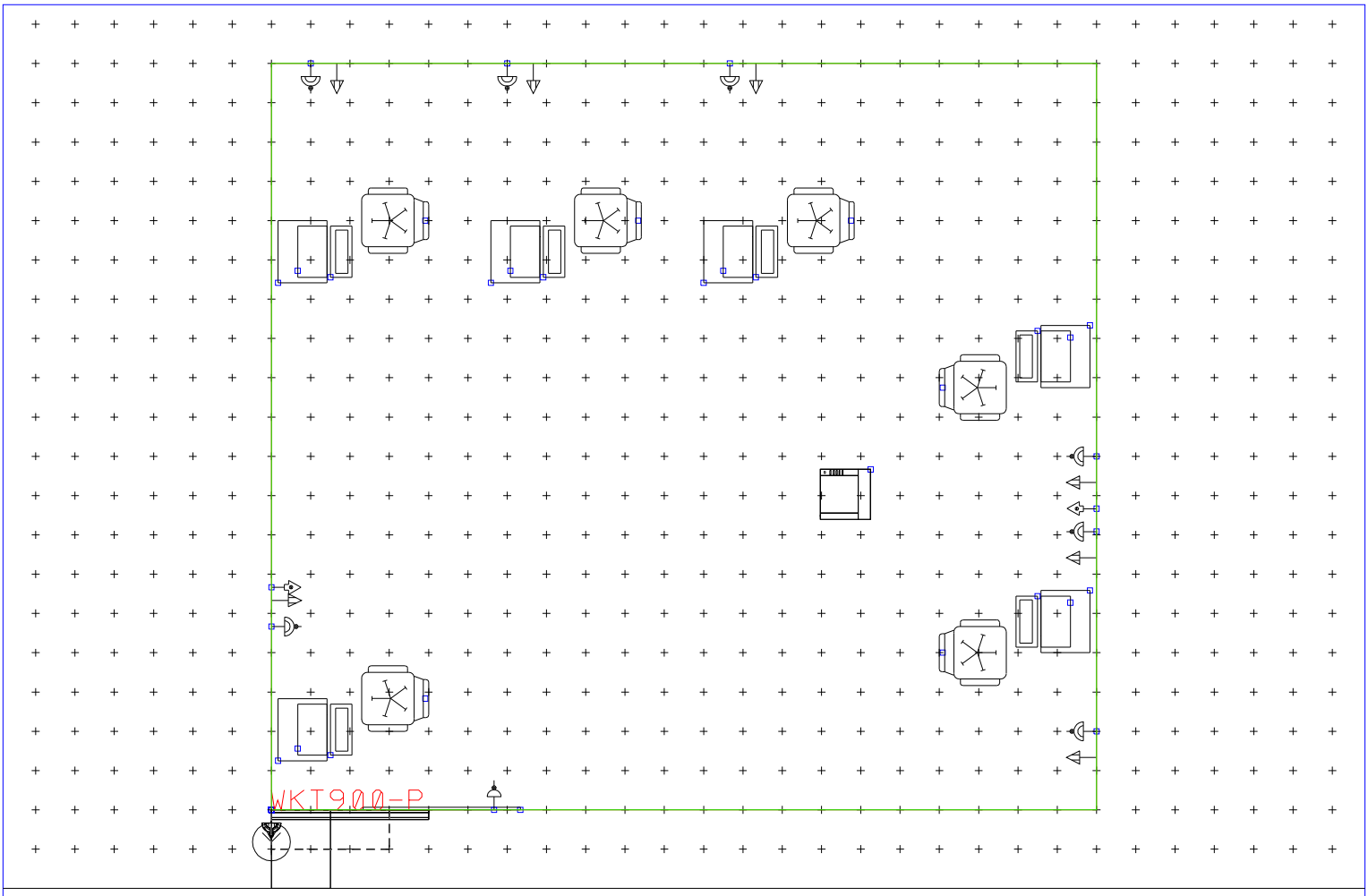
ECMO & prep store

W0110A Grid:300 (mm) 23/04/2009



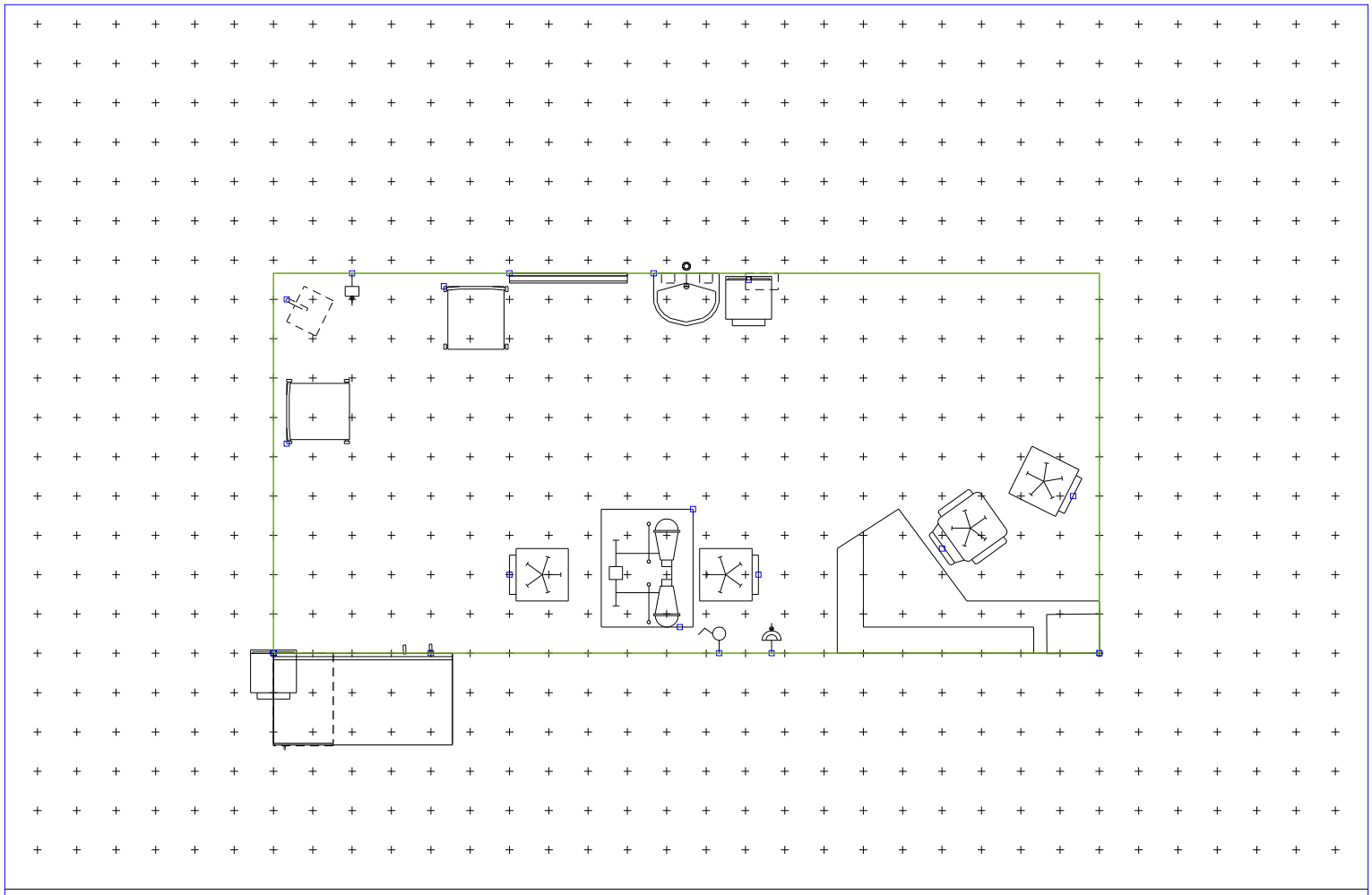
Staff communication base: 2 staff

T0212 Grid:300 (mm) 05/05/2009



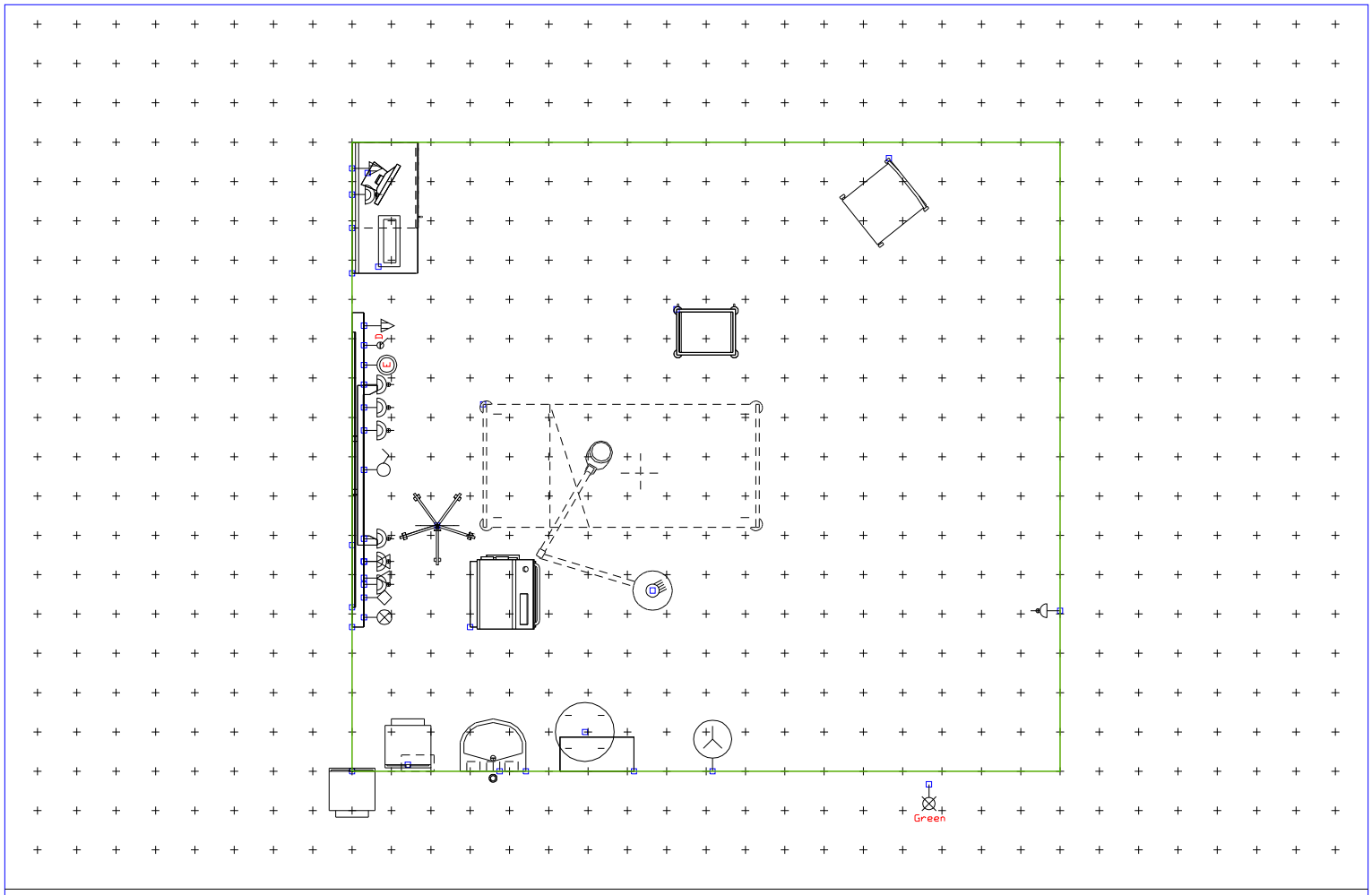
Workstations: 6 staff

M1013 Grid:300 (mm) 22/04/2009



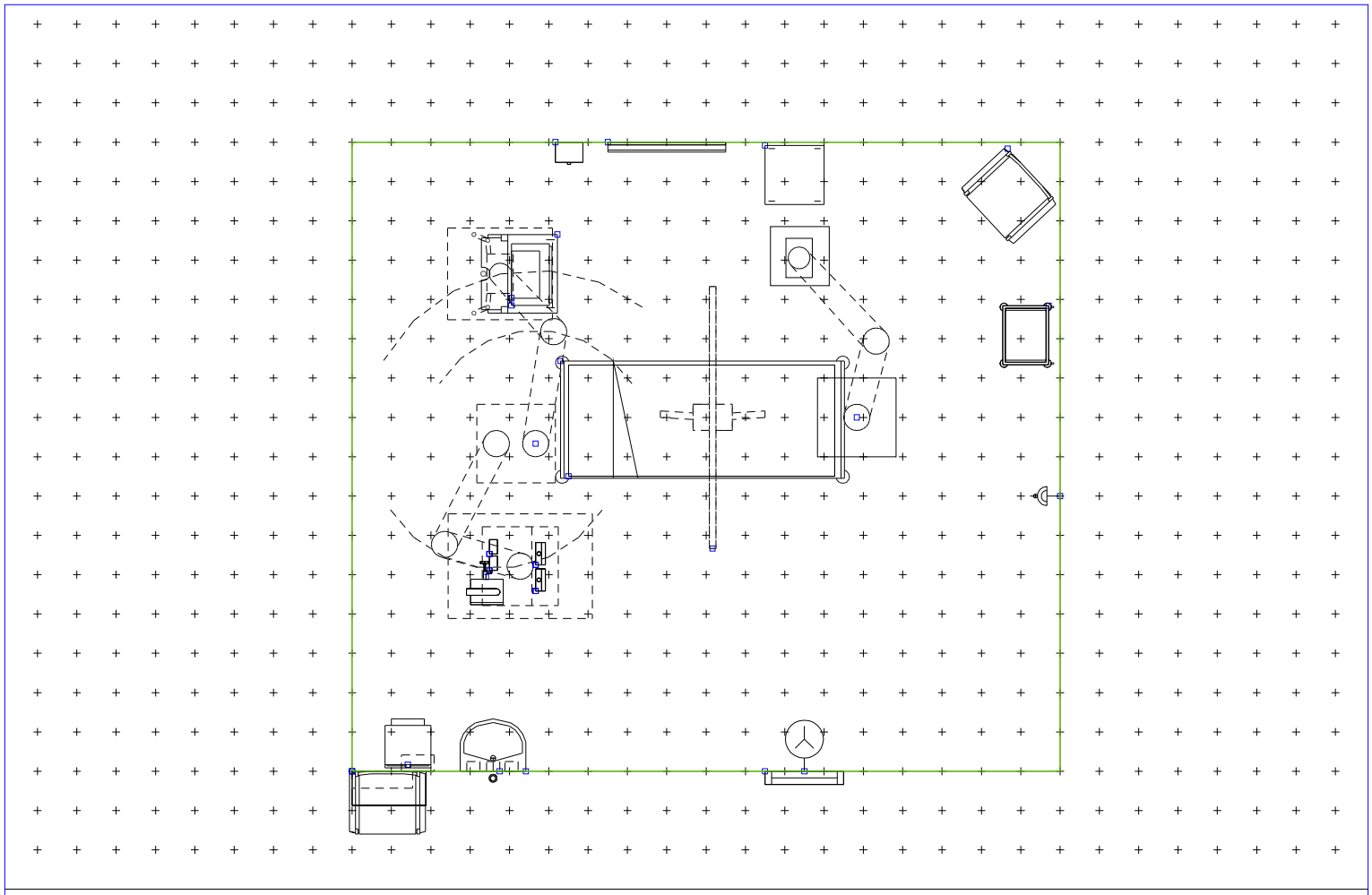
Consulting, examination room: Orthoptic

C1013 Grid:300 (mm) 22/04/2009



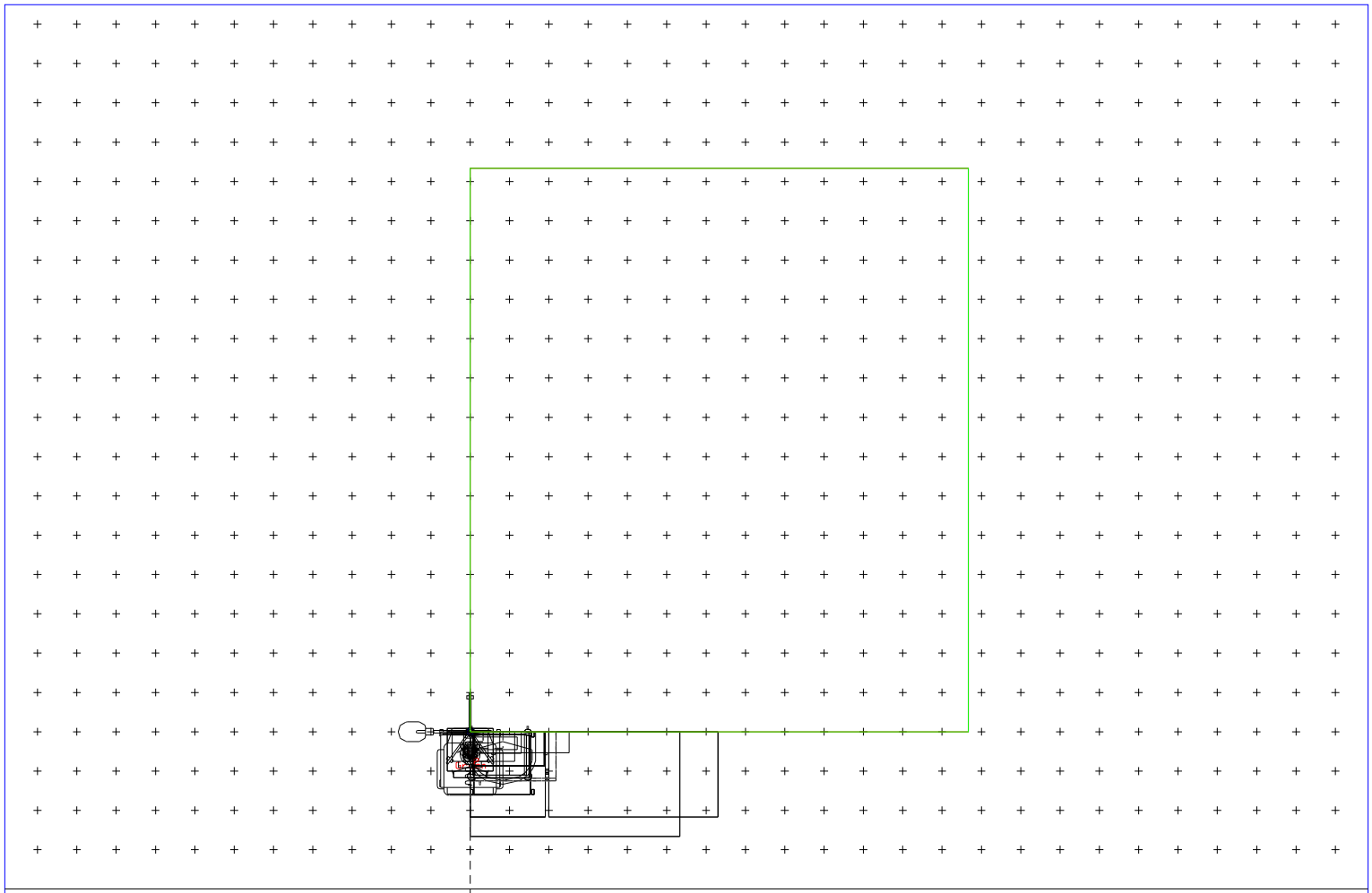
Recovery room: post anaesthetic, 1 place

B2418 Grid:300 (mm) 13/08/2007



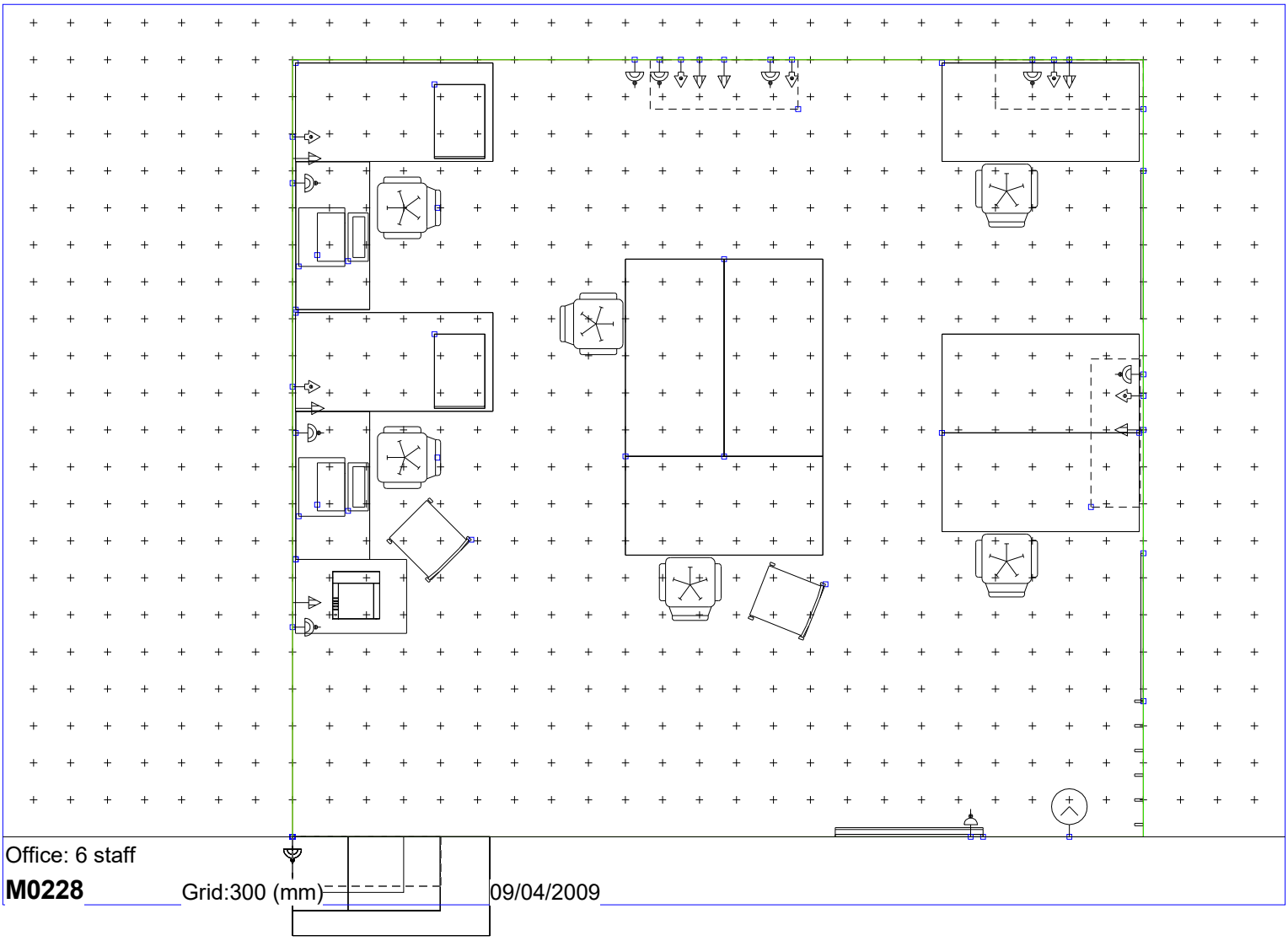
Isolation single bedroom: Critical care

B1602 Grid:300 (mm) 07/04/2009



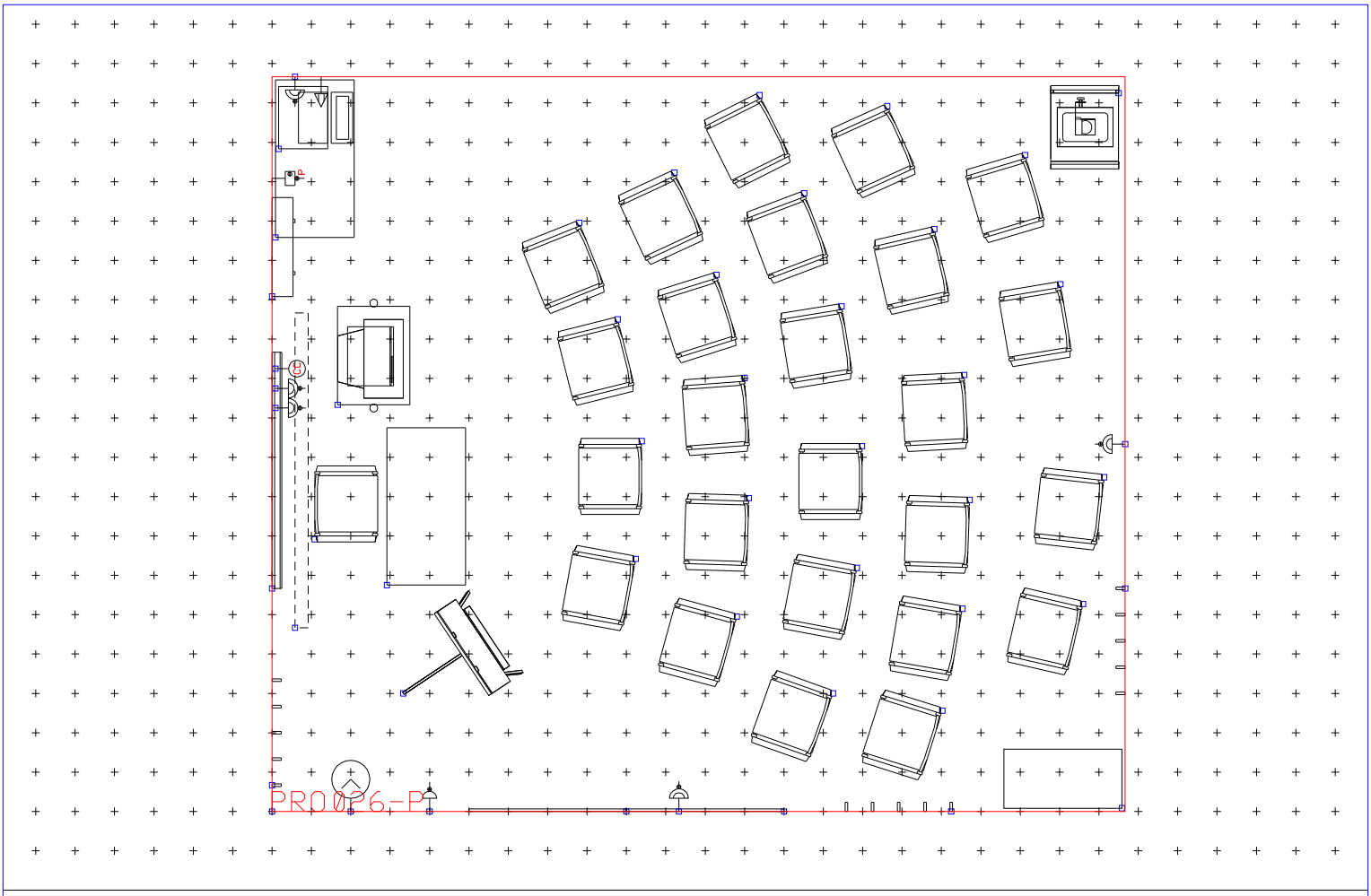
Consulting, examination room: Audiology

C0203 Grid:300 (mm) 05/05/2009



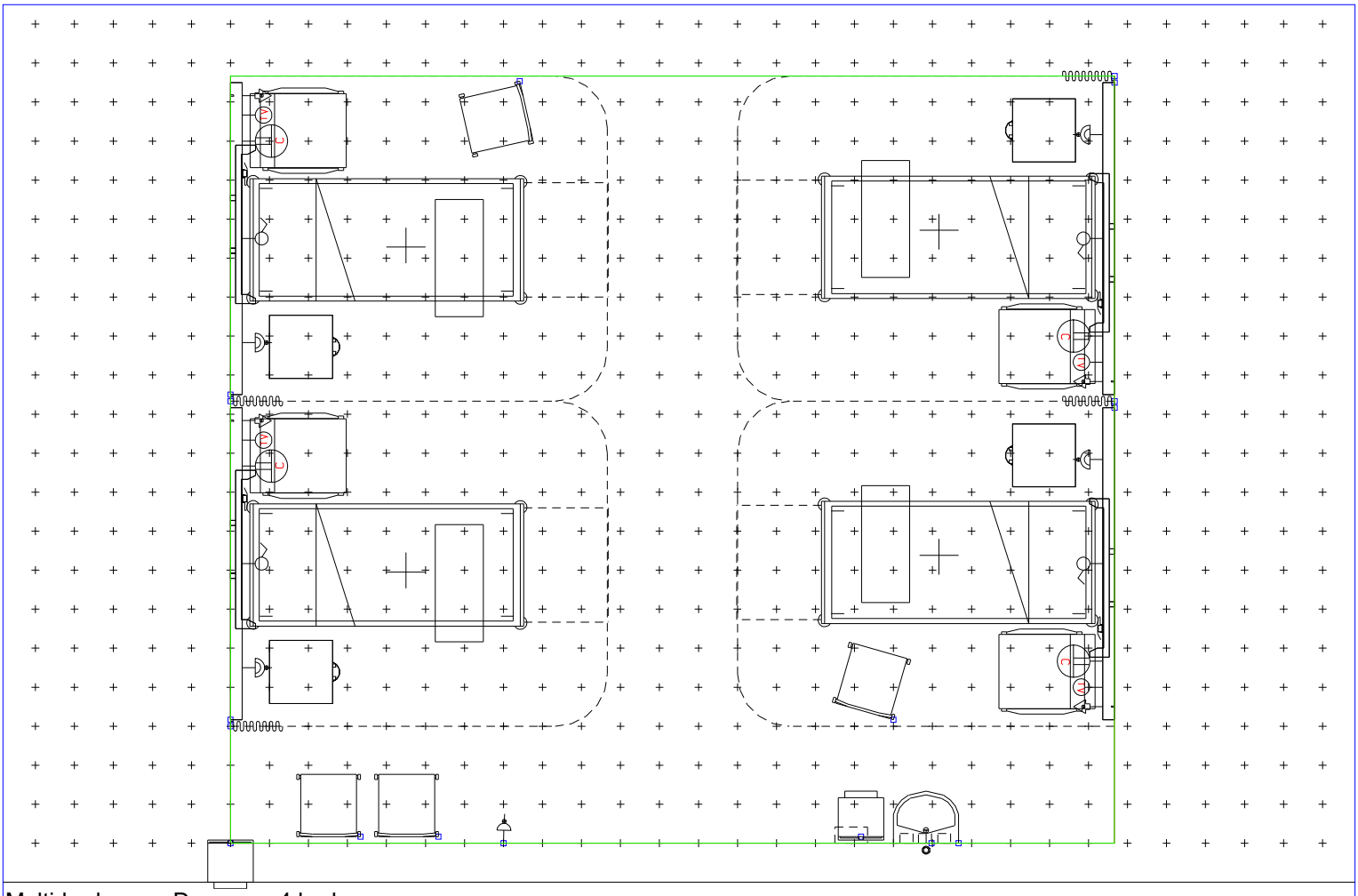
Office: 6 staff

M0228 Grid:300 (mm) 09/04/2009



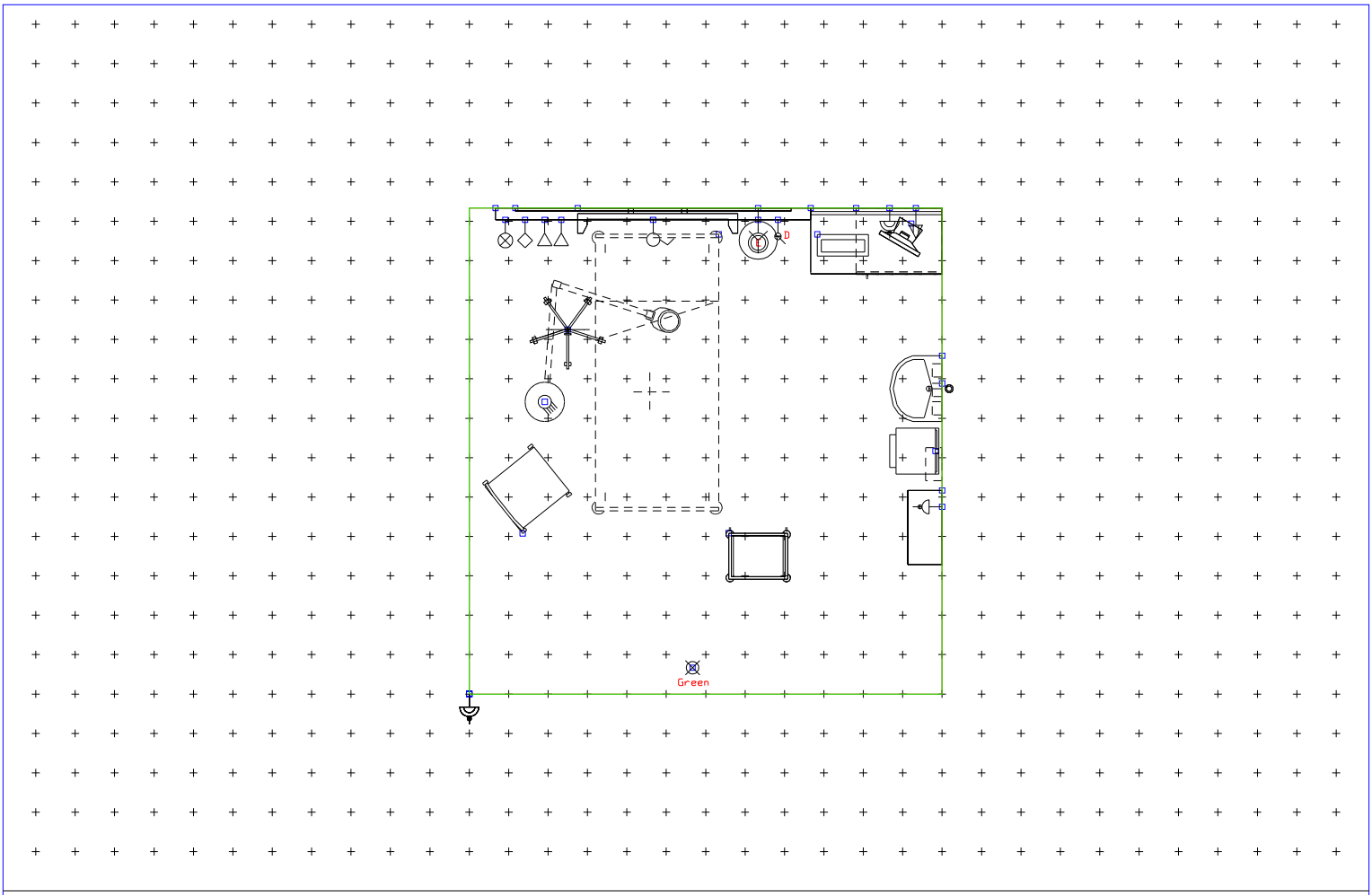
Seminar room: 25 persons

H0502 Grid:300 (mm) 07/04/2009



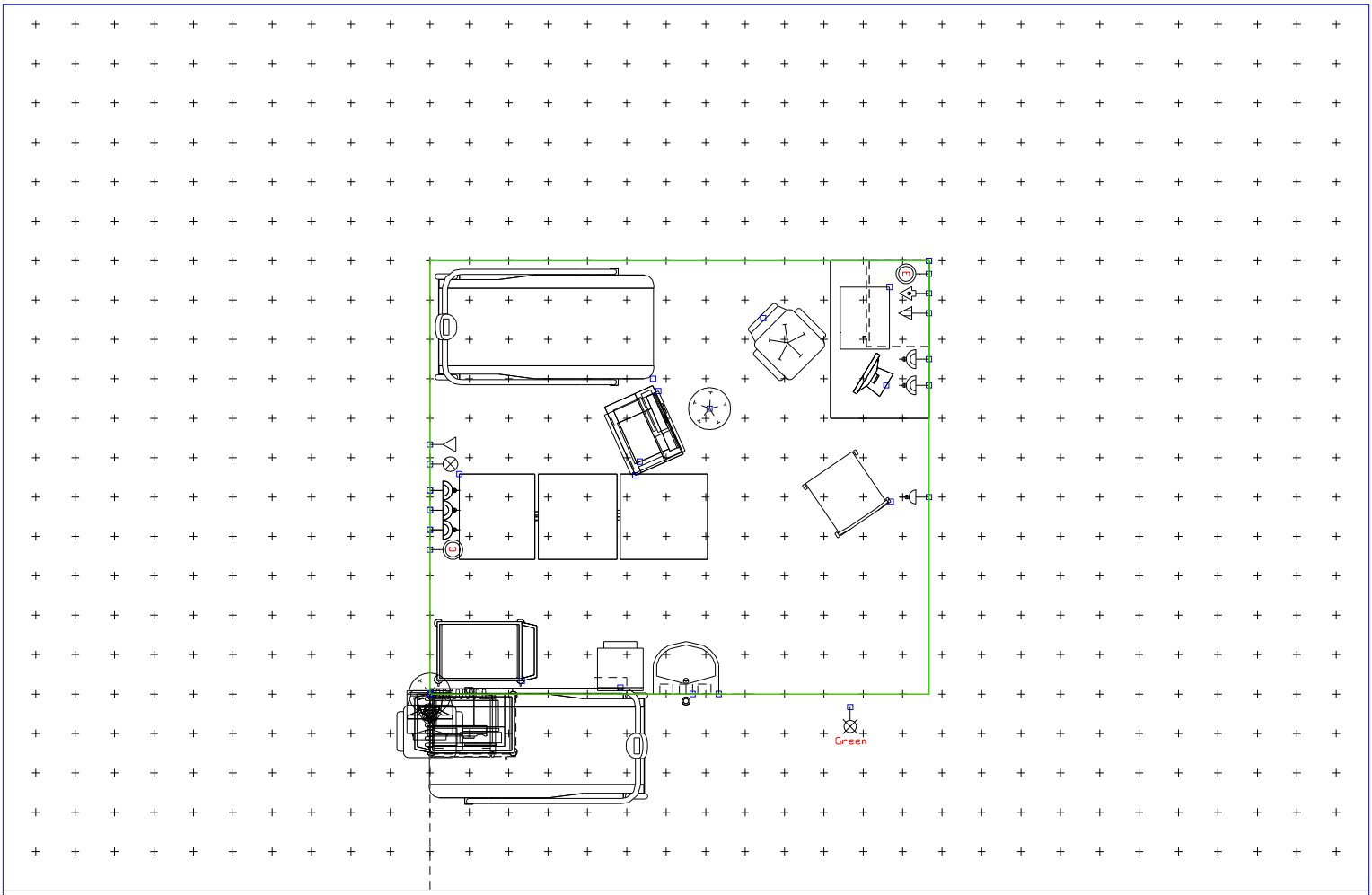
Multi-bed room: Day care, 4 beds

B0607 Grid:300 (mm) 09/04/2009



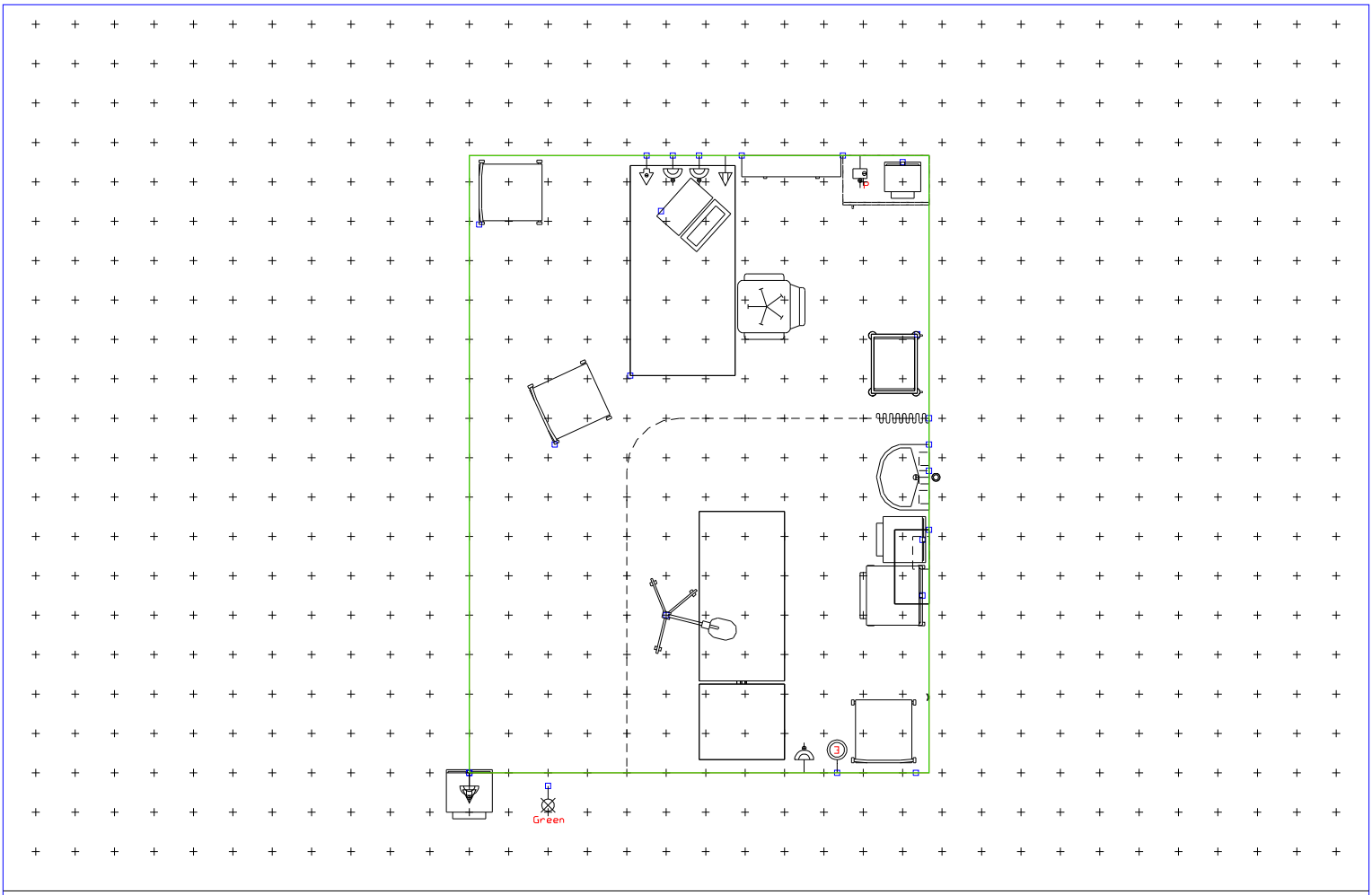
Recovery bay: post anaesthetic, 1 place

B2417 Grid:300 (mm) 07/04/2009



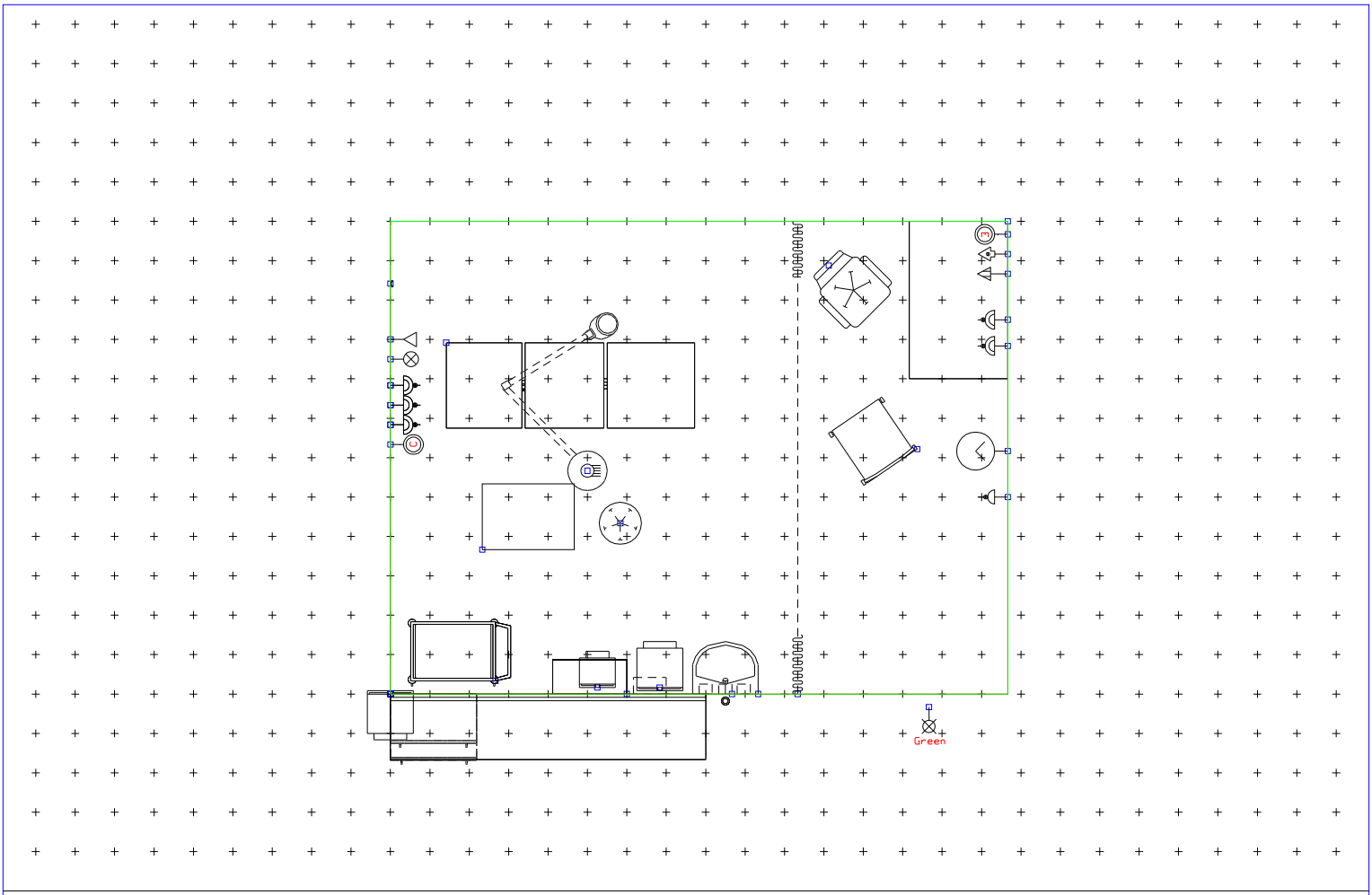
Investigation room: stress electrocardiography (ECG)

C0701 Grid:300 (mm) 07/04/2009



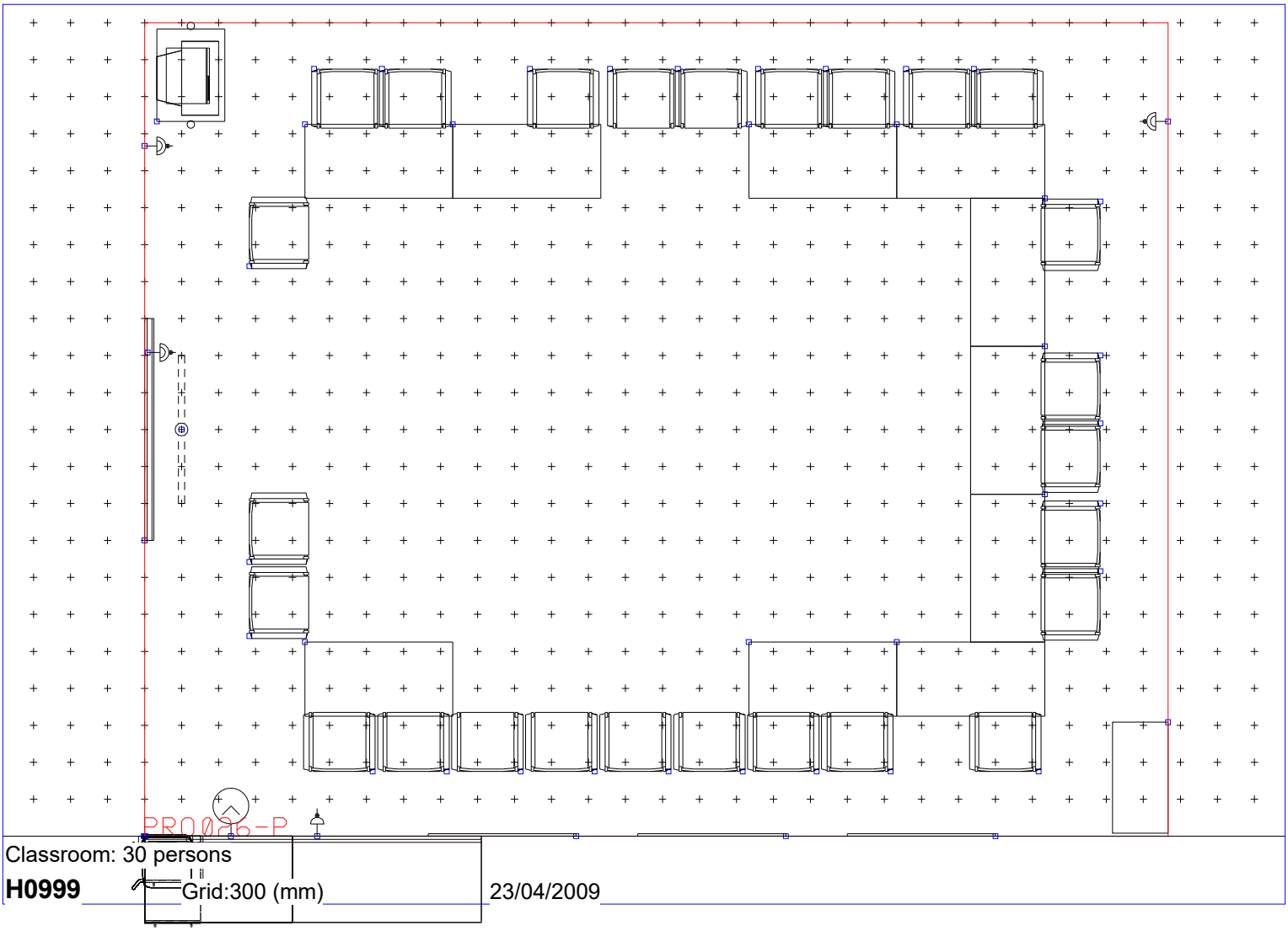
Consulting, examination room: double-sided couch access

C0201 Grid:300 (mm) 07/04/2009



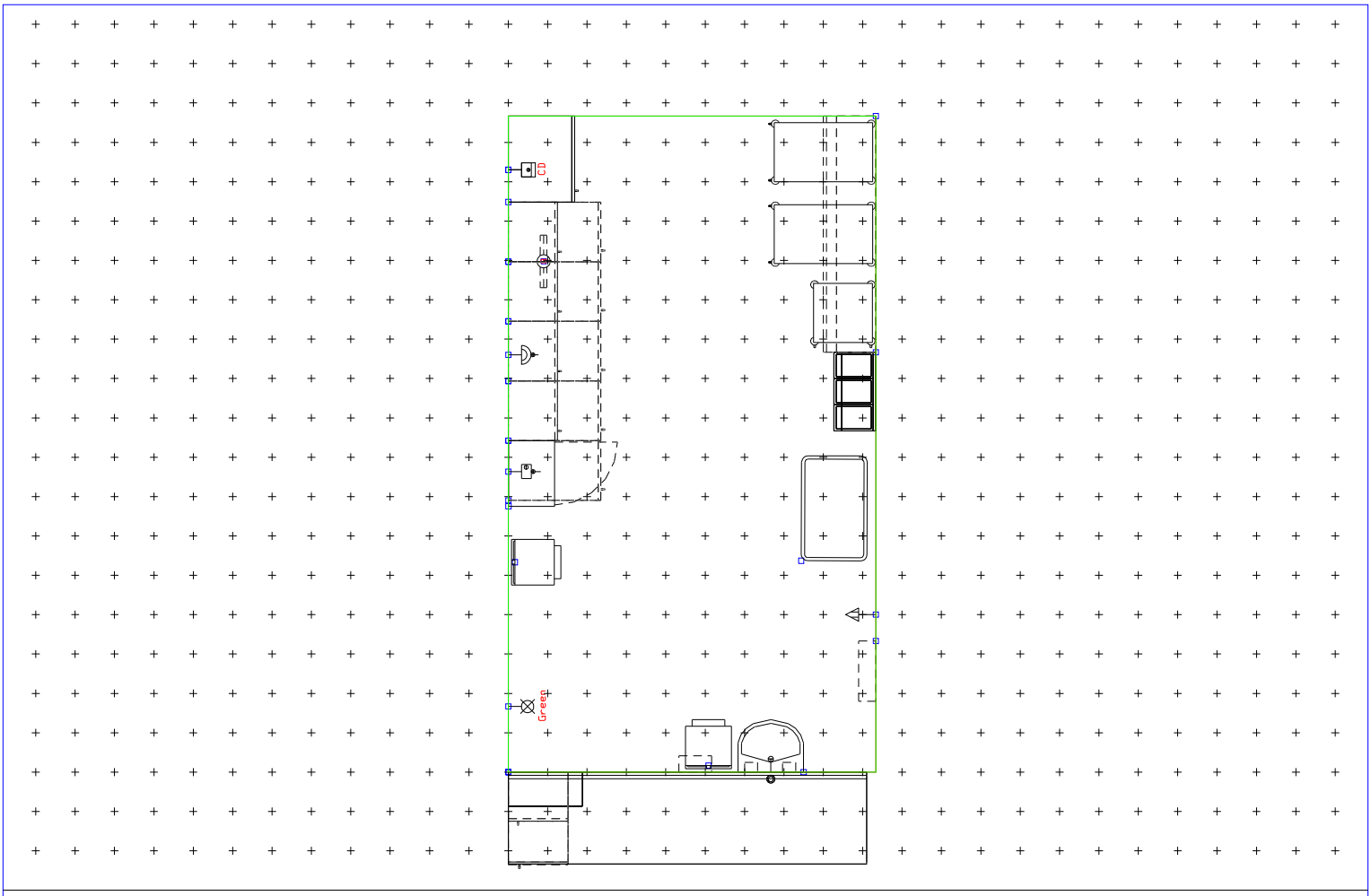
Investigation room: echocardiography

C0711 Grid:300 (mm) 07/04/2009



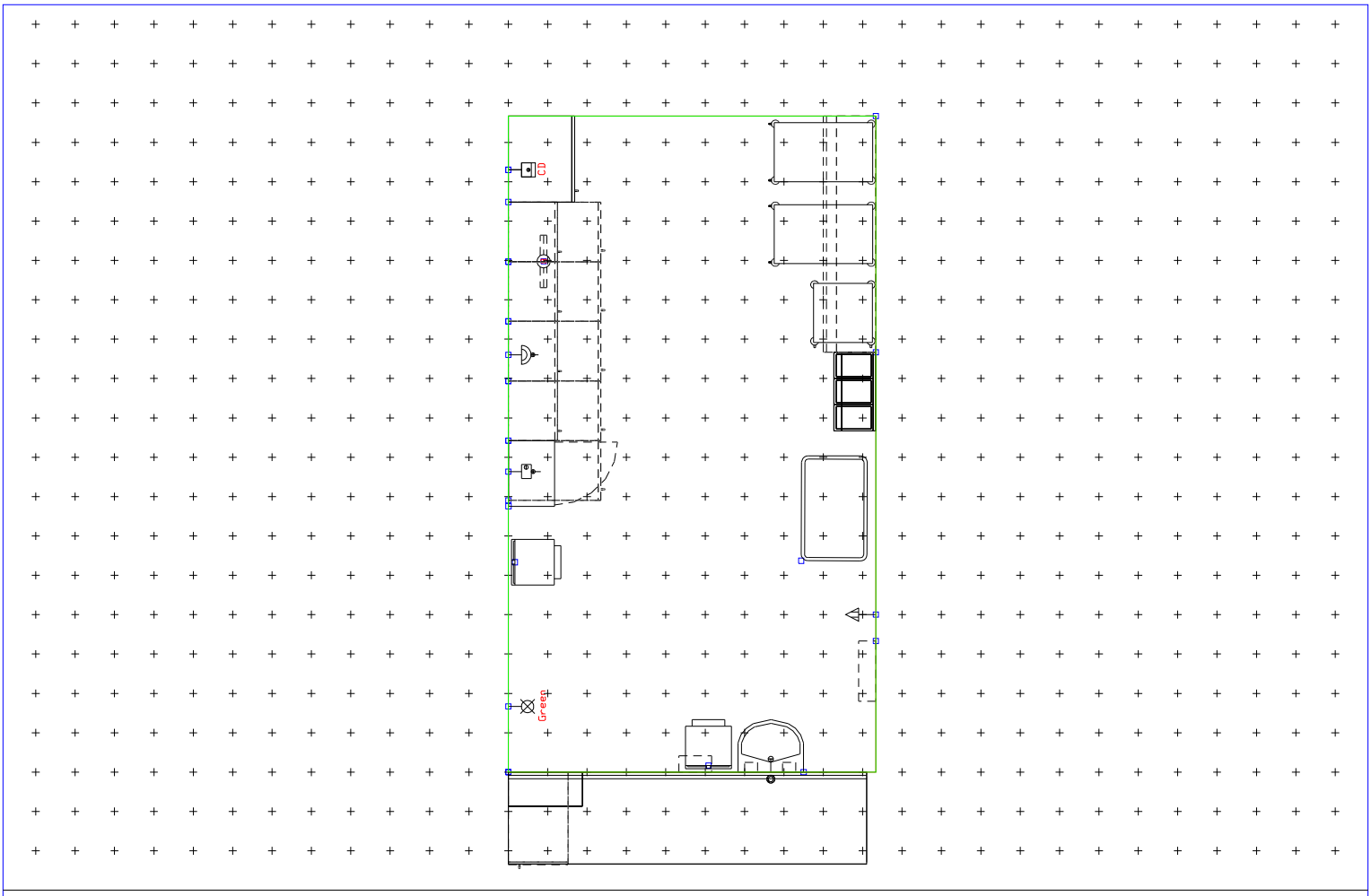
Classroom: 30 persons

H0999 Grid:300 (mm) 23/04/2009



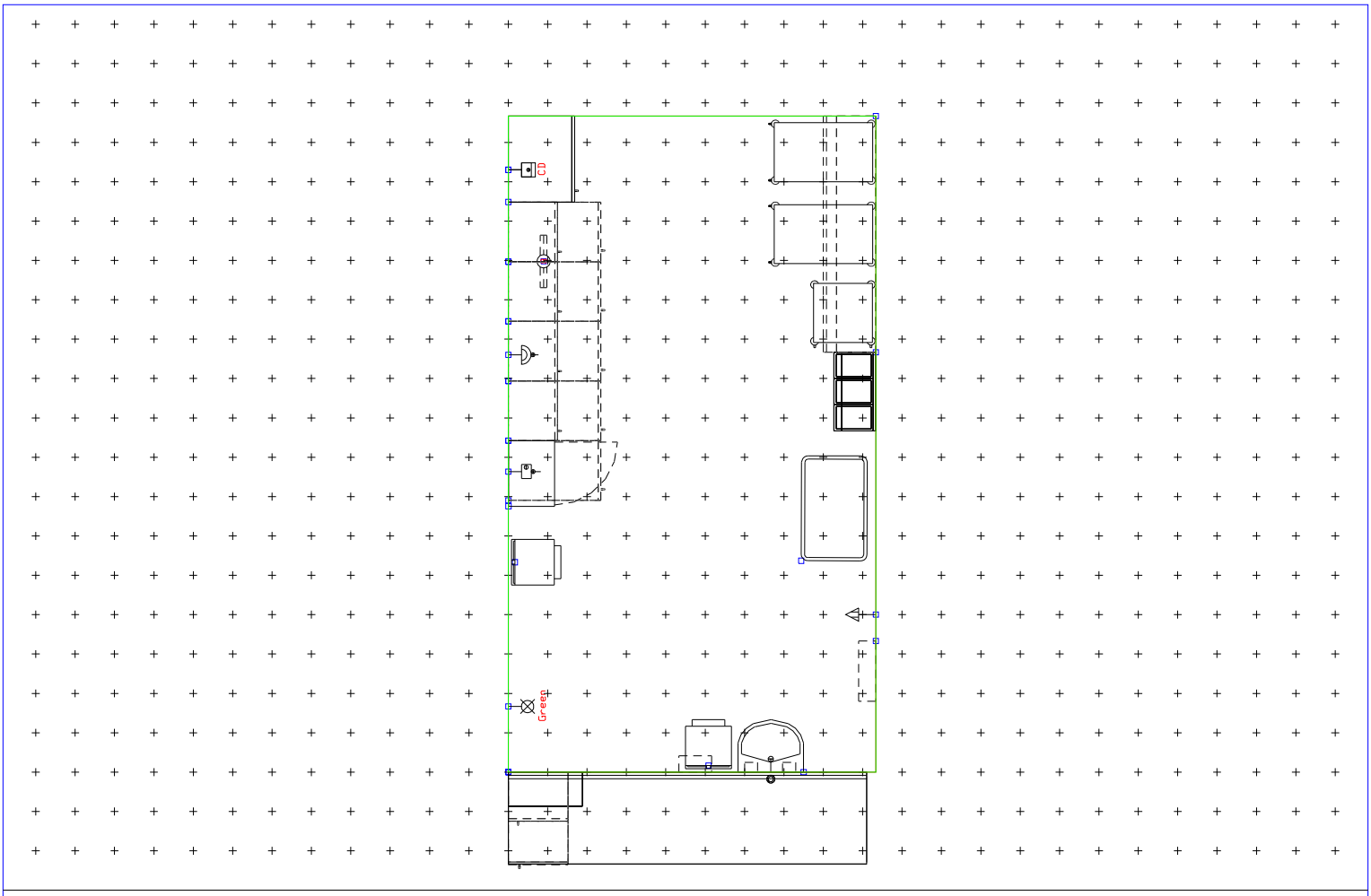
Clean Utility

T0508 Grid:300 (mm) 22/04/2009



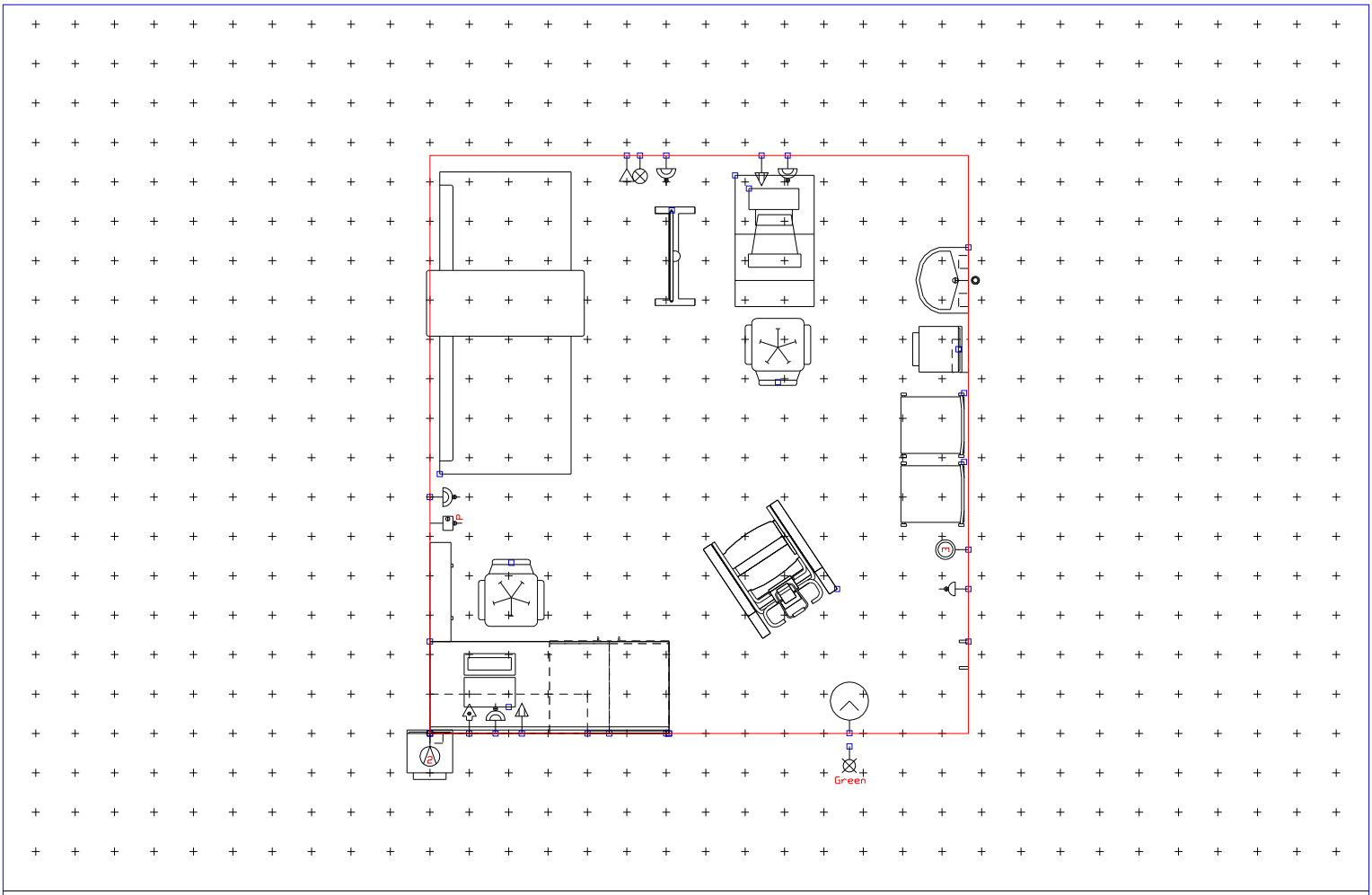
Clean utility

T0505 Grid:300 (mm) 07/04/2009



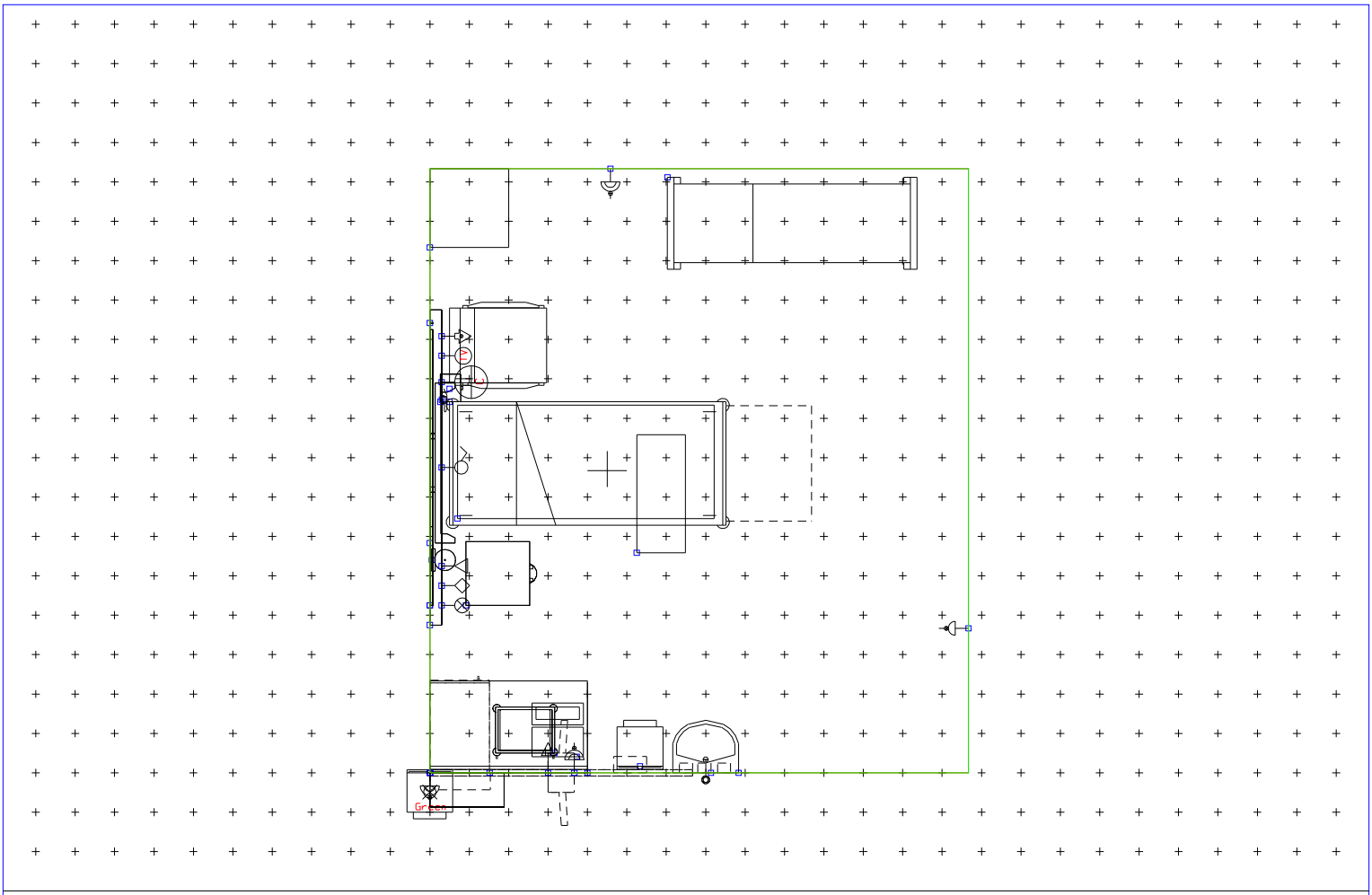
Medicines Management

T0506 Grid:300 (mm) 22/04/2009



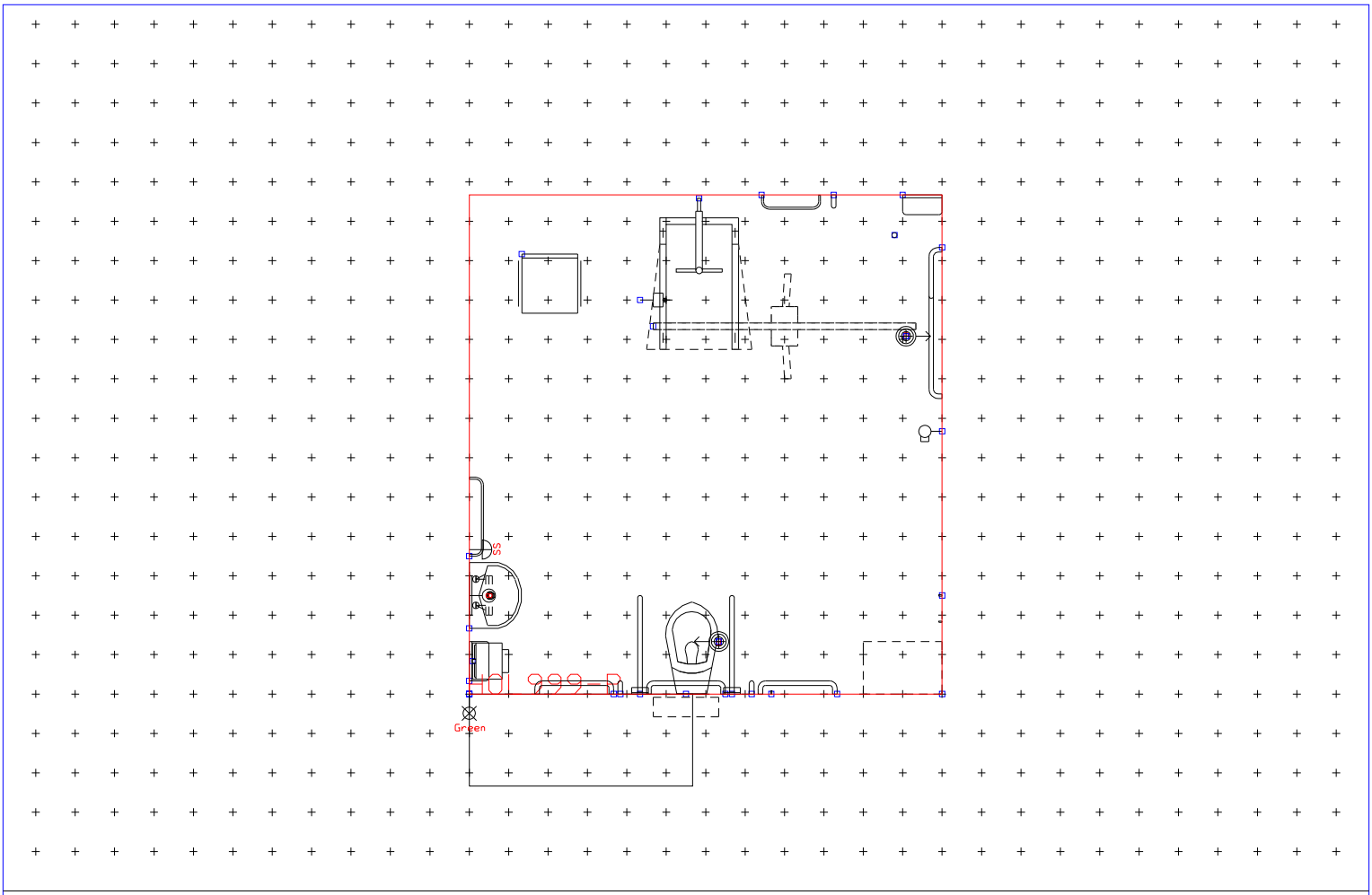
Imaging room: Bone Mineral Densitometry (BMD)

E0151 Grid:300 (mm) 07/04/2009



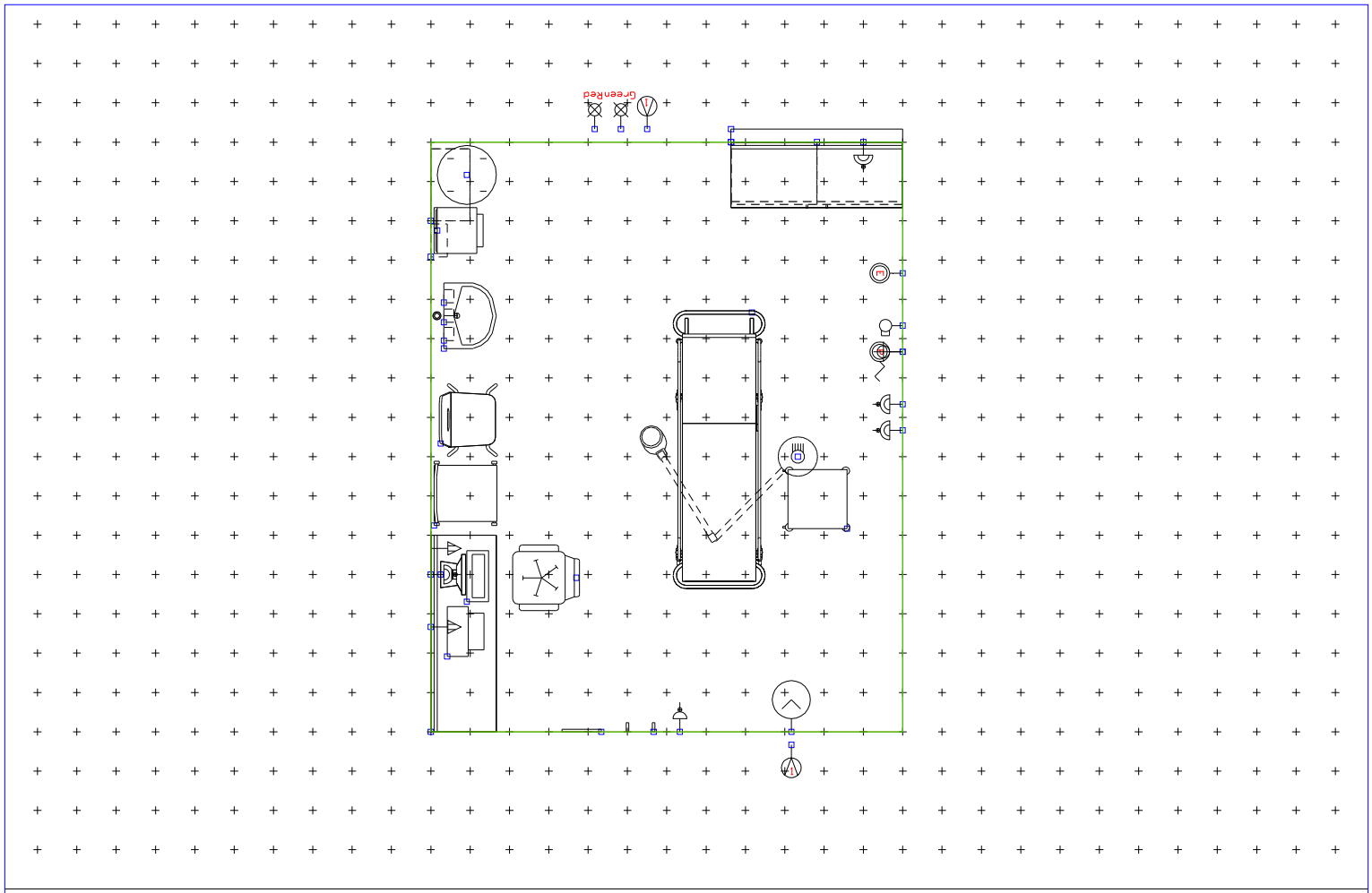
Single bedroom: Adult acute

B0303 Grid:300 (mm) 07/04/2009



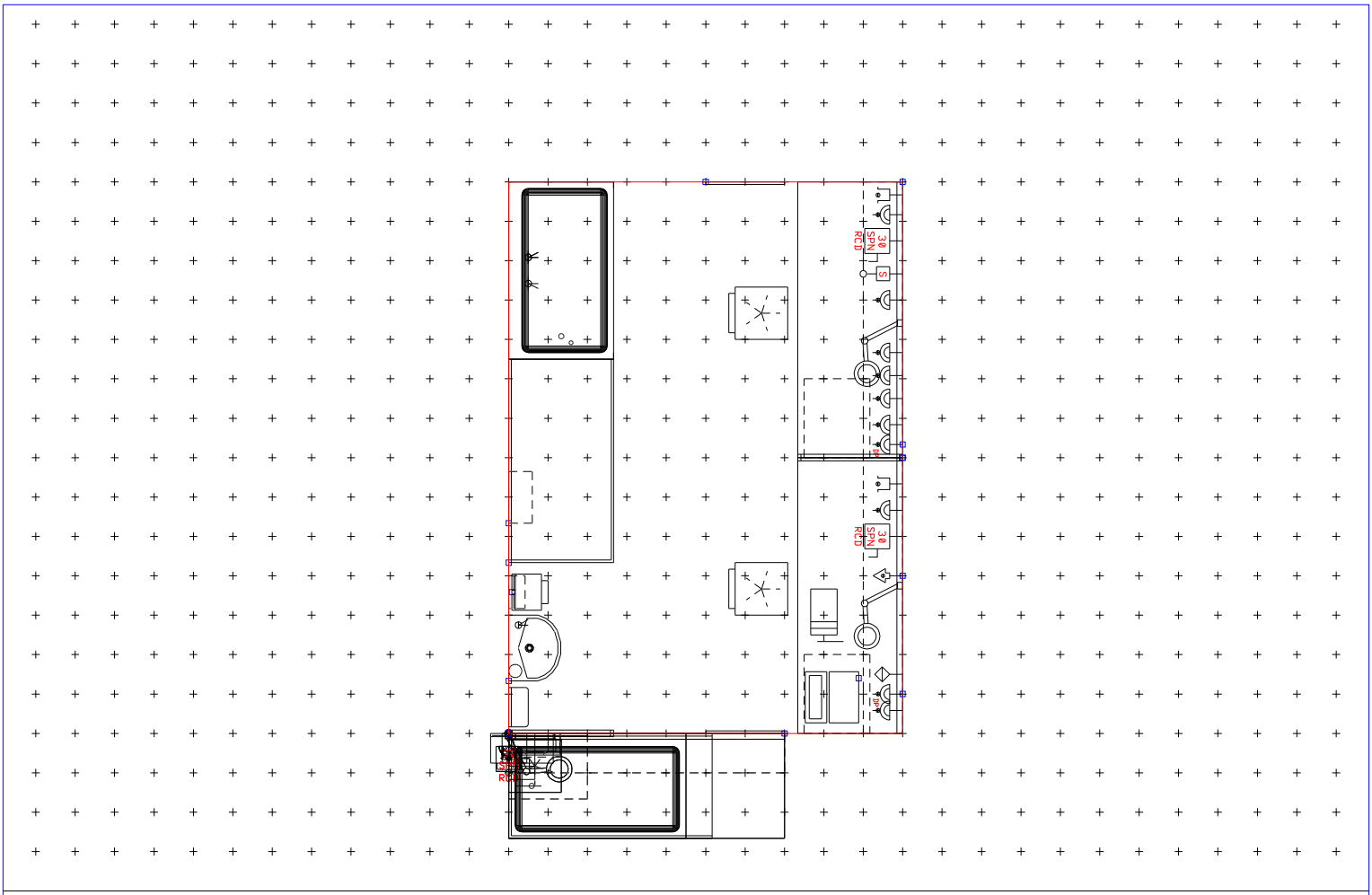
Activities of daily living: bathroom

Q0124 Grid:300 (mm) 15/09/2004



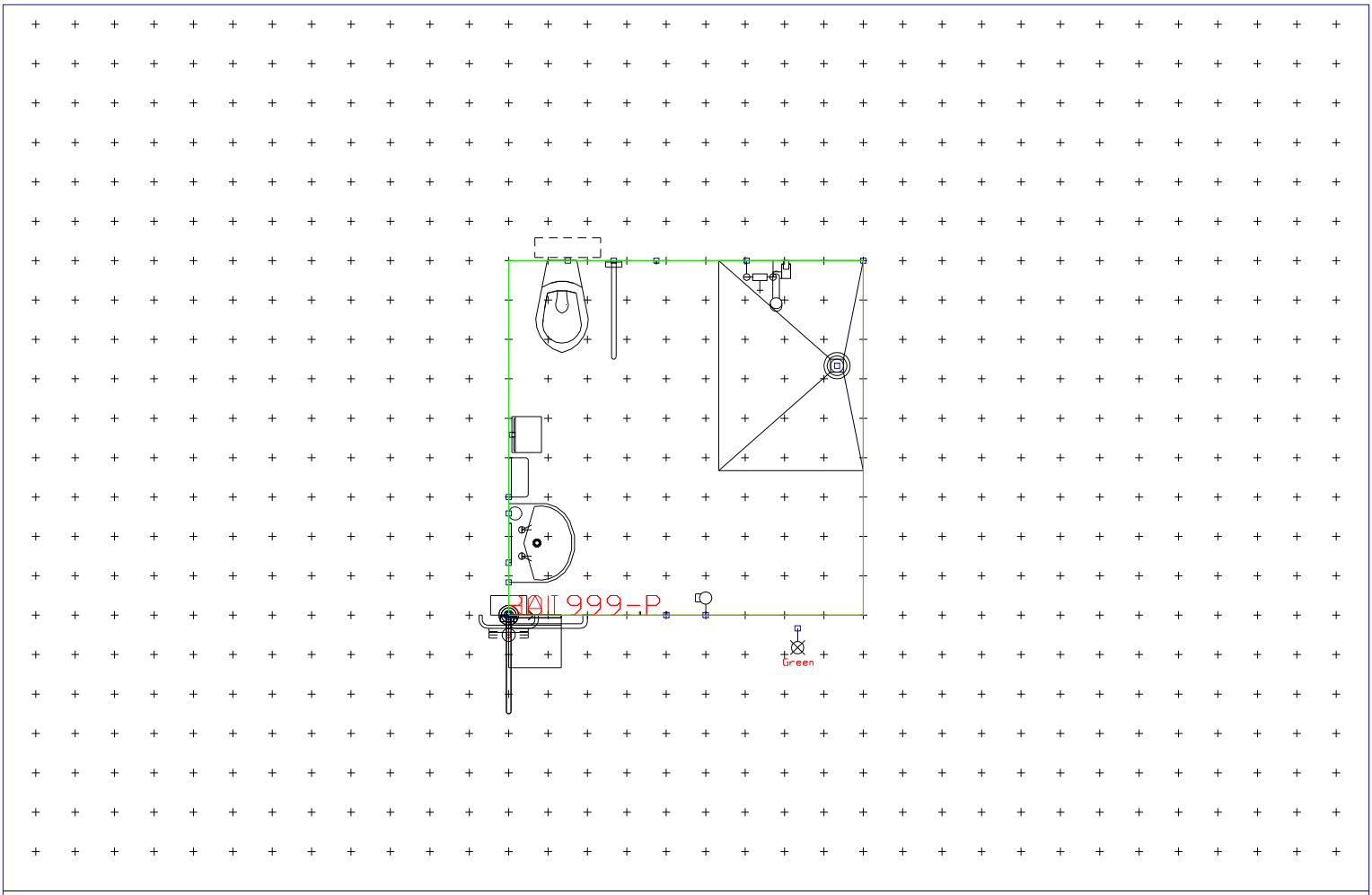
Assessment room: Paediatric, A&E

C0304 Grid:300 (mm) 19/10/2006



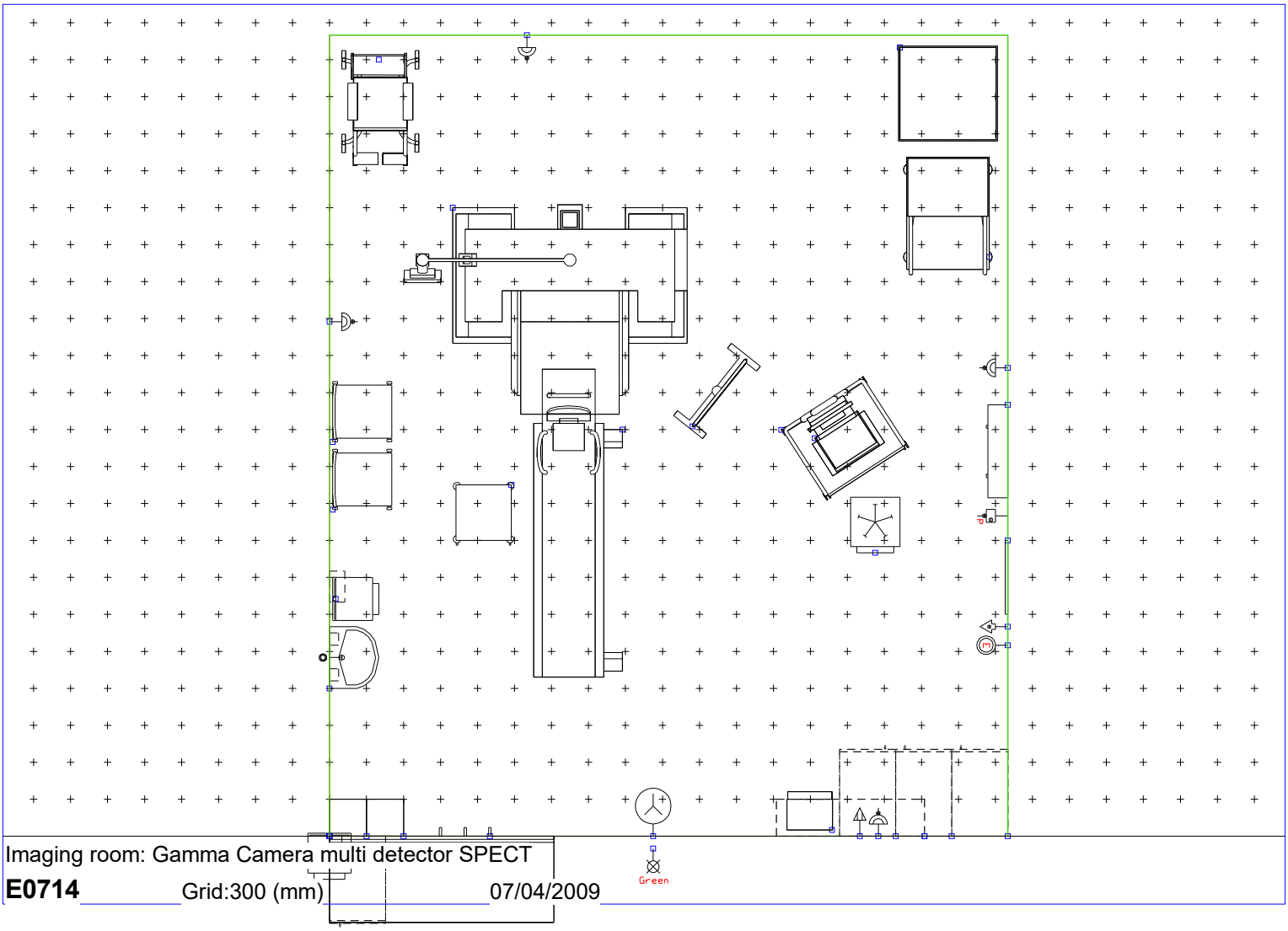
Workshop: renal dialysis equipment

K0378 Grid:300 (mm) 08/04/2009



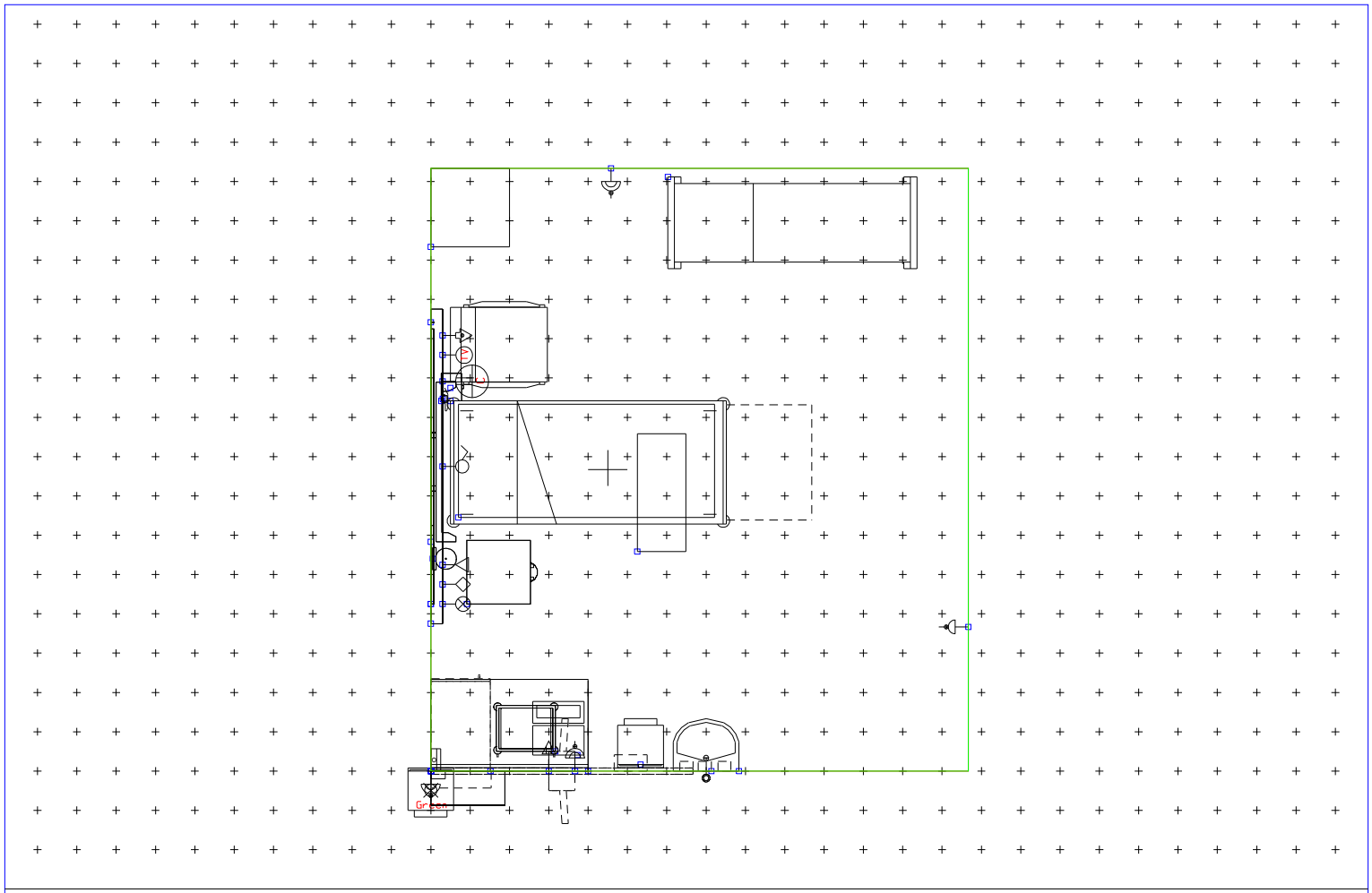
Shower, WC & wash: assisted wheelchair accessible

V1612 Grid:300 (mm) 23/04/2009



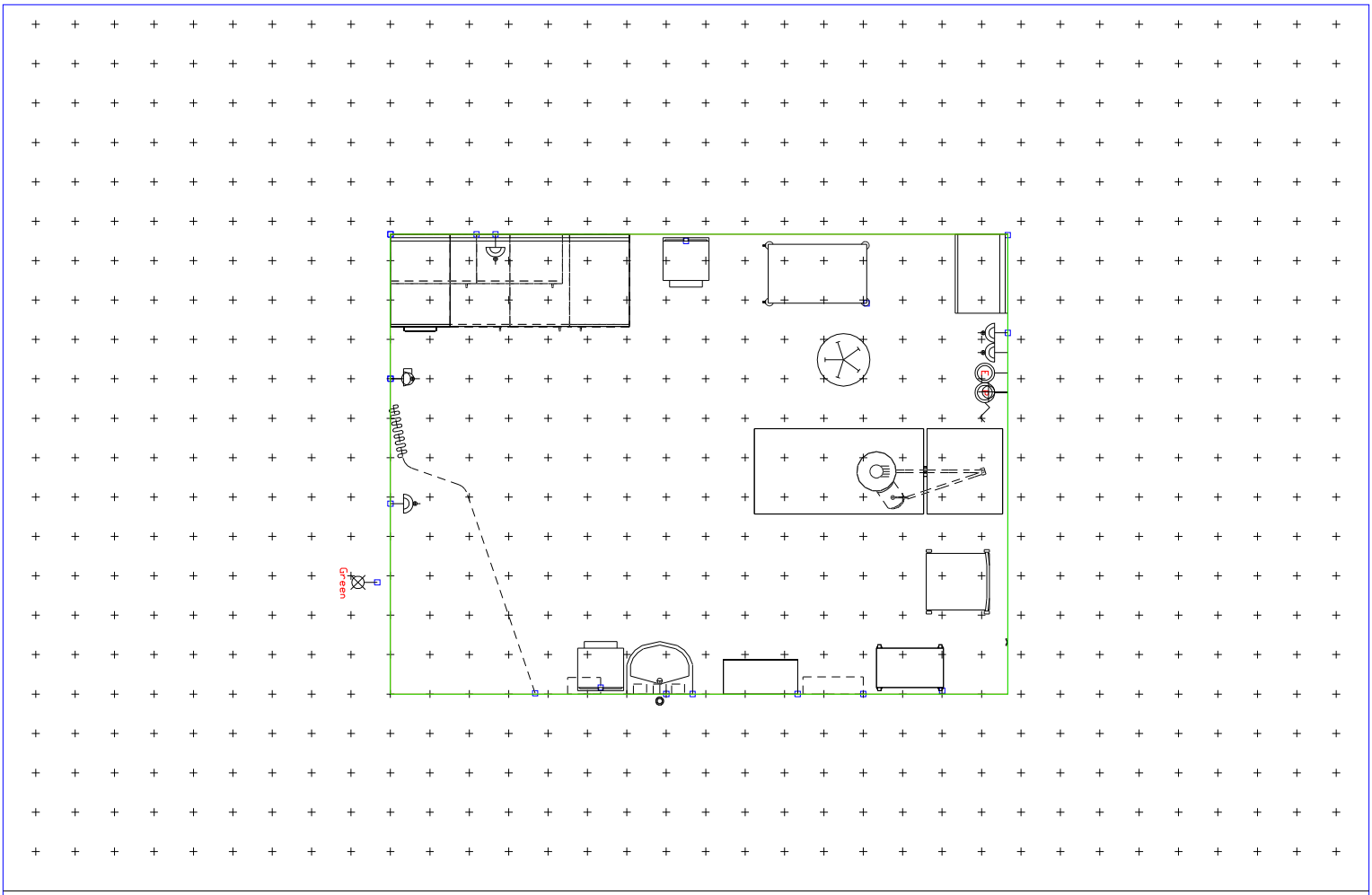
Imaging room: Gamma Camera multi detector SPECT

E0714 Grid:300 (mm) 07/04/2009



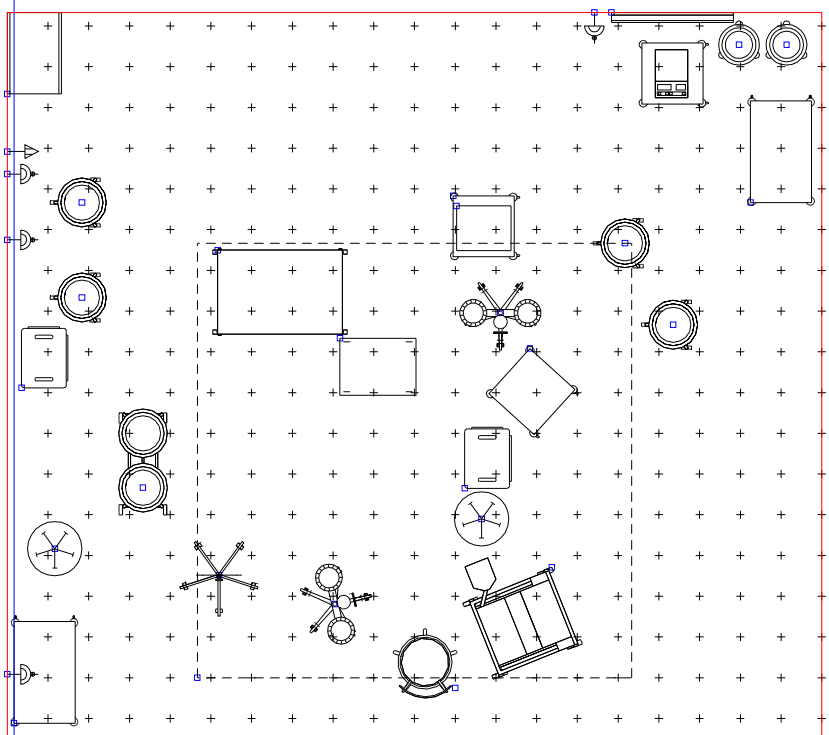
Single bedroom: Critical Care

B0303A Grid:300 (mm) 07/04/2009



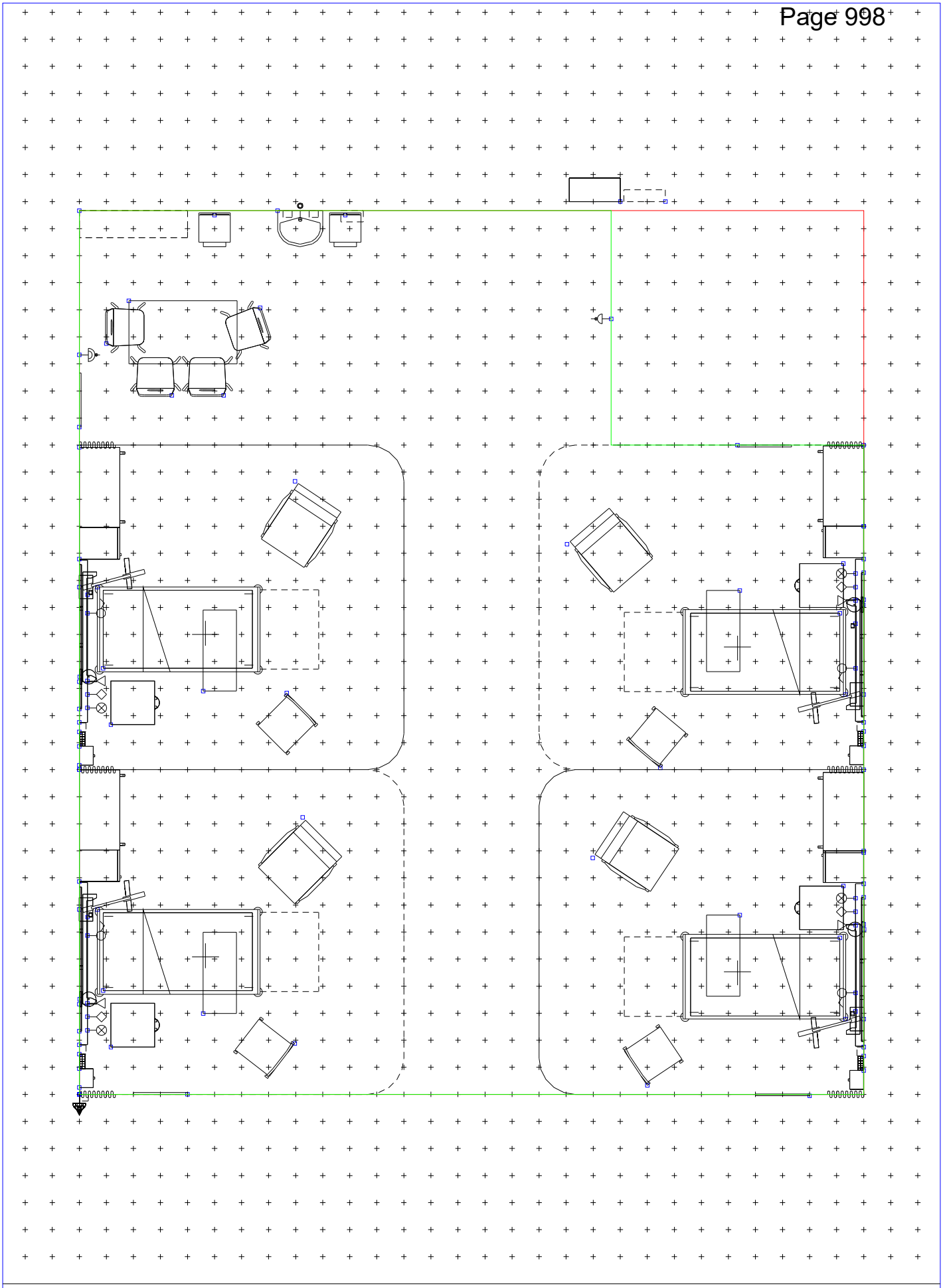
Treatment room: Continuous ambulatory peritoneal dialysis, 1 patient

X0255 Grid:300 (mm) 19/10/2006



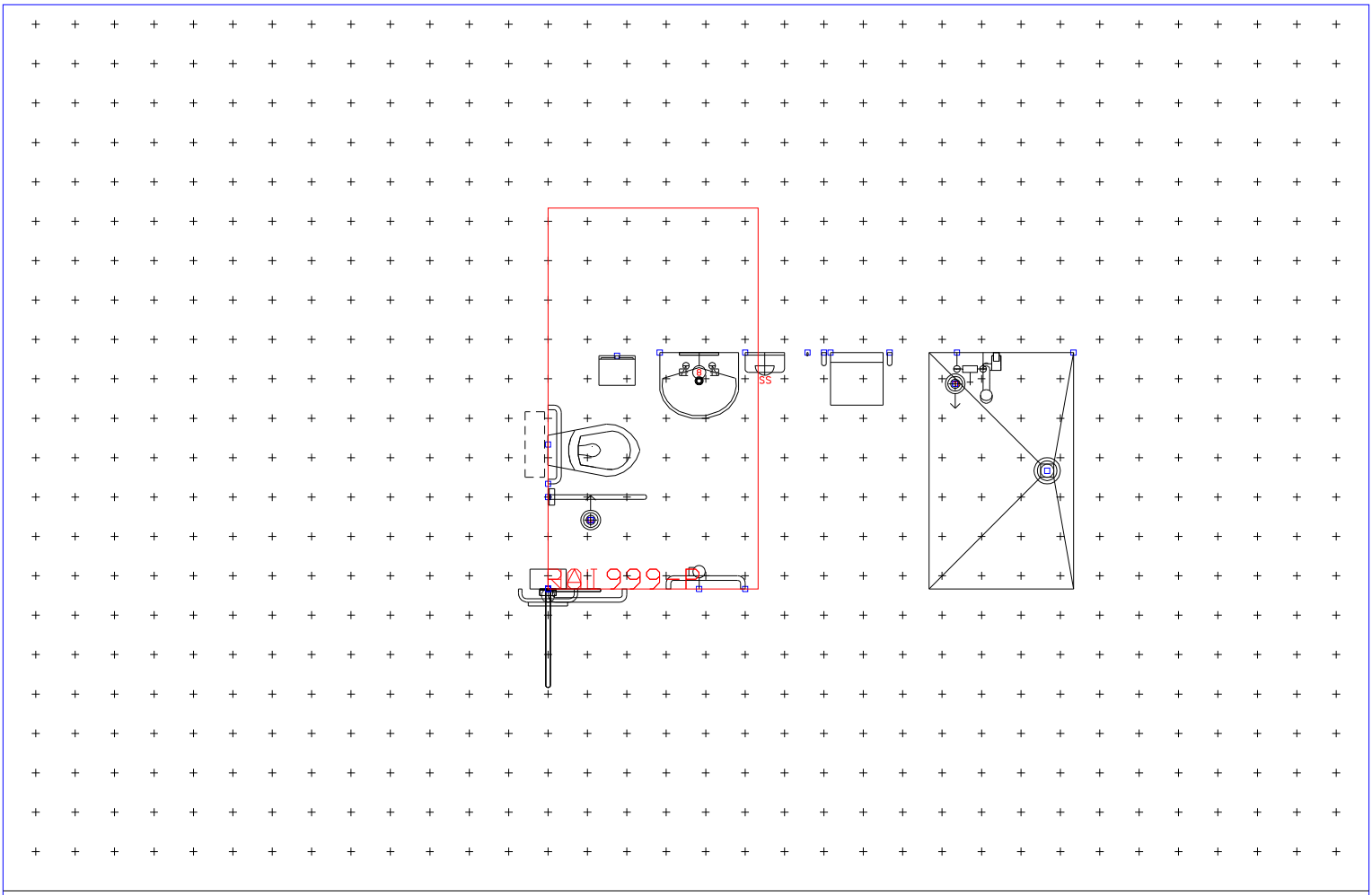
Cardiac Cathater Operating Theatre Lab

N0111A A52787523 Grid:300 (mm) 23/04/2009



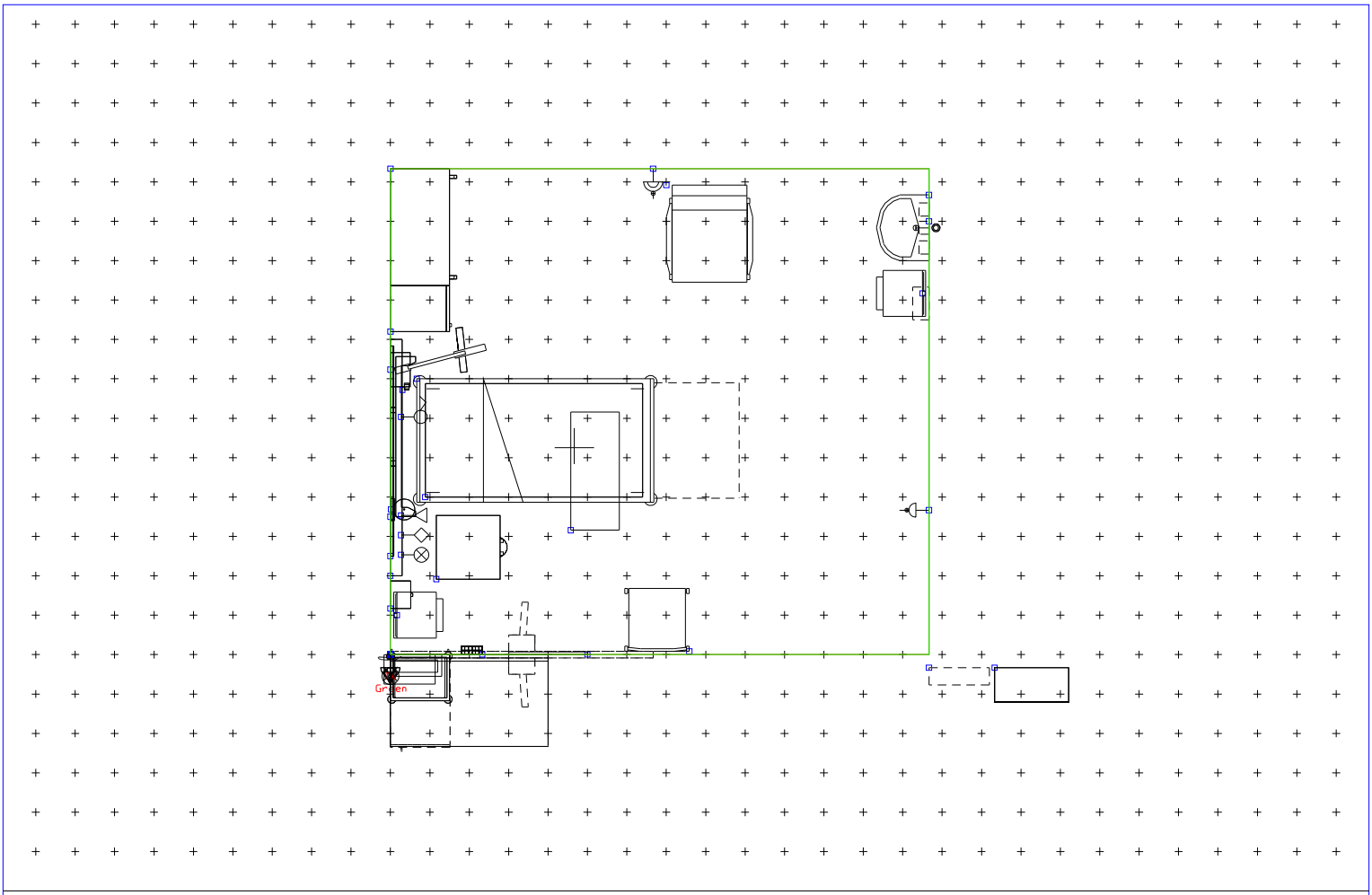
Multi-bed room, day space: Children/young people, 4 beds, with relatives overnight stay

B2001 A52787523 Grid:300 (mm) 23/04/2009



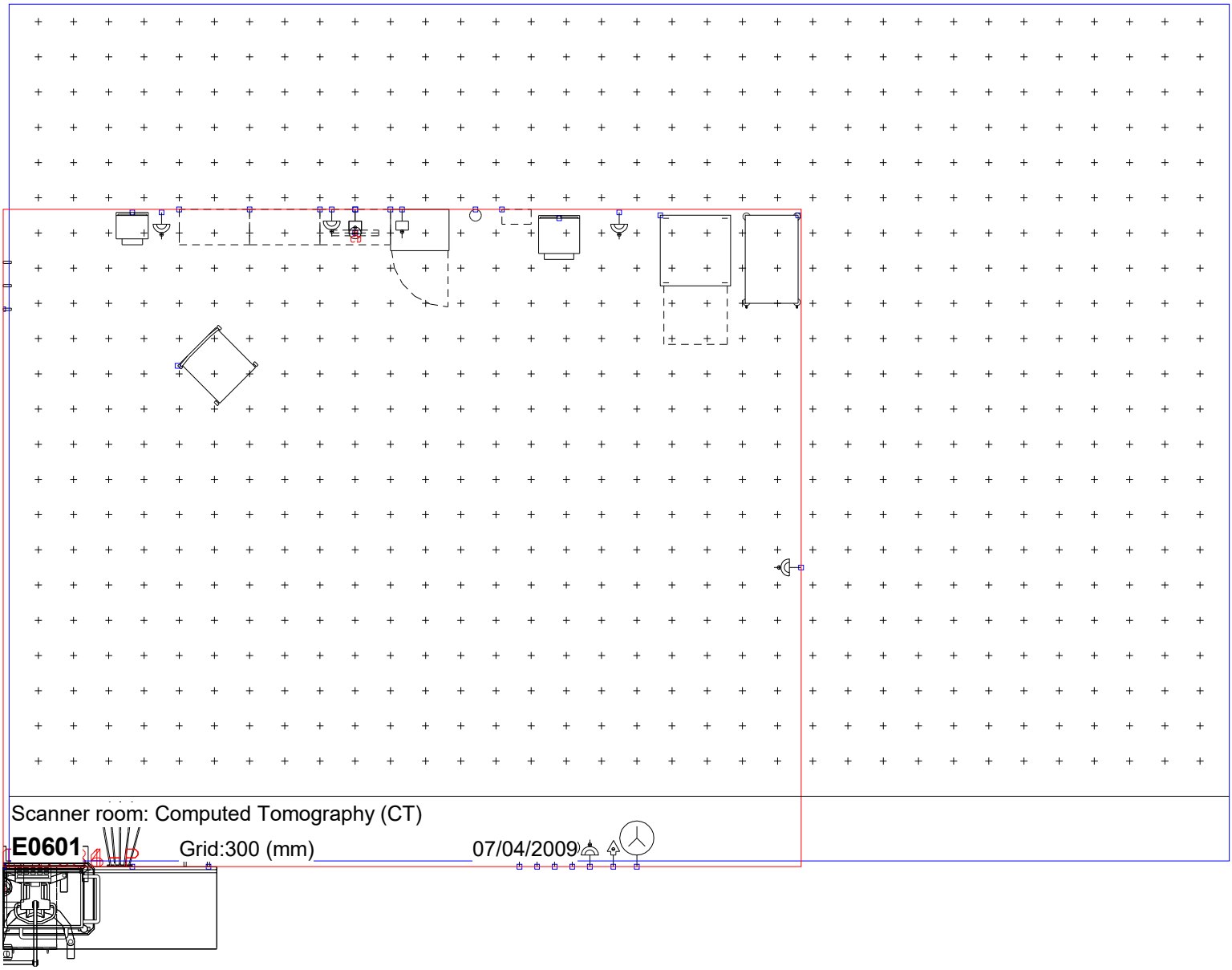
Shower, WC & personal wash: independent/assisted wheelchair accessible, en-suite

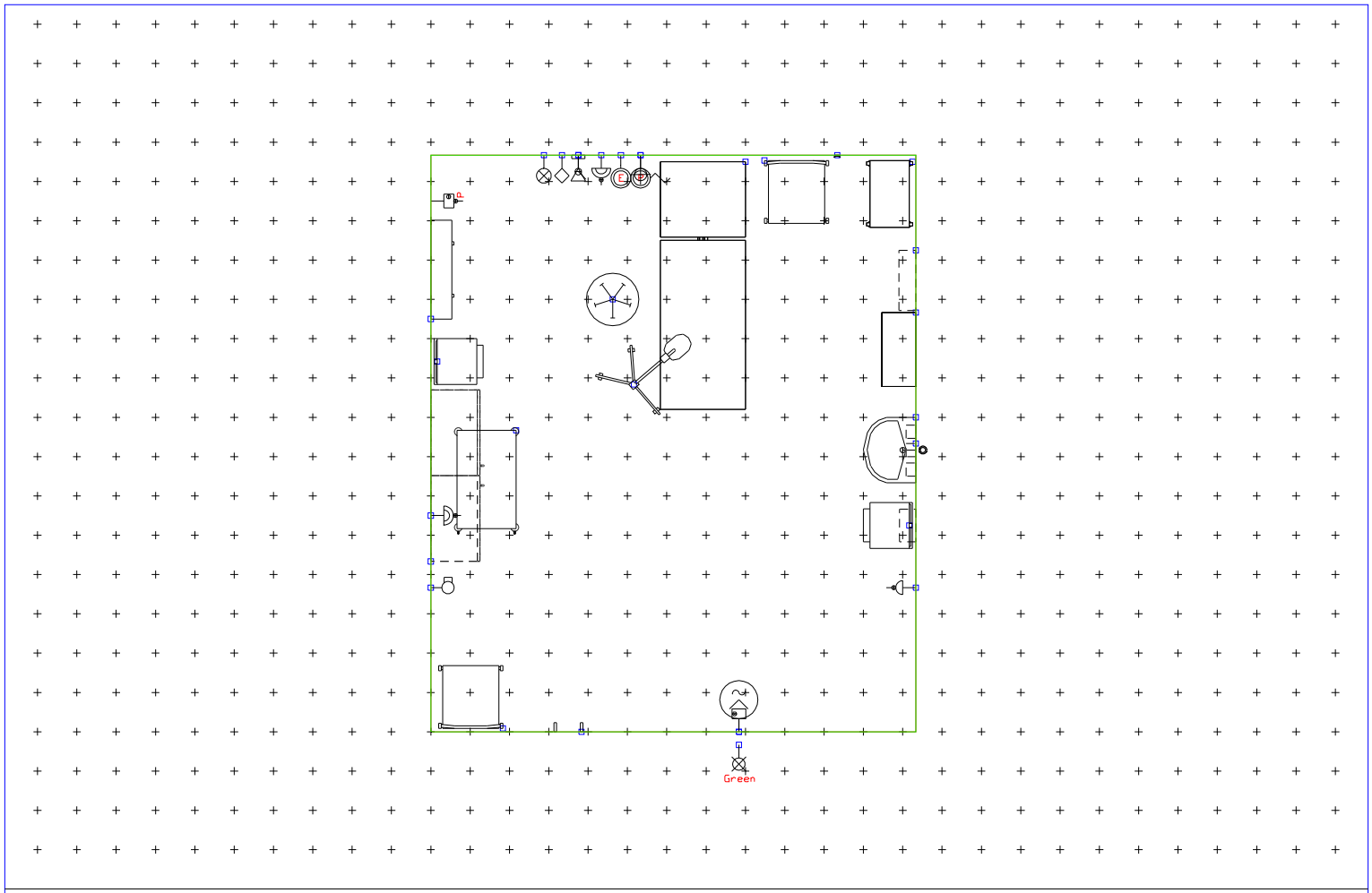
V1610 Grid:300 (mm) 07/04/2009



Single bedroom: Children/young people, with relatives overnight stay

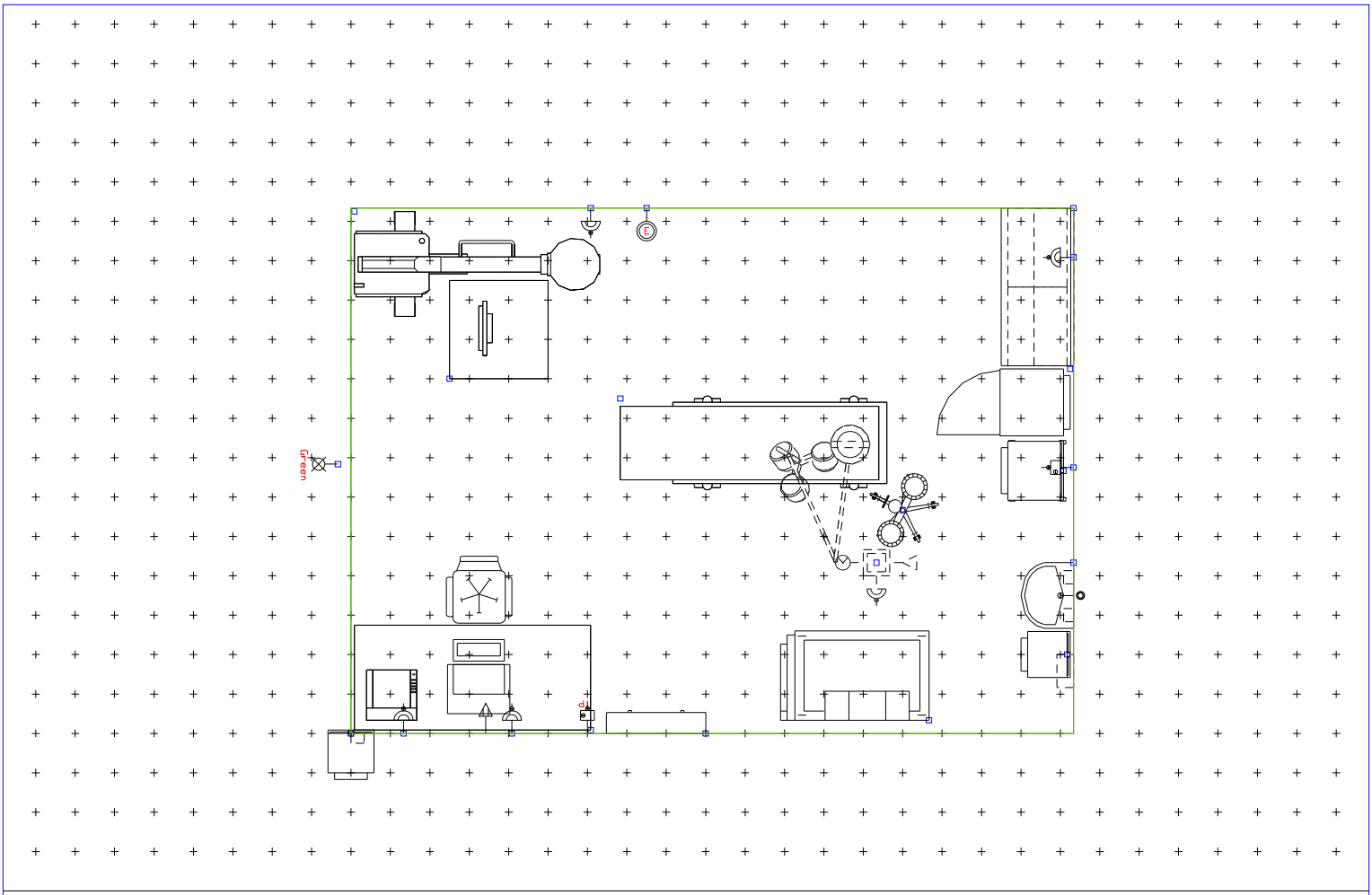
B1802 Grid:300 (mm) 23/04/2009


Scanner room: Computed Tomography (CT)
E0601
Grid:300 (mm)
07/04/2009



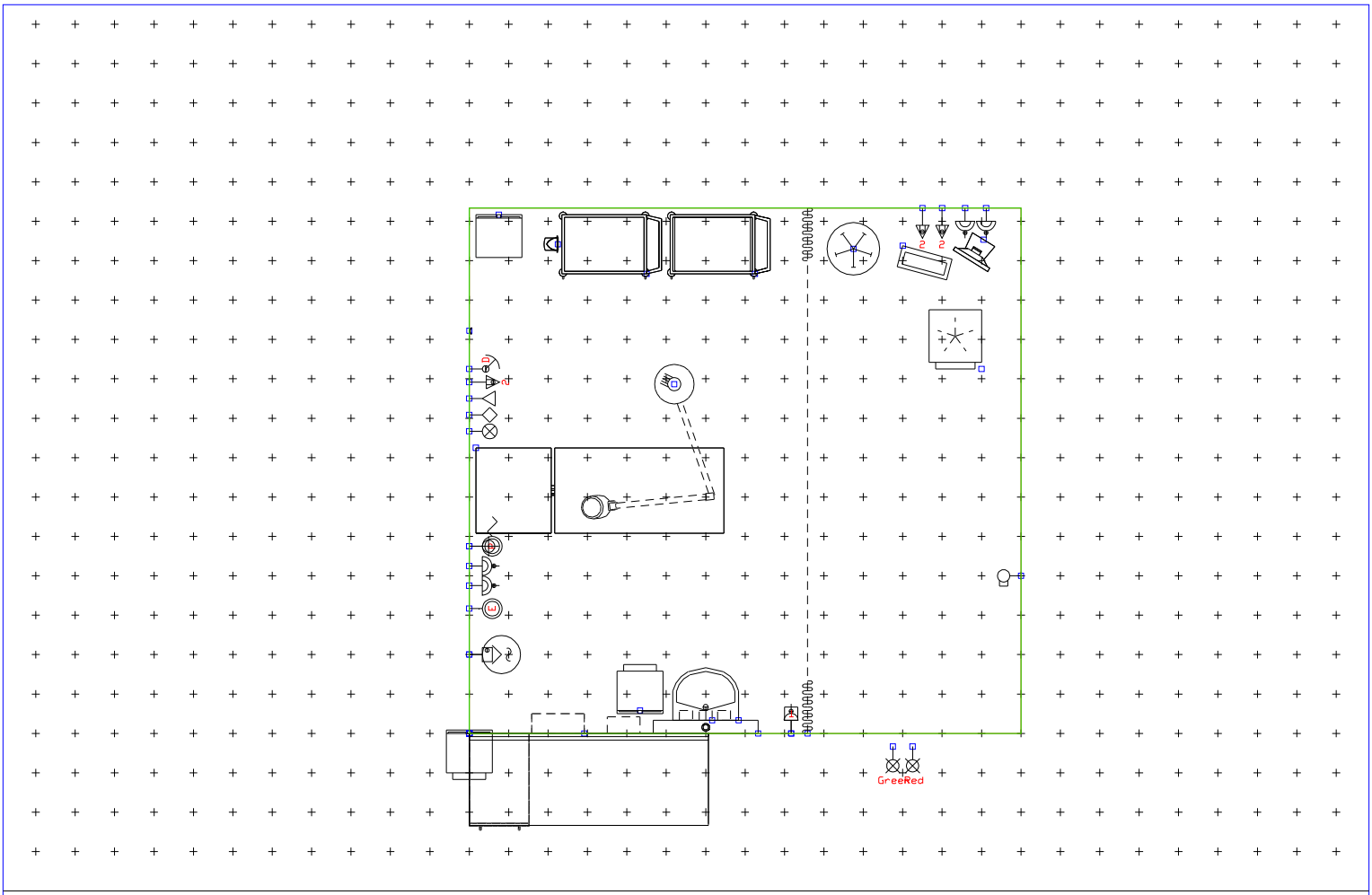
Treatment room: child

X0214 Grid:300 (mm) 23/04/2009



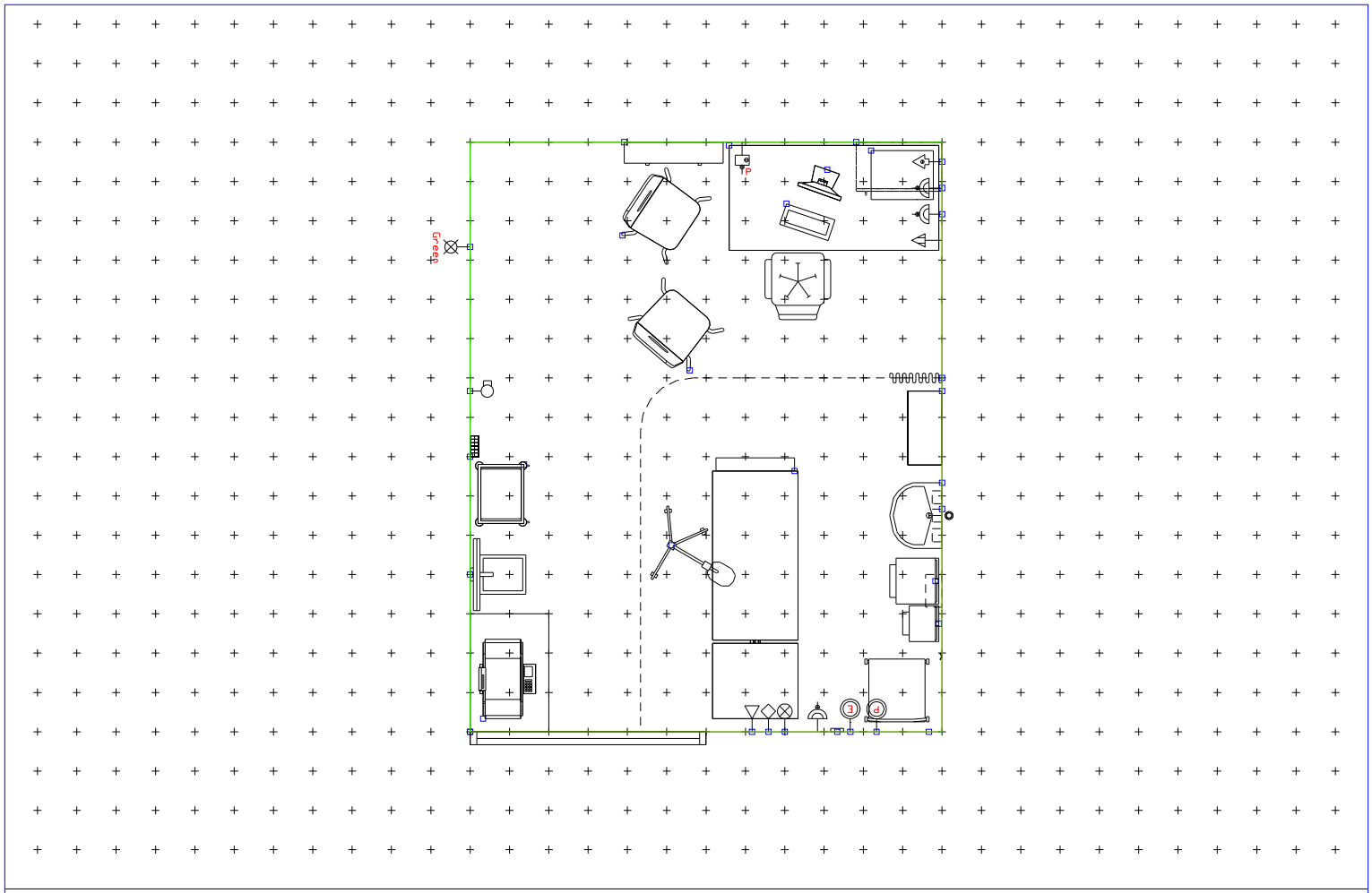
Treatment room: Endoscopy

X0221 Grid:300 (mm) 22/04/2009



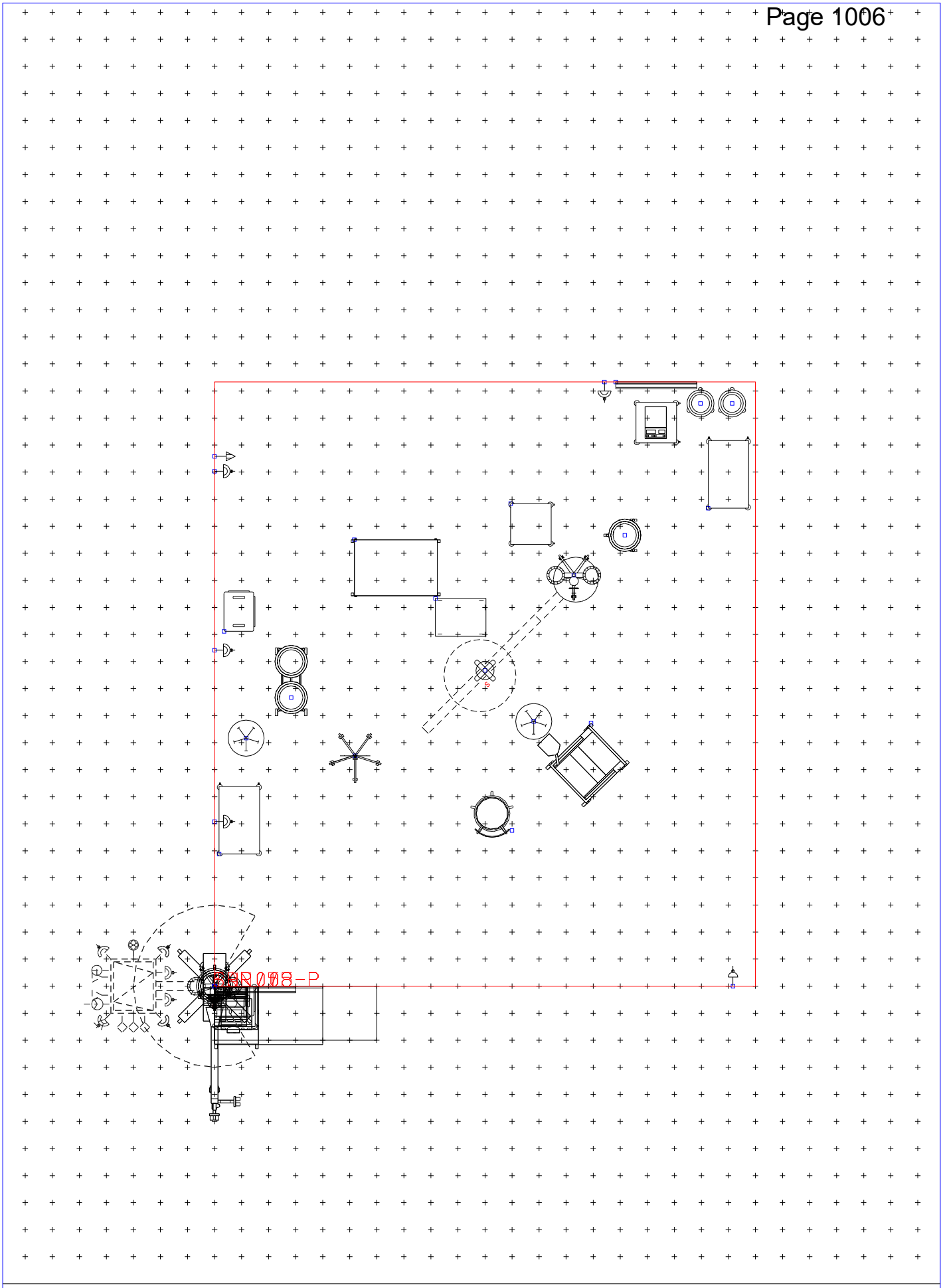
Treatment room

X0112 Grid:300 (mm) 13/08/2007



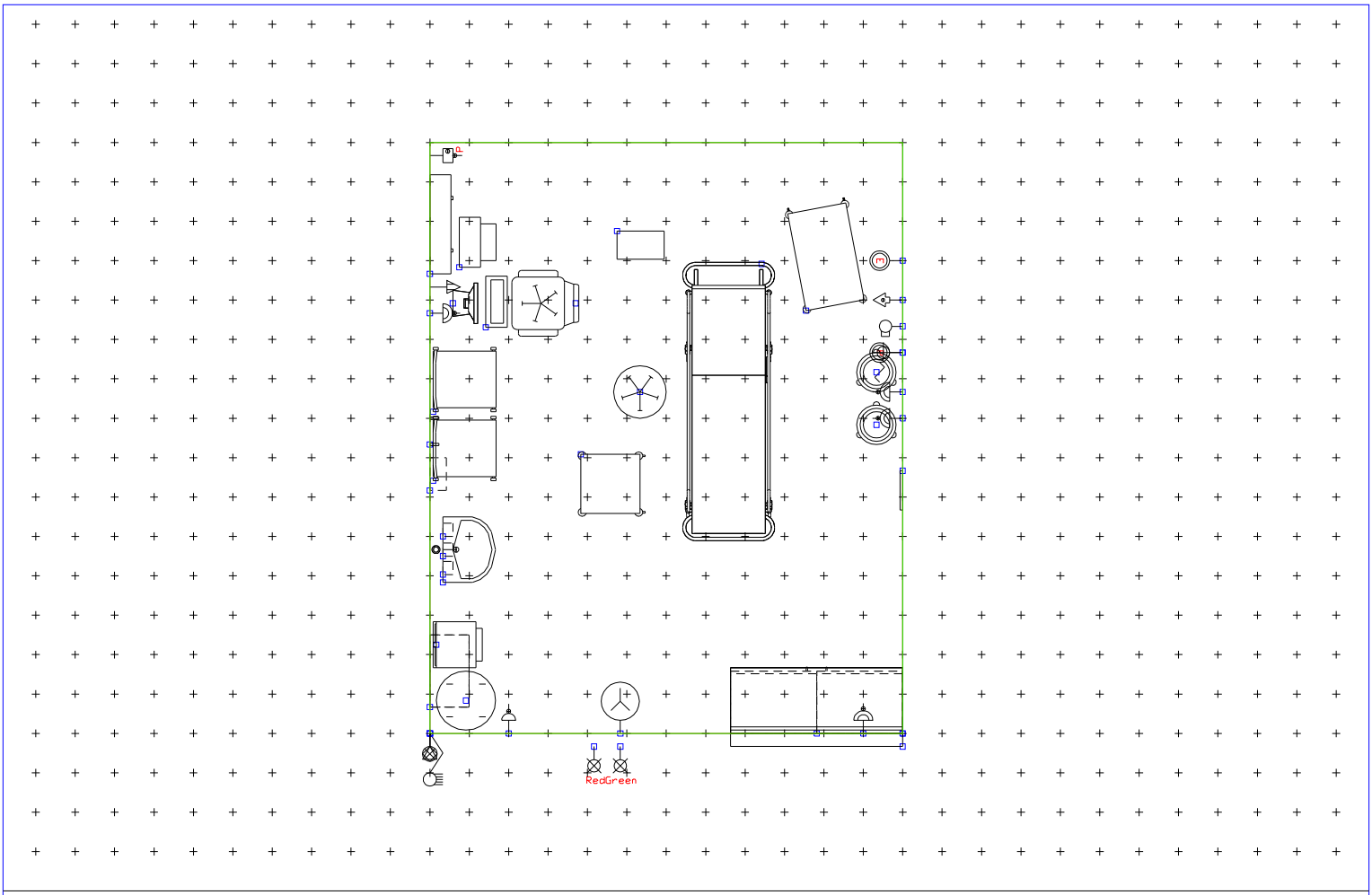
Consulting, examination, treatment room: all-round couch access

C0225 Grid:300 (mm) 23/04/2009



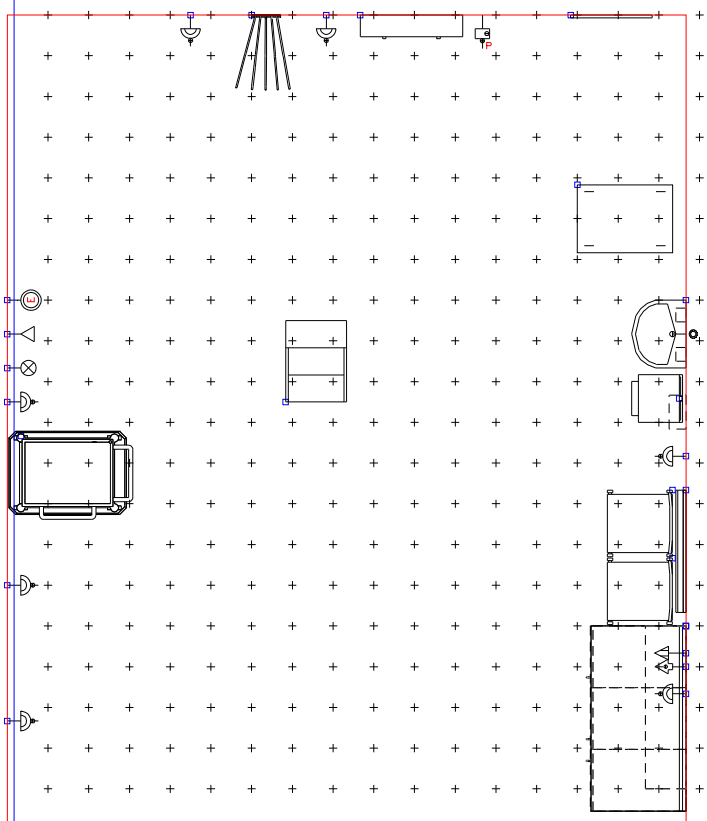
Operating theatre: general

N0106 A52787523 Grid:300 (mm) 15/09/2005



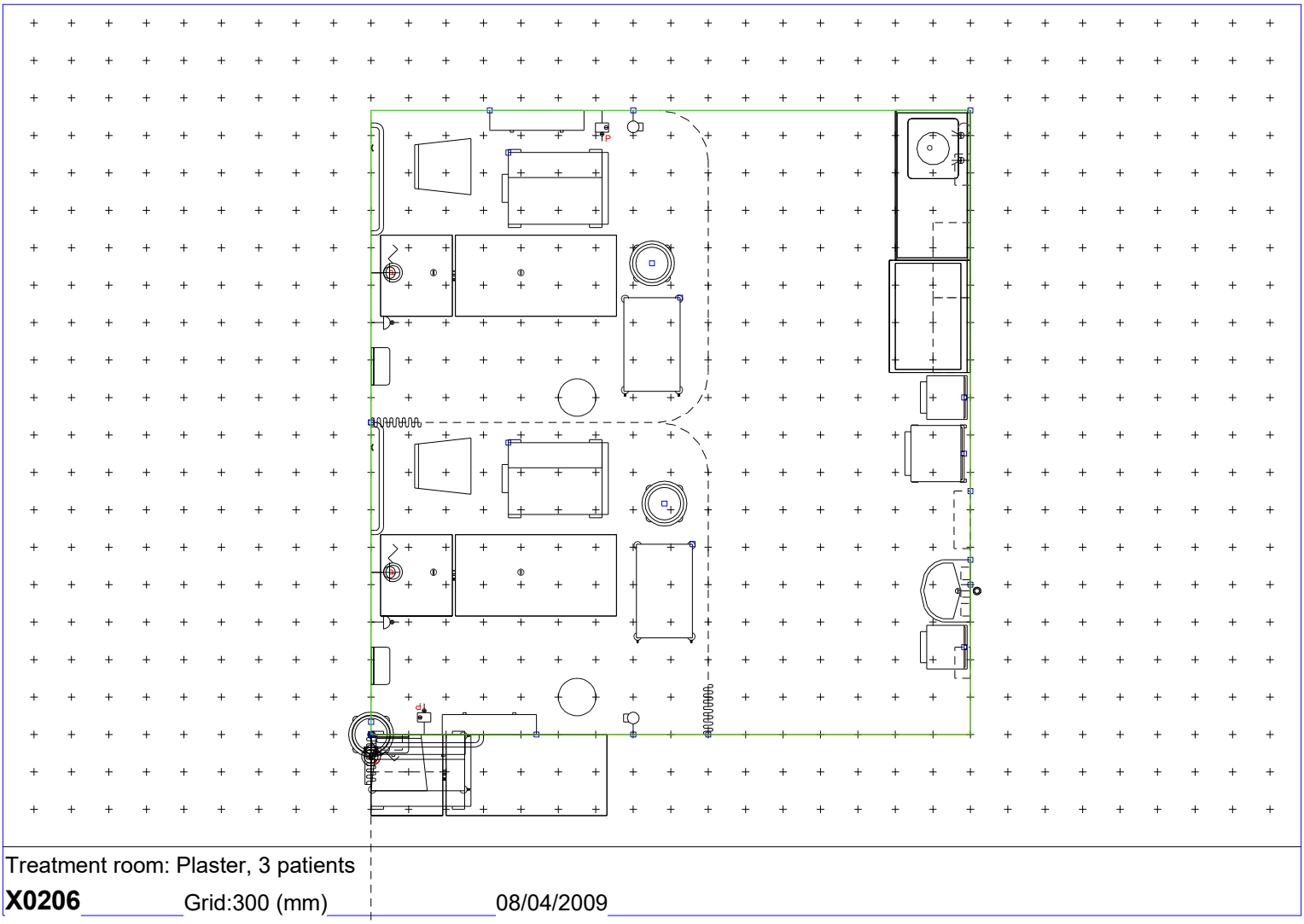
Treatment room: A&E, multi-functional

X0242 Grid:300 (mm) 08/04/2009



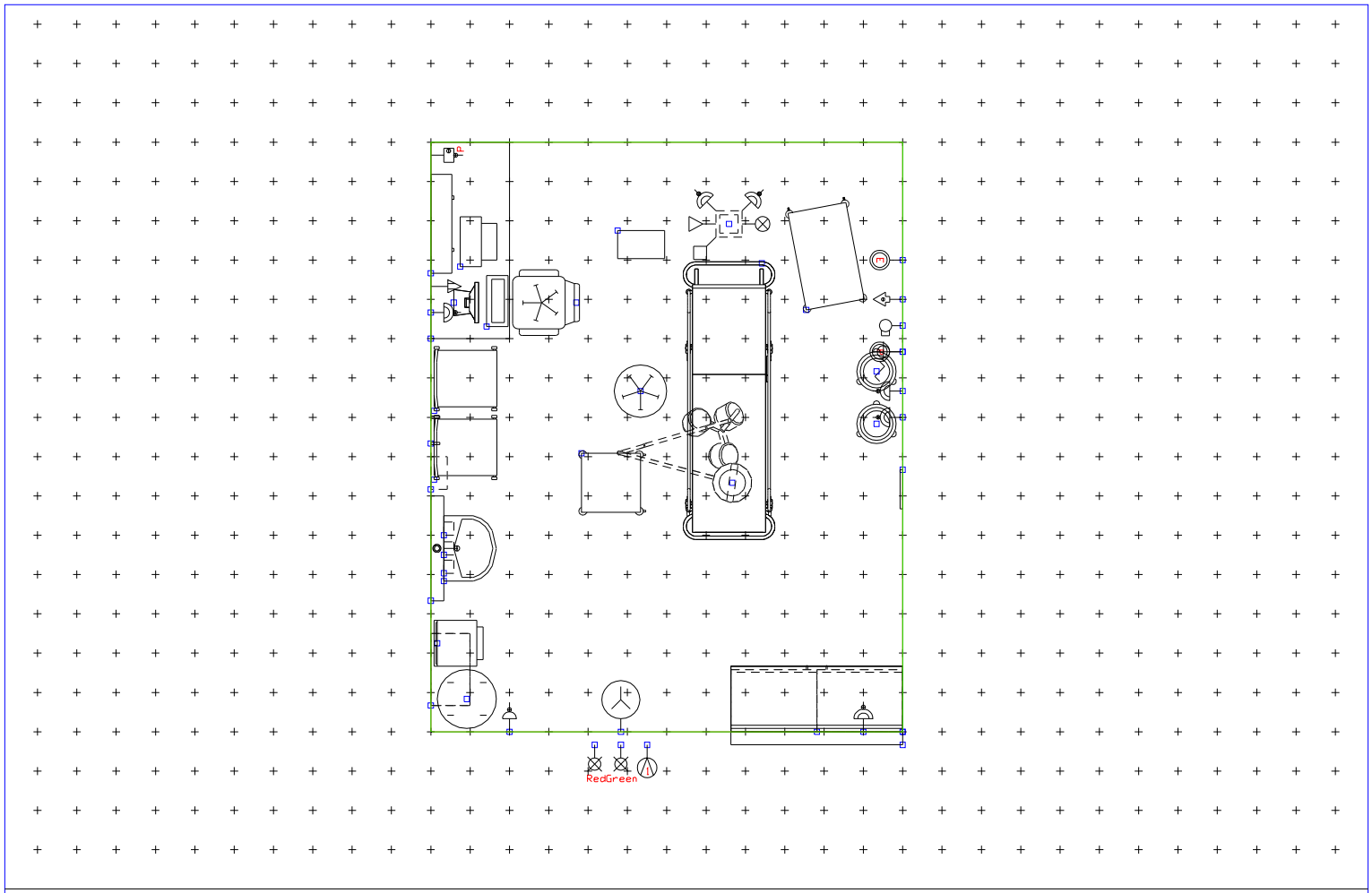
Imaging room: conventional, general x-ray with chest x-ray

E0127 A52787523 Grid:300 (mm) 07/04/2009



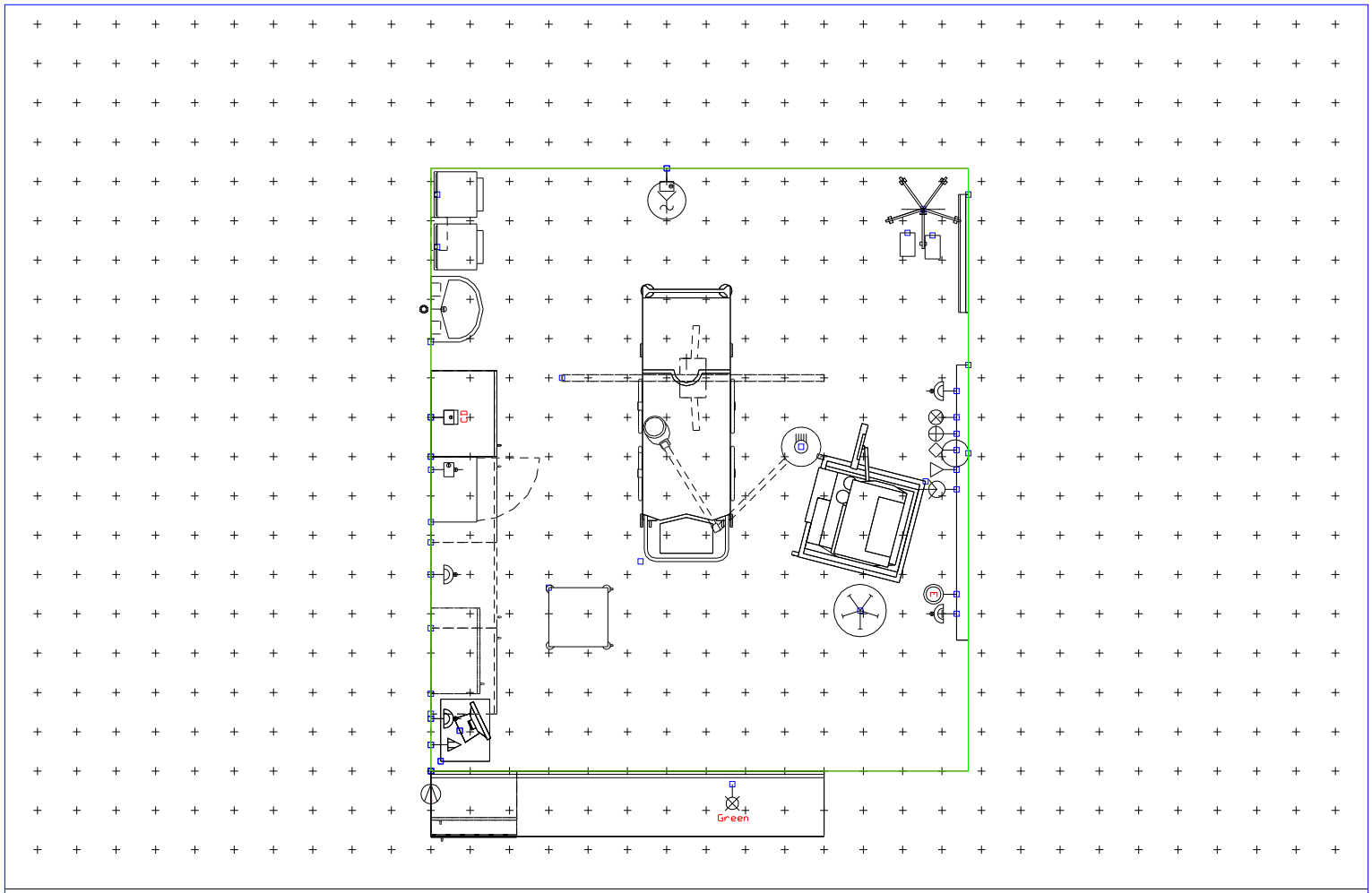
Treatment room: Plaster, 3 patients

X0206 Grid:300 (mm) 08/04/2009



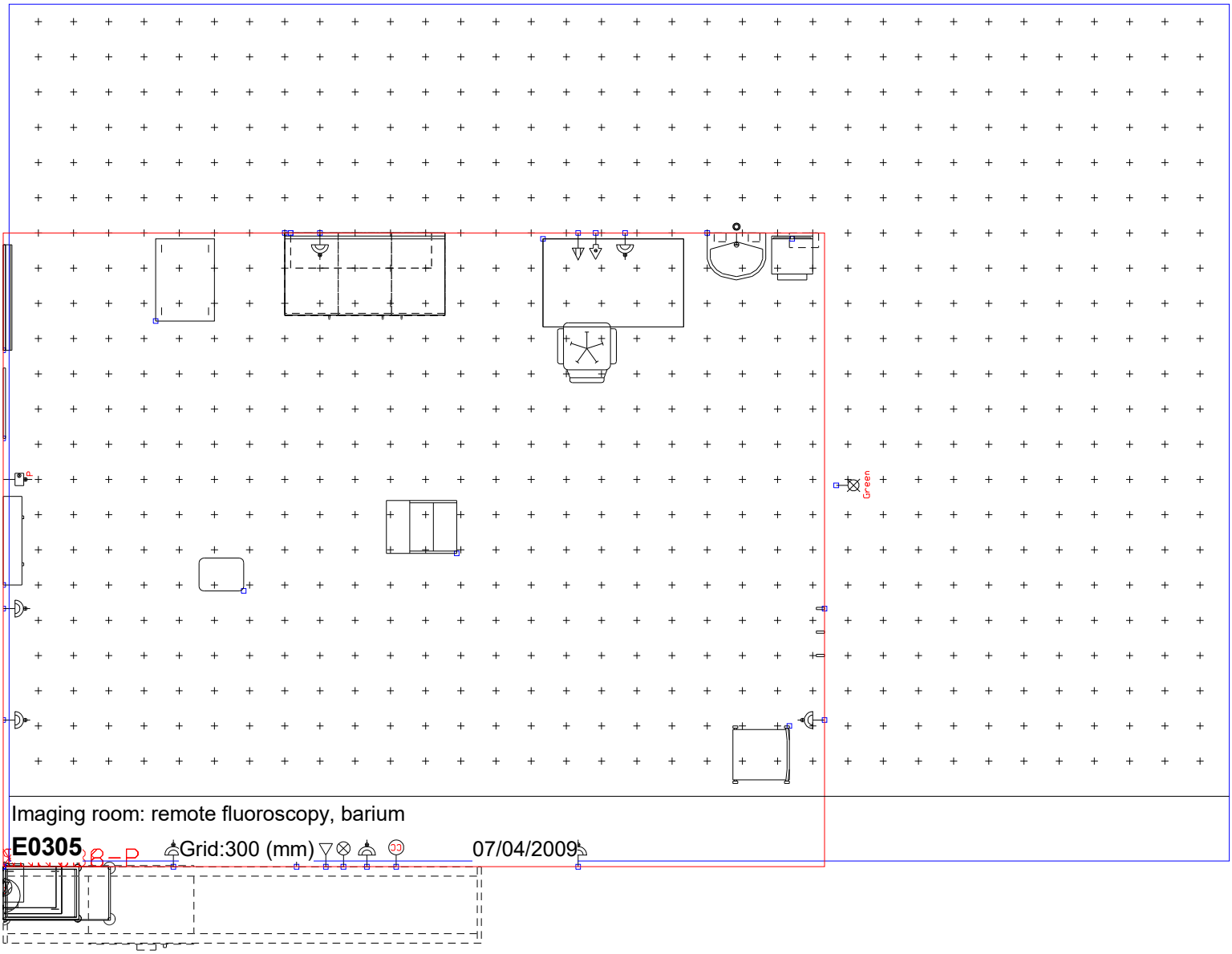
Minor Injuries Treatment room: A&E, multi-functional

X0242A Grid:300 (mm) 08/04/2009



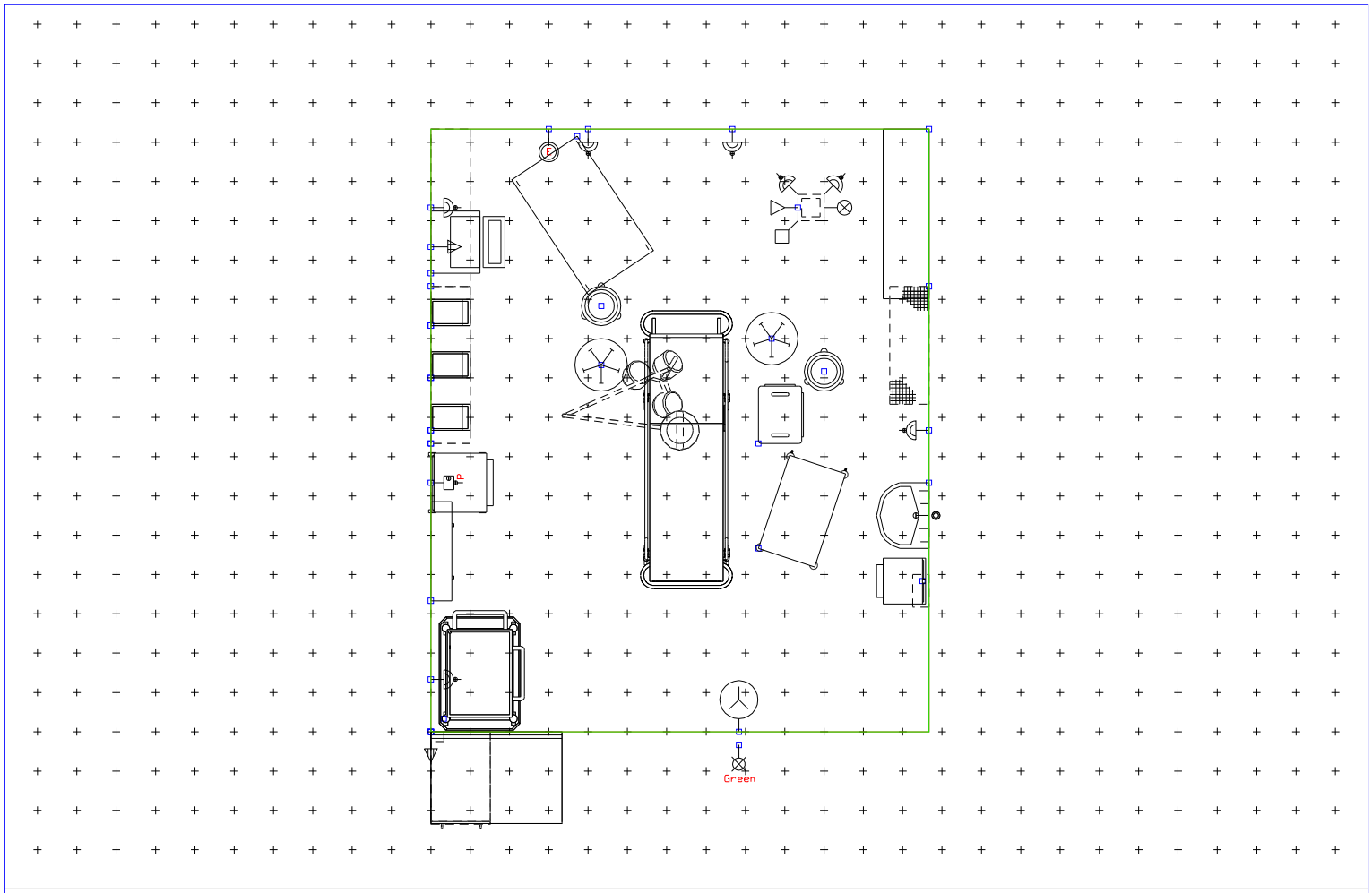
Anaesthetic room

N0305 Grid:300 (mm) 10/08/2007



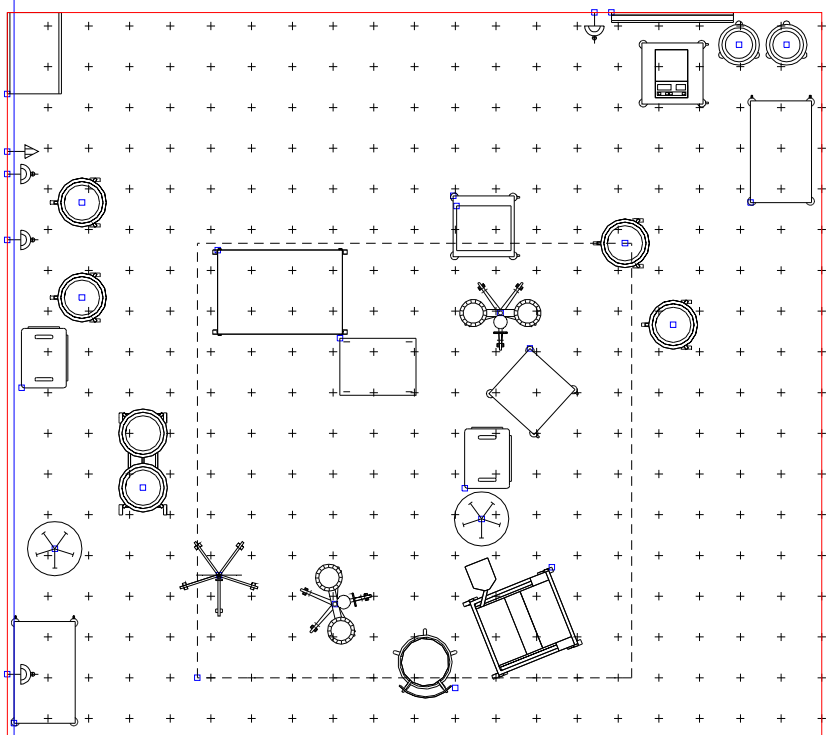
Imaging room: remote fluoroscopy, barium

E0305 Grid:300 (mm) 07/04/2009



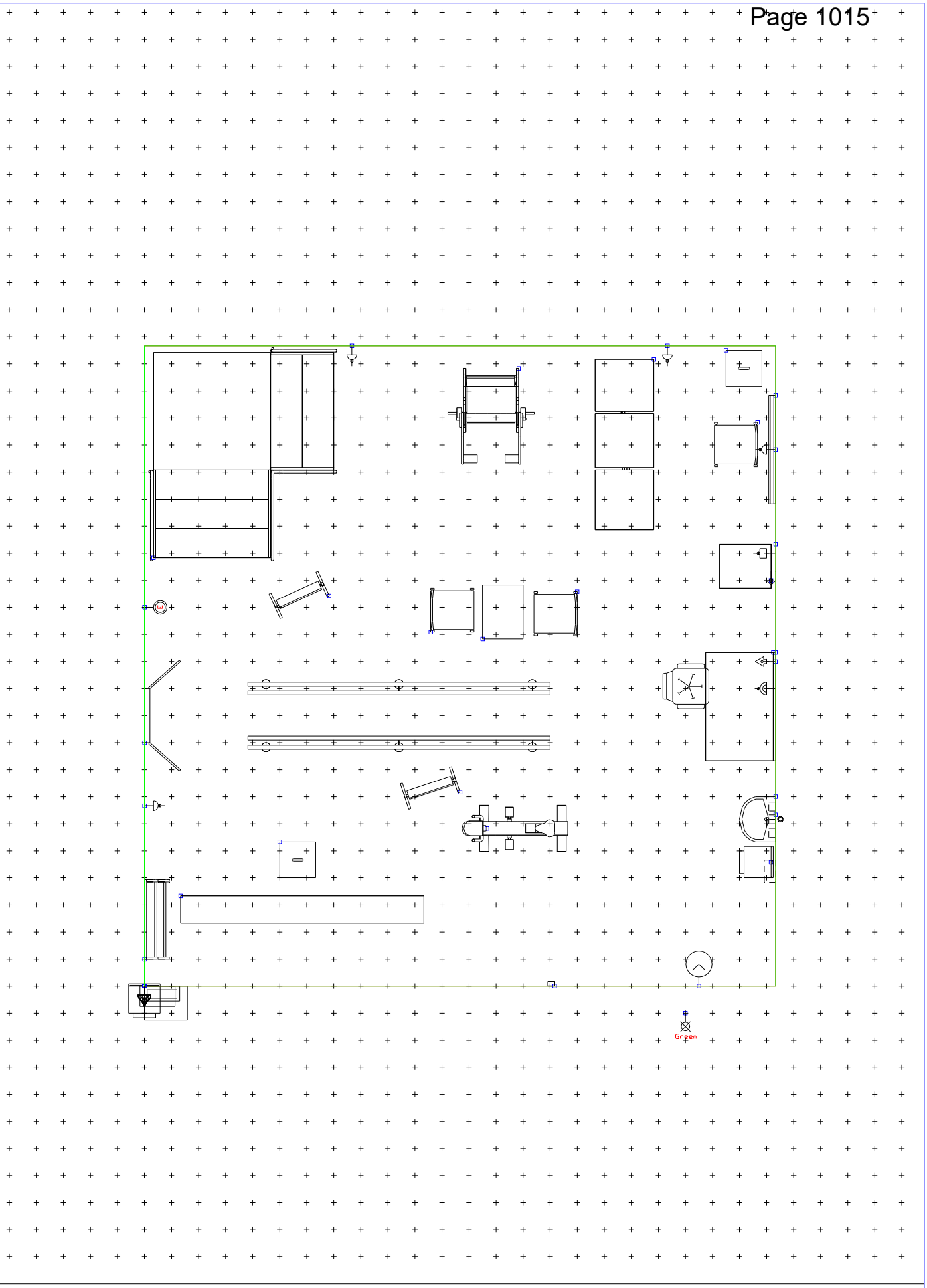
Major treatment/minor surgery room

X0240 Grid:300 (mm) 07/04/2009



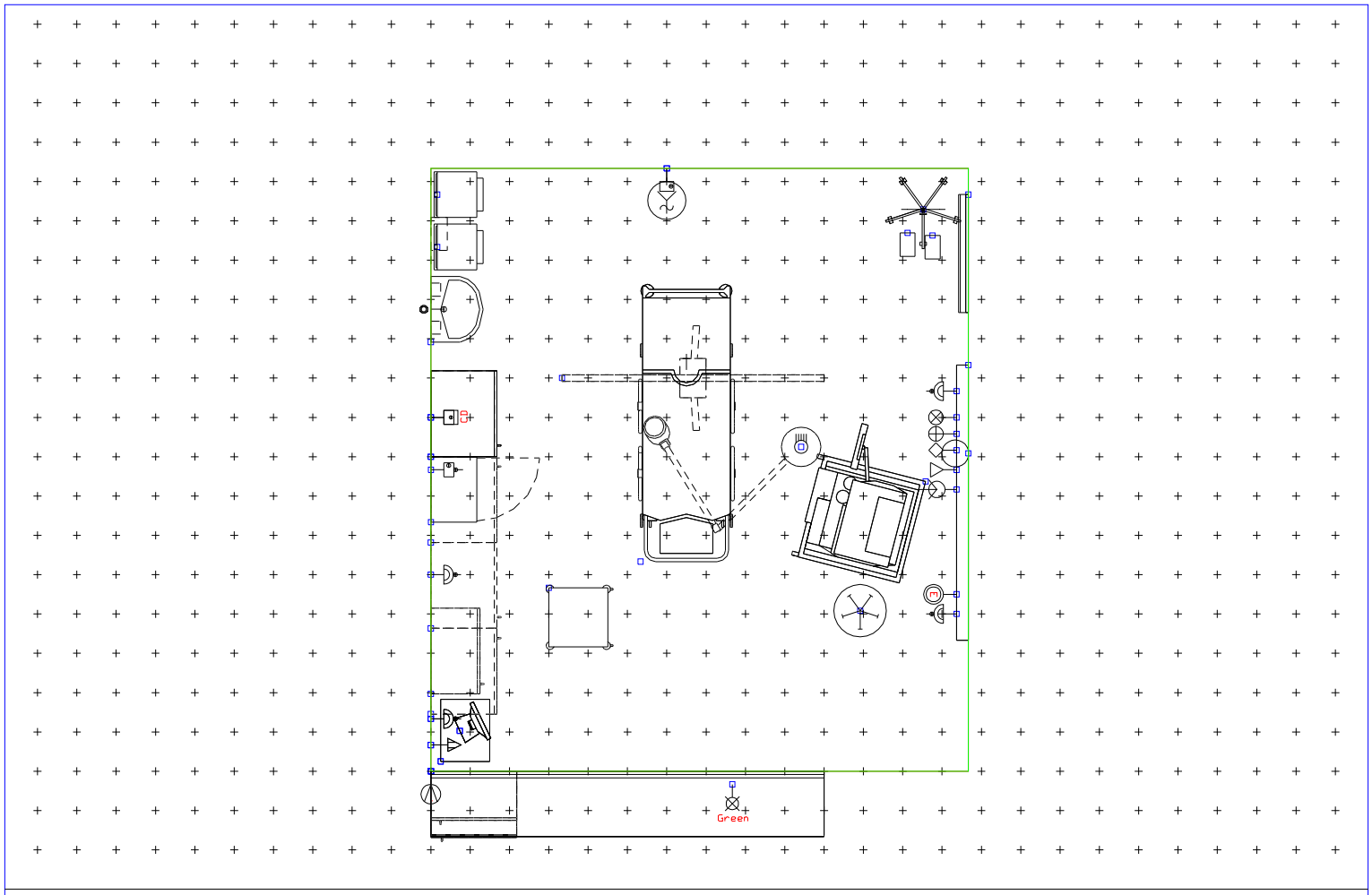
Operating theatre with ultra clean ventilation canopy (UCV)

N0111 A52787523 Grid:300 (mm) 23/04/2009



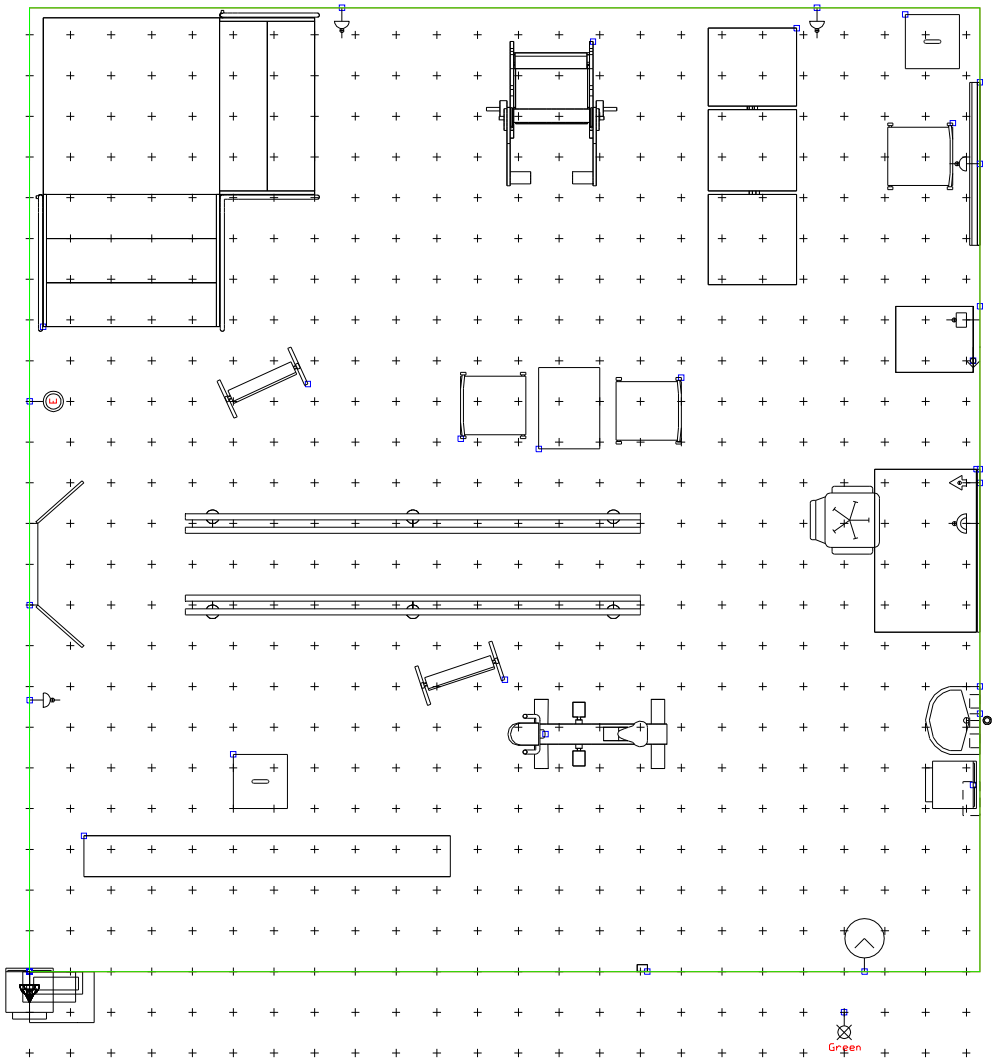
Activity area: Physiotherapy, 5 patients

X0312 A52787523 Grid:300 (mm) 07/04/2009



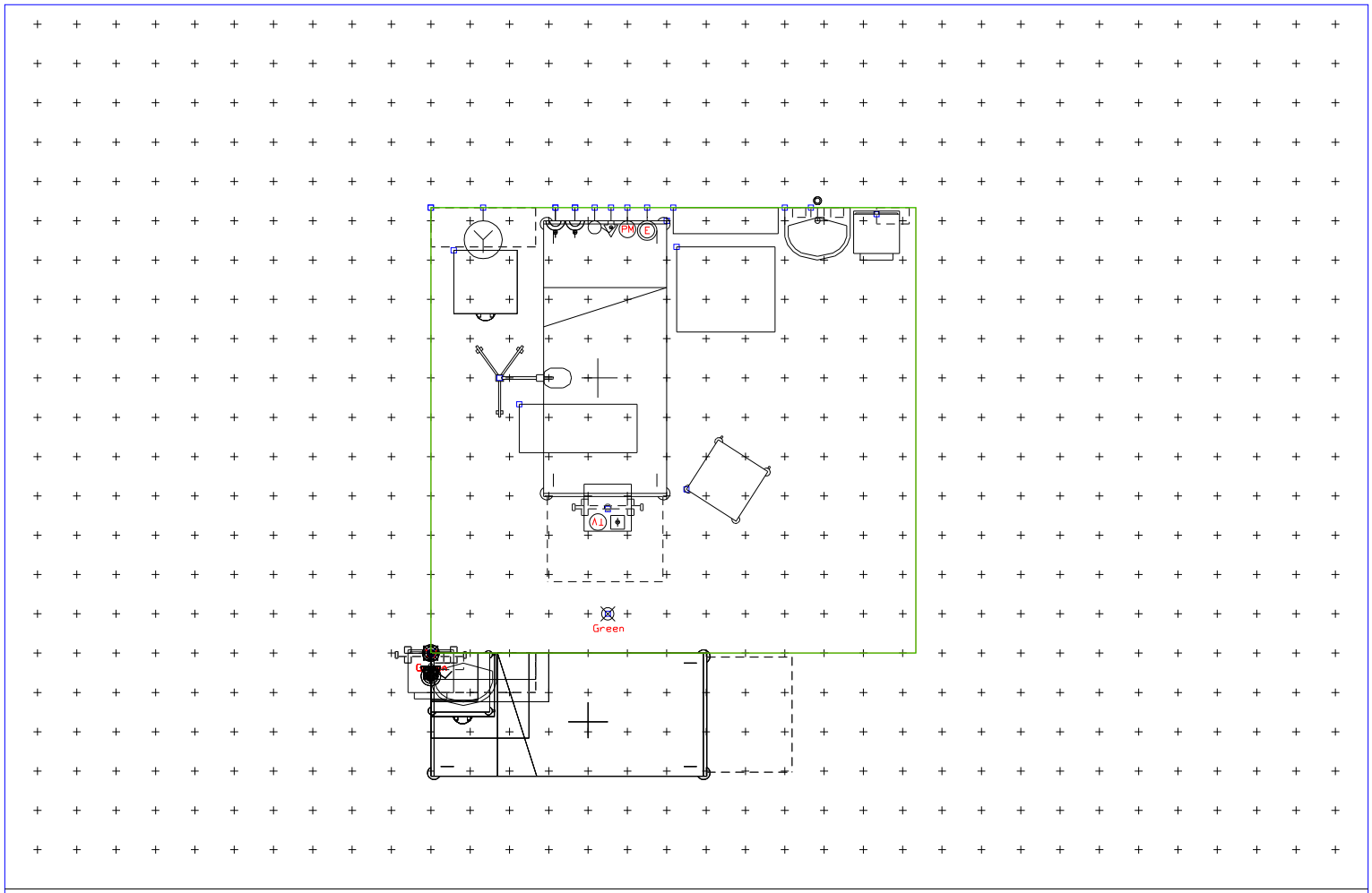
Anaesthetic room

N0305A Grid:300 (mm) 07/04/2009



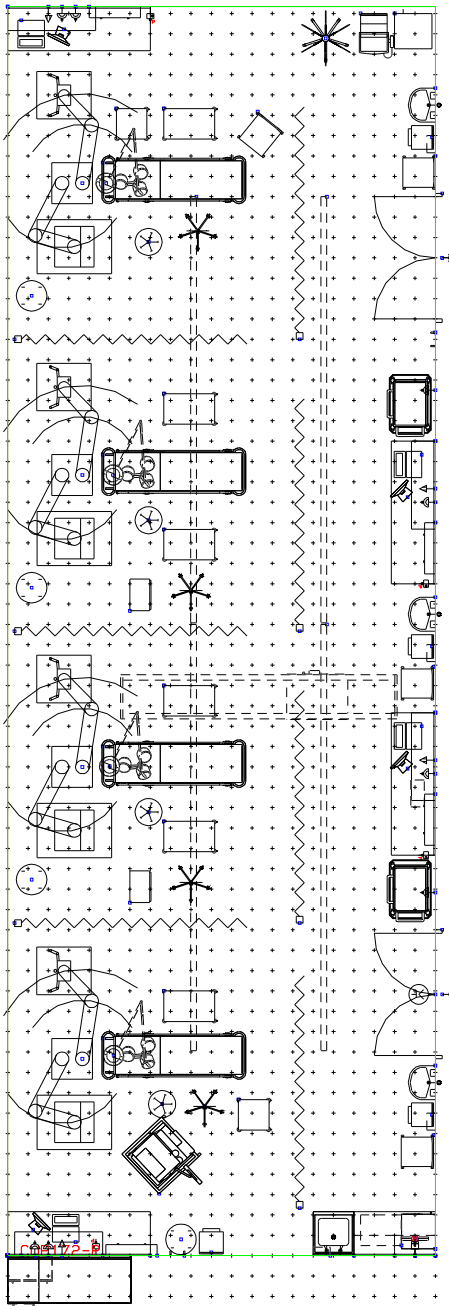
Activity area: Physiotherapy, 4 patients

X0312A A52787523 Grid:300 (mm) 07/04/2009

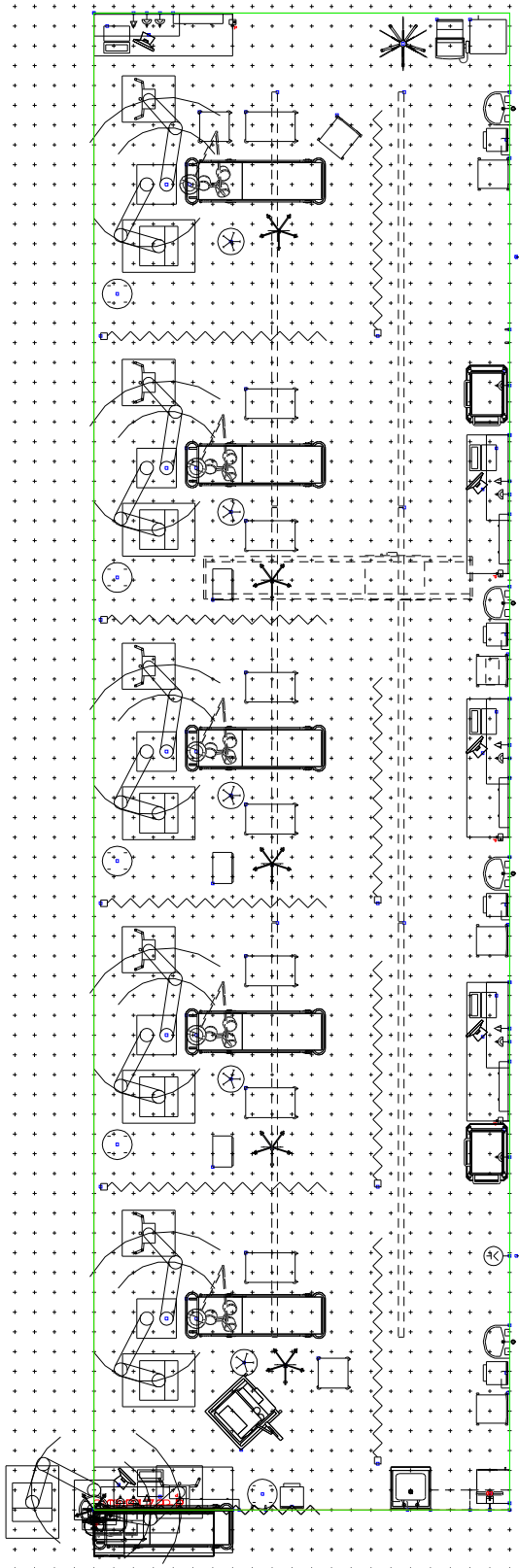


Treatment cubicles: dialysis, 4 patients

X0253 Grid:300 (mm) 22/04/2009



Resuscitation room, 4 places
A52787523
X0237 Grid:300 (mm) 13/08/2007



NOTES
Check all dimensions on site. Do not scale from this drawing
Report any discrepancies and omissions to HLM Architects
This Drawing is Copyright ©

A Colours and text amended. 12/05/2009 SA

Revisions

Project
NEW SOUTH GLASGOW HOSPITAL

Client
NHS GREATER GLASGOW AND CLYDE

Title
RADIOLOGY (ADULTS) ROOM ADJANCIES

Drawing No. Revision
PD-HLM-L(00)01-X-RA-001A

Scale @ A1: 1:200
Drawn: JD
Date: 30/04/2009
Checked: HS

HLM ARCHITECTS

In Association with bmj architects Boswell Mitchell & Johnston

HLM Architects
2nd Floor Ailsa Court 121 West Regent Street GLASGOW G2 2SD
t: 0141 226 8320 f: 0141 226 8350
LONDON GUILDFORD SHEFFIELD GLASGOW BELFAST CARDIFF PLYMOUTH

A52787523

NHS
Greater Glasgow and Clyde

HLM ARCHITECTS

12 May 2009

NEW SOUTH GLASGOW HOSPITAL

INTRODUCTORY PRESENTATION TO BIDDERS

bmj architects
Boswell Mitchell & Johnston

Currie & Brown

Hirst
LANDSCAPE ARCHITECTS

URS

harley haddow
consulting engineers

WALLACE WHITTLE

EXEMPLAR DESIGN WORK

SITE ANALYSIS

HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL

Govan Context

HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL

Southern General Hospital Site

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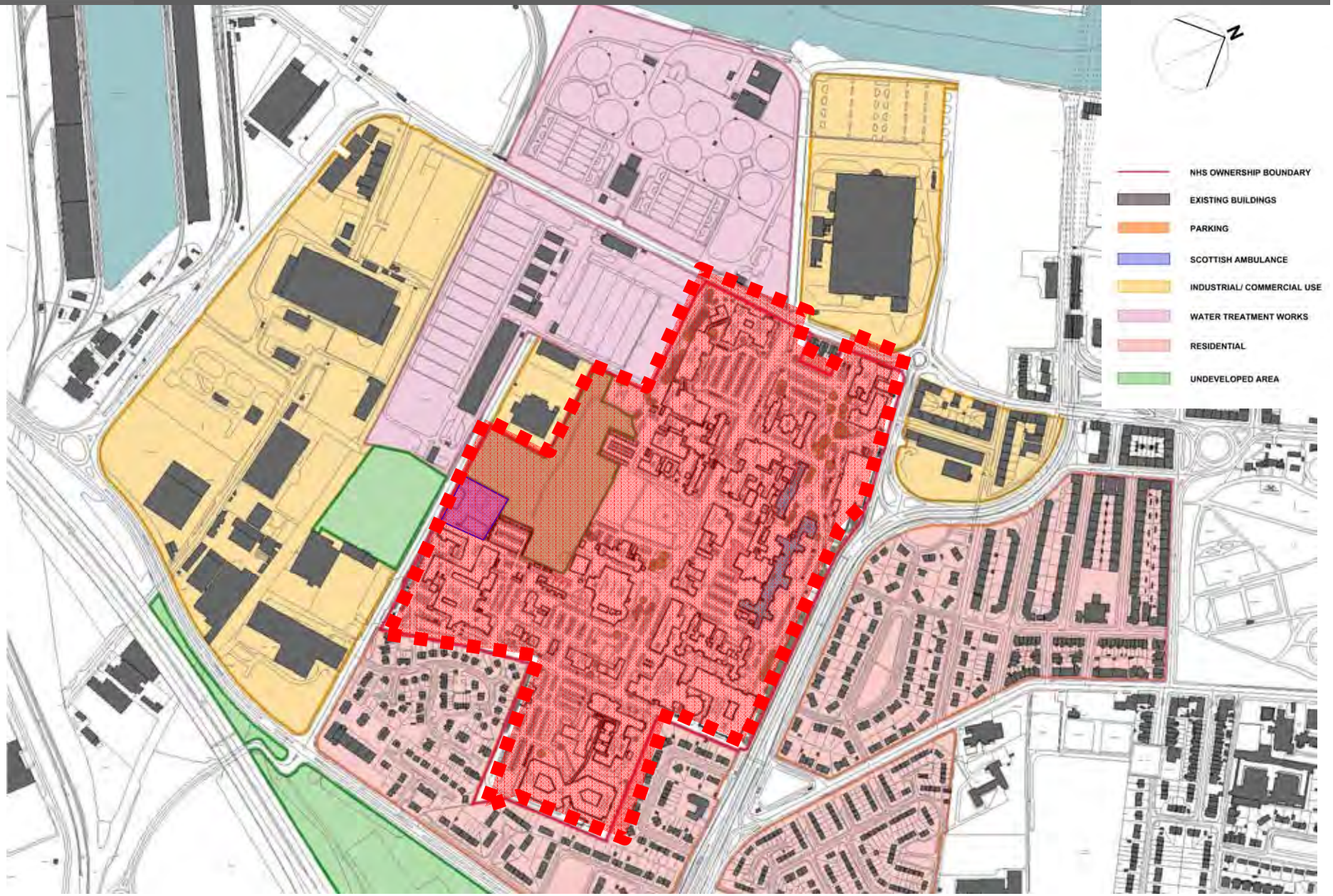
NEW SOUTH GLASGOW HOSPITAL

Existing Site: Surrounding Land Use



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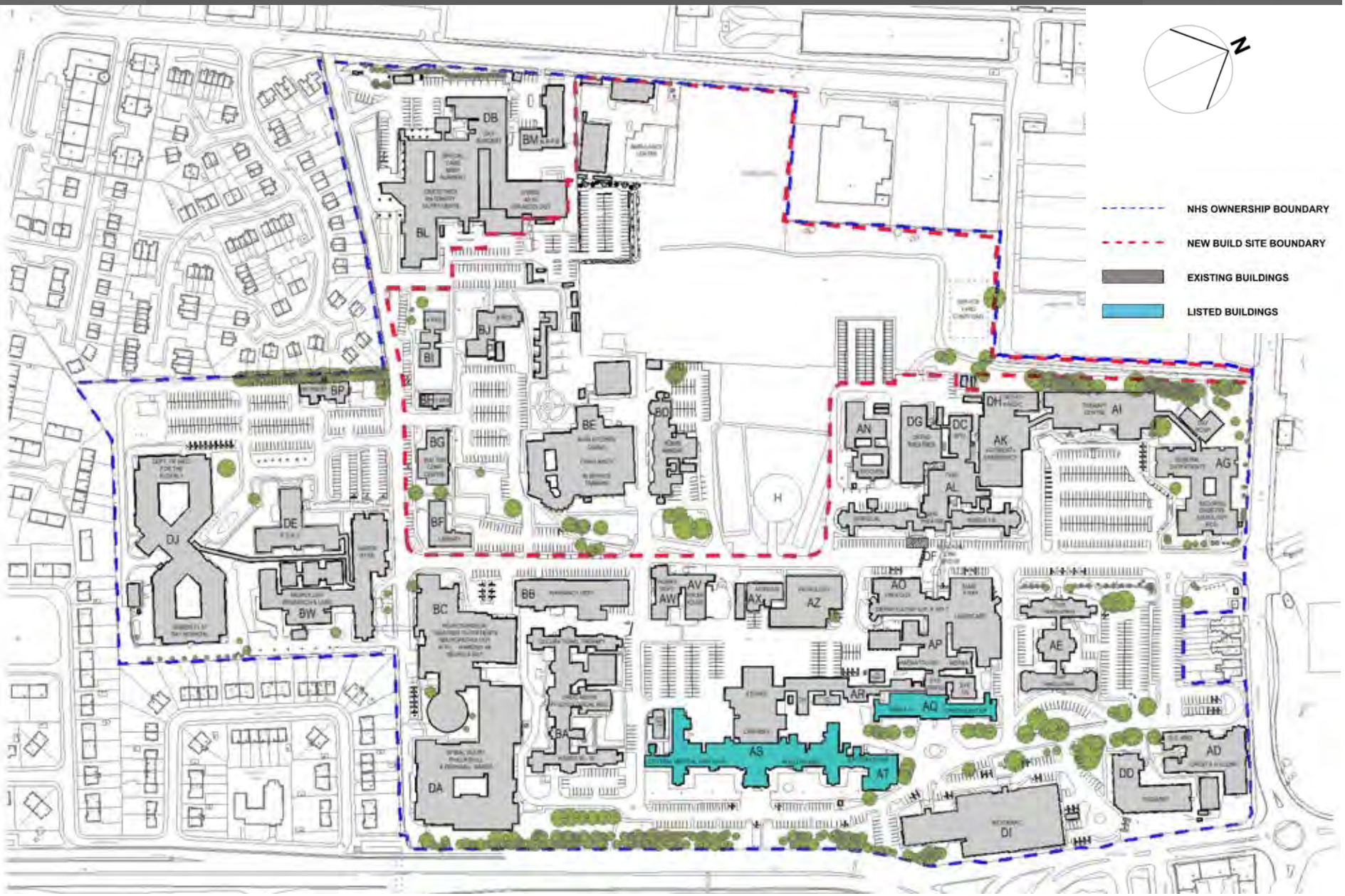
NEW SOUTH GLASGOW HOSPITAL

Existing Site Plan



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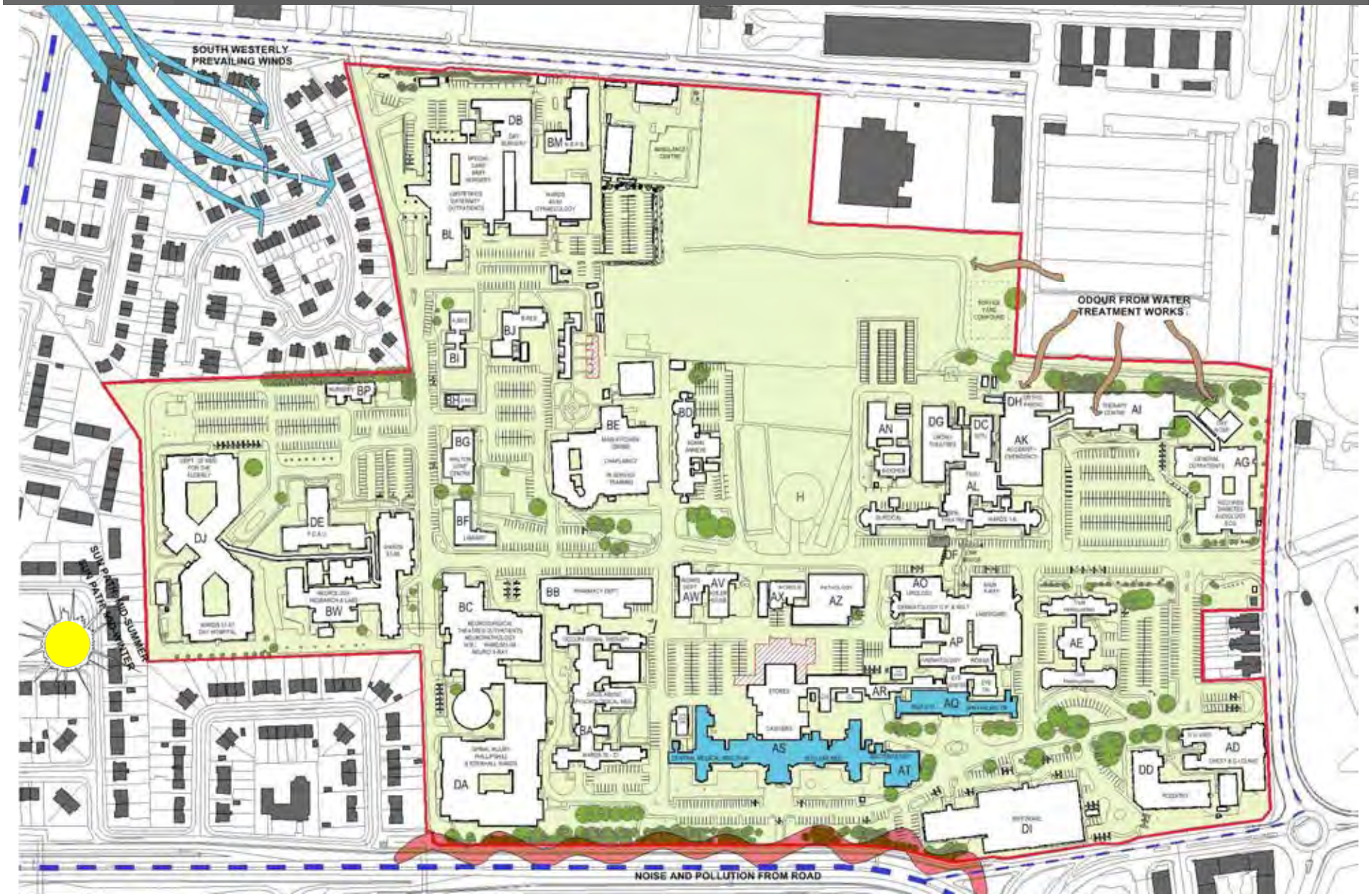
NEW SOUTH GLASGOW HOSPITAL

Existing Site: Access & Routes

HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL

Site Analysis: Climate and Environment

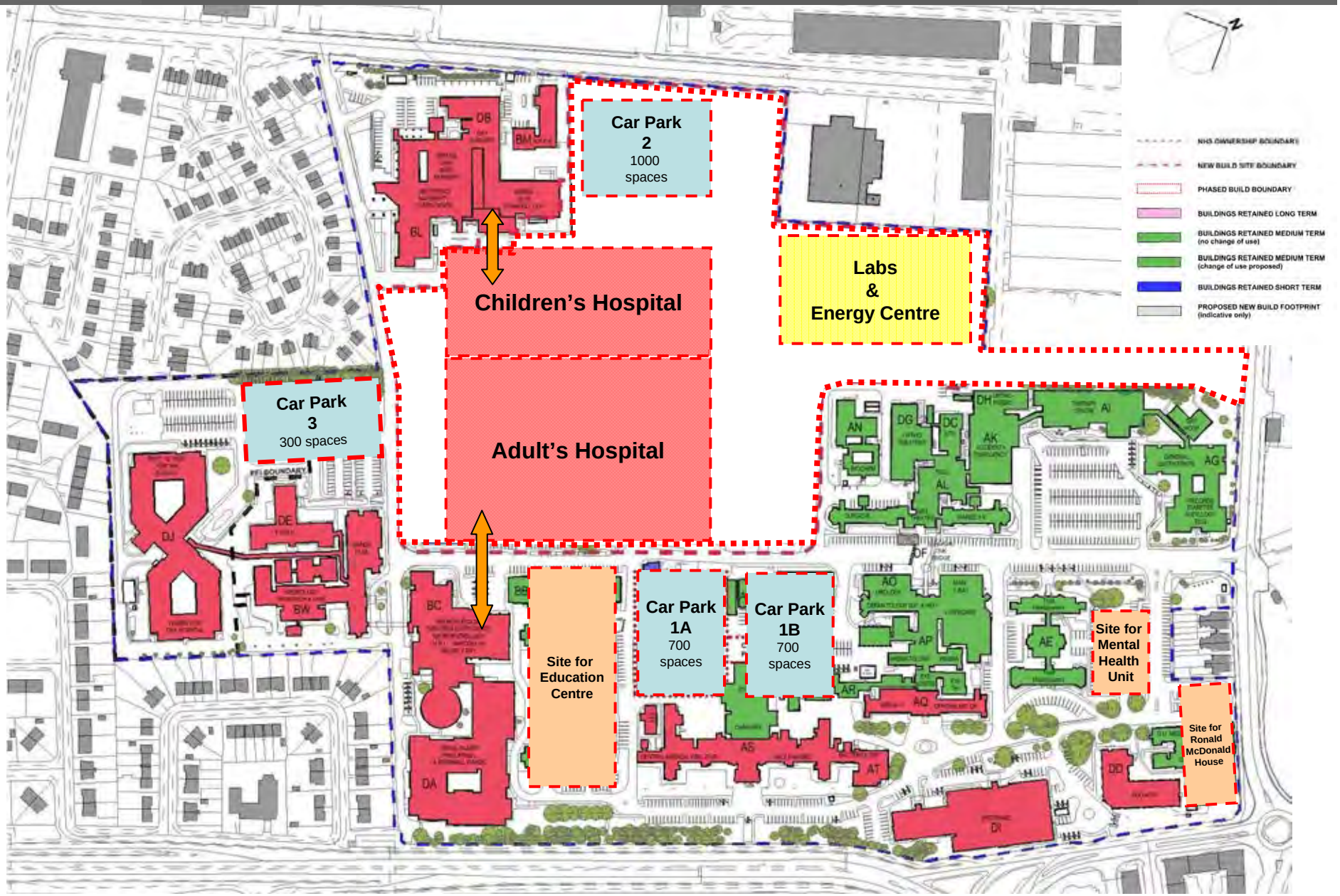


A52787523

PROPOSED SITE DEVELOPMENT PLAN

HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL

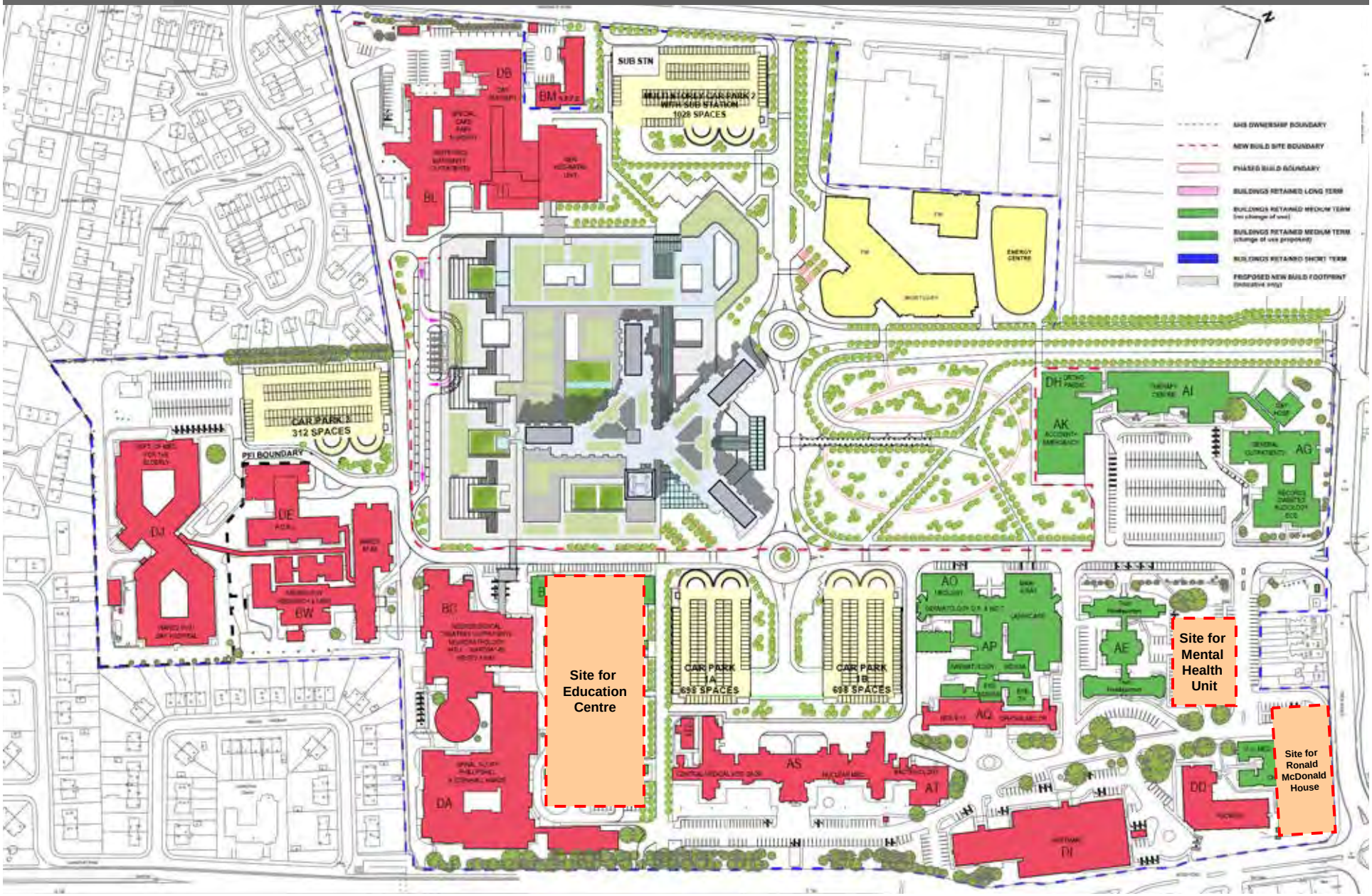
Site Development Plan



MASTERPLAN

HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL

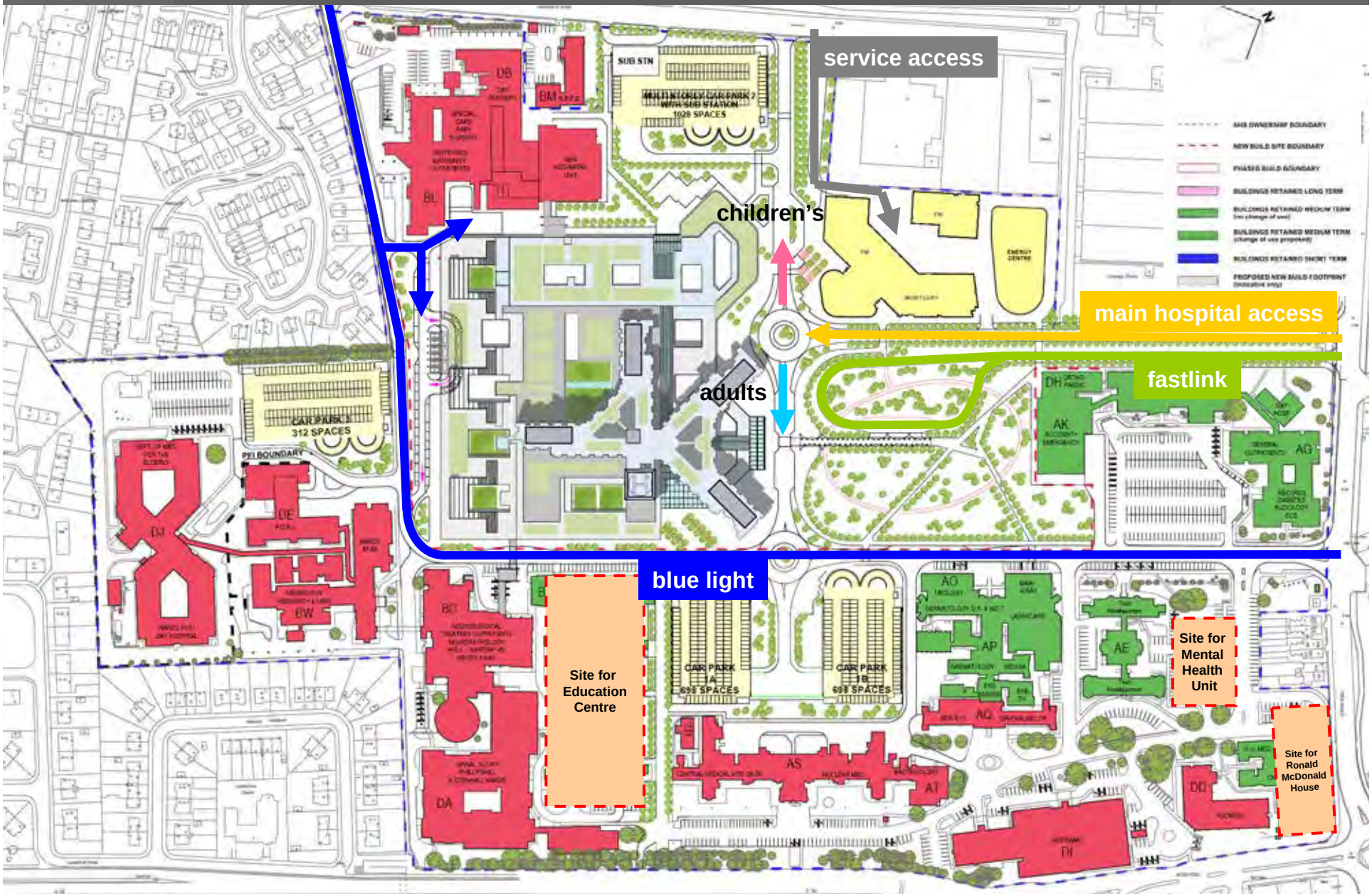
Site Plan as Proposed



A52787523

HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL

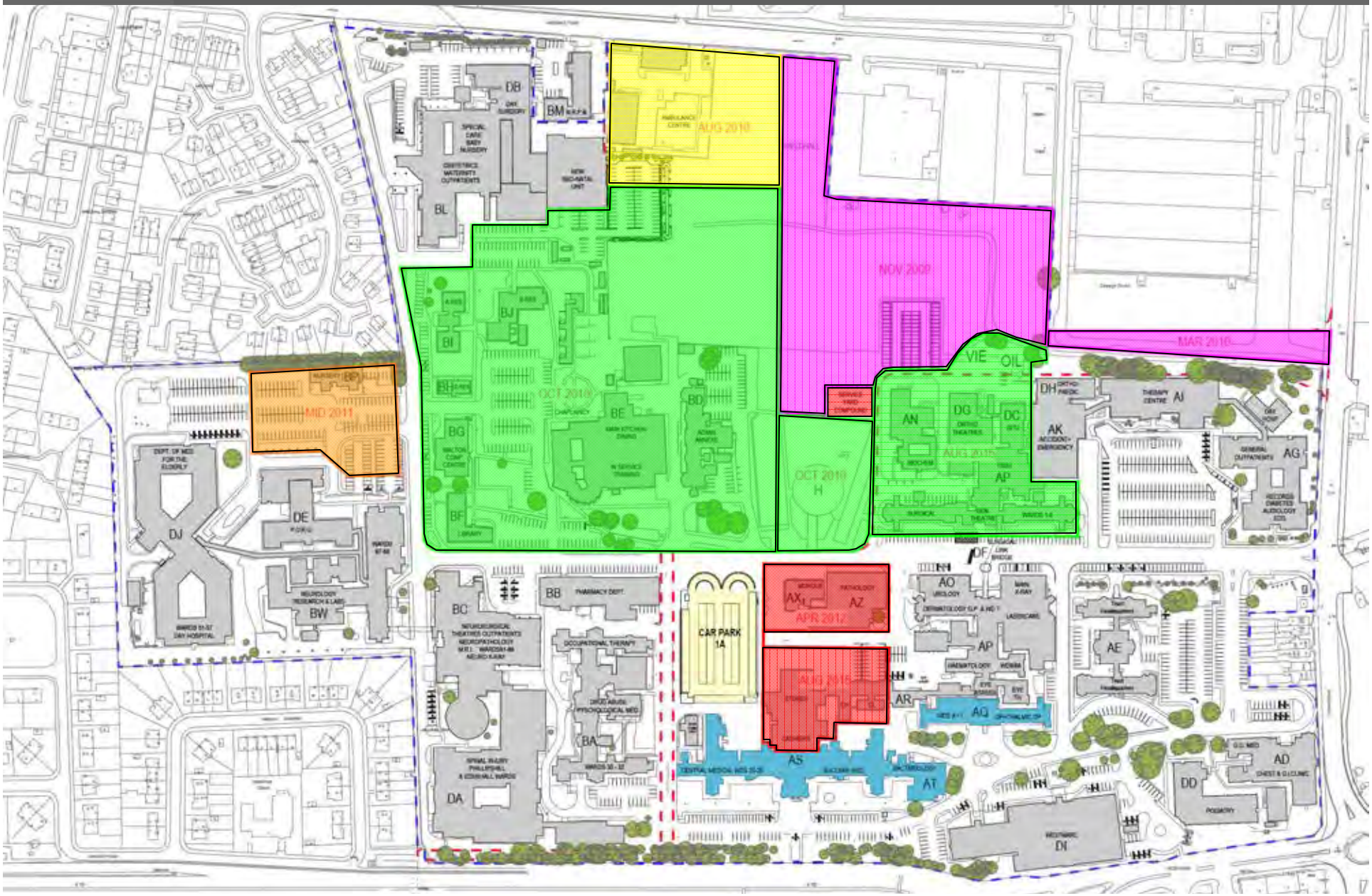
Proposed Site : Access & Routes



HANDOVER OF SITE ‘PACKAGES’

HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL

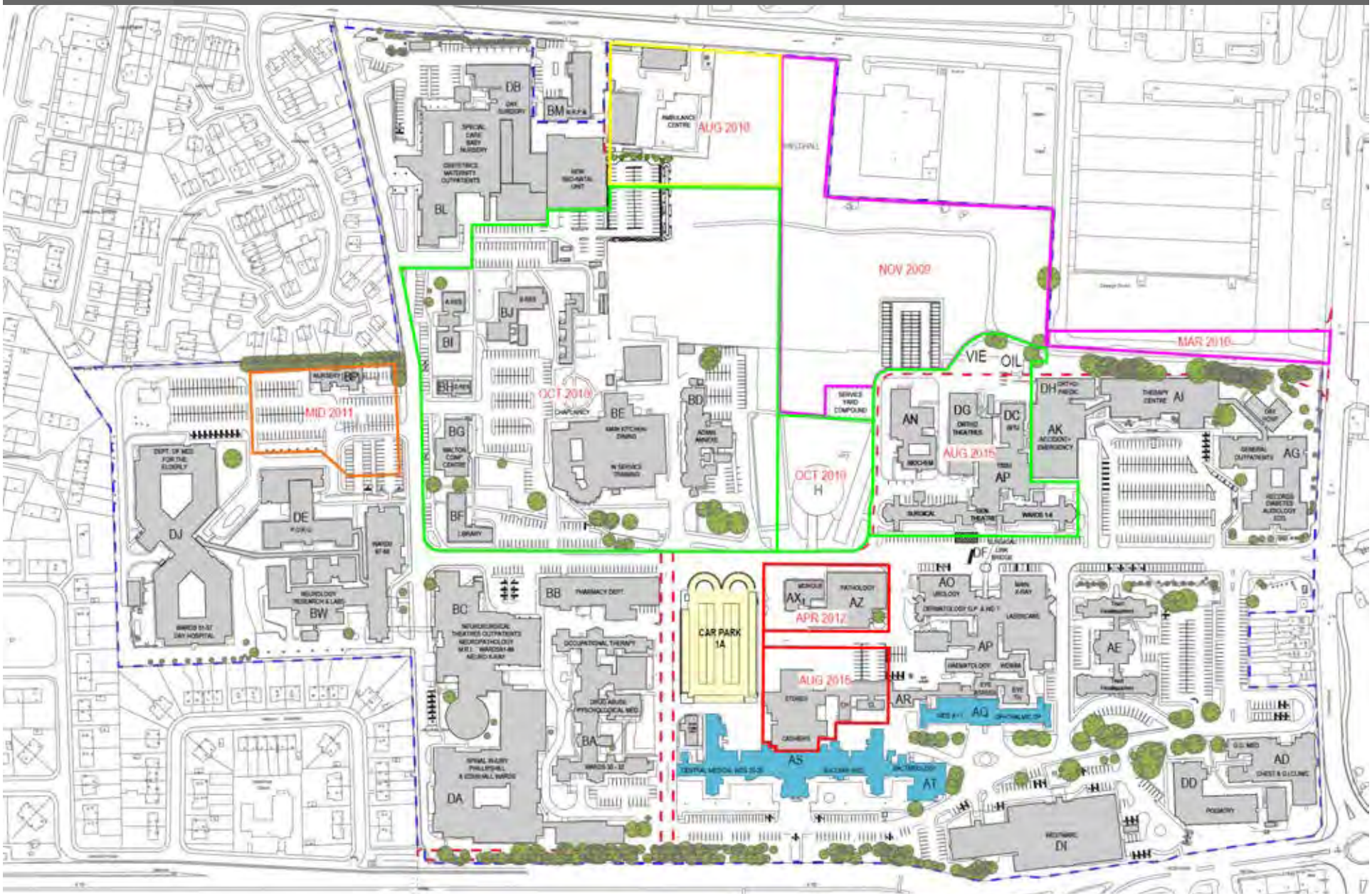
Site Packages



PHASED SITE DEVELOPMENT PLAN

HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL

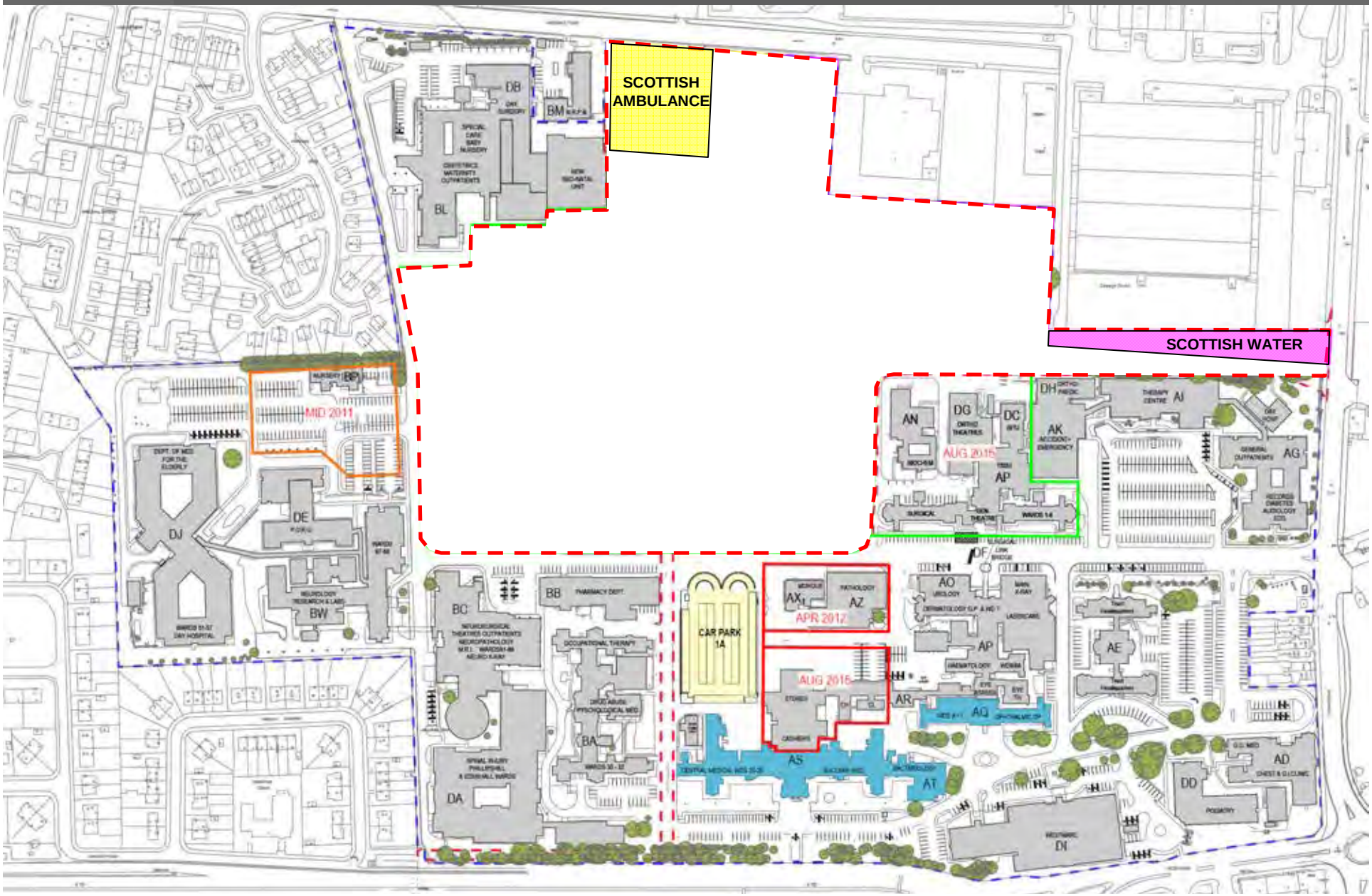
Existing Site Plan



A52787523

HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL

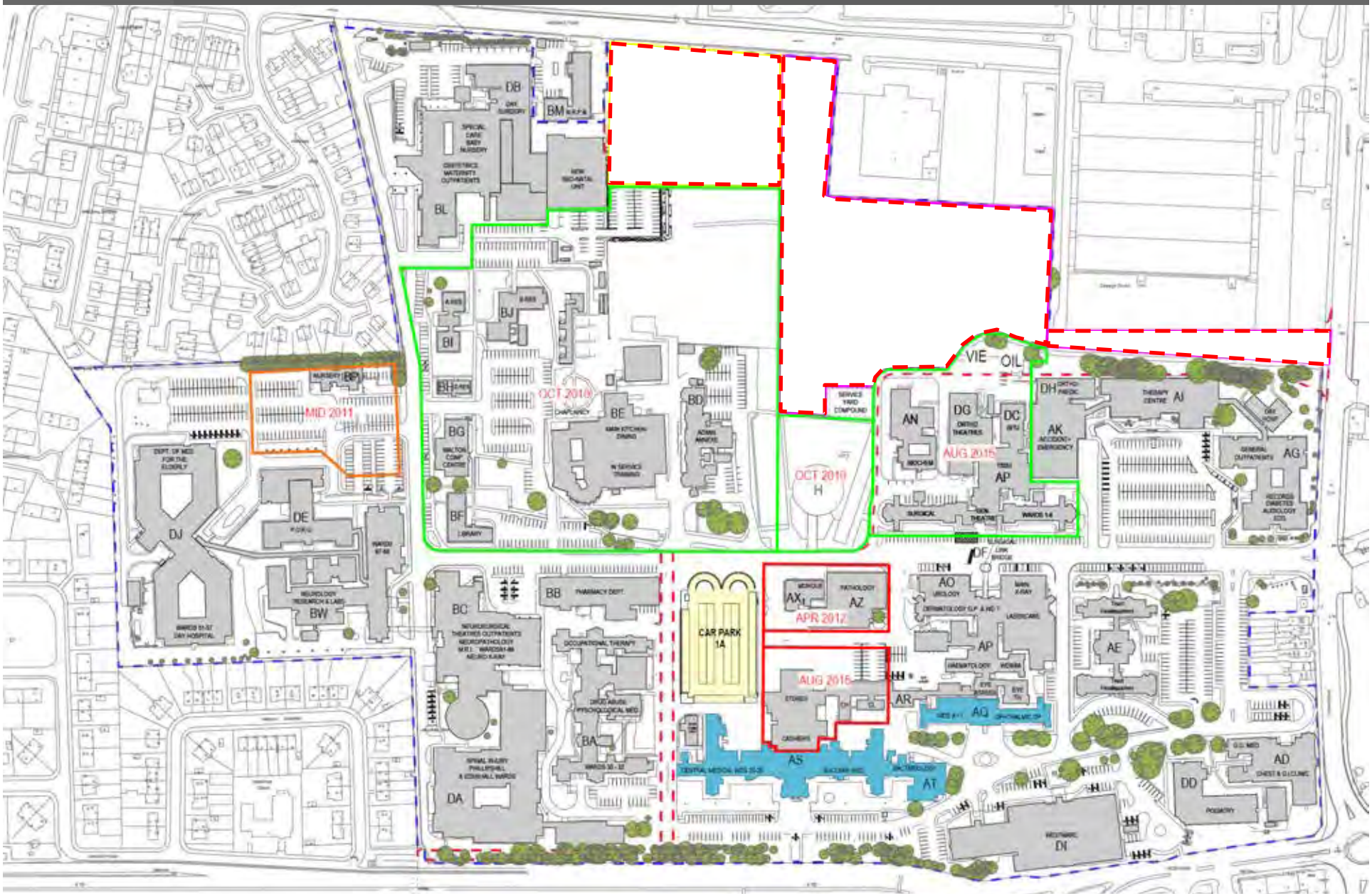
Site Plan : Required Land Acquisitions



A52787523

HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL

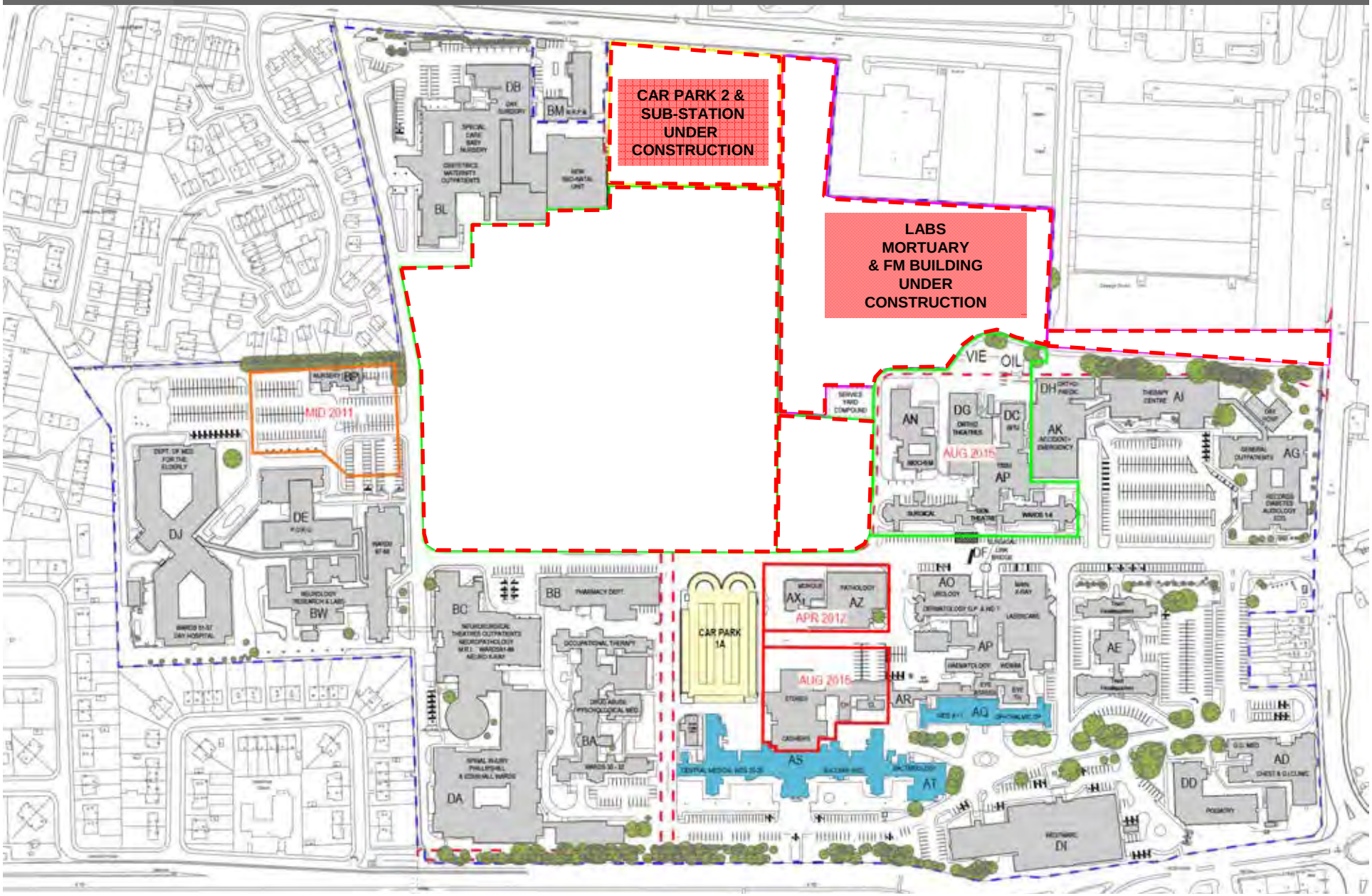
Handover of Site for Labs Construction



A52787523

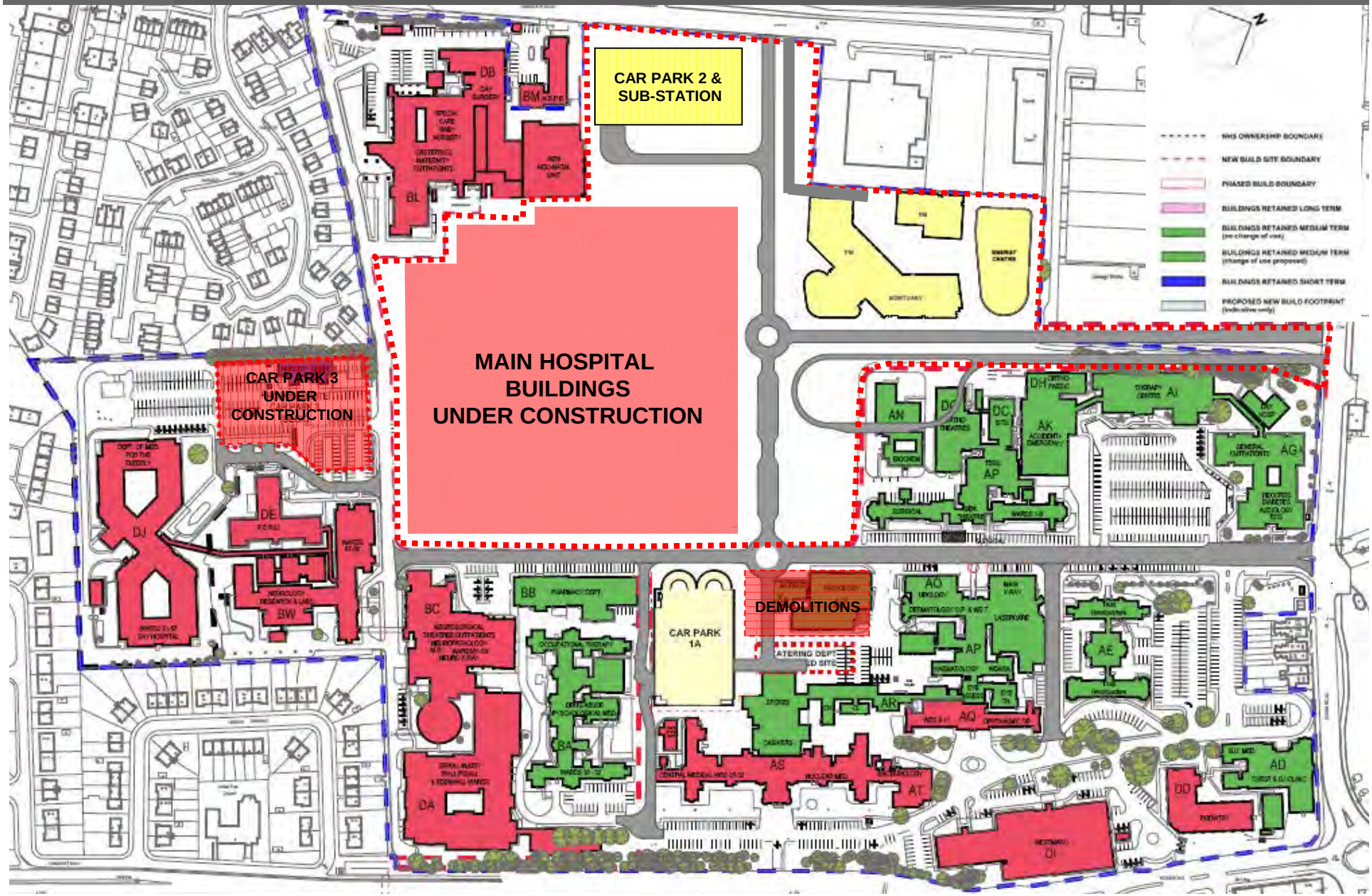
HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL

Handover of Site for Main Construction



HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL

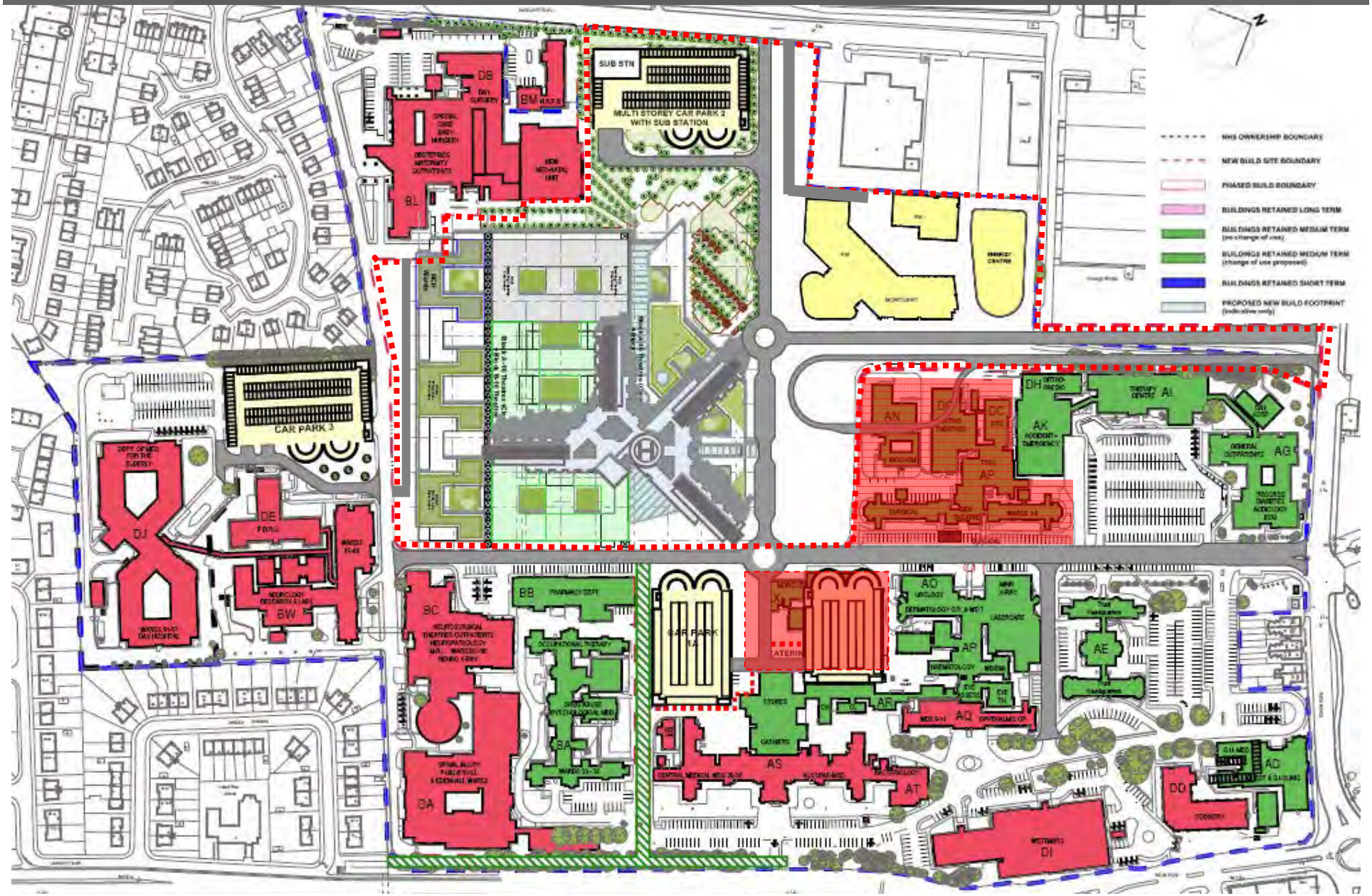
Site Plan : On Completion of Labs Building



A52787523

HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL

Site Plan : On Completion of New Hospital Buildings



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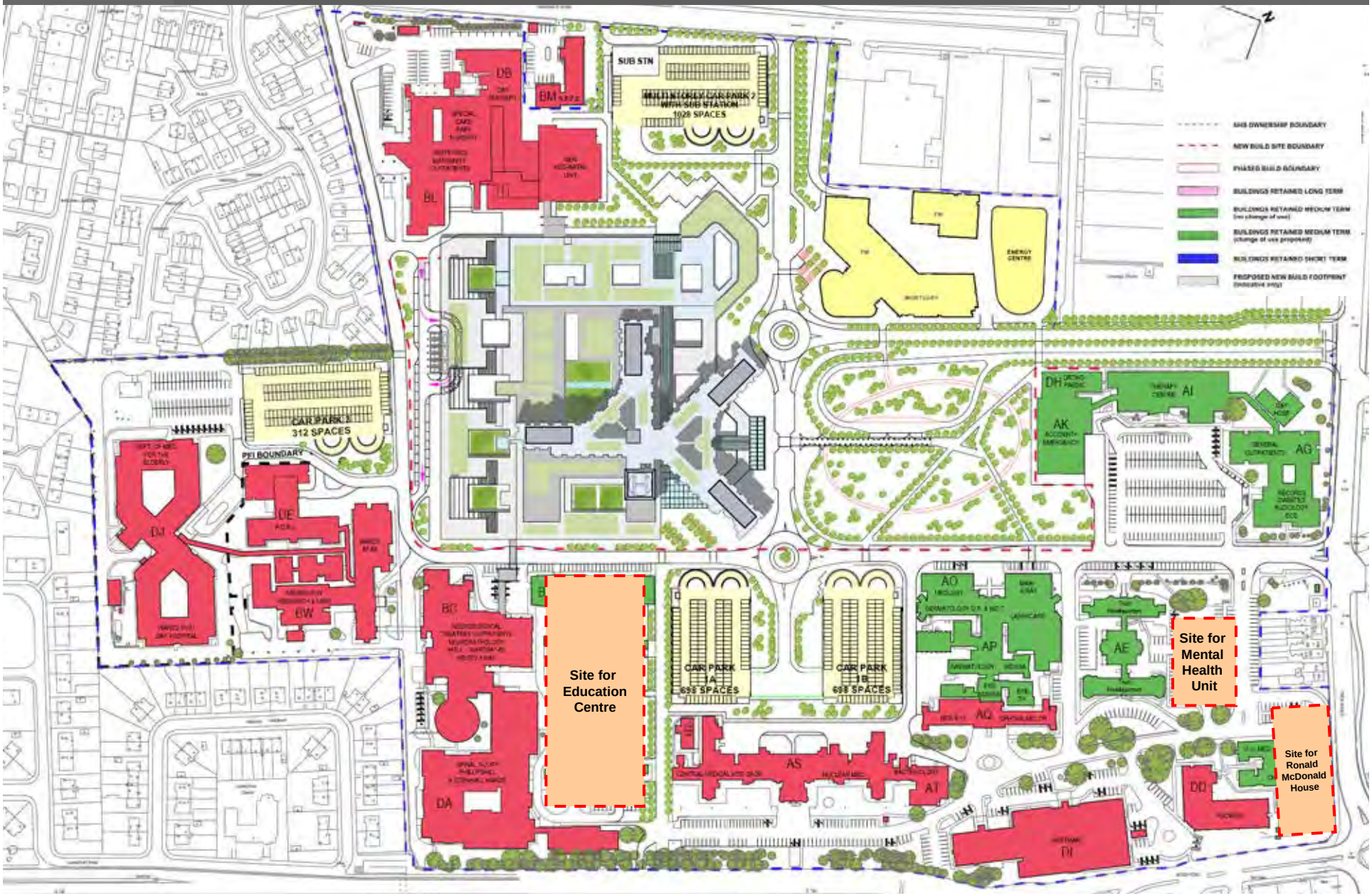
HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL

Site Plan as Proposed



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DESIGN FOR ADULT & CHILDREN HOSPITAL

BUILDING TYPOLOGIES

Out-Patient

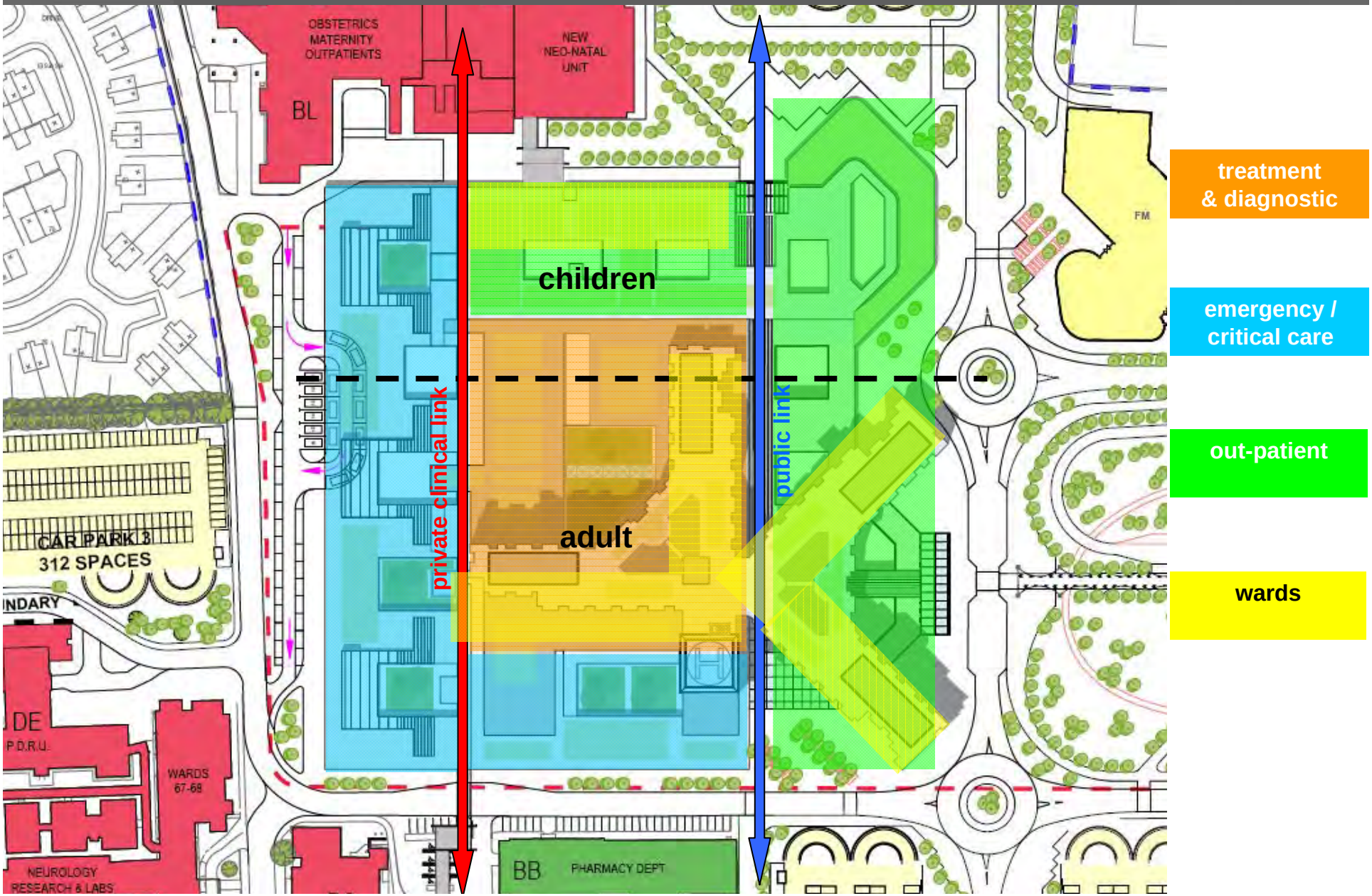
Treatment & Diagnostic

Critical Care

In-Patient Wards (tower)

HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL

Podium Design : Zoning of Building



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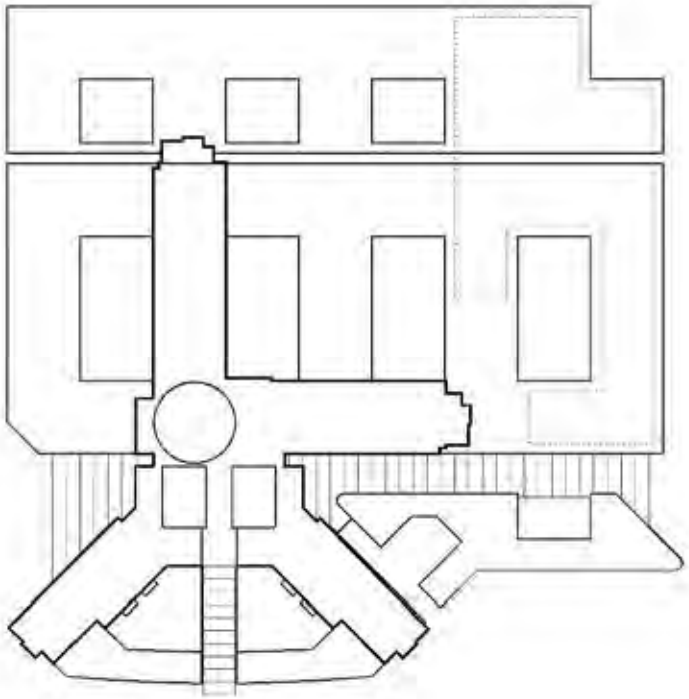
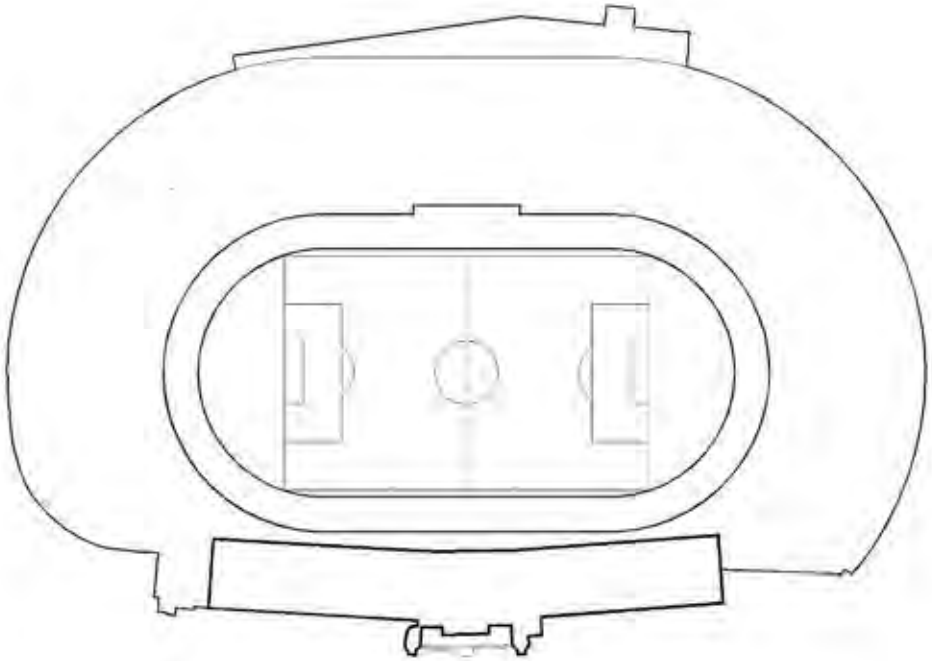
NEW SOUTH GLASGOW HOSPITAL

Scale Comparison



NSGH Footprint



Hampden Park Stadium

HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL

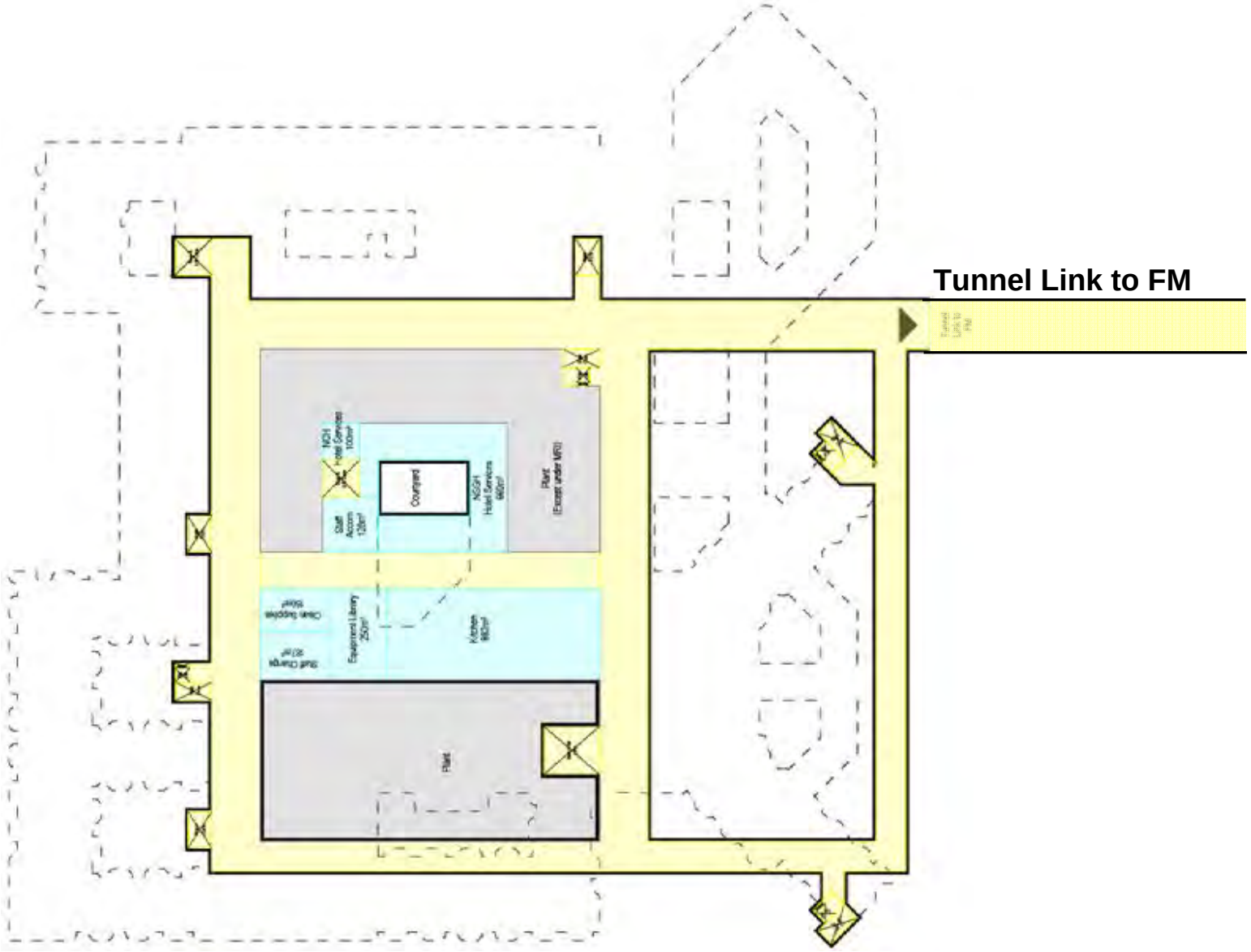
STATUS : SIGNED OFF

1:500 FLOOR PLANS

A52787523

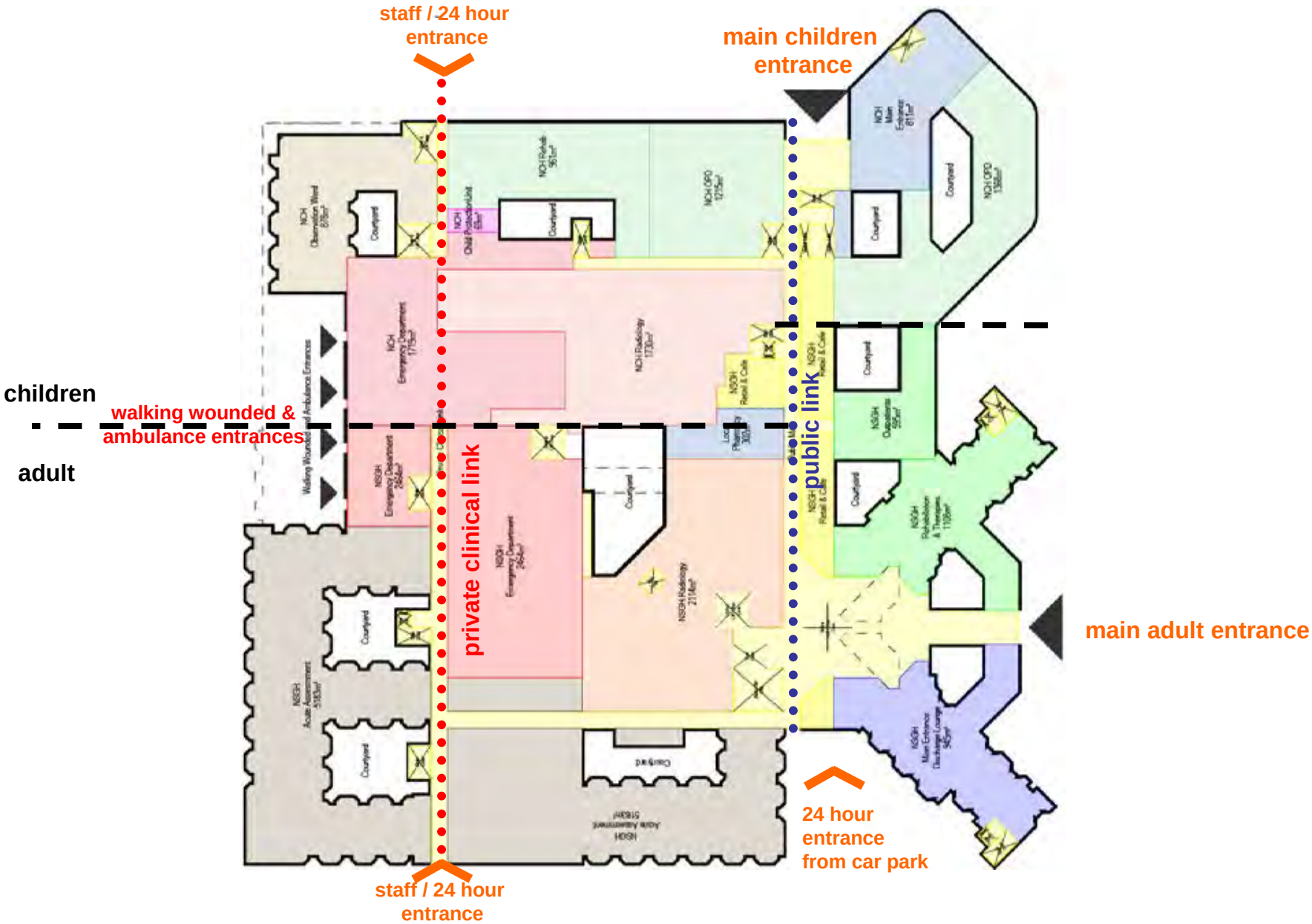
HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL

1:500 LEVEL -01 (BASEMENT) AS PROPOSED



HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL

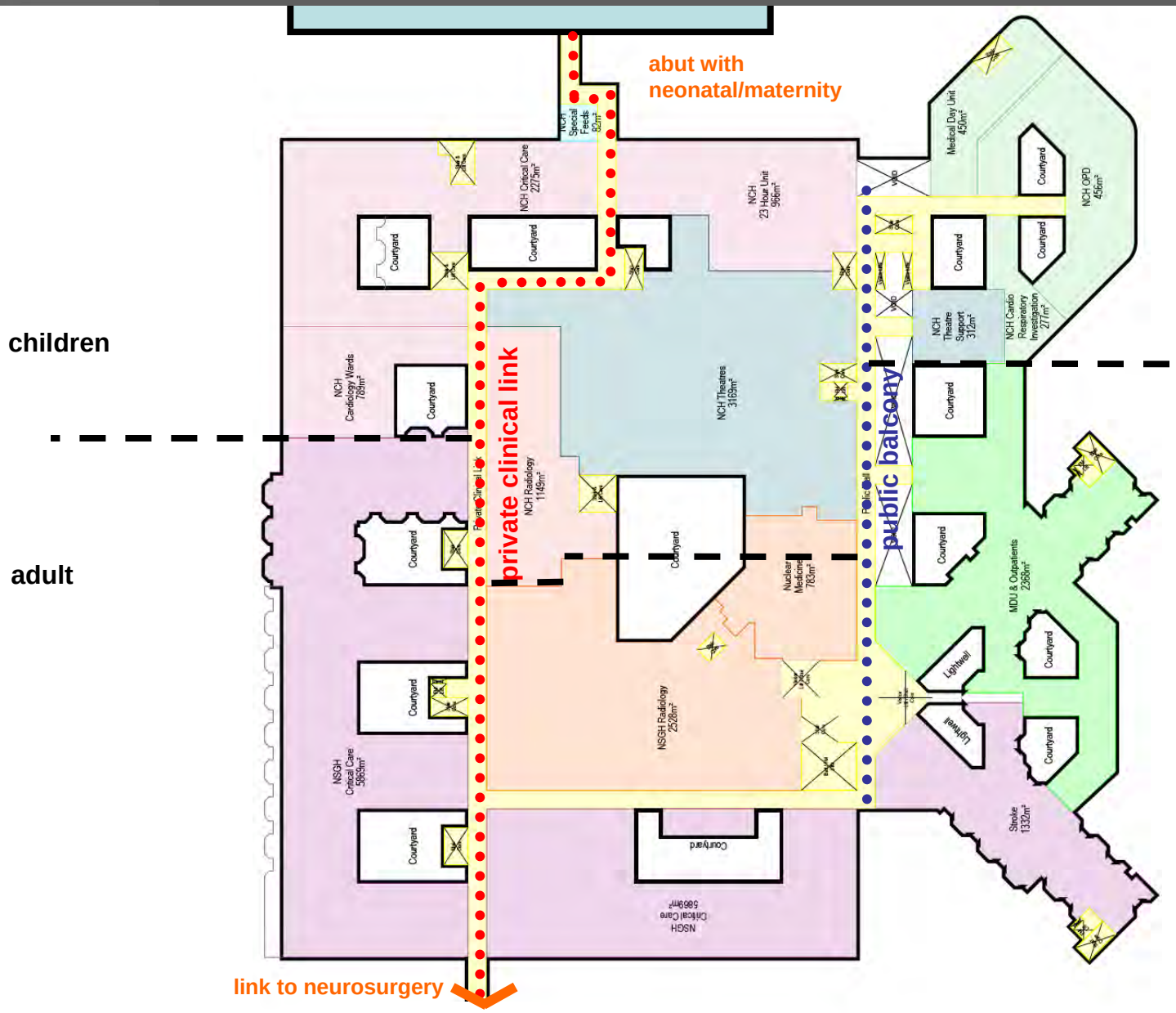
1:500 LEVEL 00 (GROUND) AS PROPOSED



A52787523

HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL

1:500 LEVEL 01 AS PROPOSED

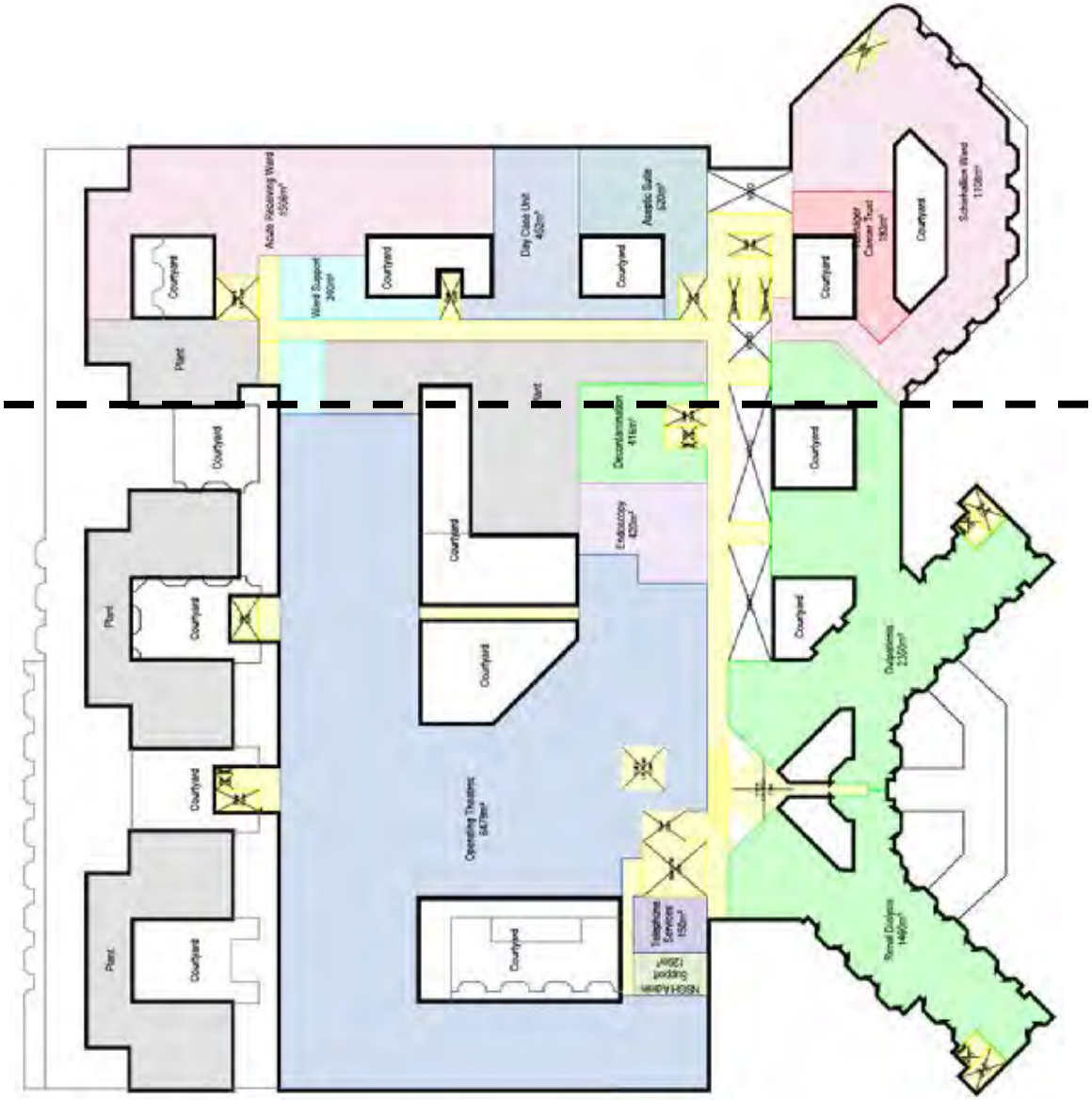


HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL

1:500 LEVEL 02 AS PROPOSED

children

adult

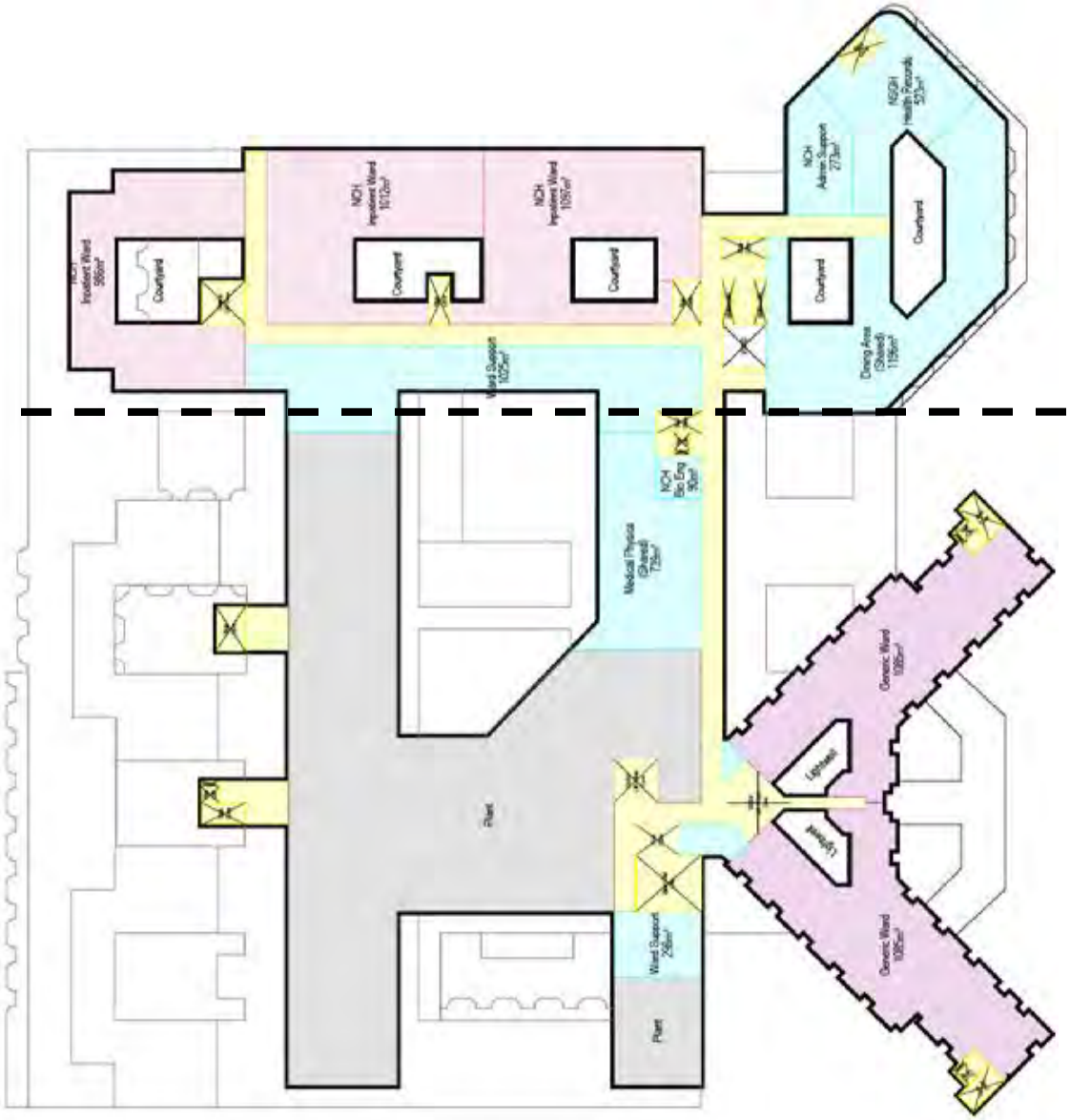


HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL

1:500 LEVEL 03 AS PROPOSED

children

adult

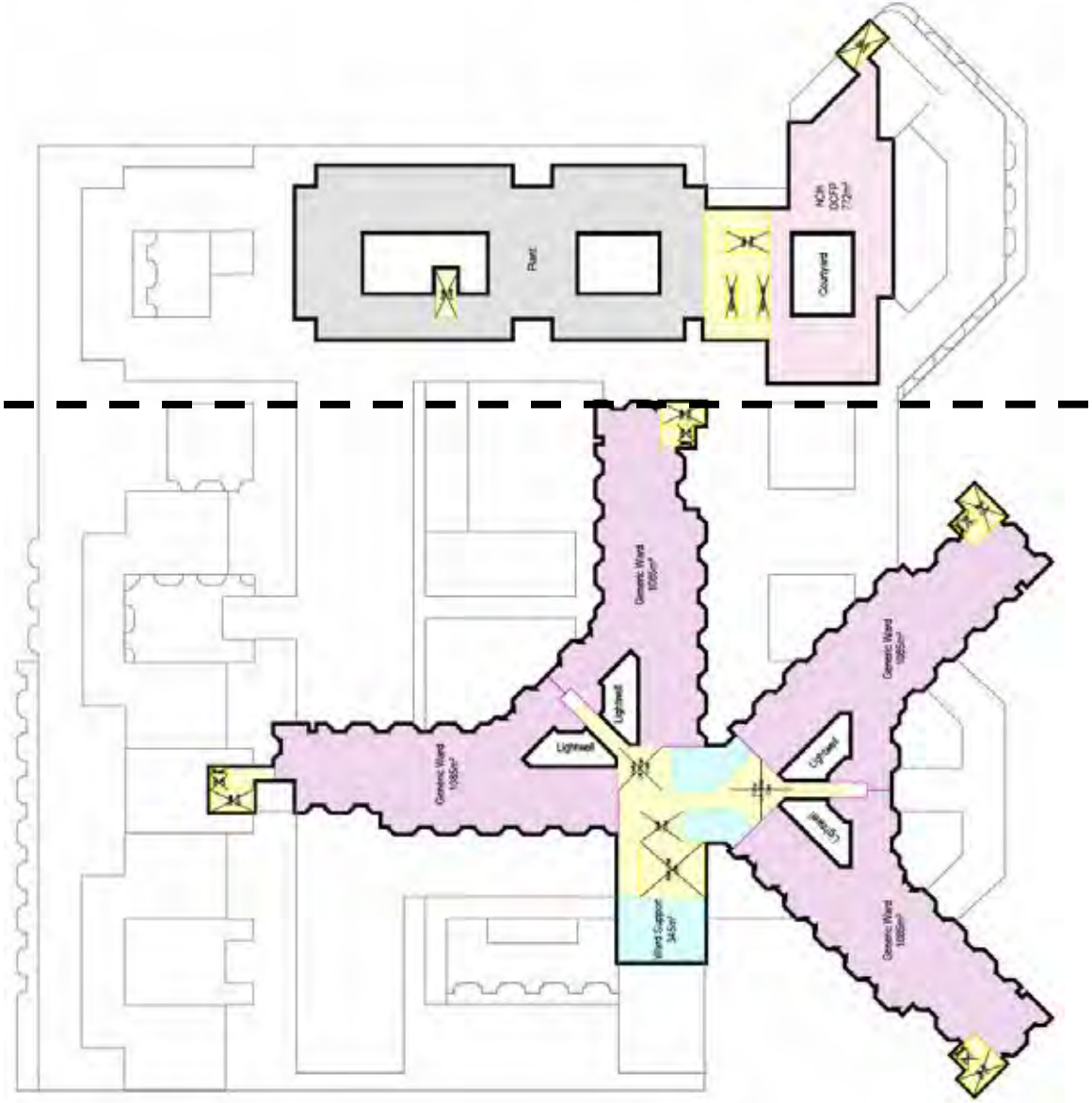


HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL

1:500 LEVEL 04 AS PROPOSED

children

adult



1:200 FLOOR PLANS

APPROVED : 21 April 2009

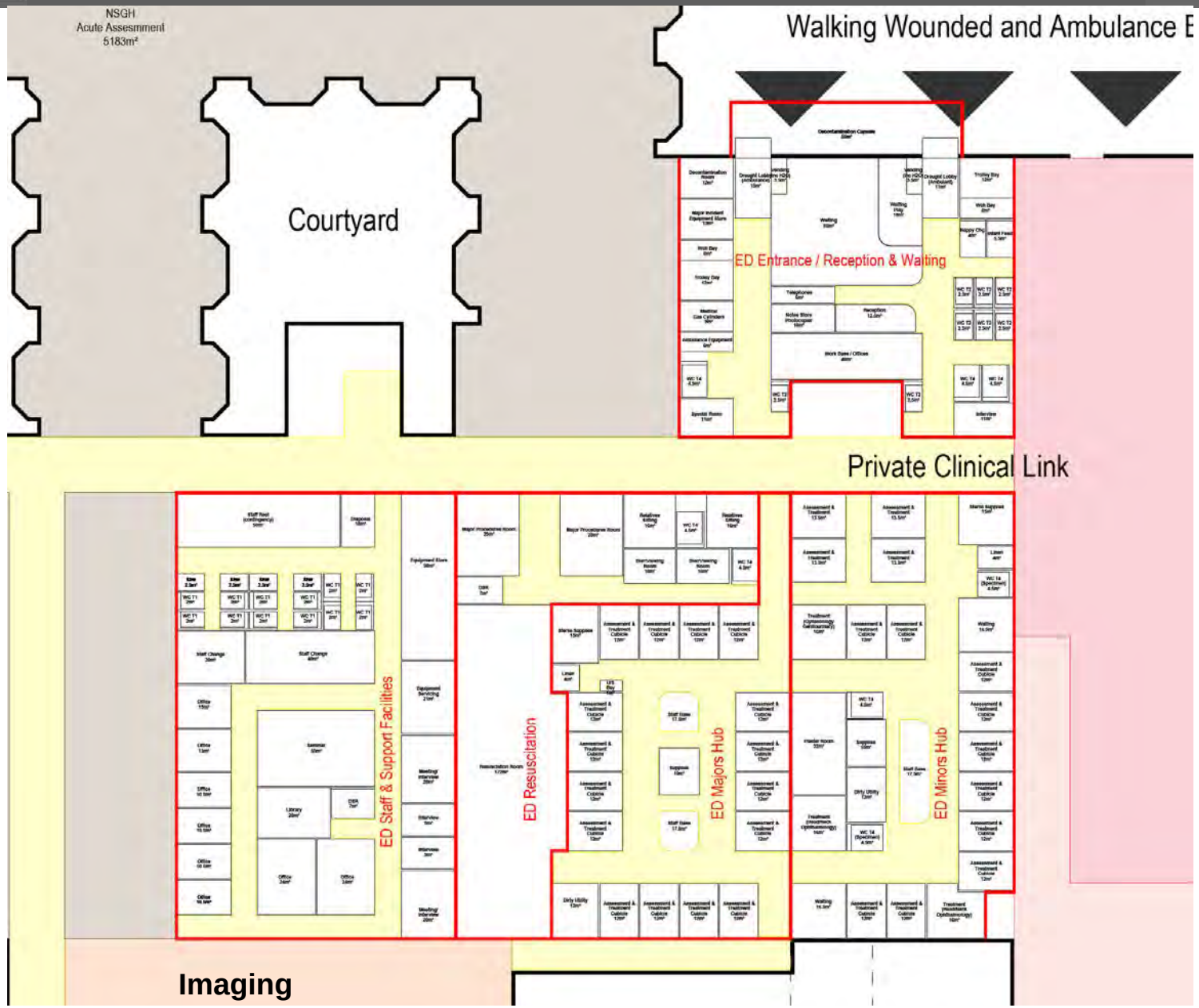
EMERGENCY DEPARTMENT

HLM ARCHITECTS

NEW SOUTH GLASGOW HOSPITAL

NSGH – EMERGENCY DEPARTMENT

APPROVED : 21 April 2009



APPROVED : 21 April 2009

ACUTE ASSESSMENT

HLM ARCHITECTS

NEW SOUTH GLASGOW HOSPITAL

NSGH – ACUTE ASSESSMENT UNIT

APPROVED : 21 April 2009

AAU Complex Needs

AAU General Receiving

NSGH Acute Assessment Entrance

AAU Immediate Assessment

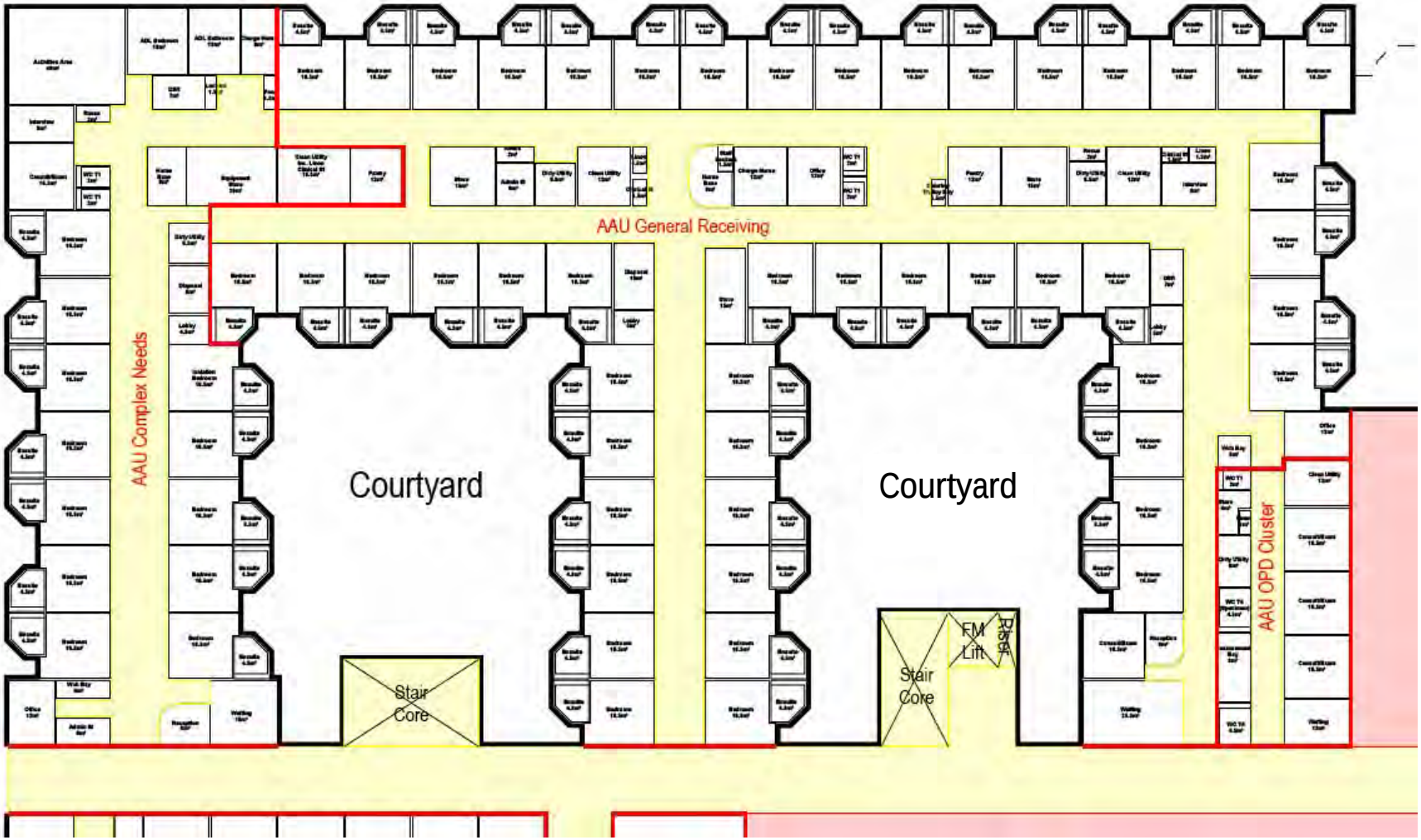
AAU Acute Assessment

HLM ARCHITECTS

NEW SOUTH GLASGOW HOSPITAL

APPROVED : 21 April 2009

NSGH – ACUTE ASSESSMENT UNIT – COMPLEX NEEDS & GENERAL RECEIVING



HLM ARCHITECTS

NEW SOUTH GLASGOW HOSPITAL

NSGH – ACUTE ASSESSMENT UNIT – IMMEDIATE ASSESSMENT

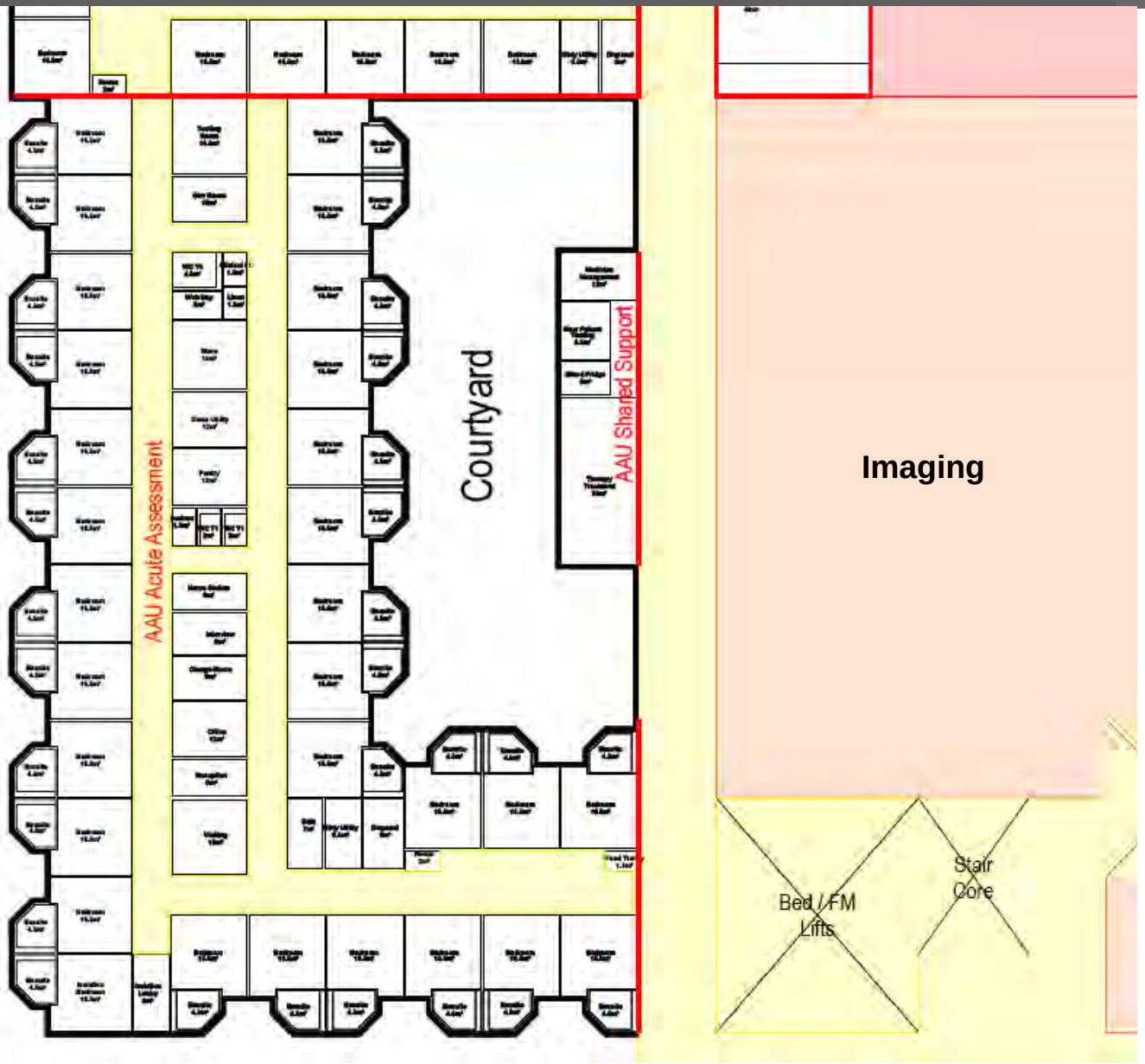
APPROVED : 21 April 2009

HLM ARCHITECTS

NEW SOUTH GLASGOW HOSPITAL

APPROVED : 21 April 2009

NSGH – ACUTE ASSESSMENT UNIT – ACUTE ASSESSMENT



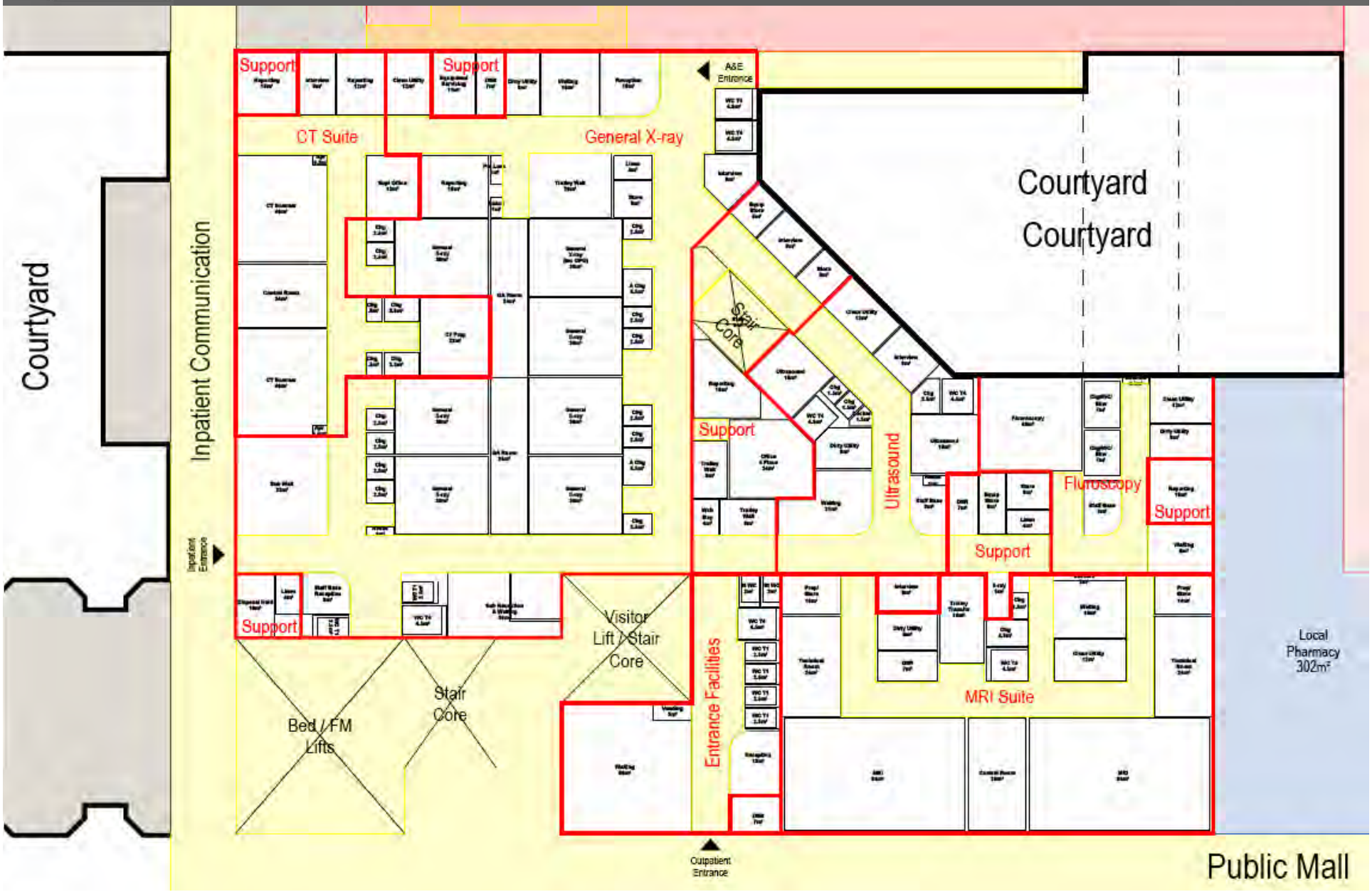
RADIOLOGY

HLM ARCHITECTS

NEW SOUTH GLASGOW HOSPITAL

NSGH – RADIOLOGY DEPARTMENT (GROUND FLOOR)

APPROVED : 21 April 2009

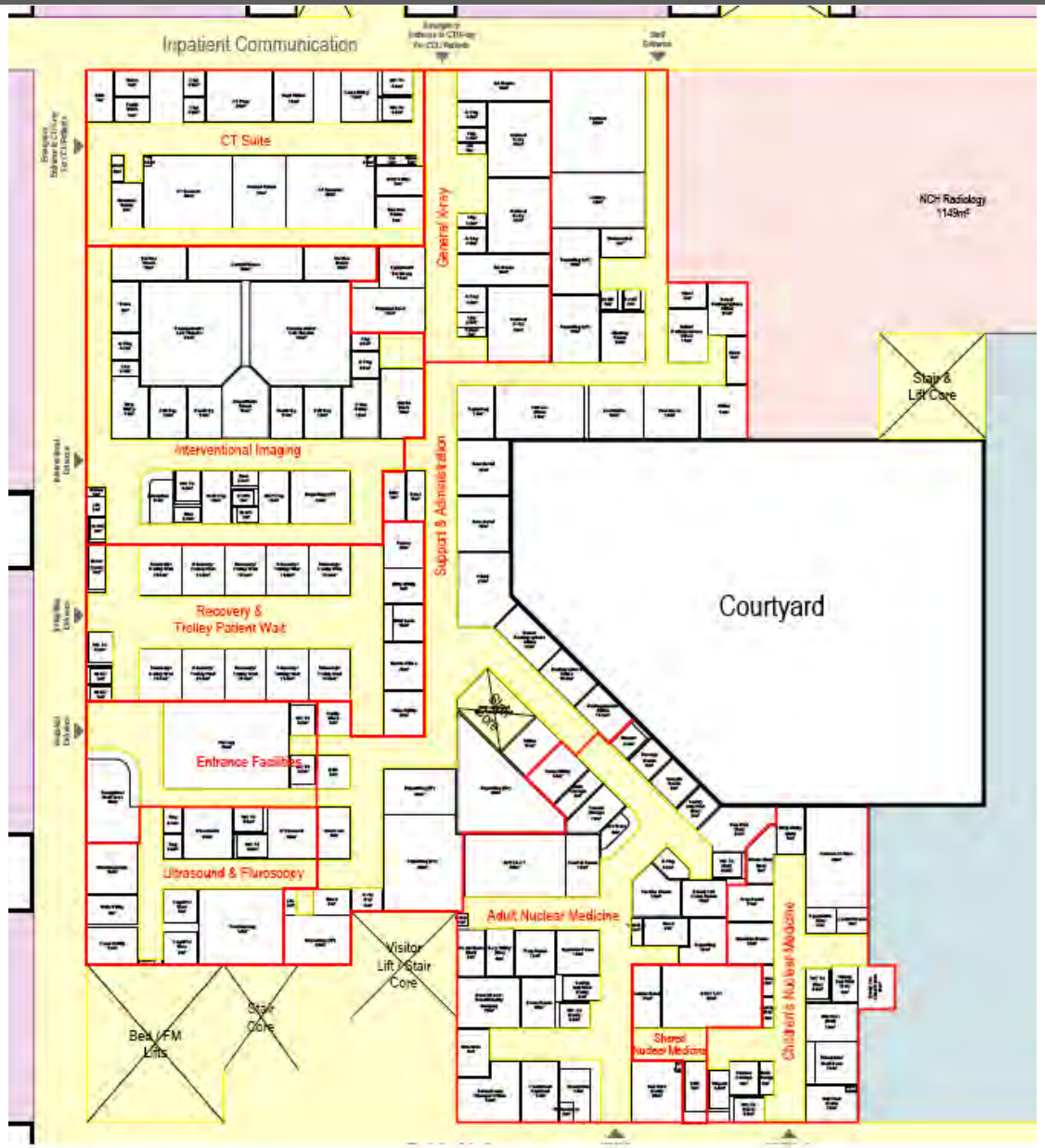


HLM ARCHITECTS

NEW SOUTH GLASGOW HOSPITAL

NSGH – RADIOLOGY DEPARTMENT (LEVEL 01)

APPROVED : 21 April 2009



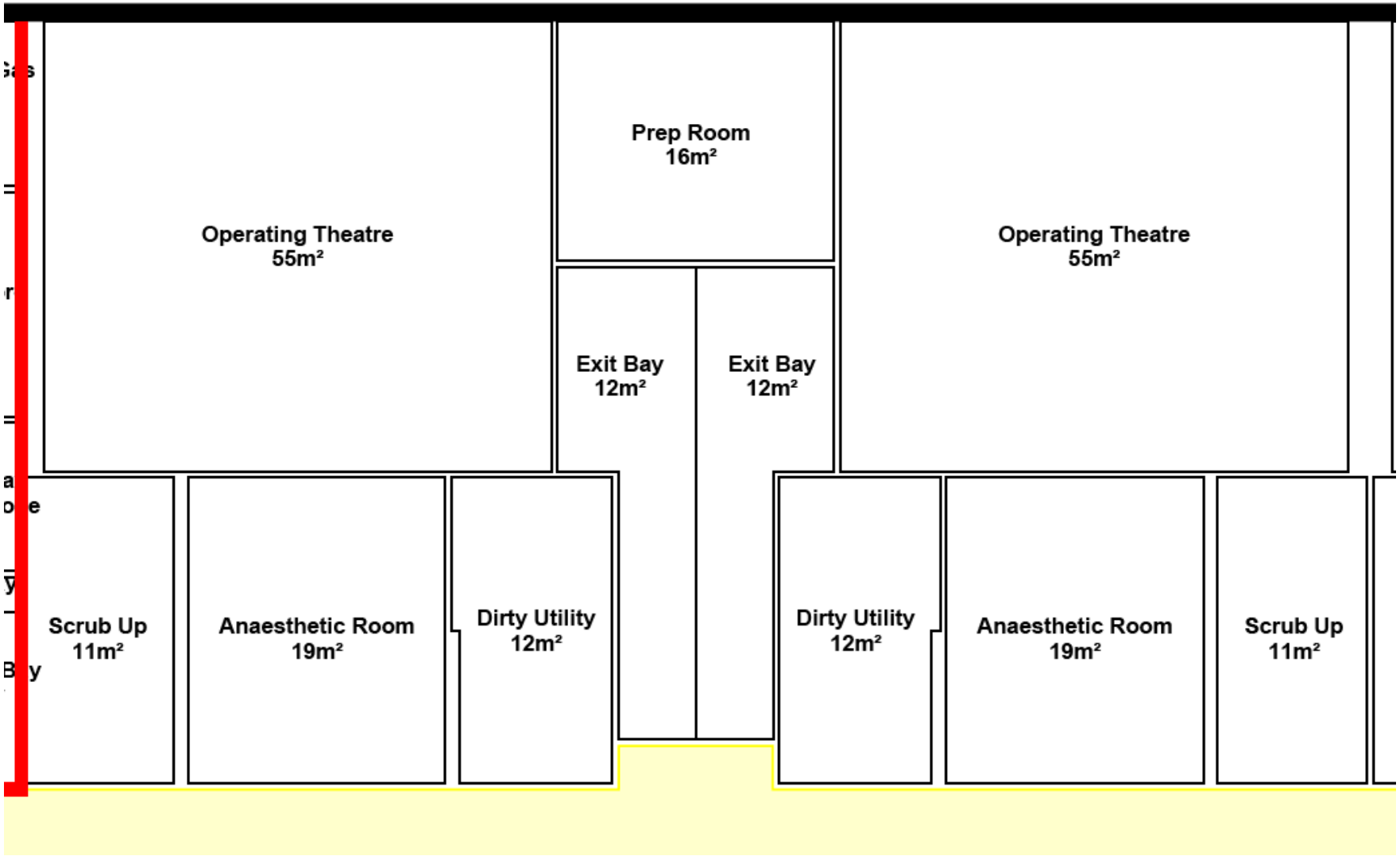
THEATRES

HLM ARCHITECTS

NEW SOUTH GLASGOW HOSPITAL

NSGH – THEATRES

APPROVAL EXPECTED : 15 May 2009



A52787523

HLM ARCHITECTS

NEW SOUTH GLASGOW HOSPITAL

NSGH – THEATRES

APPROVAL EXPECTED : 15 May 2009

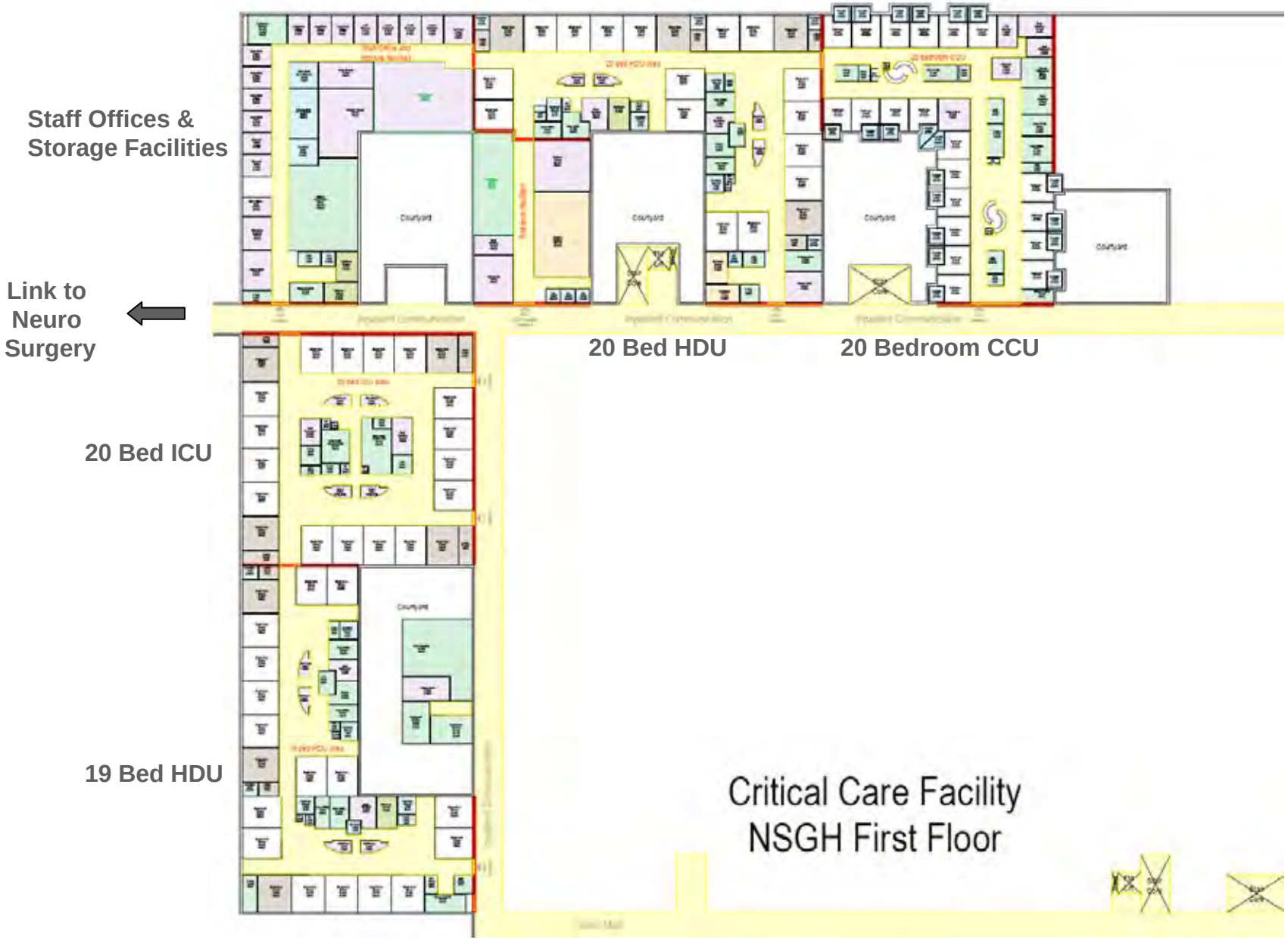
A52787523

CRITICAL CARE DEPARTMENT

HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL

Critical Care Department – Overall Layout

NSGH – CRITICAL CARE DEPARTMENT : CCU/ICU/HDU

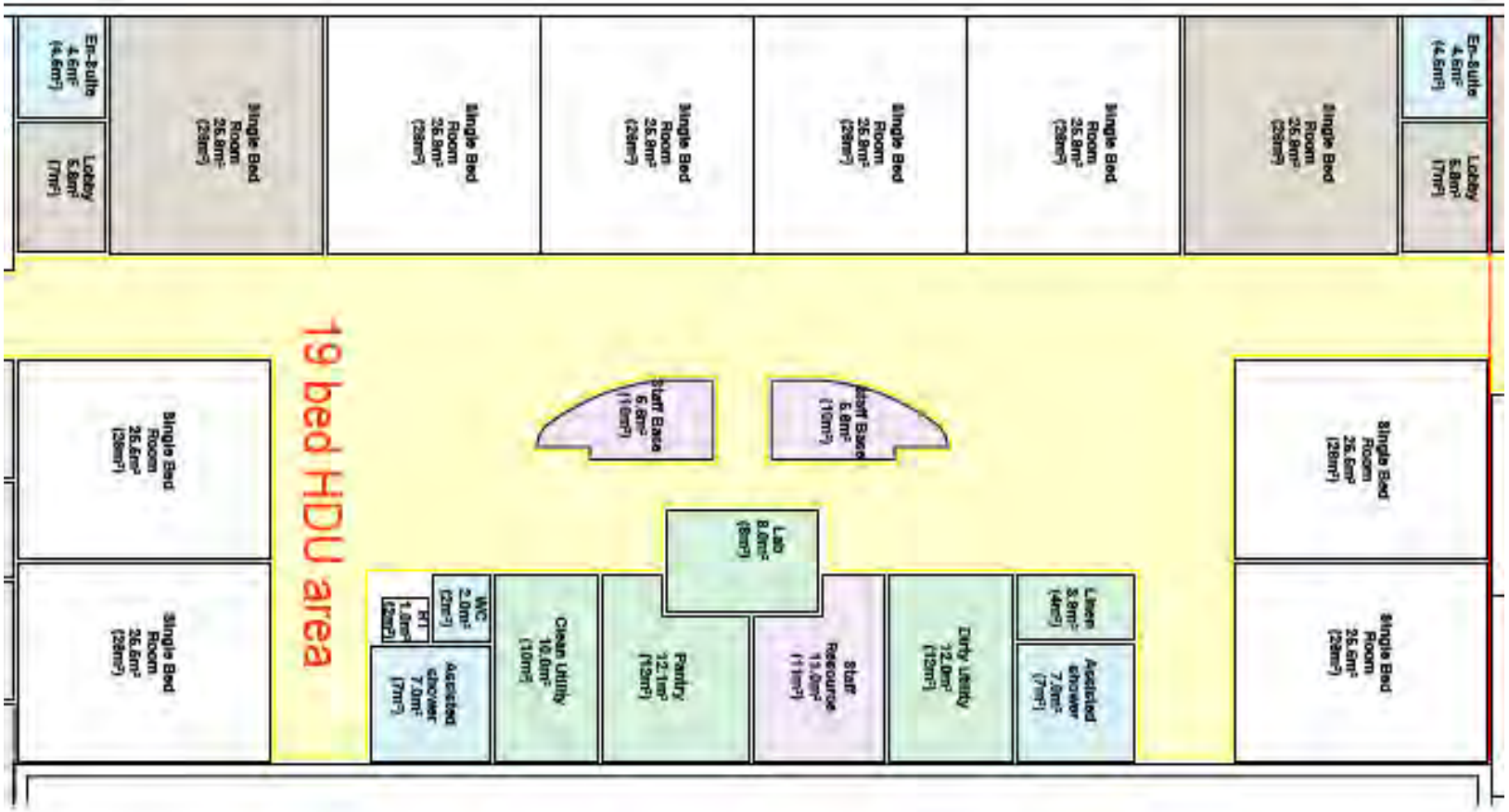


HLM ARCHITECTS

NEW SOUTH GLASGOW HOSPITAL

NSGH – CRITICAL CARE DEPARTMENT : CCU/ICU/HDU

10 Bed HDU Pod

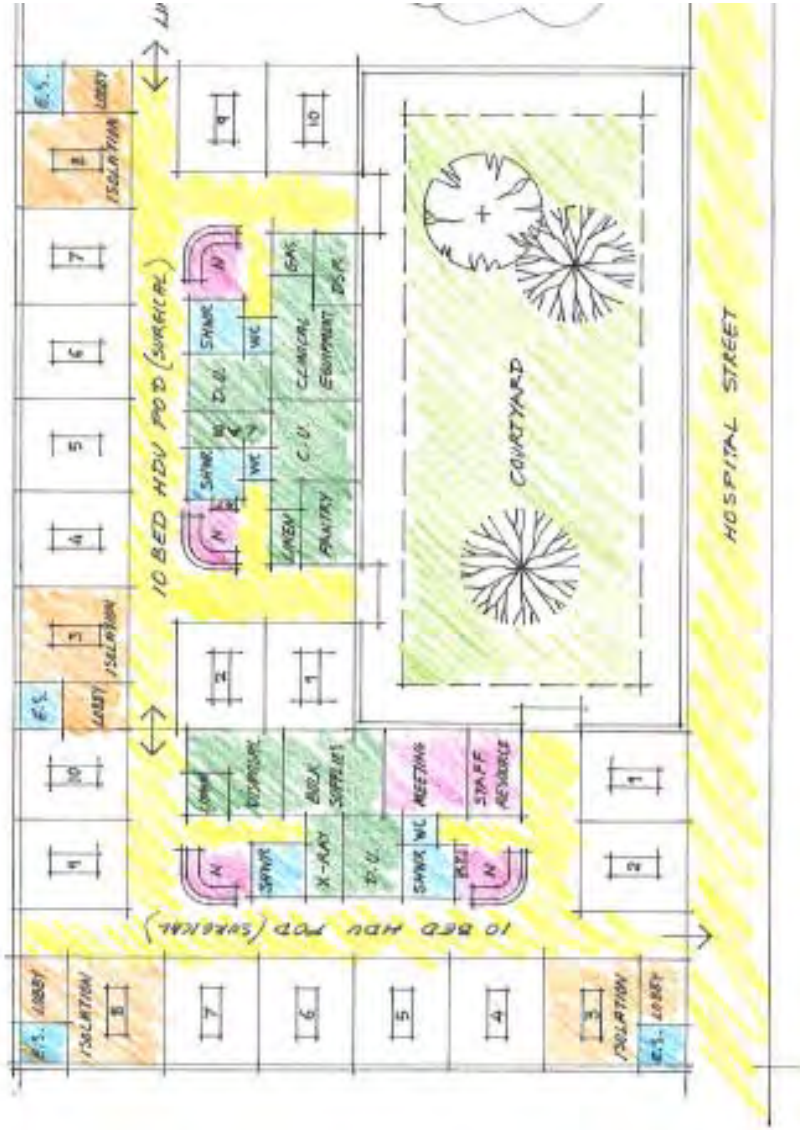


HLM ARCHITECTS

NEW SOUTH GLASGOW HOSPITAL

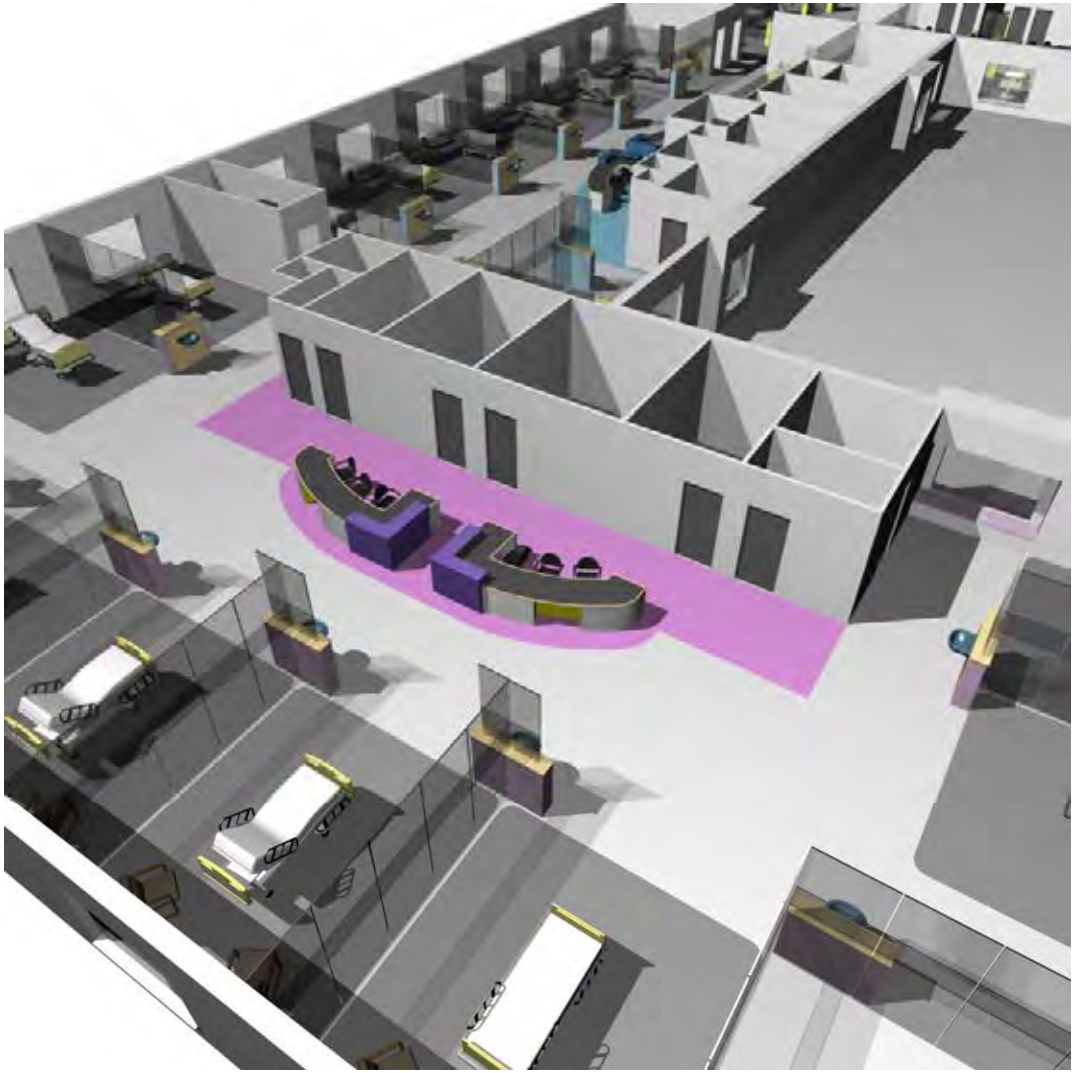
NSGH – CRITICAL CARE DEPARTMENT : HDU

19 Bed HDU Cluster



HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL
NSGH – CRITICAL CARE DEPARTMENT : HDU

19 Bed HDU Cluster



HLM ARCHITECTS

NEW SOUTH GLASGOW HOSPITAL

NSGH – CRITICAL CARE DEPARTMENT : HDU

19 Bed HDU Cluster

HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL

Critical Care Department - HCI Partitions

NSGH – CRITICAL CARE DEPARTMENT : ICU/HDU

HLM ARCHITECTS

NEW SOUTH GLASGOW HOSPITAL

NSGH – CRITICAL CARE DEPARTMENT : ICU

20 Bed ICU Cluster

HLM ARCHITECTS

NEW SOUTH GLASGOW HOSPITAL

NSGH – CRITICAL CARE DEPARTMENT : ICU

20 Bed ICU Cluster

HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL
NSGH – CRITICAL CARE DEPARTMENT : ICU

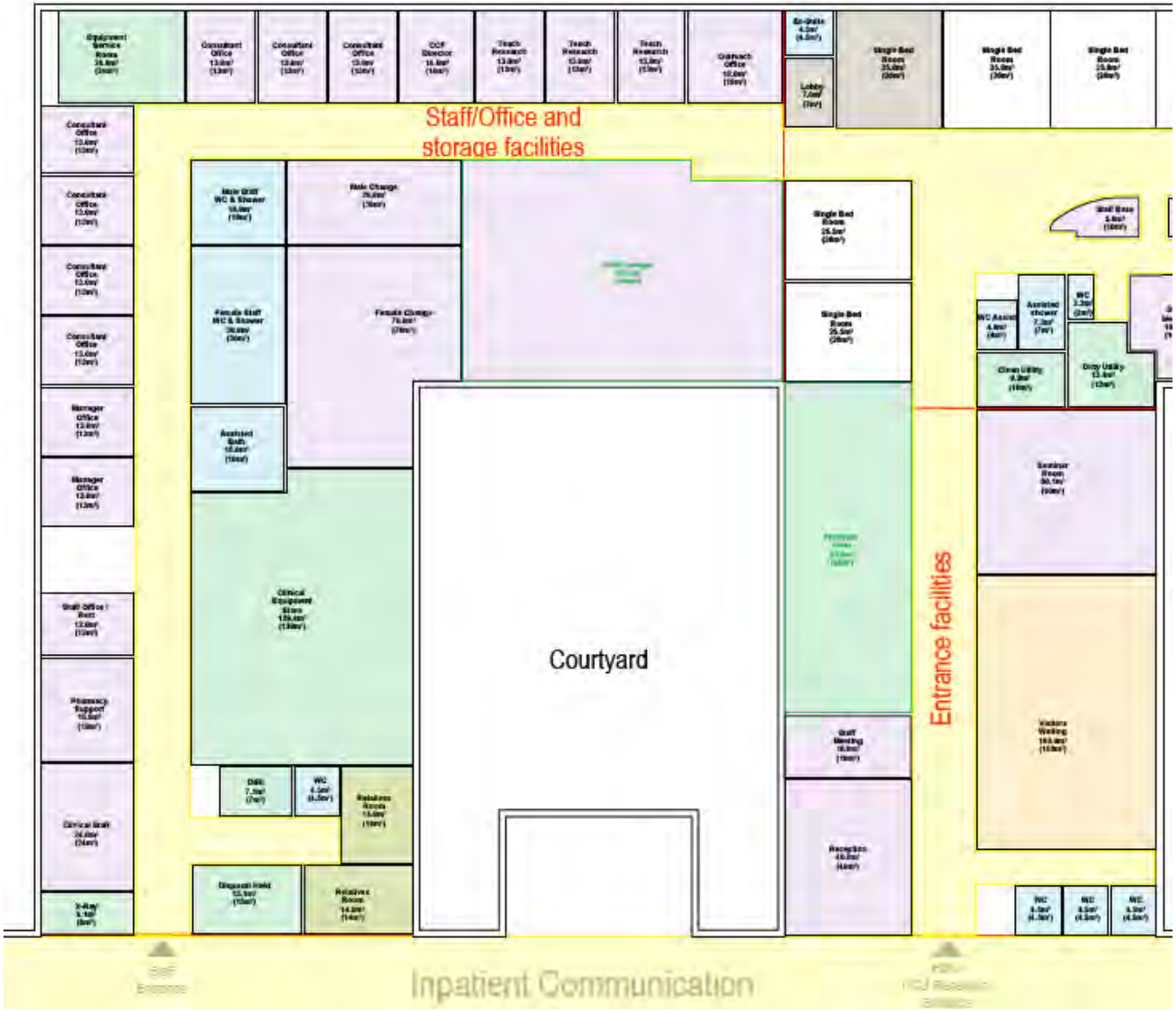
20 Bed ICU Cluster

HLM ARCHITECTS

NEW SOUTH GLASGOW HOSPITAL

NSGH – CRITICAL CARE DEPARTMENT : CCU/ICU/HDU

Staff Offices & Storage Facilities



HLM ARCHITECTS

NEW SOUTH GLASGOW HOSPITAL

NSGH – CRITICAL CARE DEPARTMENT : CCU/ICU/HDU

20 Bed HDU Cluster

HLM ARCHITECTS

NEW SOUTH GLASGOW HOSPITAL

NSGH – CRITICAL CARE DEPARTMENT : HDU

20 Bed HDU Cluster

HLM ARCHITECTS

NEW SOUTH GLASGOW HOSPITAL

NSGH – CRITICAL CARE DEPARTMENT : HDU

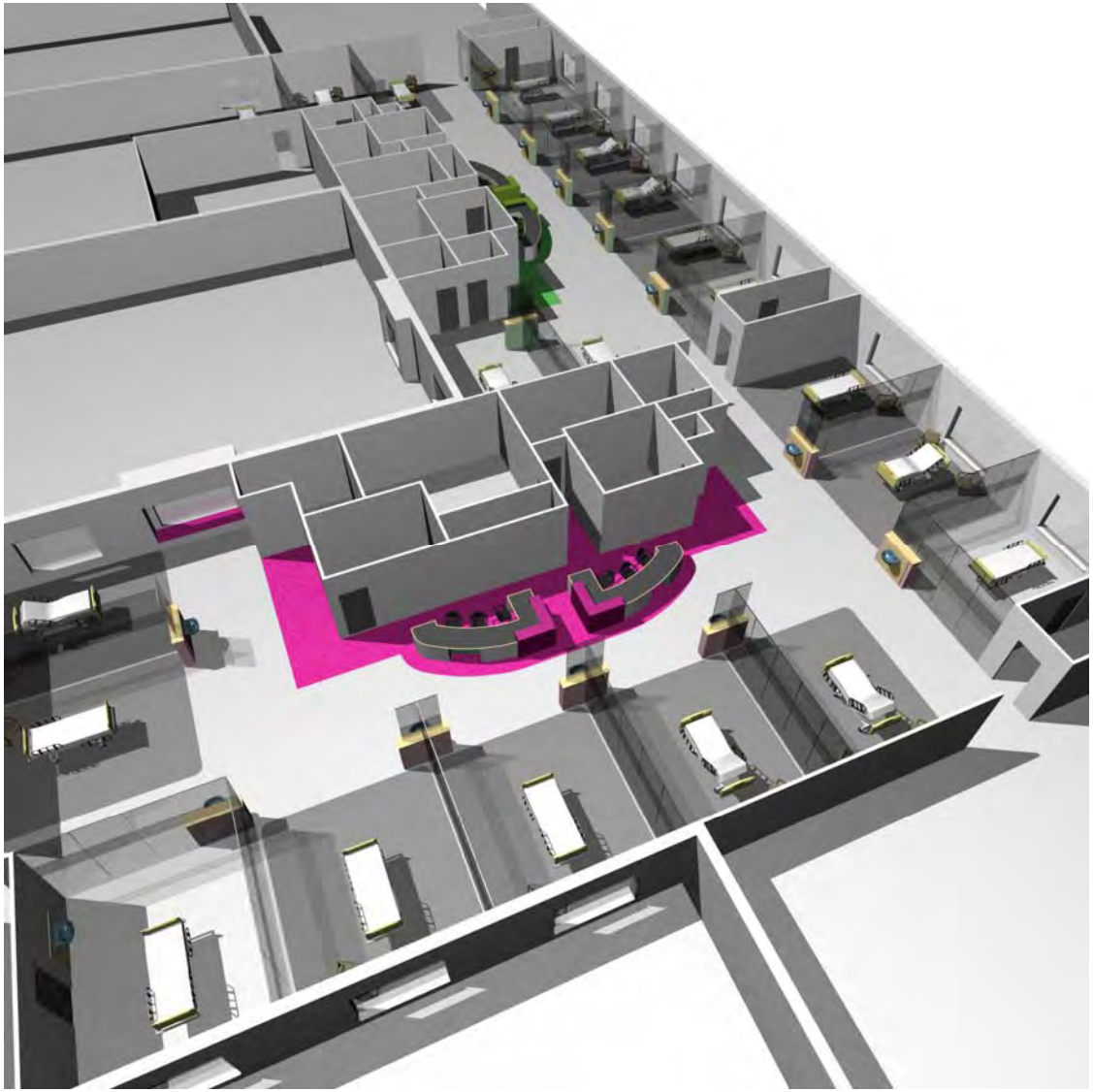
20 Bed HDU Cluster

HLM ARCHITECTS

NEW SOUTH GLASGOW HOSPITAL

NSGH – CRITICAL CARE DEPARTMENT : HDU

20 Bed HDU Cluster

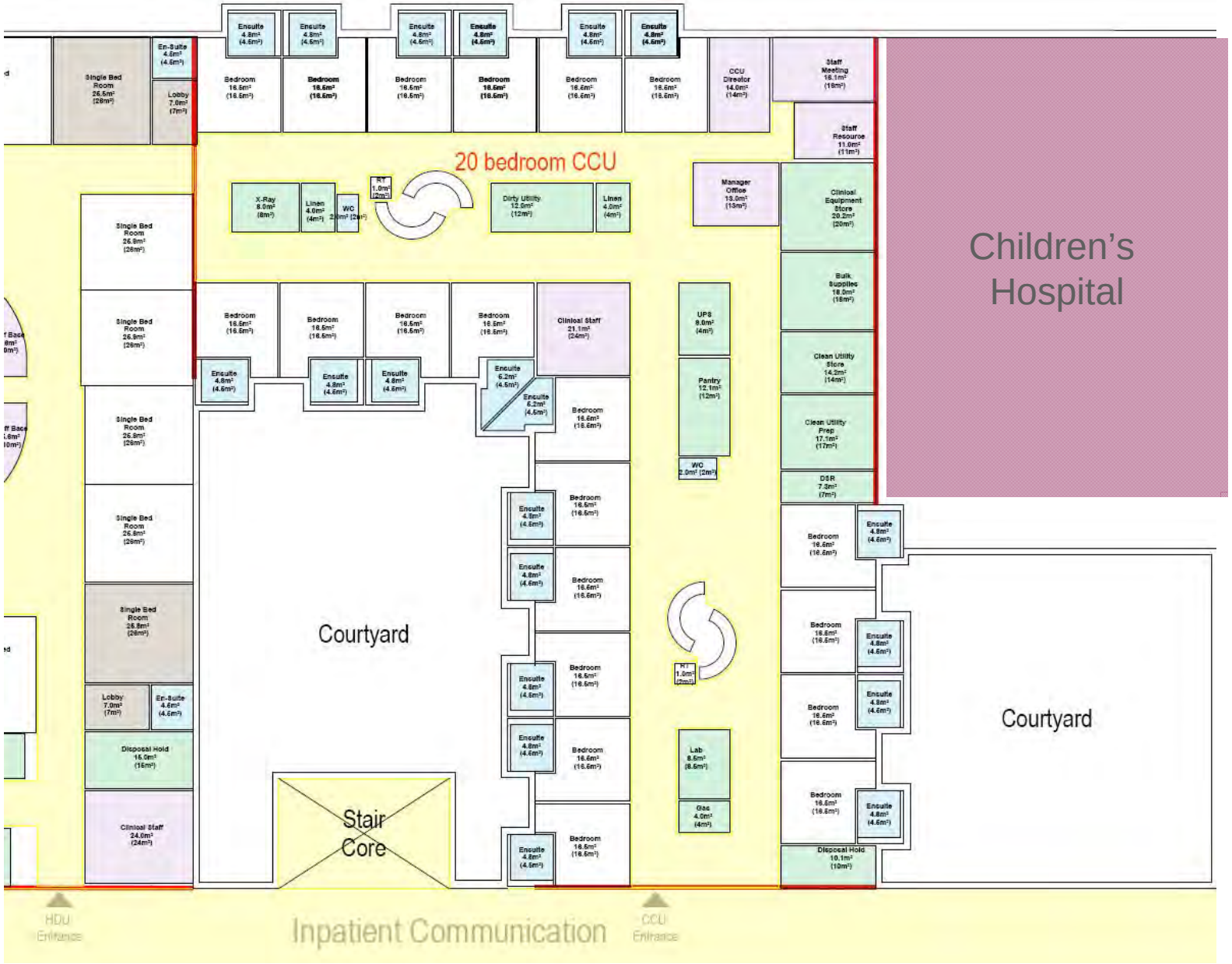


HLM ARCHITECTS

NEW SOUTH GLASGOW HOSPITAL

NSGH – CRITICAL CARE DEPARTMENT : CORONARY CARE UNIT

20 Bed CCU – Proposed Layout

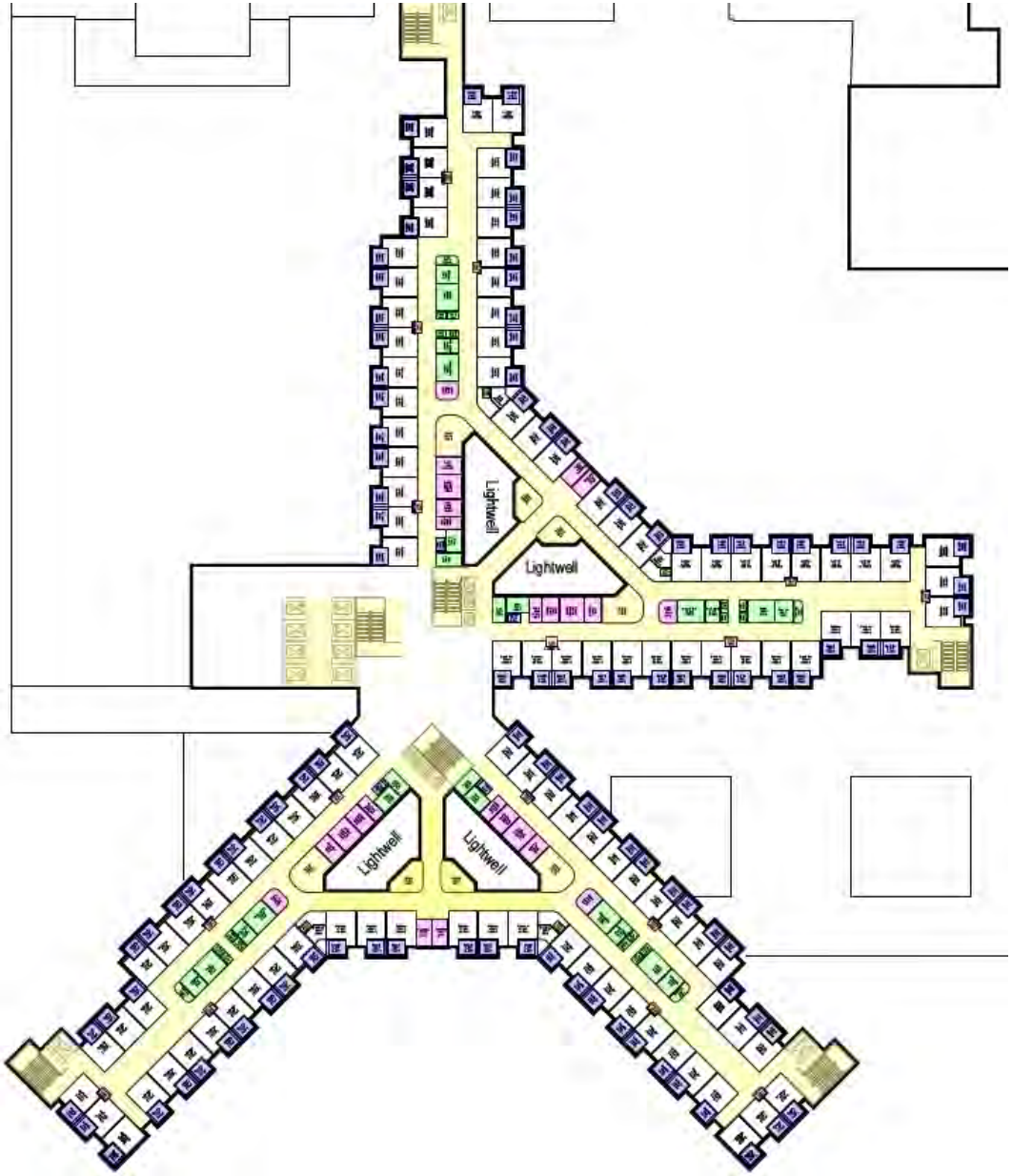


APPROVED : 27 April 2009

GENERIC IN-PATIENT WARD

HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL
NSGH - GENERIC IN-PATIENT WARD

112 bed floor plate



HLM ARCHITECTS

NEW SOUTH GLASGOW HOSPITAL

NSGH - GENERIC IN-PATIENT WARD

2 x 28 bed ward

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HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL
NSGH - GENERIC IN-PATIENT WARD

28 bed ward layout

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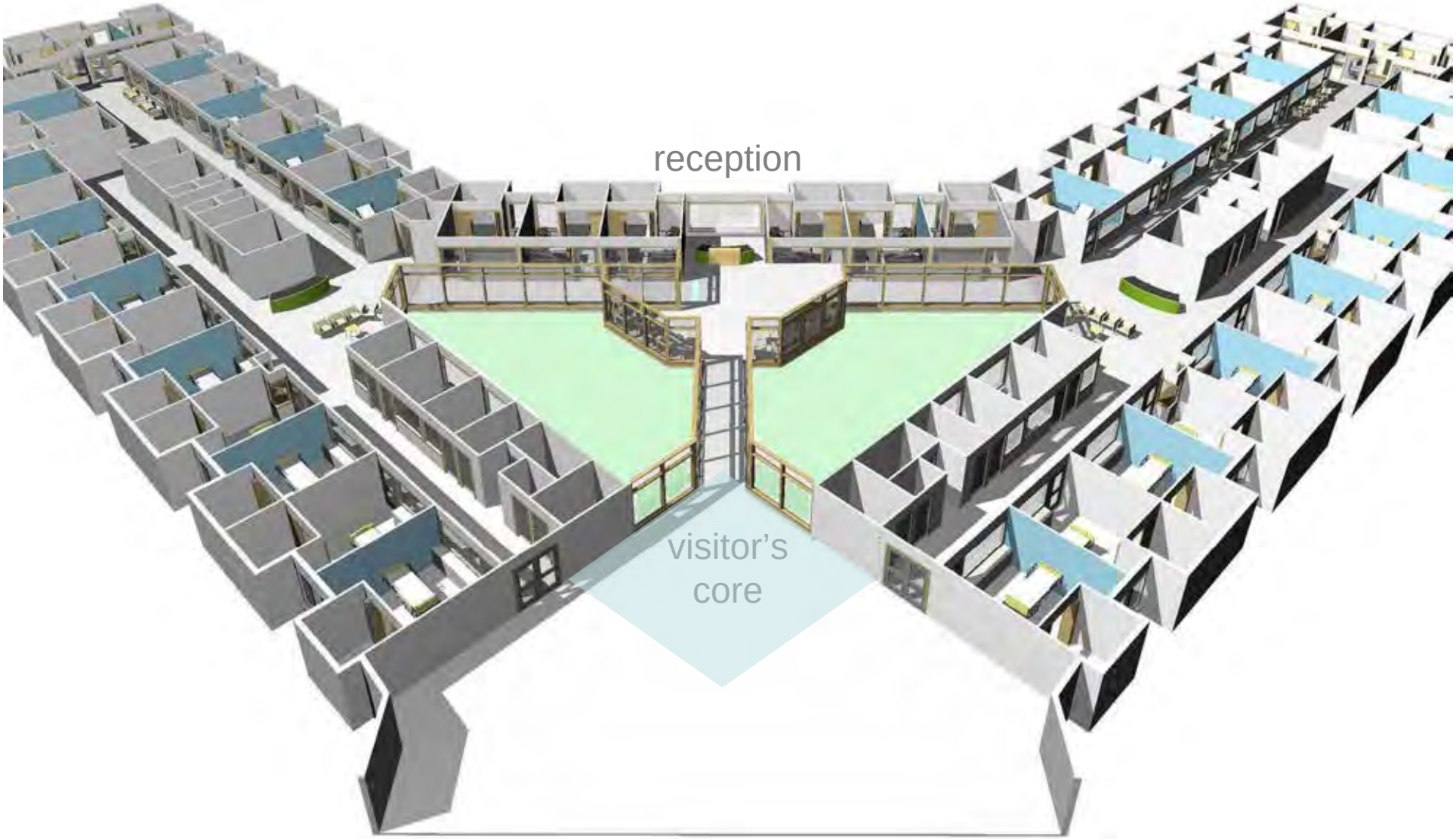
HLM ARCHITECTS

NEW SOUTH GLASGOW HOSPITAL

NSGH - GENERIC IN-PATIENT WARD



HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL
NSGH - GENERIC IN-PATIENT WARD

Approach to Wards

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HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL
NSGH - GENERIC IN-PATIENT WARD

Waiting Area and Ward Entrance

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HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL
NSGH - GENERIC IN-PATIENT WARD

Entrance Corridor into Ward

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NEW SOUTH GLASGOW HOSPITAL
NSGH - GENERIC IN-PATIENT WARD

Nurse Touch-Down Space

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NEW SOUTH GLASGOW HOSPITAL
NSGH - GENERIC IN-PATIENT WARD

Socialisation Space gives open feel to centre of Ward

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NEW SOUTH GLASGOW HOSPITAL
NSGH - GENERIC IN-PATIENT WARD

End of Ward – wide corridor and integrated socialisation space

HLM ARCHITECTS

NEW SOUTH GLASGOW HOSPITAL

NSGH - GENERIC IN-PATIENT WARD

2 x 28 bed ward

bmj architects
Boswell Mitchell & Johnston

STATUS : APPROVED BY USER GROUPS

1:200 DEPARTMENTAL LAYOUTS

CHILDREN'S HOSPITAL

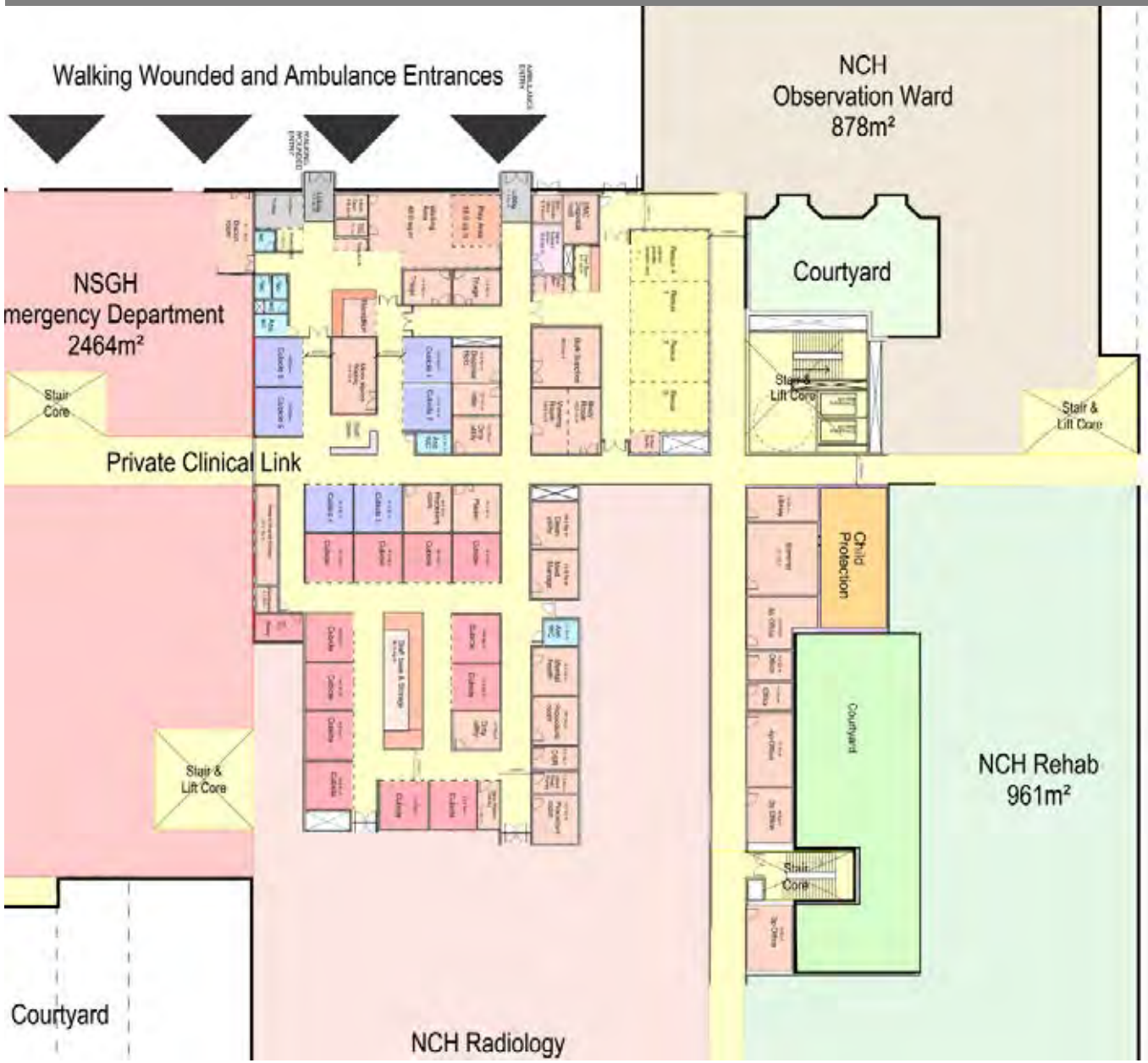
A52787523

NCH EMERGENCY DEPARTMENT

bmj architects
Boswell Mitchell & Johnston

STATUS : APPROVED

NCH – EMERGENCY DEPARTMENT



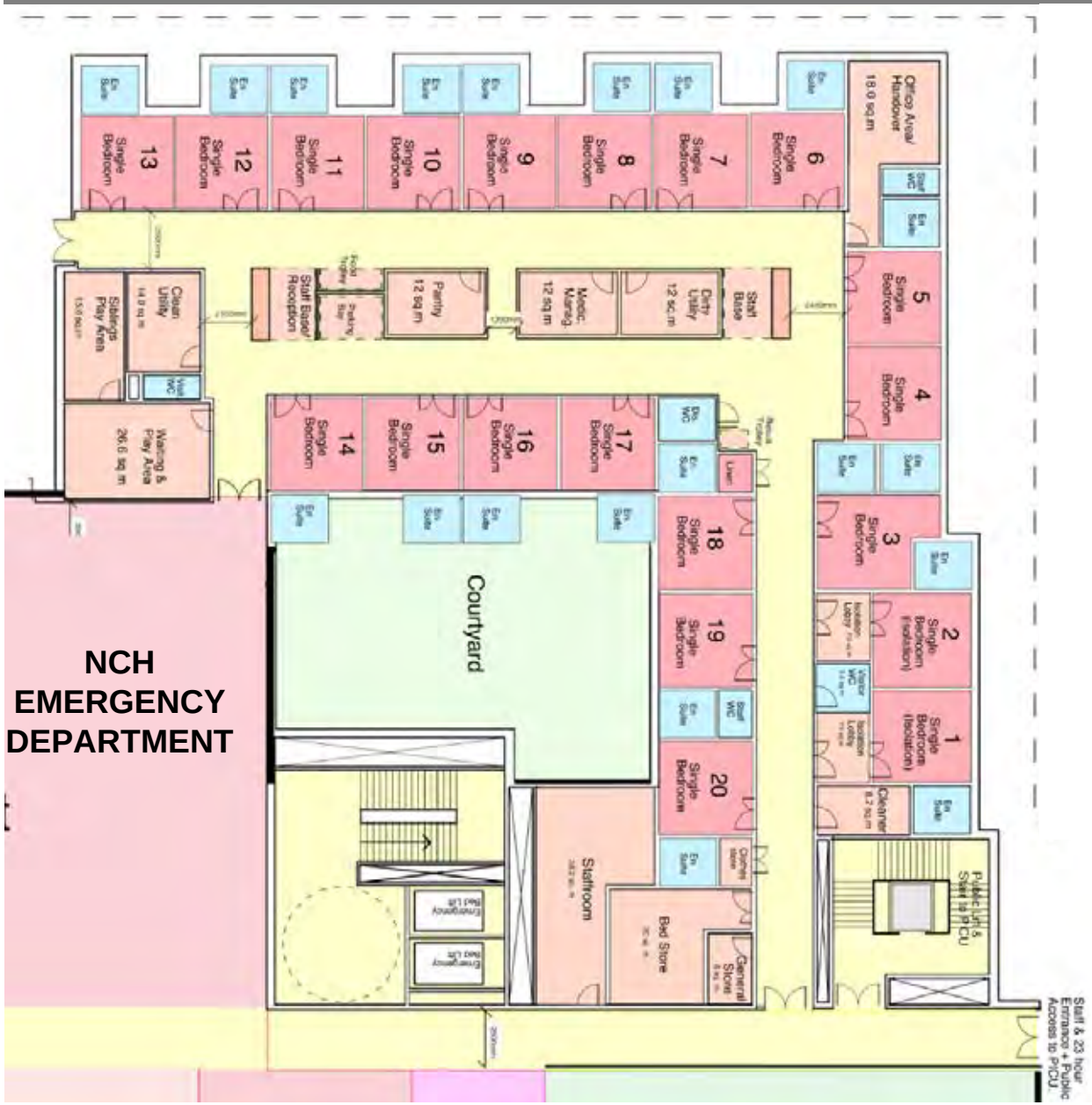
bmj architects
Boswell Mitchell & Johnston

NCH EMERGENCY OBSERVATION WARD

bmj architects
Boswell Mitchell & Johnston

STATUS : APPROVED

NCH – EMERGENCY OBSERVATION WARD



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NCH GENERIC WARDS

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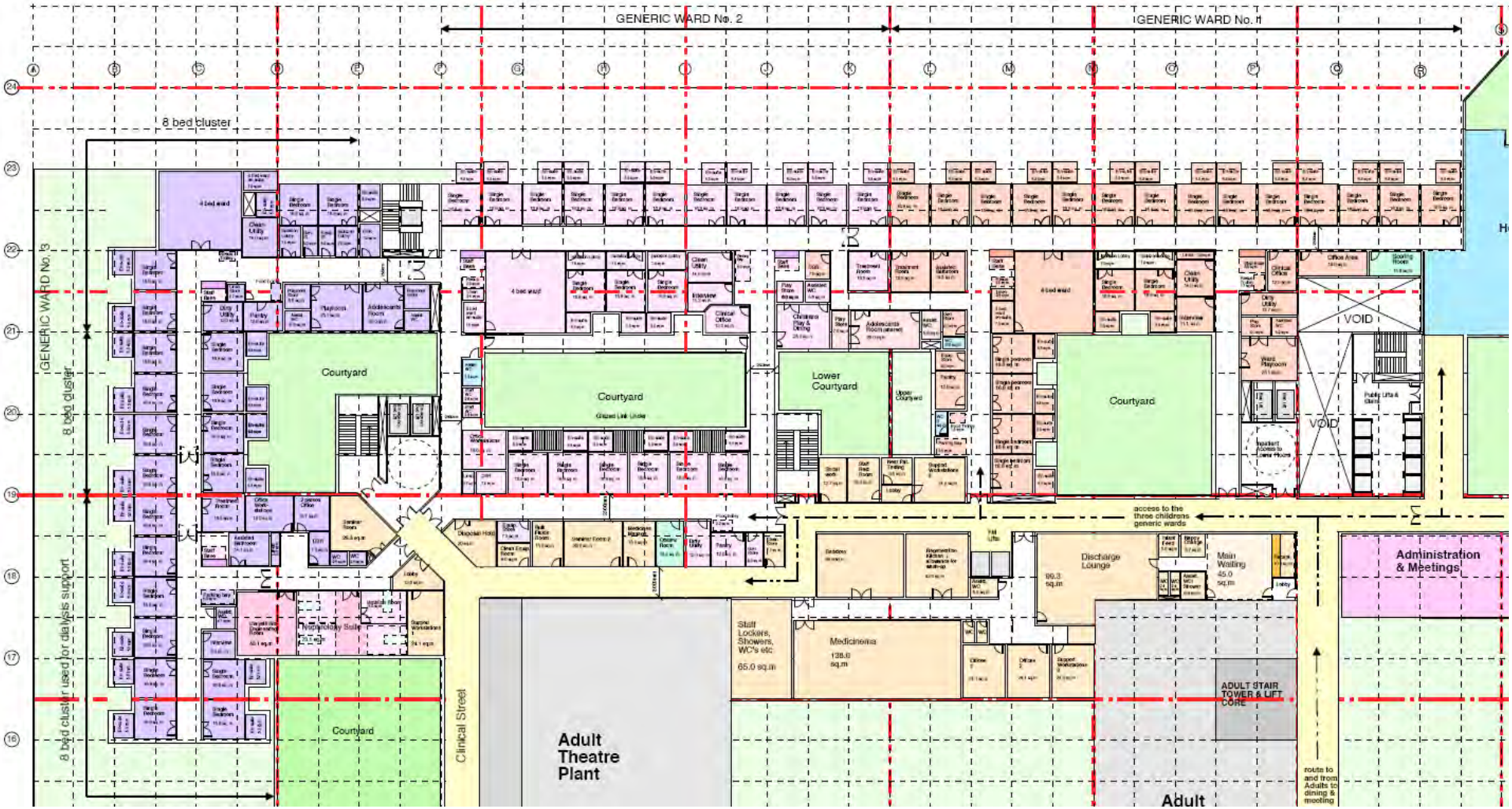
Boswell Mitchell & Johnston

APPROVAL EXPECTED 19 May 2009

NCH – GENERIC WARDS

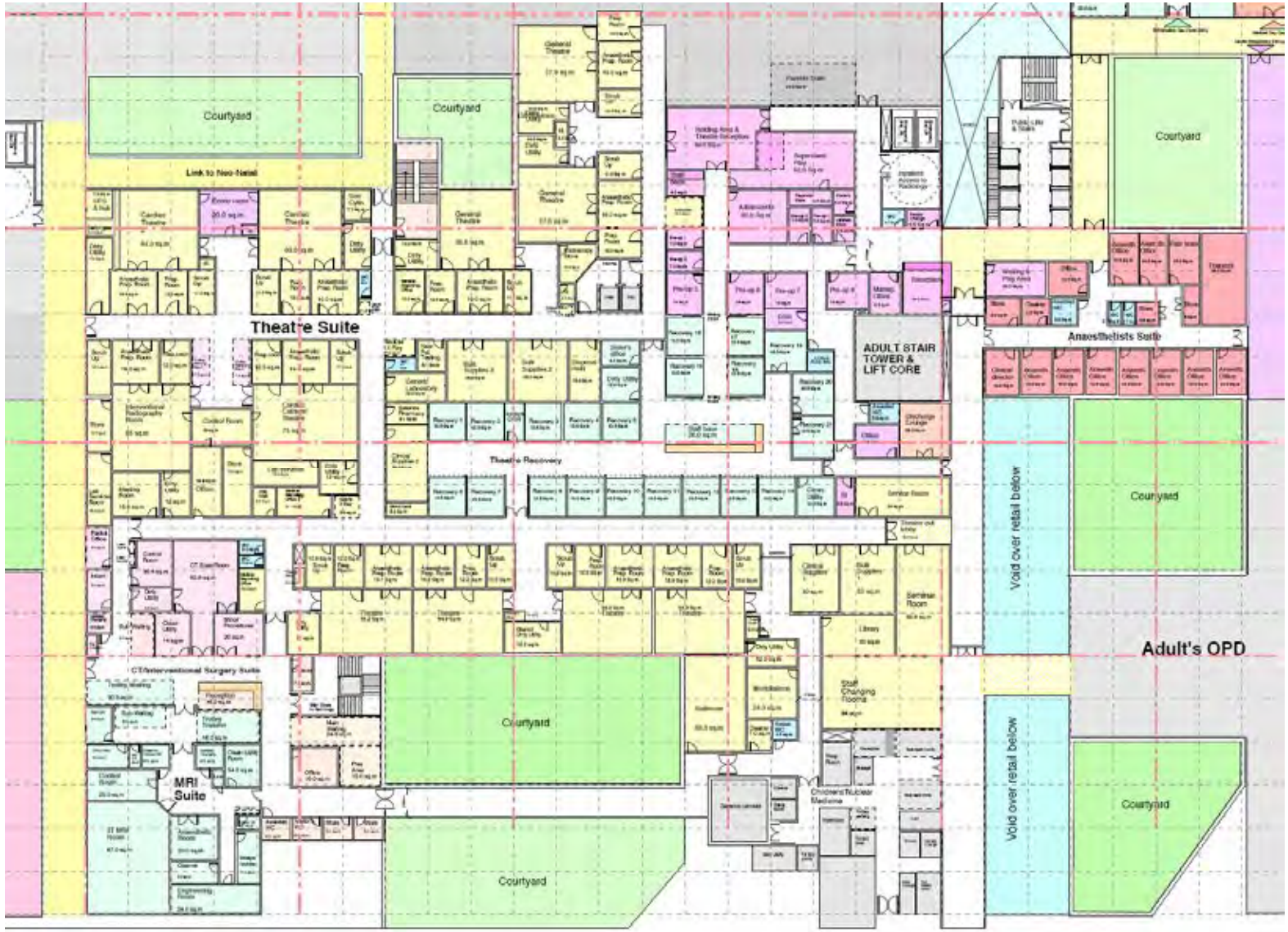


NCH THEATRES

bmj architects
Boswell Mitchell & Johnston

APPROVAL EXPECTED BY 25 May 2009

NCH – THEATRES



NCH RADIOLOGY

bmj architects
Boswell Mitchell & Johnston

APPROVAL EXPECTED BY 25 May 2009

NCH – RADIOLOGY

QUALITY OF ENVIRONMENT & MATERIALS

Hirst
LANDSCAPE ARCHITECTS

LANDSCAPE DESIGN

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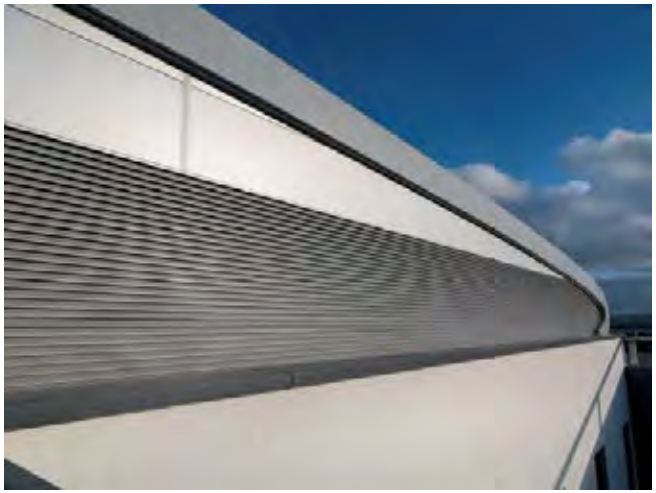
HLM ARCHITECTS
NEW SOUTH GLASGOW HOSPITAL

QUALITY MATERIALS



THE VISION

HLM ARCHITECTS

View of tower across the central park

HLM ARCHITECTS

View from new entrance boulevard

A52787523

View from the South

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HLM ARCHITECTS

View from the North

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NEW SOUTH GLASGOW HOSPITAL

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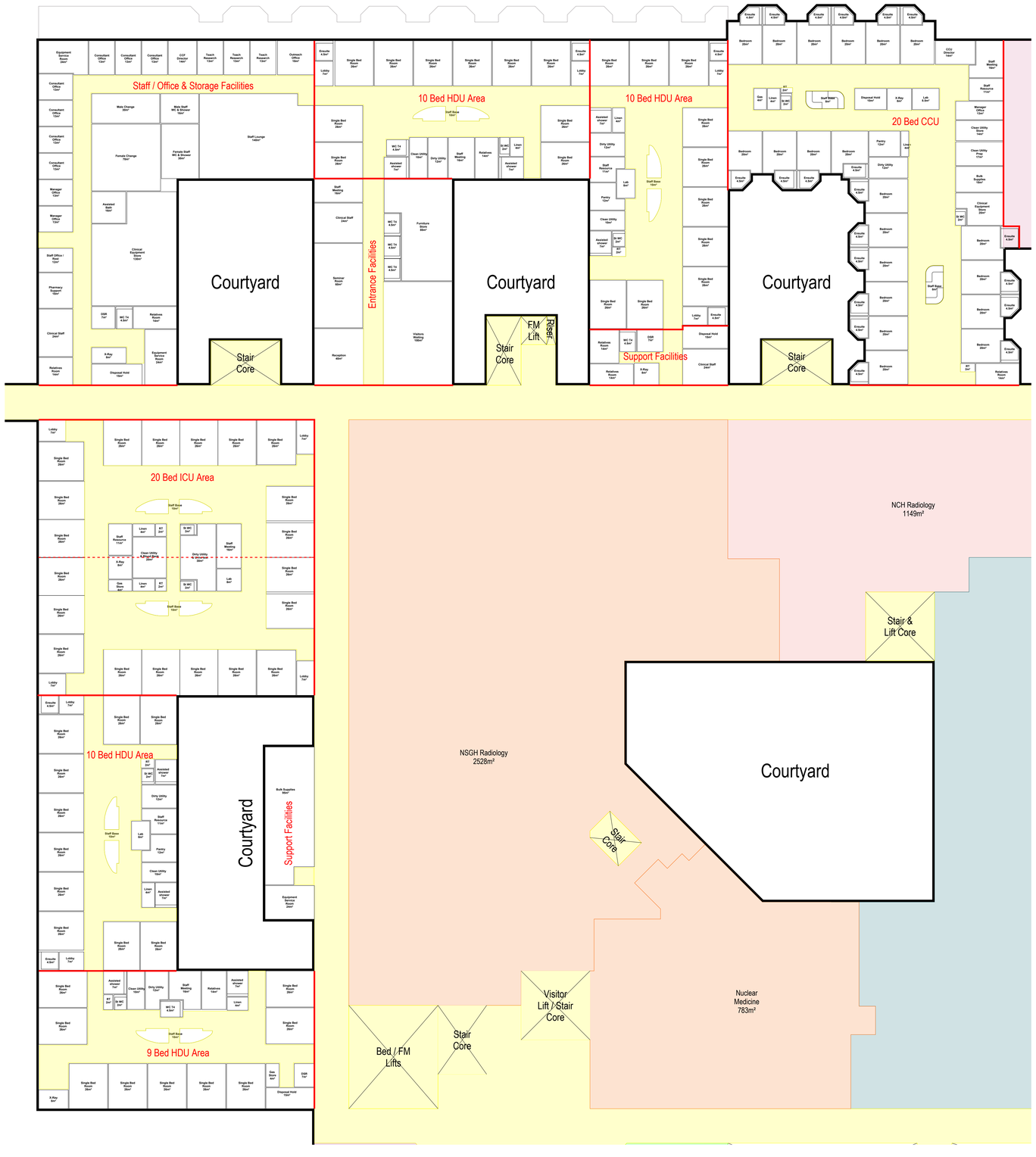

A Colours and text amended. 12/05/2009 SA

Revisions

Project
NEW SOUTH GLASGOW HOSPITAL

Client
NHS GREATER GLASGOW AND CLYDE

Title
CRITICAL CARE FACILITY (ADULTS) ROOM ADJANCIES

Drawing No. Revision
PD-HLM-L(00)01-X-CC-001A

Scale @ A0: 1:200
Drawn: DM
Date: 30/04/2009
Checked: JD

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t: 0141 226 8320 f: 0141 226 8350
LONDON GUILDFORD SHEFFIELD GLASGOW BELFAST CARDIFF PLYMOUTH

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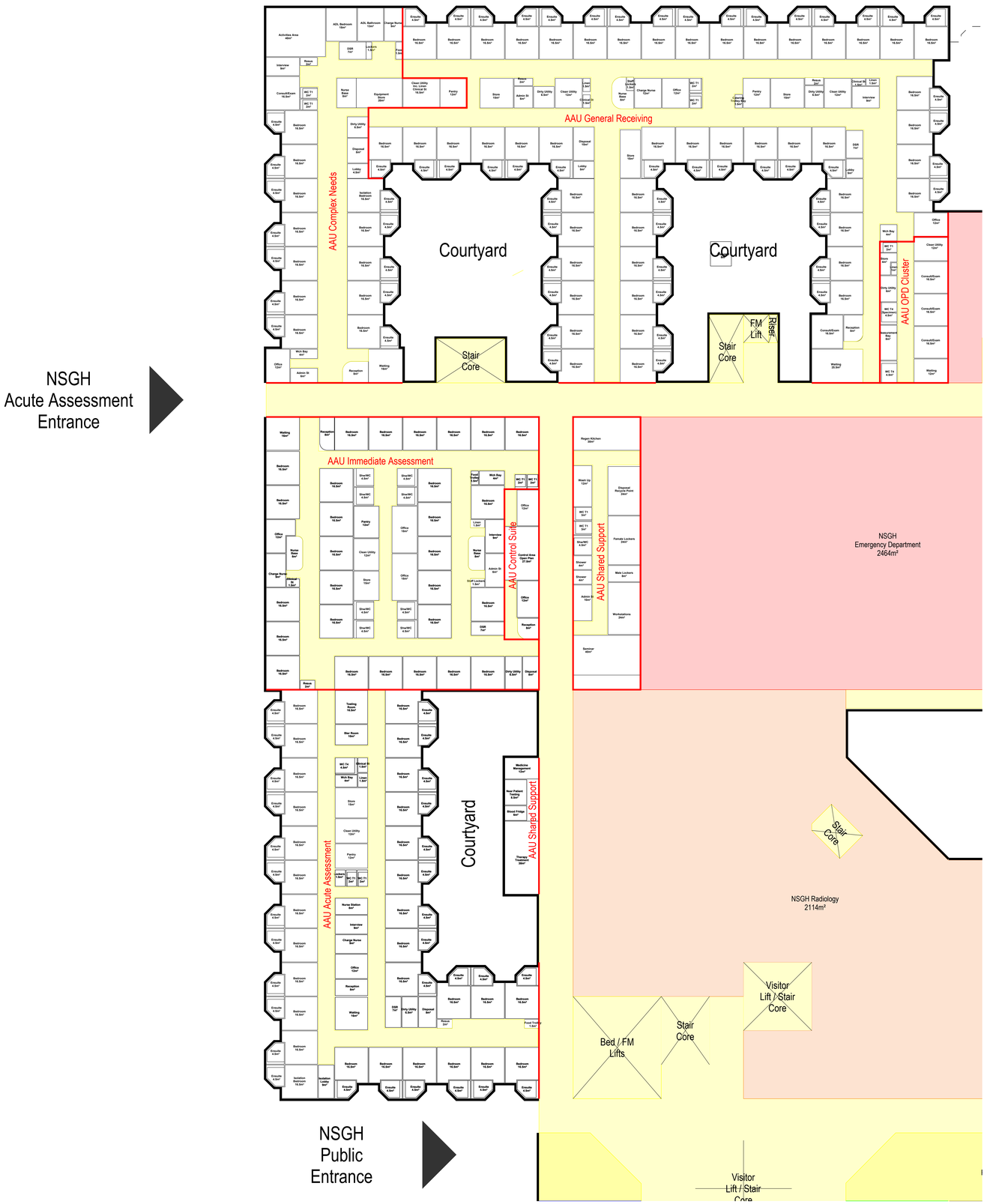

A Colours and text amended. 12/05/2009 SA

Revisions

Project
NEW SOUTH GLASGOW HOSPITAL

Client
NHS GREATER GLASGOW AND CLYDE

Title
ACUTE ASSESSMENT (ADULTS) ROOM ADJANCIES

Drawing No. Revision
PD-HLM-L(00)00-X-AA-001A

Scale @ A0: 1:200
Drawn: AJA
Date: 30/04/2009
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ADULT THEATRES - Please note the flows for Clean & Dirty, AODOS Patients and Inpatients

A52787523

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Revisions

Project
NEW SOUTH GLASGOW HOSPITAL

Client
NHS GREATER GLASGOW AND CLYDE

Title
OPERATING THEATRES (ADULTS) ROOM ADJANCIES

Drawing No. Revision
PD-HLM-L(00)02-X-OT-001 *

Scale @ A1: 1:200
Drawn: JD
Date: 30/04/2009
Checked: HS

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LONDON GUILDFORD SHEFFIELD GLASGOW BELFAST CARDIFF PLYMOUTH

Mon Jun 01 16:32:26 2009
F:\08045 - New South Glasgow Hospital\00 Cad\Issue\(0)\PD-HLM-L(00)02-X-OT-001 - Operating Theatre (Adults) and

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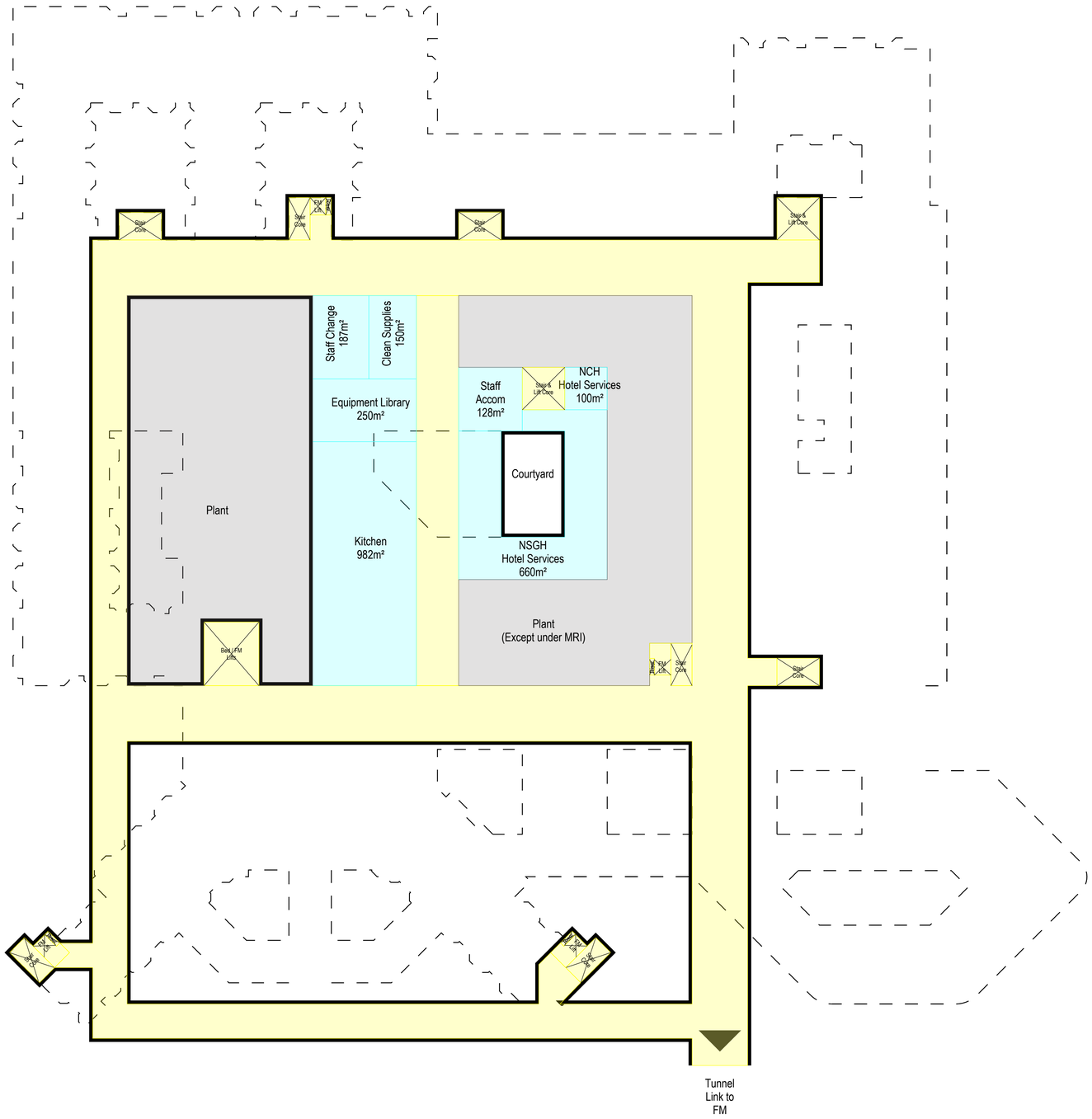

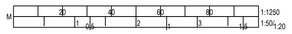

Revisions

Project

NEW SOUTH GLASGOW HOSPITAL

Client

NHS GREATER GLASGOW AND CLYDE

Title

DEPARTMENTAL ADJANCIES LEVEL -1

Drawing No.	Revision
PD-HLM-L(00)-01-X-XX-001*	

Scale @ A1	Drawn
1:500	JCD
Date	**Checked**
28/04/2009	HS

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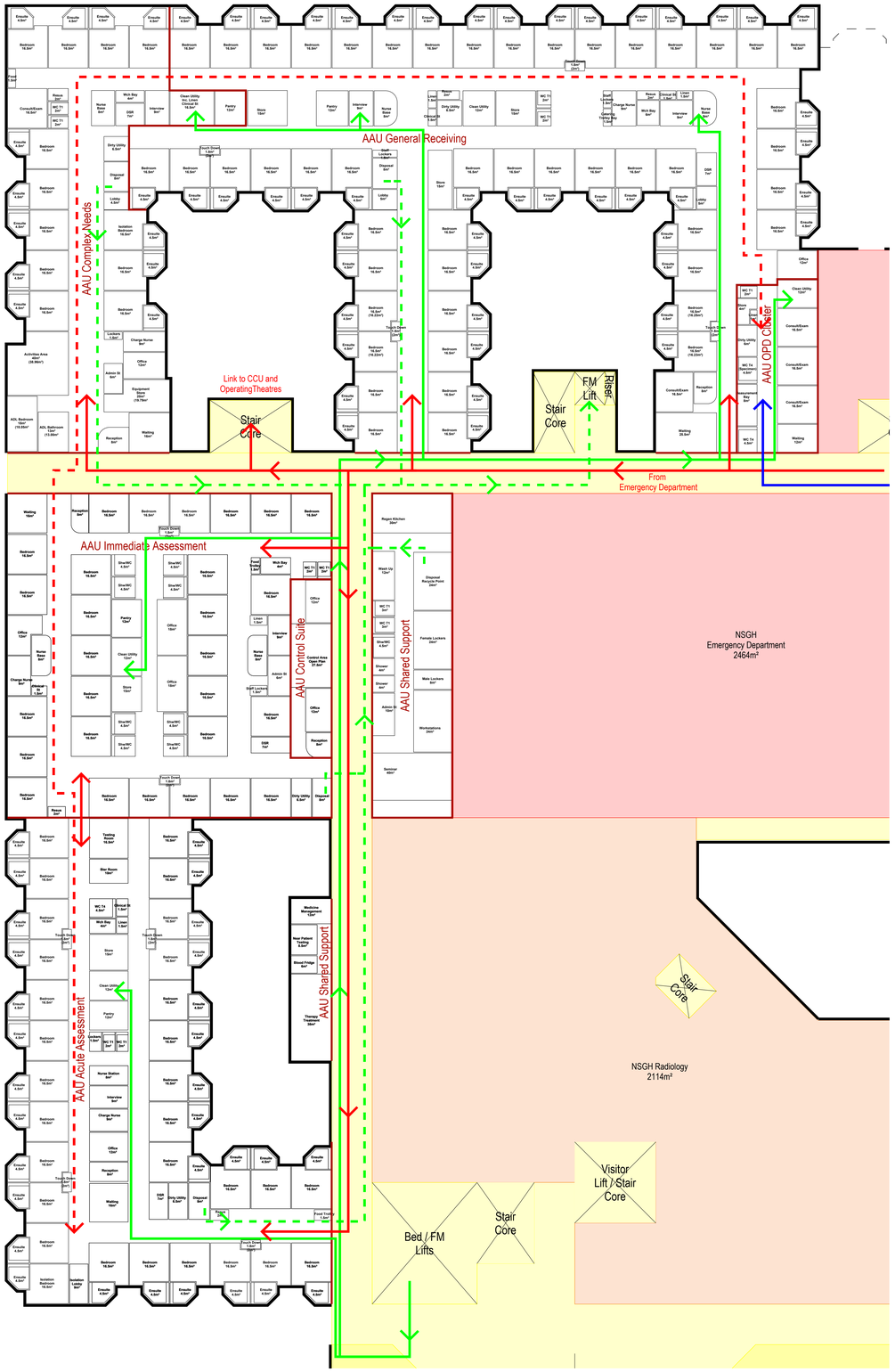
Flow route Key

- Staff / Inpatients
- Staff
- Outpatients
- Clean FM
- Dirty FM



Revisions

Project
NEW SOUTH GLASGOW HOSPITAL

Client
NHS GREATER GLASGOW AND CLYDE

Title
ACUTE ASSESSMENT (ADULT) FLOW DIAGRAMME

Drawing No.	Revision
PD-HLM-L(00)00-X-AA-002*	

Scale @ A0	Drawn
1:200	DM
Date	**Checked**
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LONDON GUILDFORD SHEFFIELD GLASGOW BELFAST CARDIFF PLYMOUTH

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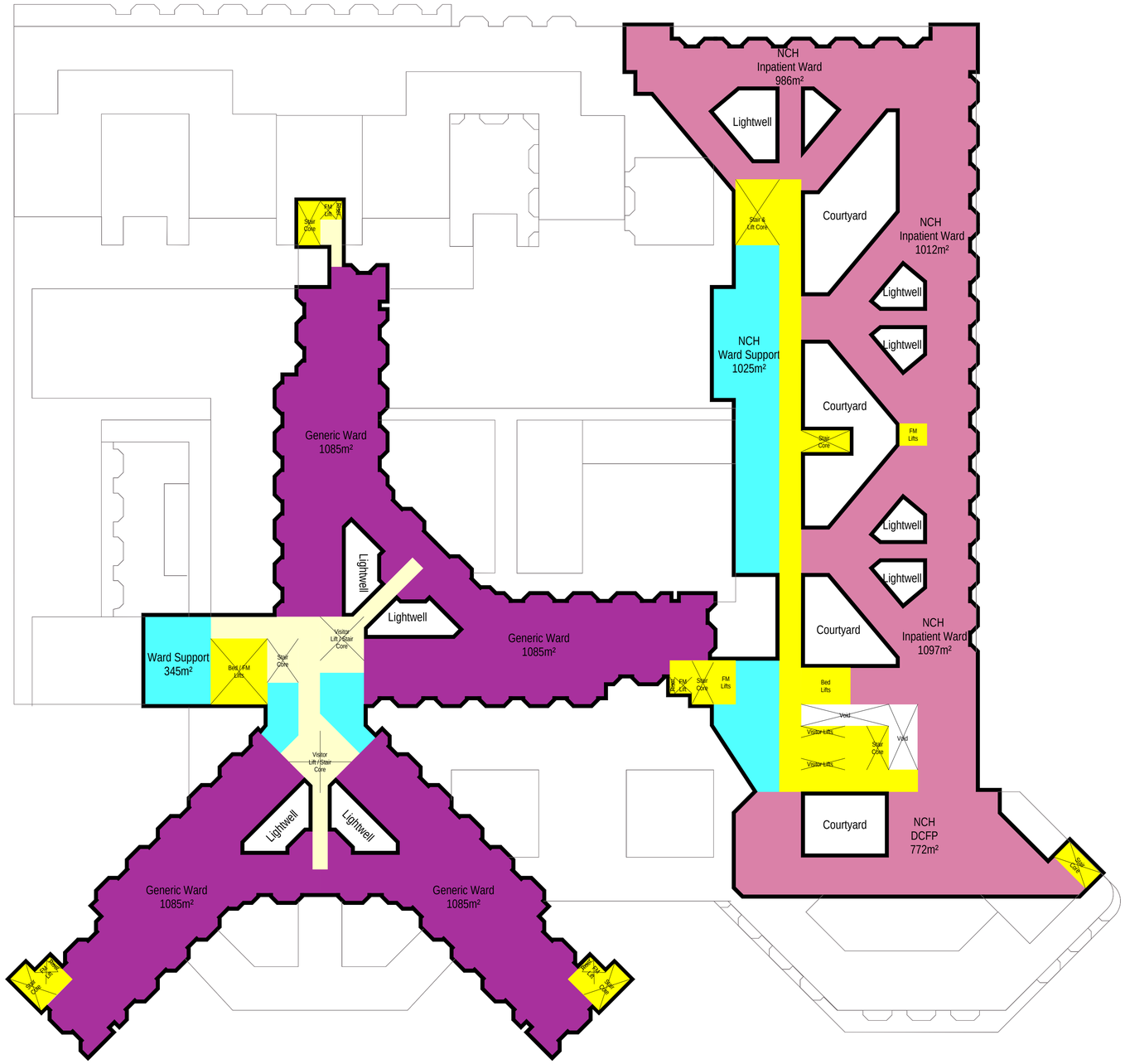

A52787523

A	Generic Wards & Ward Support Relocated from L3	2/06/09	JD

Revisions

Project
NEW SOUTH GLASGOW HOSPITAL

Client
NHS GREATER GLASGOW AND CLYDE

Title
DEPARTMENTAL ADJANCIES LEVEL 04

Drawing No. Revisio
PD-HLM-L(00)04-X-XX-001A

Scale @ A1	Drawn
1:500	JCD
Date	Checked
28/04/2009	HS

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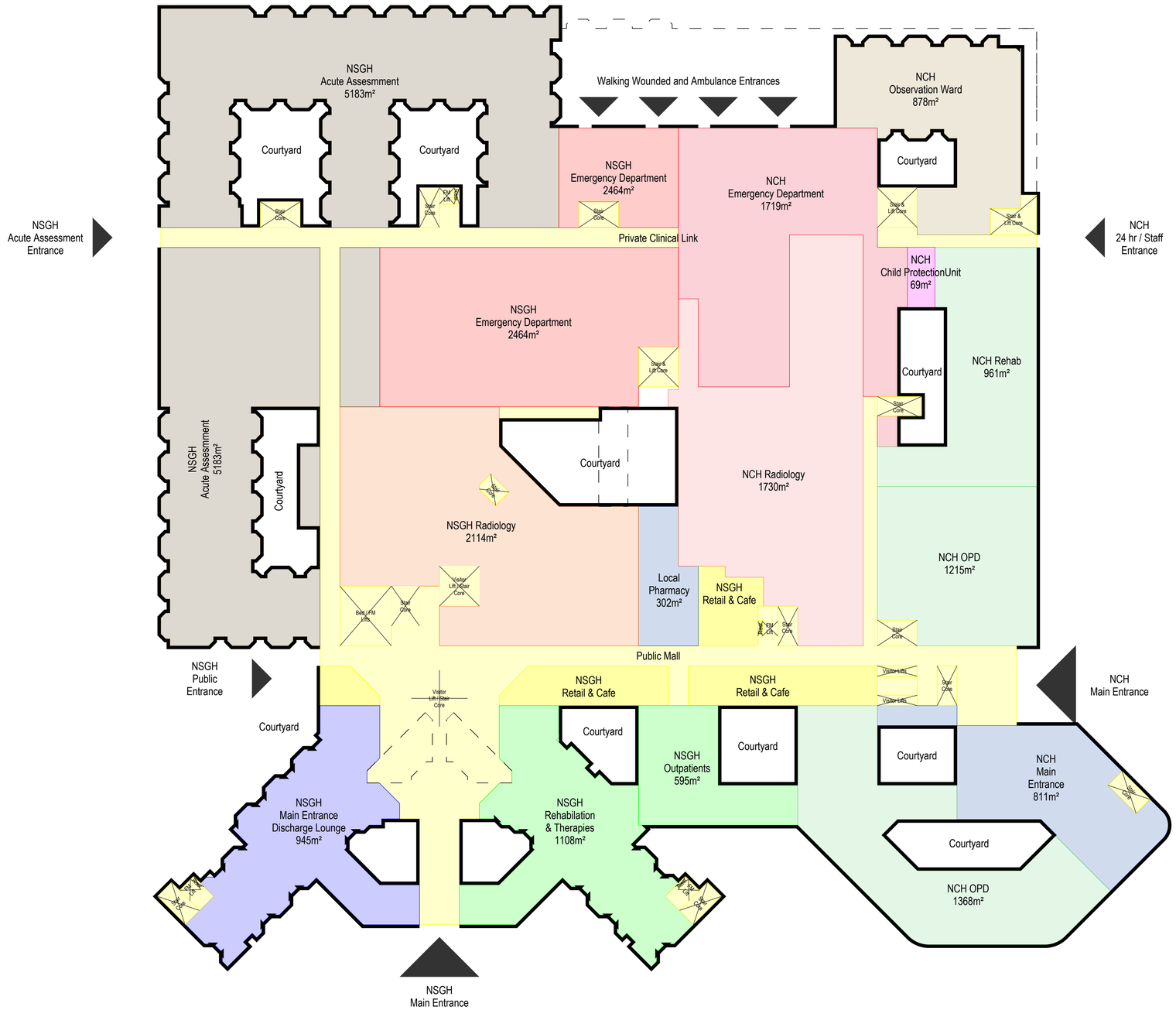

Revisions

Project

NEW SOUTH GLASGOW HOSPITAL

Client

NHS GREATER GLASGOW AND CLYDE

Title

DEPARTMENTAL ADJANCIES LEVEL 00

Drawing No. | Revision

PD-HLM-L(00)00-X-XX-001 *

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Drawn: JCD
Date: 28/04/2009
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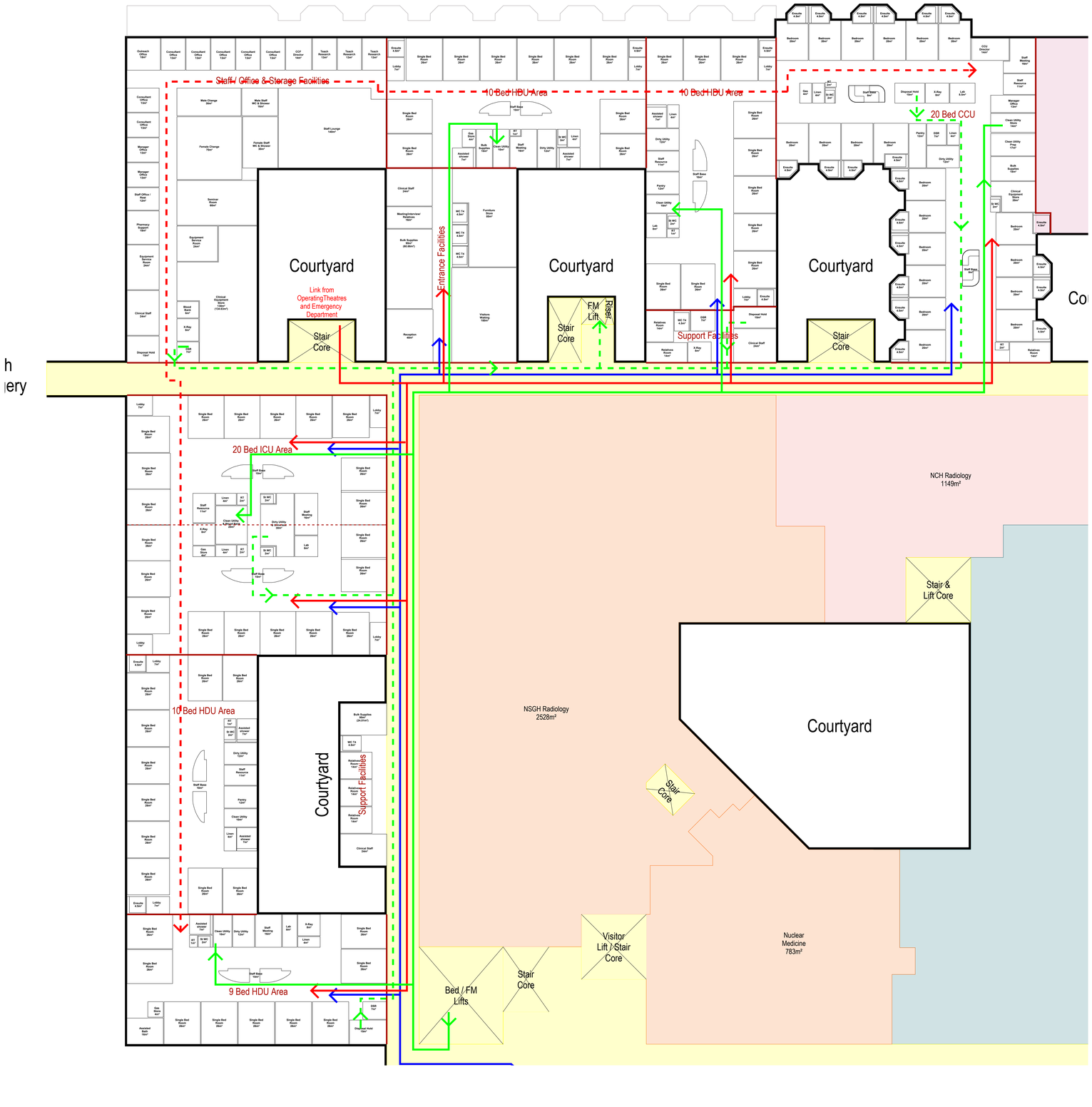
Staff
Outpatients
Clean FM
Dirty FM



Revisions

Project
NEW SOUTH GLASGOW HOSPITAL

Client
NHS GREATER GLASGOW AND CLYDE

Title
CRITICAL CARE UNIT (ADULT) FLOW DIAGRAM

Drawing No. Revision
PD-HLM-L(00)01-X-CC-002*

Scale @ A0: 1:200
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Date: 01/06/2009
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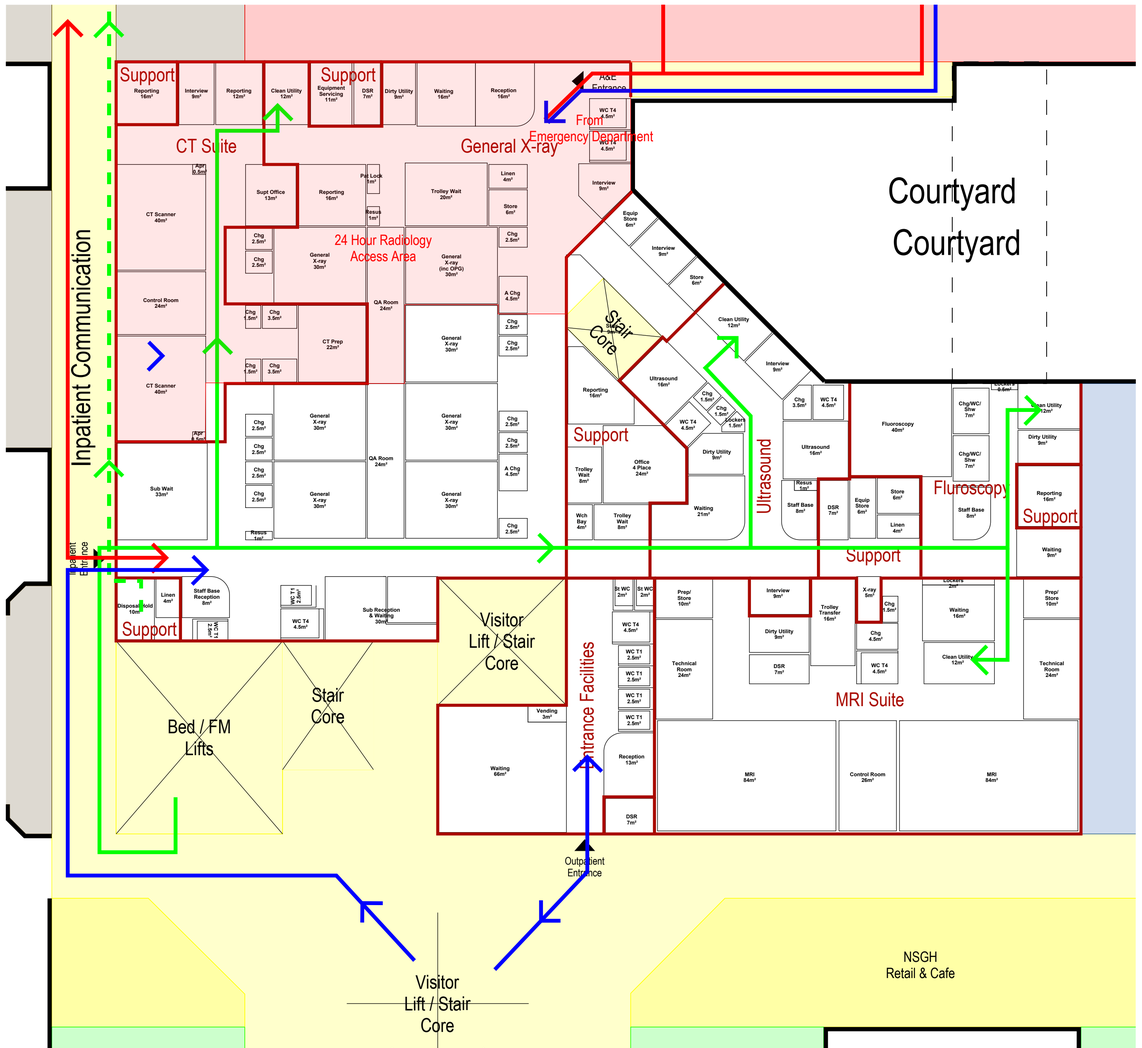
Flow route Key

- Staff / Inpatients
- Outpatients
- Clean FM
- Dirty FM



Revisions

Project
NEW SOUTH GLASGOW HOSPITAL

Client
NHS GREATER GLASGOW AND CLYDE

Title
RADIOLOGY DEPARTMENT (ADULT) FLOW DIAGRAM

Drawing No. Revision
PD-HLM-L(00)00-X-RA-002*

Scale @ A1: 1:200
Drawn: DM
Date: 01/06/2009
Checked: *

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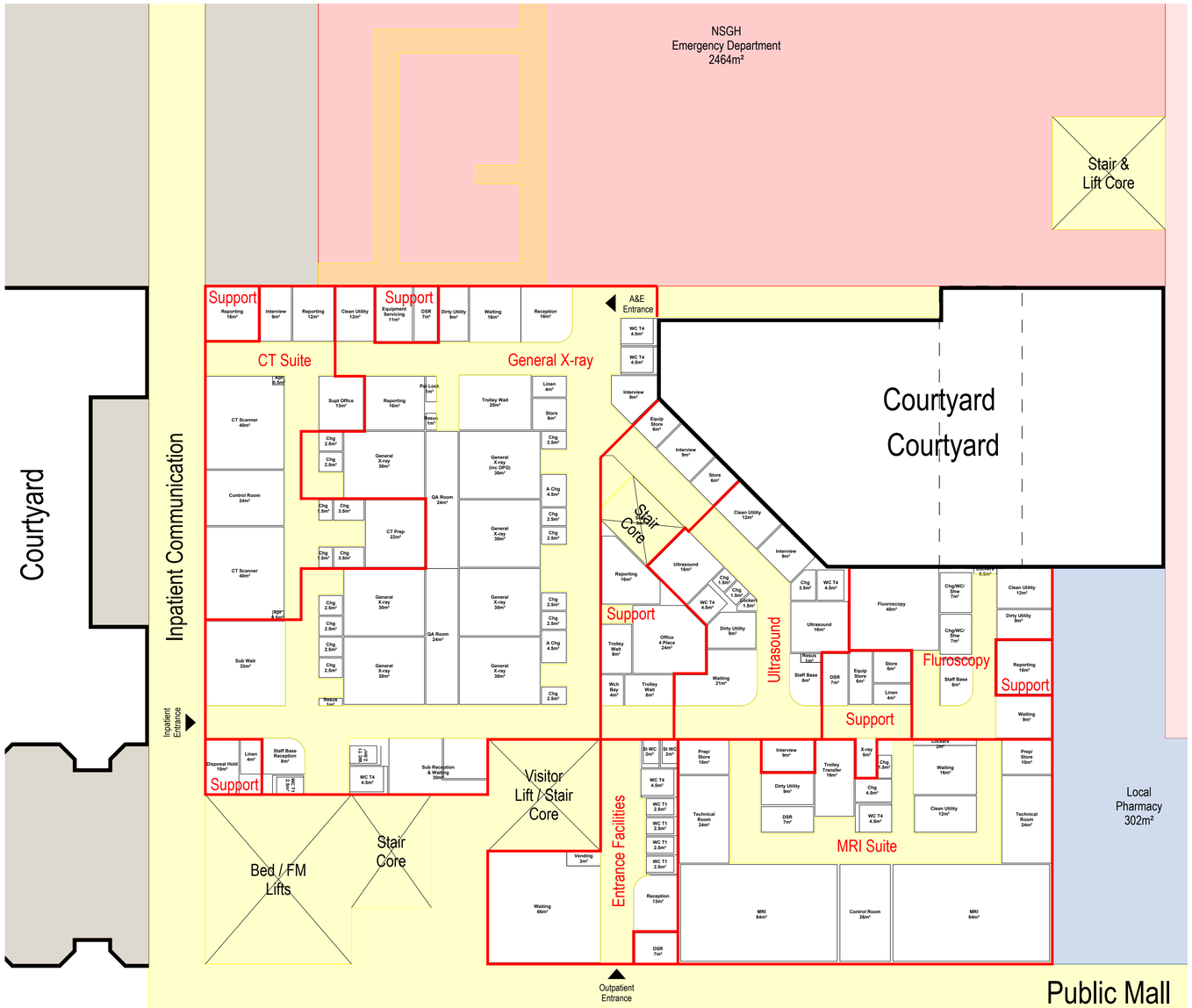

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A	Colours and text amended.	12/05/2009 SA

Revisions

Project

NEW SOUTH GLASGOW HOSPITAL

Client

NHS GREATER GLASGOW AND CLYDE

Title

RADIOLOGY (ADULTS) ROOM ADJANCIES

Drawing No. | Revision

PD-HLM-L(00)00-X-RA-001 A

Scale @ A1: 1:200
Drawn: JD
Date: 30/04/2009
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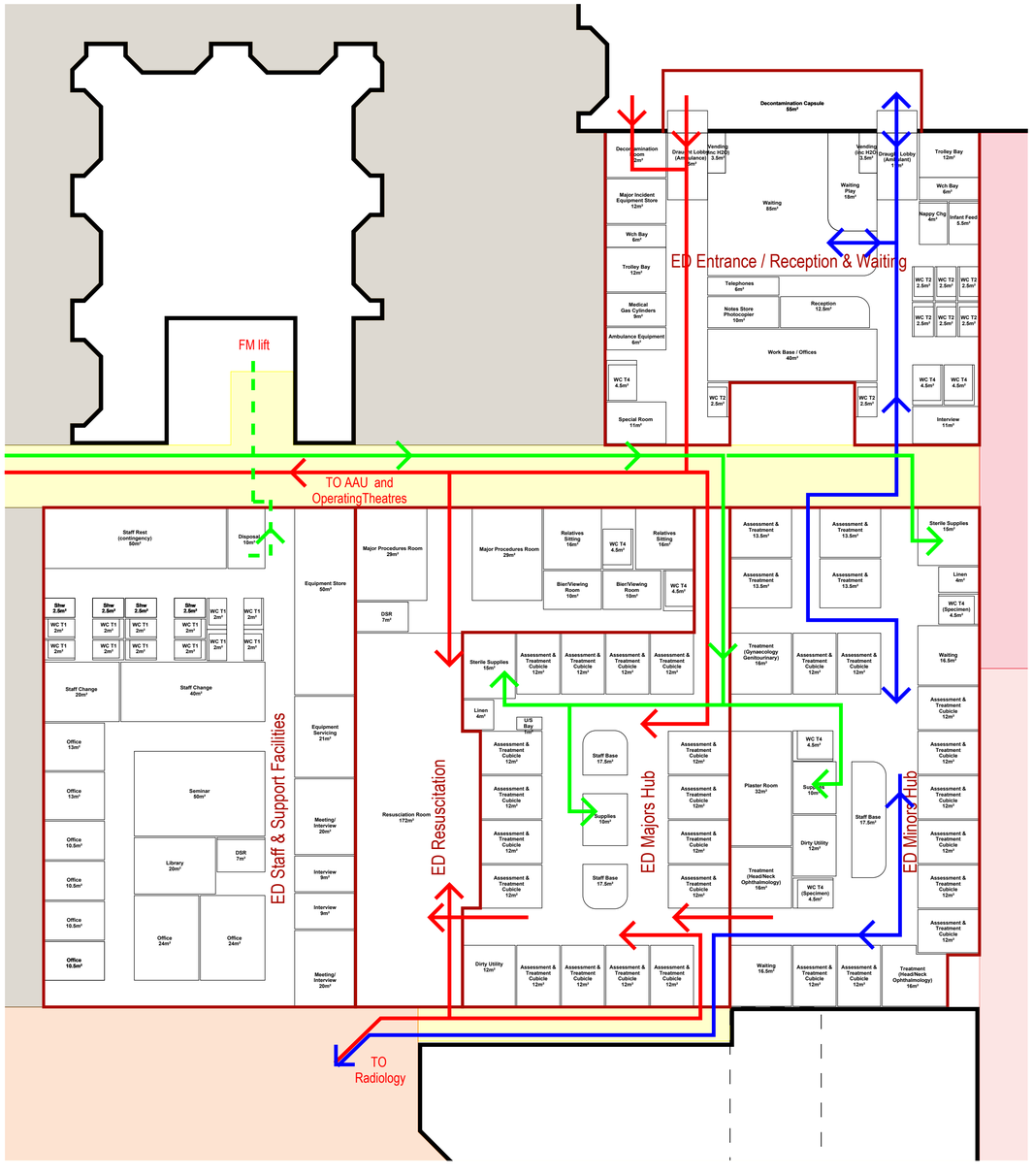
Flow route Key

- Staff / Inpatients
- Outpatients
- Clean FM
- Dirty FM

Draft issue pending review by FM 08/06/09



Revisions

Project
NEW SOUTH GLASGOW HOSPITAL

Client
NHS GREATER GLASGOW AND CLYDE

Title
EMERGENCY DEPARTMENT (ADULT) FLOW DIAGRAM

Drawing No. | Revision
PD-HLM-L(00)00-X-ED-002 *

Scale @ A1: 1:200
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Date: 01/06/2009
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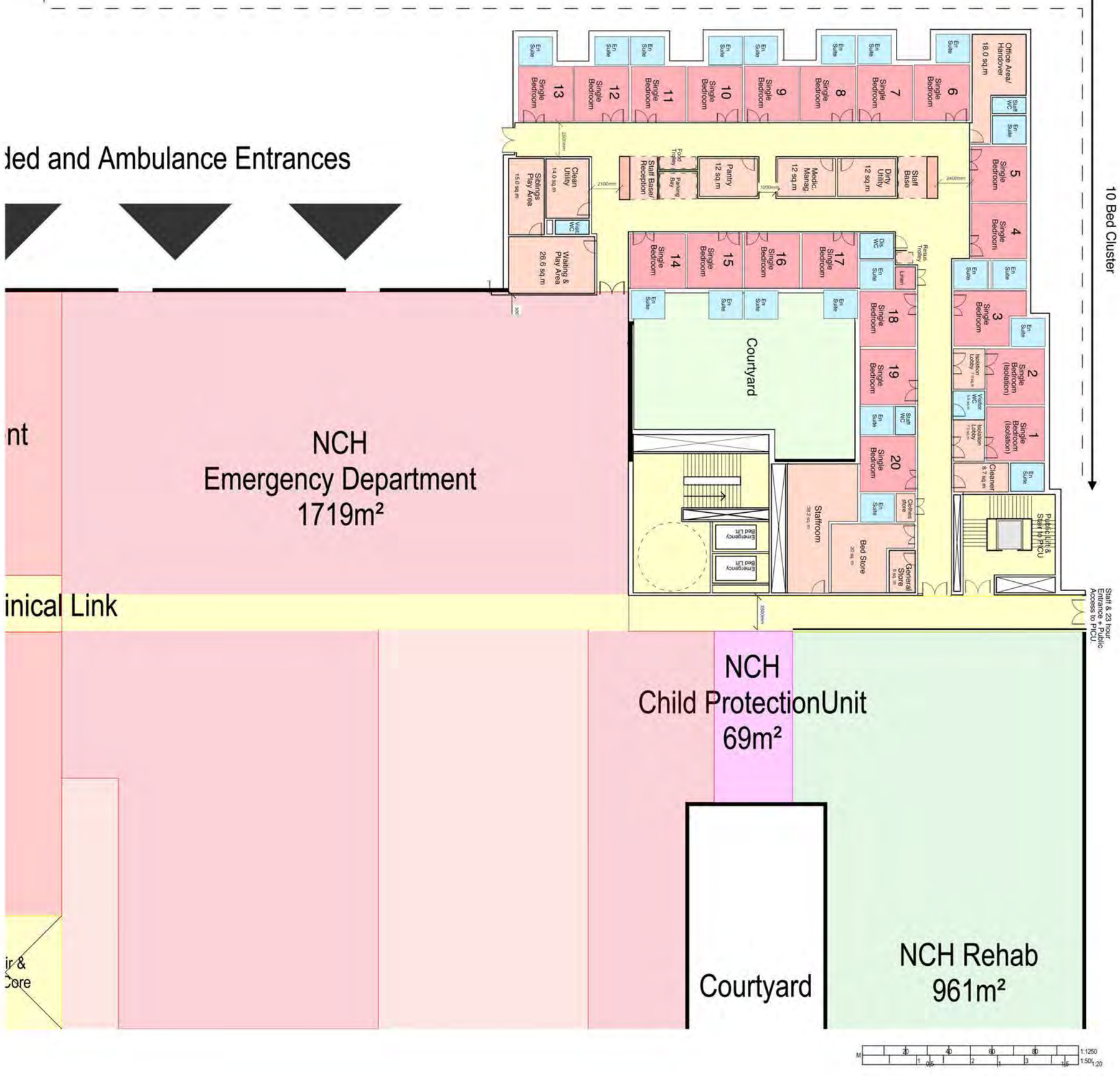

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Revisions

Project

NEW SOUTH GLASGOW HOSPITAL

Client

NHS GREATER GLASGOW AND CLYDE

Title

OBSERVATION WARD (CHILDRENS)

Drawing No.	Revision
PD-BMJ-L(00)00-X-OW-001*	

Scale @ A2	Drawn
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Date	**Checked**
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Revisions

Project
NEW SOUTH GLASGOW HOSPITAL

Client
NHS GREATER GLASGOW AND CLYDE

Title
EMERGENCY DEPARTMENT (CHILDRENS)

Drawing No.	Revision
PD-BMJ-L(00)-00-X-ED-001*	

Scale @ A1	Drawn
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Date	**Checked**
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NHS Greater Glasgow and Clyde

New South Glasgow Hospitals Project

Pre-Qualification Questionnaire

Section D – Information on Advisers

All the Advisers identified at A4 should complete this section separately.

D1 Details of Organisation

Registered Name:	Nightingale Architects Limited
Current Trading Name:	Nightingale Associates
Previous Trading Names (if different):	Nightingale Design Limited (Due to duplication of this name, we changed the name by special resolution to Nightingale Architects Ltd on 5 June 2002).
Registered Address:	87-91 Newman Street London W1T 3EY
Telephone:	020 7079 9900
Fax:	020 7079 9901
E-mail:	info@nightingaleassociates.com
Registered No:	4440612
Year of Registration:	5th June 2002 Nightingale Associates commenced work in 1989 as a Partnership and joined Tribal Group plc in May 2002.
Country of Registration:	England and Wales

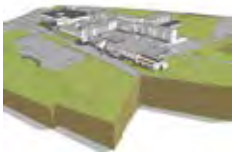
D2 Type of Organisation

Private Limited Company	✓		**Public Limited Company**	
Partnership			**UK registered branch of overseas company**	
Other (please specify)				

D3 Healthcare Experience

Provide details of healthcare projects undertaken in the last three years including the extent of the services or works for which the organisation was responsible and the dates of the organisation's involvement. Please limit to 12 entries. Projects which are particularly relevant to the scope of this scheme (as set out in the MoI) should be highlighted. Any specific experience of live hospital sites should be clearly identified, as should particular areas of innovation. Any project information/descriptor should be limited to one side A4 (font size 10pt) per project.

Project Name and Client Name	**Capital Cost £m**	**Status of project**	**Dates of involvement**	**Services provided/ Company's role**
Peterborough Hospitals PFI The Greater Peterborough Health Investment Plan / Brookfield Constuction (UK) for Progress Health Consortium	£230m	On site MHU Phase 1 Completed 2008 MSCP Completed 2008 MHU Completion due 2009 ICC Completion due 2009 Acute Completion due 2010	2004 - 2012	Architect / Lead Consultant
Coventry New Hospitals Project PFI University Hospitals Coventry & Warwickshire NHS Trust	£350m	Completed 2007	2001-2007	Architect
Southmead Hospital, North Bristol Skanska Innisfree / North Bristol NHS Trust	£370m	Competitive Dialogue closed February 2009	2007 – 2009	Architect / Lead Consultant (as part of architectural joint venture Architecture NGM)

Project Name and Client Name	**Capital Cost** **£m**	**Status of project**	**Dates of involvement**	**Services provided/ Company's role**
Royal Liverpool University Hospital The Royal Liverpool and Broadgreen University Hospitals NHS Trust	£350m	OBC submitted 2008	2008-2015	Architect / Trust Advisor
Designed for Life, Building for Wales Welsh Assembly Government	£1.2b total (examples of DFL projects below);		Current Framework Duration June 2006 – June 2010	Architect
Ysbyty Ystrad Fawr Hospital Gwent Healthcare NHS Trust	£90m	On site	May 2008 – target costs approval July 2008 start on site July 2011 - completion	
Healthvision Swansea Swansea NHS Trust	£300m	On site	Project start 2007 start on site January 2009 Completion 2010	
DGRI Redevelopment Project Royal Infirmary Hospital Dumfries NHS Dumfries & Galloway	£100m approx.	Design stage	Start Date January 2009 Due on site April 2010. Completion due 2013	Architect, Lead Consultant, Interior Design and Landscaping. 

Project Name and Client Name	Capital Cost £m	Status of project	Dates of involvement	Services provided/ Company's role
North Middlesex University Hospital PFI, London Bouygues UK Ltd for North Middlesex University NHS Trust	£82m	On Site Completion due 2010	2003-2010	Architect / Lead Consultant
Broadgreen Hospital / Cardiothoracic Centre, Liverpool Broadgreen & Royal Liverpool University Hospitals NHS Trust /	£55m	Completed 2006	2003-2006	Architect / Lead Consultant
The Essex Cardiothoracic Centre, Basildon Hospital Basildon & Thurrock University Hospital NHS Trust	£35m	Completed 2007	2003-2007	Architect and Interior Design
Mental Health Unit, Birmingham New Hospitals Project Birmingham & Solihull Mental Health NHS Trust	£55m	Completed December 2007	Start date 2002 Completion 2007	Architect and Lead Consultant

Project Name and Client Name	**Capital Cost** **£m**	**Status of project**	**Dates of involvement**	**Services provided/ Company's role**
St. Peter's Integrated Health & Leisure Centre, Burnley Burnley Borough Council	£29m	Completed July 2006	June 2004 to July 2006	Architect and Interior Design
Ysbyty Alltwen, Porthmadog North West Wales NHS Trust	£12.8m	Completed November 2008	2005 to November 2008	Architect, Lead Consultant

Peterborough Hospitals PFI

Client:
The Greater Peterborough Health Investment Plan/ Progress Health Consortium

Contractor:
Brookfield Construction Ltd

Location:
Peterborough

Role:
Architect/Lead Consultant

Value:
£230m

Completion:
2012

Procurement:
PFI

The Greater Peterborough Health Investment Plan is a £230 million project consisting of three phases, including a 39-bed Integrated Care Centre, 98-bed Mental Health Unit, and 612-bed main Acute hospital. The Design philosophy is to create a set of modern healthcare facilities for the Trust and a landmark project for the City of Peterborough; to make a positive contribution for the patients, staff and the wider community.
The main Edith Cavell masterplan is based on a community of buildings or 'Campus'. The new buildings, including an Energy Centre and associated infrastructure, are being constructed around the existing operational Hospital.

Once complete this will be demolished to create a new green landscaped square; allowing all the major departments to have their own dedicated entrance at ground level, and providing a public frontage to the building.The Acute Hospital consists of a two-storey clinical podium upon which the three-storey Ward Tower is located. This allows the Wards to take advantage of distant views and natural light. In addition the innovative 'new Nightingale' cruciform 4-Bedded ward has been integrated into the design. A connected Women's and Children's Hospital sits adjacent to the Acute hospital, maintaining its own separate identity.

Coventry New Hospitals PFI

Client:
University Hospitals Coventry & Warwickshire NHS Trust

Contractor:
Skanska

Location:
Walsgrave, Coventry

Role:
Architect

Value:
£350m

Completion:
2007

Procurement:
PFI

This is the largest hospital to be procured by the NHS in recent history and represents a major achievement in the quality of design and construction that is enhanced by the PFI Process.

The 1200 bed Acute Hospital incorporates a Cancer Centre with nine LINAC radiotherapy bunkers, a Women's Hospital, an operating suite of 24 theatres plus 4 day surgery theatres, a major trauma centre, a cardiac centre with four dedicated theatres and a Children's Hospital with dedicated Accident & Emergency.

In the early stages of the design an Arts committee was established by the trust to raise funds and procure significant works of art. The result is some stunning pieces of art most notably in the main entrance of the hospital.

Southmead Hospital PFI, North Bristol

Client:
Skanska Innisfree/North Bristol NHS Trust

Contractor:
Skanska

Location:
North Bristol

Role:
Architect/ Lead Consultant (as part of the architectural joint venture, Architecture NGM)

Value:
£370m approx.

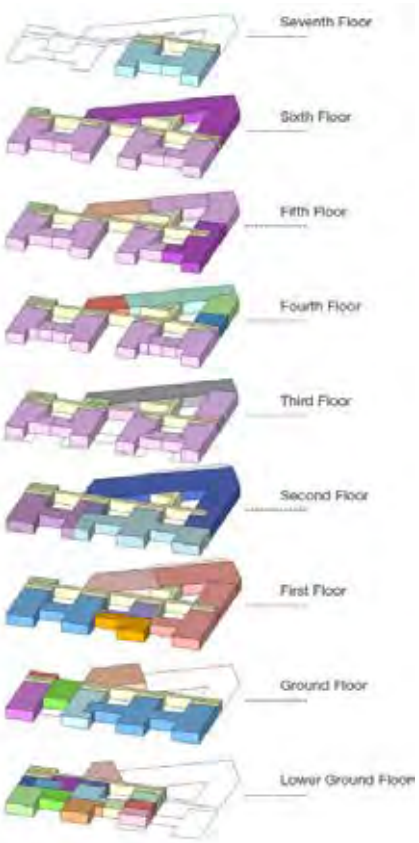
Completion:
Competitive Dialogue closed 19 February 2009

Procurement:
PFI – Competitive Dialogue

This is the first healthcare PFI project to be procured under the competitive dialogue process in England. The proposed development will contain 784 beds, 30 operating/procedure rooms, and a community hospital. 75% of the beds will be in single rooms.
Our masterplan proposed a new public square at the hospital's main entrance, and a new "conservation park" incorporating the hospital's historic buildings. The design proposals place diagnostic and treatment facilities and inpatient ward accommodation, on each side of a large atrium linking all departments

Our proposal featured many innovations, including

- An automatic natural ventilation/solar control strategy for the bedroom windows,
- Interstitial bathrooms,
- A unique layout for the 4 bed bays,
- Patient cabins and clean cores in the theatres,
- A semi-circular critical care unit with supporting areas at the centre, linked to the bedroom clusters by radial corridors
- Automatic guided vehicle capability.



Royal Liverpool University Hospital

Client:
The Royal Liverpool & Broadgreen University Hospitals NHS Trust

Location:
Royal Liverpool University Hospital

Role:
Trust Advisor

Value:
£350m

Completion:
2015

Procurement:
PFI

The renewal of the Royal Liverpool University Hospital forms a major element of the North Mersey Future Healthcare Project and comprises the development of a major new adult acute teaching hospital and support accommodation on the site of the existing building. The brief for the scheme has been developed over a period of several years with the primary focus being the treatment of emergency and acutely ill patients. The accommodation will comprise more than 680 beds, all provided in single bedrooms, with extensive emergency facilities provided in an integrated Emergency Department supported by a Critical Care Unit, Operating Department, Interventional Radiology Unit, Imaging and Endoscopy Departments. Out-patients facilities will include the St Pauls Eye Out-Patients and Research Centre, Renal Dialysis, Nuclear Medicine and Radio-Pharmacy, Diabetes Centre, Cardio Respiratory Unit and Therapies department. Support accommodation will include Laboratory Medicine Services, Mortuary and Clinical Research Unit. The overall area of 90,000 square metres, which includes a major new Energy Centre, will be constructed adjacent to the existing hospital and all services will be decanted from the existing hospital prior to an extensive programme of phased demolitions, site clearance and landscaping.

The Outline Business Case is due to be submitted in April 2008 and subject to approval Financial Close is anticipated in late 2010. The new hospital is projected to be fully operational in early 2015 with site works and demolitions taking place over a period of approximately three years leading to an overall completion in late 2017.

Designed For Life, Building for Wales

Client:
Welsh Assembly Government

Contractor:
BAM Construction

Location:
Throughout Wales

Role:
Architect

Value:
Current Project - £1.2bn

Completion:
Current framework is for 4 years, June 2006 – June 2012, with an option of a 2 year extension

Procurement:
NEC 3 option 3 (Target contract with activity Schedule)

In July 2006 Nightingale Associates were appointed as part of one of the successful supply chain Partner organisations on the Welsh Assembly Governments 'Designed for Life: Building for Wales' procurement framework. The key aims of the framework are to provide value for money, greater certainty in terms of cost and programme, better risk management and to allow for continuous improvement through collaborative working. Since the commencement of the DfL framework. Nightingale Associates have been appointed to provide design services for 5 major new healthcare schemes, including the £300m Health Vision Swansea project, and an extension to an existing Cancer Treatment Centre at Ysbyty Glan Clwyd, in North Wales.

Through the DfL framework Nightingale Associates are delivering 2 new build hospitals in South Wales with 100% single bedrooms, the 107 bed Ysbyty Aneurin Bevan, in Ebbw Vale and the 277 Bed Ysbyty Ystrad Fawr in Caerphilly. Through the collaborative working groups Nightingale Associates have been involved in a research project to evaluate the design of a single bedroom. The result of this work has informed the design of the single rooms within the Ystrad Fawr & Ebbw Vale hospitals. The Designed for Life framework will run for 4 years with an option to extend the appointments for a further 2 years. The overall value of DfL projects has been estimated at £3bn.

DGRI Redevelopment Project

Royal Infirmary Hospital, Dumfries Framework Scotland

Client:
NHS Dumfries & Galloway

Contractor:
BAM Construction

Location:
Dumfries and Galloway Royal Infirmary

Role:
Architect, Lead Consultant, Interior Design and Landscaping

Value:
£100m approx.

Completion:
Due April 2013

Procurement:
Frameworks Scotland

Nightingale associates have worked in collaboration with Tribal's market- leading health planners to win the first contract tendered in Scotland under the NHS procurement initiative, Framework Scotland.

The redevelopment of Dumfries Royal Infirmary Hospital will include new build ward accommodation for approximately 200 beds (100% singles in new build and minimum 50% singles in the refurbished areas).

Nightingale Associates has carried out extensive research on 100% single bedrooms under the "Designed for Life Framework" in Wales.

Also included in the scheme is reconfiguration of existing facilities to provide an integrated Emergency Department, Ambulatory Care Centre, Clinical Support Services and Administration Accommodation. Nightingale Associates are working closely with the Board and their design champion to deliver their "Design action plan" as set out in HDL 58, a policy for design quality for NHS Scotland.

North Middlesex University Hospital PFI

Client:
Bouygues UK Ltd for North Middlesex University NHS Trust

Contractor:
Bouygues

Location:
London

Role:
Architect, Lead Consultant

Value:
£82m

Completion:
2010

Procurement:
PFI

The project is for the development of an existing hospital campus to construct a new building to provide acute hospital services. The new building includes a Diagnostic Treatment Centre, A&E Department, Theatres & Critical Care Unit and Surgical Wards. The entrance rotundas provide entry points from the two principle directions of arrival to the hospital campus with an atrium space linking the new building to the existing hospital across a one storey change of level on site.

Broadgreen Hospital/ Cardiothoracic Centre

Client:
Broadgreen & Royal Liverpool University Hospitals NHS Trust/ Cardiothoracic Centre NHS Trust

Contractor:
Norwest Holst

Location:
Liverpool

Role:
Architect, Lead Consultant

Value:
£55m

Completion:
2006

Procurement:
ProCure21

This redevelopment of Broadgreen Hospital and the Cardiothoracic Centre in Liverpool was constructed in five major phases and involved the provision of extensive new-build accommodation as well as significant alterations and substantial extensions to existing facilities.
The completed development provides the Royal Liverpool & Broadgreen University Hospitals NHS Trust with a dedicated treatment centre which includes an orthopaedic centre, urology and general surgery facilities, associated wards and a day surgery unit and the Cardiothoracic Centre with an enlarged operating department, a new critical care facility, out-patient department and wards.

The scheme includes an innovative 'Barn' operating theatre which accommodates four operating tables within an open-plan area – an arrangement aimed at improving surgical teamwork and the sharing of expertise.
The adopted design solution exploits the sloping site and makes extensive use of natural light, courtyard landscaping and colour to enhance the patient environment, aid way finding and to create a high quality working environment for staff.

The Essex Cardiothoracic Centre, Basildon Hospital

Client:
Basildon & Thurrock University Hospital NHS Trust

Contractor:
BAM Construction

Location:
Basildon, Essex

Role:
Architect and Interior Design

Value:
£35m

Completion:
2007

Procurement:
ProCure21

The Essex Cardiothoracic centre is a tertiary cardiac care centre comprising operating theatres, catheter laboratories, critical care, surgical wards, outpatients and rehab. The centre also offers post graduate teaching rooms which are designed to allow for easy clinical expansion.

Designed to compliment the existing buildings, the scheme occupies the lower part of the south facing slope of hospital grounds affording the patient areas magnificent views over open fields towards the Thames estuary. The architectural design is focused around the building occupants offering natural daylight to virtually all rooms including the operating suites.

Mental Health Unit, Birmingham New Hospitals Project

Client:
Birmingham & Solihull Mental Health NHS Trust

Contractor:
Balfour Beatty

Location:
Birmingham on two sites: Queen Elizabeth Hospital and Showell Green Lane

Role:
Architect, Lead Consultant

Value:
£55m

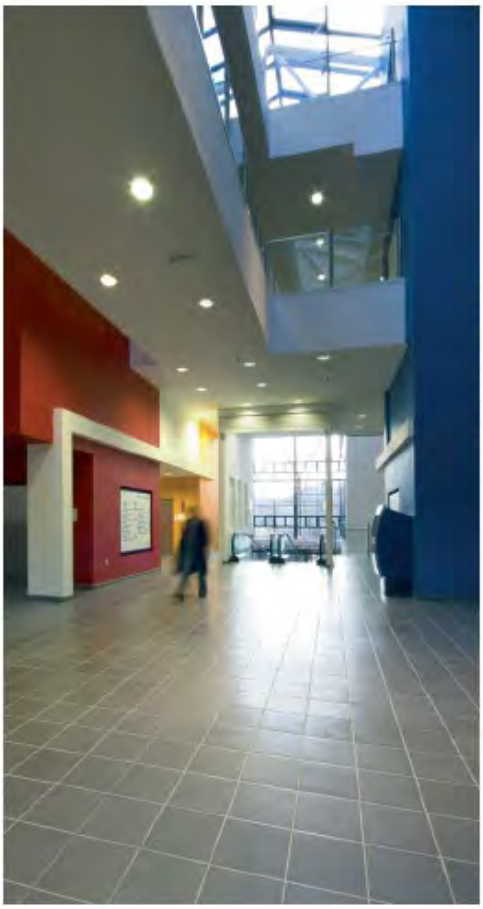
Completion:
2007

Procurement:
PFI

This Mental Health Unit is a key part of the £521m Birmingham New Hospitals PFI project. Spread across three buildings, the scheme will provide modern facilities with a campus feel, offering a safe therapeutic environment on a human scale. Five buildings across three sites will house 201 patients and also offer day care and outpatient facilities.

Facilities include older acute, acute adult, PICU, eating disorders, wards for acute patients, three wards for older patients, day hospital and specialist treatment including eating disorders, mother and baby, deaf services, neurophysiology, neuropsychiatry, offices and university accommodation.

Birmingham and Solihull Mental Health NHS Trust have commended the winning scheme for its successful blend of privacy and dignity for patients, plus the flexibility and effectiveness of its layout.
Natural light, colour, texture and external views have also been incorporated to enhance the therapeutic environment.



St Peter's Integrated Health & Leisure Centre

Client:
Burnley Borough Council

Contractor:
Eric Wright Group/ Eric Wright Construction

Location:
Burnley

Role:
Architect and Interior Design

Value:
£29m

Completion:
2006

Procurement:
NHS LIFT

The St. Peter's Centre, located in the very heart of Burnley, is a combined leisure and primary care centre housed in one building, extending to nearly 20,000m2. The population of Burnley suffers from higher than average rates of long-term illness, life expectancy is significantly lower than the national average and there are particular problems associated with teenage pregnancy rates, circulatory diseases and coronary heart disease. Many of these problems are associated with lifestyle. The centre addresses these issues directly by providing a more integrated approach to primary care, with valuable links between healthcare and exercise.

New indoor leisure facilities have been provided for the 90,000 residents of Burnley, including a swimming pool, sports hall, squash courts and dance facilities.

The project forms part of the East Lancashire LIFT initiative and was started to the raise the health and other needs of the local population, including the regeneration of the town centre. It is part of the NHS ten-year plan which identifies the urgent need to improve primary care premises.

This scheme was named Project of the Year at the RICS North West Awards in May 2007.

Ysbyty Alltwen, Porthmadog

North Meirionnydd / East Dwyfor Community Hospital

Client:
North West Wales NHS Trust

Contractor:
Allenbuild

Location:
Wales

Role:
Architect / Lead Consultant

Value:
£12.8m

Completion:
November 2008

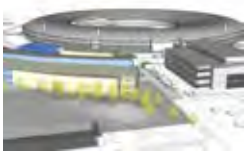
Procurement:
Traditional

A challenging yet inspiring project, Ysbyty Alltwen near Porthadog, North Wales is a highly sustainable Community Hospital carefully integrated into its setting on the edge of Snowdonia National Park.
The hospital site, which was previously used as a rail interchange and ironstone mine, took almost three years to complete, having undergone extensive consultation processes with local interest groups during its design process, in order to respond to the varied ecology of the surrounding. The vision was to deliver a therapeutic environment for patients and staff by exploiting the natural habitat on and around the existing site, maintain the relationship between the exterior and interior by maximising the views out of the building. The choice of external materials was key to the success of the building's relationship with the landscape. Local stone, white render, and natural timber cladding are all appropriate to the local vernacular and the scale of the building.

The well designed hospital offers a 30 bed ward, Outpatients Department and a Day Hospital, as well as Minor Injuries and Radiology Unit and a large base for the hospital's Community Mental Health Team. Working closely with the Trust and the Centre for Alternative Technology in Machynlleth, our design team championed a number of sustainable design principles. The building uses bio-fuel as a primary natural heating source and the scheme has been designed around an internal winter garden space which is integral to the proposed natural ventilation and heating strategies. Other initiatives include a green roof and rain water harvesting. On the same site we have also been assisting the Trust in preparing a feasibility report with Welsh Health Estates, which investigate the erection of a wind turbine on the site which could not only supply the Hospital with power but the whole village of Tremdaog.

D4 Other Relevant Experience (Major Projects)

Provide any evidence of non-health projects that demonstrate the organisation's experience in the last three years relevant to its proposed role in the project. Please limit to 12 entries. Any specific experience of live operational environments should be clearly identified. Similarly, particular areas of innovation should be highlighted. Any project information/descriptor should be limited to one side A4 (font size 10tp) per project.

Project Name and Client Name	**Capital Cost £m**	**Status of project**	**Dates of involvement**	**Services provided/ Company's role**
University of Oxford Old Road Campus Research Building Oxford University Estates Directorate	£55m	Completed 2007	2004-2007	Lead Consultant and Architect (co-operative role with Make)
University of Oxford – Oxford Molecular Pathology Institute Oxford University Estates Directorate	£23.5m	Due for Completion November 2010		Lead Consultant and Architect, Laboratory Planning (co-operative role with Make)
Research Complex, Rutherford Appleton Laboratory Harwell Science and Innovation Campus Science & Technology Facilities Council	£19.9m	On site Due for Completion September 2009	2006-2009	Architect and Lead Consultant 

Project Name and Client Name	**Capital Cost £m**	**Status of project**	**Dates of involvement**	**Services provided/ Company's role**
University of Warwick, Coventry Clinical Science Building University of Warwick	£25m	Completed October 2006	Project start December 2001 Project Completion 0f Coventry New Hospitals PFI 2007	Architect and Health Planner
Keele University, Staffordshire Clinical Education Centre North Staffordshire Hospital/ Keele University	£14.5m	Completed 2006	Project Start November 2001	Architect and Lead Consultant
Tower Hamlets BSF Tower Hamlets Council Bouygues UK Ltd for Tower Hamlets Council Bethnal Green Technology College Oaklands School Ian Mikardo School	£180m £14.25m £9.14m £2.6m	On site	Completion due February 2011 Project start February 2009 Project start February 2009	Architect, Lead Consultant and Interior Design

Project Name and Client Name	**Capital Cost £m**	**Status of project**	**Dates of involvement**	**Services provided/ Company's role**
Croydon College Croydon College	£85m	Phased development Completion 2010	Masterplan in 2004 Planning for the Tower in 2007 ongoing	Masterplanner, Architect, Interior Designer
Guildford College, Stoke Paul Campus Guildford College	£90m	Awaiting LSC approval	2006 – Jan 2007	Masterplanner, Architect and Lead Consultant
Lewisham College, Deptford Campus Guildford College	£90m	Completed Feasibility	December 2008	Masterplanner, Architect
East Berkshire College Langley East Berkshire College	£45m	Completion 2013	Master plan 2006 2 phases	Masterplanner, Architect

Project Name and Client Name	**Capital Cost** **£m**	**Status of project**	**Dates of involvement**	**Services provided/ Company's role**
Varndean College, Brighton Varndean College	£30m	Awaiting LSC approval	Completion due 2010	Masterplanner, Architect
Redcar & Cleveland College Redcar & Cleveland College	£17,7m	Completed	Completion September 2008	Architect Lead Consultant

Old Road Campus Research Building, University of Oxford

Client:
Oxford University Estates Directorate

Contractor:
MACE Plus

Location:
Oxford

Role:
Architect (co-operate role with Make)

Value:
£55m

Completion:
2007

Procurement:
2 Stage design and build with novation

The Old Road Campus building is a new stand alone £50m research laboratory for the Medical Sciences Division and the Engineering Sciences Division of the University of Oxford. The building comprises of unique flexible research laboratory accommodation for the Institute of Biomedical Engineering, Department of Clinical Pharmacology, the Structural Genomics Consortium, the Radiation Oncology and Biology Unit, the Edward Jenner Institute for Vaccine Research and the Ludwig Institute for Cancer Research.

The project was delivered on a “live” campus site surrounded by similar university laboratory buildings in twenty four hour occupation and use.

Access had to be maintained to all buildings and all research programmes had to continue uninterrupted. This process was further complicated as neighbouring buildings had vibration sensitive contents/ experiments that also had to be taken into account.

A key design feature externally was the unique pixellated cladding which was an innovation that allowed the building to blend into its landscape and reduce its apparent bulk.

University of Oxford
Oxford Molecular Pathology Institute (OMPI)

Client:
Oxford University Estates Directorate

Contractor:
TBA

Location:
Oxford

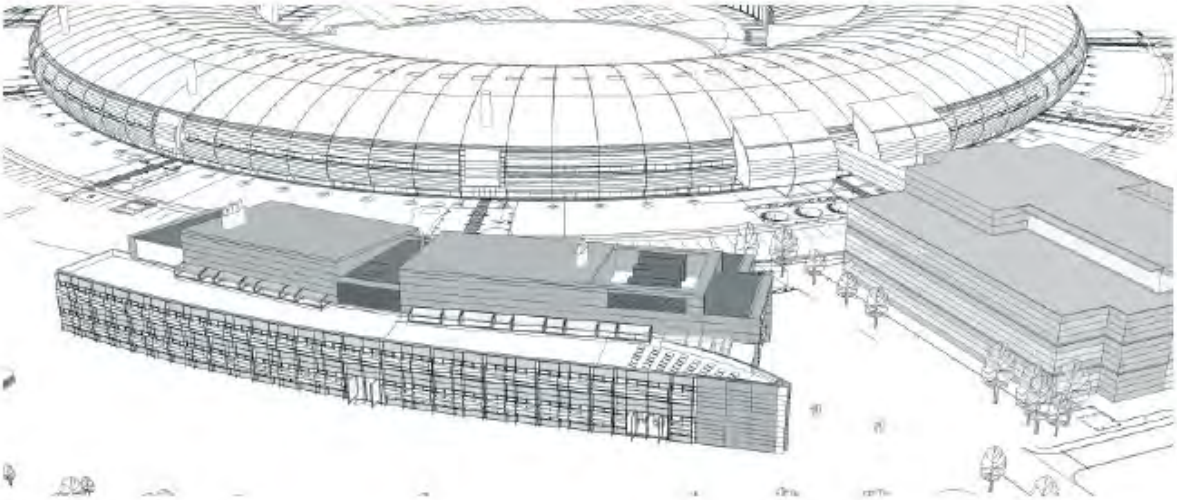
Role:
Lead consultant / Architect / Lab Planning

Value:
£23.5m

Completion:
November 2010

Procurement:
2 Stage design and build with novation

Designed in collaboration with MAKE, this competition-winning scheme creates a new facility adjoining the Sir William Dunn School of Pathology at the University of Oxford. The proposals replace an existing building to the north-west of the Dunn School, equipping the research institute with unheeded, state of-the-art flexible laboratory spaces and new computer services facilities. Laboratory spaces and office facilities are laid out around a grand open staircase which rationalises circulation and creates a social focal point within the building. In appearance, the building offers a calm and respectful counterpoint to the Pevsnerlisted, WIlliam-and-Mary style of the Dunn School, subtly reflecting its emphatic horizontal expression and offering a modern interpretation of the cornice and plinth detailing of the original building. The palette of materials has also been selected to chime with the red brick and stone detailing of the original building. A stone-clad core is articulated as the spine of the building, while a system of horizontal terracotta louvres shades the glazed northern and southern facades from solar gain. Vertical shading fins are integrated with the louvres along the north facade in order to shield against morning and evening low-angle sunlight. The scheme has been designed to meet 20% of its energy requirements through on-site renewables; these include a CHP plant, borehole ground-source heating, solar water heating and an absorption cooling process which uses the excess heat generated by computing equipment to cool the building.



Research Complex, Rutherford Appleton Laboratory

Client:
Science & Technology Facilities Council

Contractor:
M & W Zander FE UK Limited

Location:
Harwell

Role:
Architect, Lead Consultant

Value:
£19.9m

Completion:
2009

Procurement:
GC Works Design and Build

Nightingale Associates are Lead Consultant and Architect for this new £20m research complex at the Harwell Science and Innovation Campus. The Campus is being developed as a leading global centre for science and innovation and will become home to some of the world's most prestigious research facilities.

The new complex will provide around 5500m2 of laboratory facilities for both life and physical scientists using the UK'S new synchrotron, the Diamond Light Source, as well as other Government funded world class scientific resources based at the campus. These include ISIS, the neutron spallation source, and the Central Laser Facility, both operated by the Science and Technology Facilities Council.

The new building will be operated by the Medical Research Council.

The project incorporates a number of energy saving features and the design is expected to achieve a 'very good' rating using BREEAM.

Clinical Sciences Building Coventry

Client:
University of Warwick

Contractor:
Skanska

Location:
Coventry

Role:
Architect

Value:
£25m

Completion:
2006

Procurement:
Design and Build, PFI

The Clinical Sciences Building forms part of the £310m Coventry New Hospitals Project PFI. The building acts as a dedicated education and research block linked to the Acute Hospital.

Nightingale Associates was lead consultant and architect for a new 10,450m2 combined teaching and research science building comprises 4000m2 of basic research laboratories. The research wing is a self contained department separated from the teaching block by shared catering and lounge (interaction) areas. Designed for adaptability the accommodation includes generic primary lab modules with associated secondary and write up spaces together with ACDP cat 2 and 3 support labs. Teaching facilities include a 250 seat lecture theatre,1500m2 library, a suite of 40 person seminar rooms and a specialist clinical skills department, a teaching mortuary with eight post-mortem tables, an isolation room with dedicated viewing gallery and body storage for 120 bodies. A classroom & teaching facilities for 300 students, a 142 bed Mental Health unit, Centre for Reproductive Medicine and Computer Centre.

Keele University, Staffordshire

Client:
North Staffordshire Hospital/ Keele University

Contractor:
Laing O'Rourke

Location:
Staffordshire

Role:
Architect, Lead Consultant

Value:
£14.5m

Completion:
2006

Procurement:
ProCure21

The Clinical Education Centre is an outstanding medical education facility for both the University Hospital of North Staffordshire and Keele University. It is one of the pilot schemes for the NHS Procure21 - designed to meet the ever-changing needs of Clinical Education, with emphasis on flexibility of use. The underlying theme of the project and main objective of the Client's brief was to create a flagship building which would raise the profile and status of both the Hospital and University.

The design provides an integral education centre, undergraduate medical school, Nurses Education Centre and was built to meet the highest clinical standards of contemporary medical environments.

An atrium at the centre of the building links all facilities. A drum shaped lecture theatre dissects the atrium. This space has been designed to incorporate different forms, balconies, platforms, and views. It acts as a heart to the facility and encourages medical students to meet informally and share knowledge.

The Design Team enjoyed a productive working relationship with the local Authorities, who were very supportive of the innovative design, and it has since won awards from Stoke City Council for its design quality.

Tower Hamlets BSF; Bethnal Green Technology College

Client:
Tower Hamlets BSF

Contractor:
Bouygues UK Ltd.

Location:
London

Role:
Architect

Value:
£180m

Completion:
2011

Procurement:
Design and Build, PFI

Launched by the Government in 2003, Building Schools for the Future (BSF) is a programme which aims to rebuild or refurbish every secondary school in England over a fifteen year period, with a projected budget of £45 billion.

Tower Hamlets' BSF programme will invest over £180million in secondary schools to provide world class 21st century facilities that transform the educational outcomes of young people. It also aims to bring schools closer to the community by enabling shared access to improved facilities such as Information and Communication Technology (ICT). This will place schools at the heart of the community, providing local people with increased opportunities for lifelong learning and community development.

Bethnal Green Technology College will be in the first wave of schools in the Borough to be developed under BSF, and is Tower Hamlets' second Pathfinder school. The investment from BSF offers a great opportunity for the College to reshape itself with a new style entrance, making the school more welcoming, accessible and secure.

A planned combination of new buildings and refurbishment will radically improve teaching facilities, enabling the college to engage more effectively with parents and the local community. The improvements to the outdoor PE area will also offer an exciting opportunity for the school to help support the London Olympics, as the school has been identified as a potential training centre.

Croydon College, Phased Development

Client:
Croydon College

Contractor:
Various

Location:
Surrey

Role:
Masterplanner, Architect, Interior Designer

Value:
£85m

Completion:
2010

Procurement:
Phased, Traditional and D&B

Nightingale Associates is working with Croydon College to deliver a phased estates strategy which was translated into a master plan by our designers in 2004. The College's vision is to strengthen its position as a 21st century learning provider, creating a focal point for the community.

We have also supported the college's aspirations in designing a new mixed use, 30 storey high rise development, the lower levels zoned for educational use, the upper floors residential accommodation. The tower is a unique example of placing education at the heart of the community, with the ground floor of the design providing a public arcade and major pedestrian route from Croydon East Station to the Queens Gardens.

After an exhaustive consultation process including GLA and CABE reviews, the tower achieved planning consent in February 2007.

Currently on site is phase 3, a five storey glass rotunda, which houses a new library. The entrance is welcoming; its glass façade provides a transparent connection with the community and panoramic views of the adjacent gardens.

The external lighting has been designed in the ethos of the Croydon Skyline Project, a network of twenty buildings that are the subject of large light based art installations. This was a Millennium Commission funded project which promotes civic pride, night-time activity and generally improving Croydon's image.

Guildford College, Stoke Park Campus

Client:
Guildford College

Contractor:
TBA

Location:
Surrey

Role:
Masterplanner, Architect

Value:
£90m

Completion:
December 2008

Procurement:
Feasibility/ Masterplanning

Guildford College's Stoke Park Campus is a £90 million development involving the complete overhaul of the College's facilities. The 28,000m2 scheme will include a number of unique and bold features, including a series of individually-designed 'Pavilions in the Park', which will form elegant 'Academies', each displaying its own identity within a consistent architectural language. There will also be a total integration of landscape and buildings, offering an opportunity for outside 'rooms' and teaching spaces for the College's 12,000 students.

Nightingale Associates has been working with the college to develop a proposal that will transform the college's built environment in order to conform to new Government initiatives aiming to close the skills gap by 2020. The design of the scheme was based on the aims of the College, of which the following were paramount:

- Boldness – to look beyond the tried and tested
- Creativity – to energise and inspire the college and the wider community
- Supportiveness – to provide a safe and comfortable environment for students and staff
- Enterprise and efficiency – to ensure that all spaces support exciting and varied functions
- Flexibility – to accommodate current and evolving teaching trends
- Future-proofing – to enable space re-allocation and reconfiguration
- Planning approval was achieved in December 2008.

Lewisham College Deptford Campus

Client:
Guildford College

Contractor:
TBA

Location:
Surrey

Role:
Masterplanner, Architect

Value:
£90m

Completion:
December 2008

Procurement:
Feasibility/ Masterplanning

Nightingale Associates was appointed in January 2007 to undertake a Feasibility Study and Scheme design for the Deptford Bridge Campus Redevelopment of Lewisham College. The college were looking to dispose of their Lewisham Gateway Campus and to concentrate their estate at Deptford Bridge.

The masterplan developed the concept of the 'metropolis' and includes 24,000m2 residential and commercial, as well as 40,000m2 of education useage.

The scheme enhances the quayside with public access linked to adjacent developments and the Ravensbourne Canal. A series of residential blocks cantilever over the commercial and college uses in the podiums and rise toward the landmark college tower on the corner of Deptford Church Street and the A2 Blackheath Road, a major road into central London.

The project gained Application in Principle funding from the Learning and Skills Council and has tendered through a developer led procurement route.

East Berkshire College Langley

Client:
East Berkshire College

Contractor:
TBA

Location:
Berkshire

Role:
Masterplanner, Architect

Value:
£45m

Completion:
March 2013

Procurement:
2 Stage Design and Build

East Berkshire College is a large-sized college of general further education based at two sites. The Windsor Campus, also designed by Nightingale Associates was opened by the Queen in March 2007.

The college is now focusing on the redevelopment of their main site in Langley, Slough. The Langley campus offers conventional vocational study including significant entry level provision and delivery of 500 apprenticeships.

Nightingale Associates was appointed to master plan the new campus in 2006. Impressed with the design vision, East Berkshire College re-commissioned the design team to deliver the design in 2007.

The project totalling 18,172 m2, is to be carried out in two phases and will replace all the existing buildings on site, most of which date from the 1970's and are dilapidated and extremely space inefficient.

The design of the building aspires to raise the profile of the college and reflect the aspirations of the college and its community. To this end, the built form uses high quality materials and the design solution seeks to contribute positively to the public realm.

Varndean College, Brighton

Client:
Varndean College

Contractor:
TBA

Role:
Masterplanner, Architect

Value:
£30m

Completion:
2010

Procurement:
TBA

Varndean College is a successful Sixth Form College based on a single campus located to the north of Brighton city centre.

Nightingale Associates was commissioned to undertake a Feasibility Study and Masterplan of its proposed development and has helped to submit an 'Application in Principle' to the Learning & Skills Council. The College's mission is to replace substantial parts of its existing estate which are life-expired and no longer fit for propose. In addition, the College is requiring a significant expansion and provision of curriculum, support and enrichment space.

Nightingales have progressed from producing a masterplan to recently being commissioned to deliver the entire 13000m2 new build sixth form college. The design will include an atrium, LRC, hydrotherapy pool, ALDD Unit, sports hall and nursery.

Redcar and Cleveland College

Client:
Redcar and Cleveland College

Contractor:
HBG Construction

Location:
Redcar

Role:
Architect Lead Consultant

Value:
£17.7m

Completion:
September 2008

Procurement:
Traditional

Nightingale Associates was appointed by Redcar and Cleveland College to design a new 12,000m2 state-of-the-art building to meet the needs of the College's diverse and progressive curriculum.

The new facilities provide a 21st Century education environment, transforming the students' learning experience. It has given the College a landmark presence in a prominent location, which is housed within a single building including many architectural features.

The design has integrated aesthetically pleasing spaces with sustainable features. These ensure that current building standards are exceeded, with increased energy efficiency and reduced CO2 emissions. Consideration has also been given to whole life-cycle costing to ensure that the building is easy to maintain and cost effective to run.

The building is also equipped with unique and innovative technology, such as LCD display screens situated at key points within the building to provide instant messaging and information services.

In the classrooms, interactive whiteboards, audio-visual equipment, extensive data cabling and wireless connectivity ensure that learning facilities are suitably 'future-proofed'; and advanced security and safety systems feature programmable access cards which take the place of locks and keys.

D5 Provide an analysis of the staff currently employed in healthcare projects according to seniority as follows:

Grade	**Health Projects**	
	No	**%**
Partner	0	
Director	27	8.4
Senior Manager	27	8.4
Manager	10	3.0
Other (specify)		
Architect	53	16
Architectural Assistant	60	18.1
Architectural Technician	58	17.5
Totals	**235**	

UPDATE ON THE ISOLATION ROOMS FOR THE NEW SOUTH GLASGOW (ADULT) HOSPITAL

The following indicates the isolation rooms required for the New Adult Hospital.

Haemato-Oncology Ward

Sealed ward with hepa filtration positive to the rest of the hospital and all highly filtered air to H13 i.e. 99.95%

(NB - requires a negatively pressurised Treatment Room within the Haemato-Oncology Unit for administration of pentamidine inhalations.)

Respiratory Wards (serving rest of medical)

3 negatively pressurised sealed rooms (without ante rooms) - located together

Renal inpatient wards

2 positively pressurised sealed rooms with negatively pressurised ante-room/s – located within the 20 bedded higher acuity ward

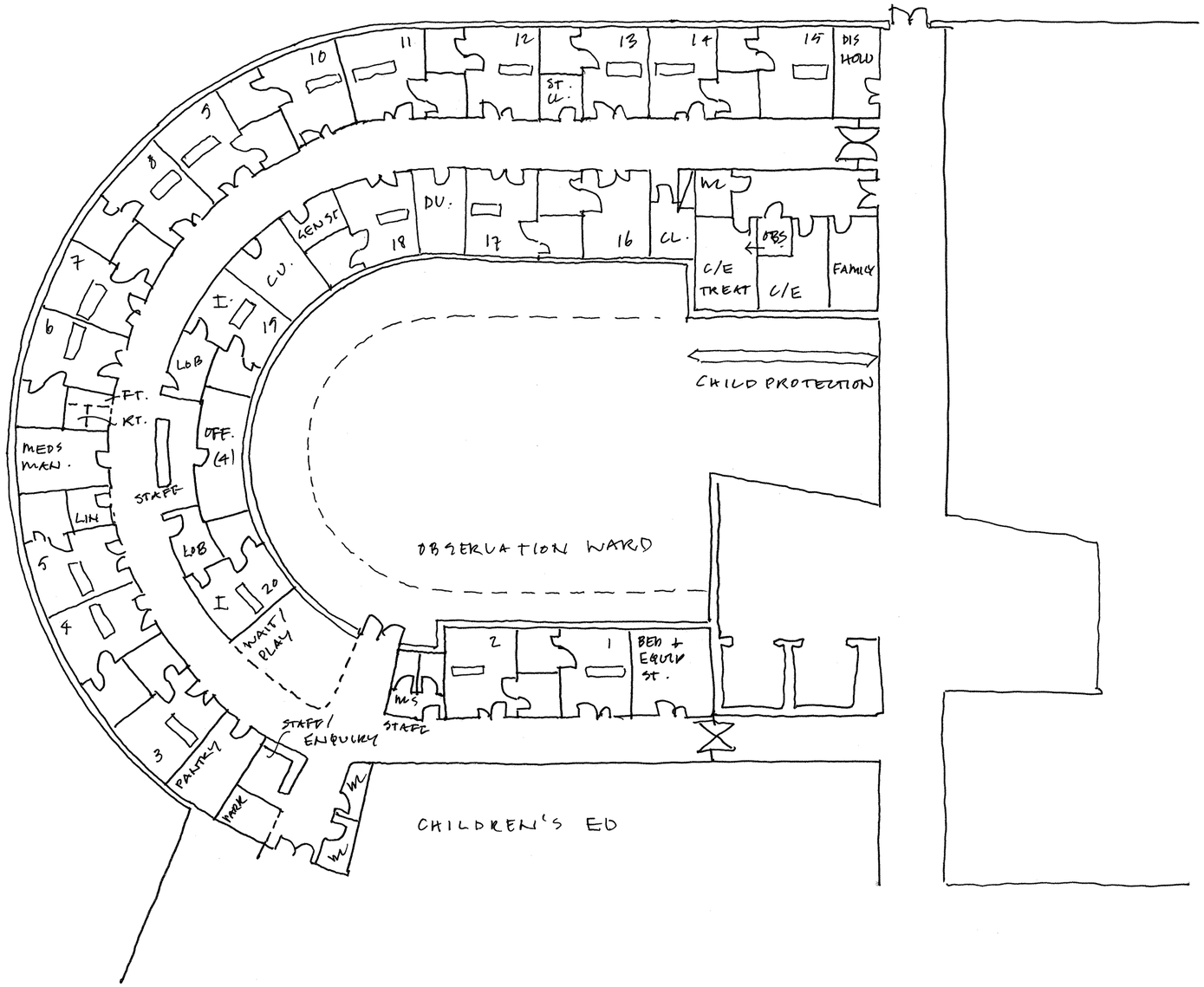
A&E (Emergency Department)

2 negatively pressurised sealed rooms (without ante-rooms) - location as described within the Clinical Output Specification

Critical Care (includes ICU/Surgical and Medical HDU)

10 negatively pressurised sealed rooms with ante-rooms – location as described within the Clinical Output Specification

All in accordance with SHPN4 and SHTM 03-01



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AND CHILD PROTECTION
2010-03-10 2ND ITERATION

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NEW CHILDREN'S HOSPITAL

Clinical Output Specification

AREA	CARDIAC SERVICES

1. INTRODUCTION

Since 2000 the Royal Hospital for Sick Children in Glasgow has been the sole provider of cardiac surgery and interventional cardiology for the children of Scotland. Currently the unit manages congenital heart abnormalities from the fetus to 16 years of age, although in line with the majority of the UK the aim is to develop a single unit caring for congenital heart disease from fetus to old age. Adult congenital heart disease is currently managed in a unit based at the Western Infirmary and Golden Jubilee Hospitals. Close collaboration leading to a single service comprising collocated adult and paediatric units is the long term aim.

At present all paediatric heart abnormalities are managed in Scotland with two exceptions. Children requiring cardiac transplantation are referred to either of the two designated national UK centres. Neonates with hypoplastic left heart syndrome are currently referred to a further two centres in England with large programmes, although this will be managed locally within the next 12 months.

Currently, major aspects of the service including cardiac surgery, interventional cardiology (including electrophysiology), neonatal cardiology and extracorporeal support, are funded by the National Services Division.

The service comprises many different facets as outlined below:

1. Fetal Cardiology. This is run jointly with fetal medicine specialist obstetricians in Glasgow, Edinburgh, Dundee, Kirkcaldy and Aberdeen.
2. Out-patients. The main outpatient service is centred on Glasgow (9 weekly clinics and 2 fortnightly clinics) and Edinburgh (4 weekly clinics). Additionally out-reach clinics, run in conjunction with local paediatricians, are held at 14 district hospitals throughout Scotland.
3. In patients.
    a. Cardiology Ward
        i. Currently there is an 18 bed cardiology and cardiothoracic surgery ward that receives acute admissions and transfers, patients admitted for elective surgery and cardiac catheter procedures, patients admitted to start new medical therapy, patients requiring observation and patients having non-cardiac procedures who are best managed in a specialist cardiac environment. In addition patients are transferred to the ward from intensive care following cardiac surgery for a period of close monitoring prior to discharge.

b. PICU (Paediatric Intensive Care Unit)
    i. Cardiology and cardiac surgery patients form a substantial proportion of the paediatric intensive care workload. Currently there are 7 designated beds for cardiac surgery and interventional cardiology, although this number may increase as the number and type of procedures undertaken changes.
    ii. Although there are 7 designated cardiac beds, in practice flexible working with the general intensive care beds permit the most efficient use of the beds available. At present there are 26 ICU/HDU beds available for general and cardiac use. It is anticipated that developments in cardiac surgery (e.g. hypoplastic left heart) and general ICU will increase demand for available beds.

c. NICU (Neonatal Intensive Care Unit)
    i. Newborns with known or suspected congenital heart disease, requiring inpatient investigation and treatment are admitted to the neonatal intensive care unit. In many cases this will be after elective delivery at Yorkhill following an antenatal diagnosis. This avoids transfer from another hospital in the neonatal period.

4. Cardiac Investigation Department. Cardiology in children relies heavily on specialist non-invasive investigations including electrocardiograms, echocardiograms, ambulatory ECG monitoring, pacemaker interrogation and exercise testing. Such tests are organised and run by a specialist group of cardiac physiologists who provide the service for inpatients and outpatients in the cardiac investigation department (CID).
5. Cardiac Operating Theatre. Cardiac surgery is undertaken in a specialised theatre located within the main theatre block. Although of a similar overall design to other theatres, it has a larger central operating area to accommodate the extra equipment required for cardiac surgery, a larger storage area for imaging and recording equipment as well as specialised consumables such as heart valves, conduits and so on. It is currently in use >90% of the time. Separate but in close proximity is the perfusionist's room where the heart bypass machines required for every open heart operation are stored, maintained and setup. Currently it also doubles up as the extracorporeal support office/storage area.
6. Cardiac Catheter Laboratory. Cardiac catheterisation, catheter intervention, invasive electrophysiological procedures and pacemaker implantation all require a specialised area known as a catheter laboratory. This area is essentially an operating theatre in which the operating table is surrounded by specialist X-ray equipment that allows the procedures to be undertaken using X-ray guidance. Cardiology currently uses this area 60% of the time with interventional radiology using occupying the laboratory a further 20%.
7. Office accommodation. This is currently accessed by the 4 cardiology consultants based full time in Glasgow, 2 additional cardiologists who visit from Edinburgh, 4 consultant cardiac surgeons, 5 secretaries, 2 data mangers and 4 cardiac liaison nurses. It is recognised that various solutions are being considered for office accommodation but accommodation for the departmentally based staff will be needed in the respective areas.

2. LOCATION AND LINKS –

Accommodation Requirements

Outpatients
Adjacency of the cardiac services outpatient area with the cardiac investigation department would be helpful to avoid unnecessary patient journeys. Approximately 2 rooms per session are required continually.

Cardiac Investigation Department (CID)
At present the cardiac investigation department has the following accommodation:

4 echo rooms (blacked out and air-conditioned)
1 ECG/pacing room
1 Exercise testing room (air-conditioned)
1 ECG/ambulatory recording analysis room (air conditioned)
3 Offices for senior staff (Cardiac physiologists and Catheter lab sister)
1 Data collection area (air conditioned and containing cardiac database server)
1 Data viewing room (black out and air-conditioned)
1 large meeting room/lecture theatre (air conditioned, multiple AV projection systems)
2 changing areas (including showers)
1 staff area
1 patient toilet area
1 staff toilet area
1 DSR area

Although currently adequate, the incorporation of a dedicated cardiac outpatient (as above) would solve several current problems and allow a shared waiting/reception area.

One of the major facilities within the CID is the meeting room which is pivotal in the management of children with congenital heart disease. Section 8.5 below, illustrates the number of assessments each child with congenital heart disease undergoes. On a weekly basis this information is collated and assessed by all consultant staff at single "joint cardiac conference" (JCC). This requires projection (on at least 2 screens simultaneously) of data fed from the following sources.

Networked computer : access to cardiac database
Laptop computer : for externally derived data/presentations
PACS computer : X rays, CT scans, MRI
Echo server : current and previous echocardiograms
Angiography server : current and previous angiograms
Data visualiser : ECGs, hand written/drawn data
Teleconferencing system : external physician input
Live feed from cath lab/theatre: teaching and observing

In addition to weekly meetings this room is used on a daily basis for surgeons/cardiologists reviewing data immediately prior to undertaking cases, for telemedicine consultations and to run internal and external teaching sessions and courses.

The room needs to accommodate 30 people, be air-conditioned, and have duel data projection onto white screens and multiple networked data points to feed in the necessary external links.

Inpatient ward area
The there will be a 14 bed unit which will be adequate for the current level and pattern of service and can accommodate spikes in activity. 1 open areas of 4 beds located close to the central nurses station would facilitate the close monitoring required by patients returning from intensive care and cardiac catheterisation procedures. A further 10 cubicles would then allow isolation of patients to prevent the spread of infection, to protect immunologically compromised children and to help nurture parent/baby relationships in the convalescent phase of care. Centralised ECG monitoring is now standard in most cardiac centres combined with the ability to review stored monitored data for current inpatients. Together with a telemetric monitoring facility this would greatly enhance the ability to monitor and diagnose heart rhythm problems affecting inpatients, an currently problematic area.

An additional dedicated blacked out imaging room with IT connections to the central echocardiographic server would allow ward patients to undergo the necessary pre and post operative assessments without travelling to and from CID. In addition it would provide a dedicated space on the ward to scan children out of hours and permit on ward review of archived echo data on current in patients.

A treatment room is at present available for taking blood and examining patients as they are admitted for treatment. This facility is essential.

Many patients attend the ward for review soon after discharge, either to look over an infected wound, check on weight and feeding, check blood levels or for a more in depth clinical assessment. A dedicated clinical review room/area would minimise the extent to which this interferes with the ongoing management of current inpatients and help prevent cross infection.

The ward is also an area where a great deal of undergraduate and post graduate education takes place. Currently much of this is undertaken standing in patient areas or the central corridor in the absence of a dedicated teaching area. A dedicated teaching area could also double as a parent interview room and an area for parents to wait whilst their child is undergoing investigations or treatment.

Catheter Laboratory
The catheter laboratory in place at Yorkhill has worked well since its opening in 2007. The layout is adequate, although not excessive, with only minor niggles regarding an inadequate scrub area and inadequate storage space. Both would need to be enlarged in the new lab. Otherwise, a similar size and specification facility would be appropriate in the new hospital with consideration given to potential development of links with cardiac theatre and MRI in due course in terms of immediate adjacency and future-proof construction of floor, walls and ceiling. This would entail building to the combine standards of a cardiac operating theatre as well as a fluoroscopy room.

The addition of a dedicated anaesthetic room was a great improvement on the old system, even without a recovery area. It is anticipated that the shared theatre recovery area will be used the in the new hospital circumventing this issue.

There are important regulations governing construction of a cardiac catheter laboratory because of the radiation usage. Currently these are been put together in conjunction with diagnostic imaging.

Cardiac Theatre
The present cardiac theatre size is barely adequate. An increase in the width would improve access considerably and allow easier incorporation of additional equipment such as a permanent image intensifier for on table angiography, dedicated cardiac ultrasound equipment and fixed video recording equipment. Access must also be wider than normal to permit the movement of patients attached to extracorporeal support.
Cardiac theatres differ from standard theatres in that they require better and wider temperature control, separate piped gas/suction outlets for the heart bypass equipment and greater storage areas for the large amount of equipment and consumables peculiar to cardiac surgery.

External Department Links
Whilst the table below outlines the necessary adjacencies of all the different facets of cardiac services, because of the nature of the service certain critical links are essential. These revolve mainly around the procedural side of the service and concern the dedicated cardiac theatre(s), cardiac catheter laboratory, MRI suite and the paediatric intensive care unit.

1. As of 2007 there has been an increasing trend towards hybrid procedures in which the surgeon and interventional cardiologist perform a combined operation requiring a single space acting as both a cardiac theatre and a catheterisation laboratory. The new cardiac catheter laboratory which opened this year has been set up in this way and a similar facility is vital for the new hospital. With increasing complexity of cardiac surgical procedures there is an increasing need to take patients directly from cardiac surgery to the cardiac catheterisation laboratory to ascertain the success or otherwise of an operation and in some instances further treat the child using interventional catheterisation techniques. To facilitate this model of care and minimise the risk of transporting a critically ill child, the catheterisation laboratory and cardiac operating theatre should be immediately adjacent. This would have the added advantage of improving communication between surgeon and interventional cardiologist during routine procedures.

2. Interventional cardiac MRI is an emerging technique in which a child is moved back and forth between the MRI scanner and the catheter lab during a procedure to improve the safety and effectiveness of a transcatheter intervention. Although in its infancy, two UK centres currently have a dedicated combined MRI/interventional catheter laboratory suite permitting this type of procedure (Evelina Childrens Hospital and Great Ormond Street Hospital), however philosophically both have been designed with different aims in mind. Evelina has a single long room with MRI scanner at one end and image intensifier at the other. Their aim is to permit catheter intervention within the MRI suite. GOSH on the other hand have adjoining rooms with a track between to allow the end result of interventions to be assessed immediately by MRI. It may be unreasonable to expect a similar facility in the new Glasgow Children's Hospital as the place of interventional cardiac MRI in patient management has not been fully established, but it is prudent to make allowance for this to be developed in the future were it to become a necessary standard of care. Therefore the catheter laboratory and MRI suite should be situated to permit conversion to a combined facility in the future. This would be best achieved by having the rooms immediately adjacent, and

each built to the necessary standards for MRI scanning *and* cardiac catheterisation.

3. Children routinely require transfer to PICU after cardiac surgery and occasionally after interventional cardiac catheterisation. Not infrequently critically ill patients on the paediatric intensive care unit require either cardiac surgery or interventional cardiac catheterisation during there stay, at times whilst connected to an extra corporeal cardiopulmonary support machine. The movement of such children is a period of very high risk and therefore its duration should be minimised and there are strong clinical governance reasons why cardiac theatre and the cardiac catheter lab should be located in close proximity to PICU.

Close to	**Reason**	***Category**
1.Fetal Cardiology		
Office accommodation	Ease of access	3
2.Out Patients		
Cardiac investigation department (CID)	>60% of outpatients require investigations at visit.	2
3.Cardiology ward		
PICU	Minimise transfer times of patients to ward from PICU	2
Cardiac theatre	Minimise transfer times of patients to theatres	2
Catheter lab	Minimise transfer times of patients to and from catheter lab	2
CID	All patients require CID based investigations	2
4.CID		
Out patients	Above	2
Cardiology ward	Above	2
Cardiac theatre	Staff frequently work in theatres	3
Catheter lab	Staff frequently work in catheter lab	3
PICU	Staff frequently work in PICU	3
5.Cardiac theatre		
PICU	Minimise transfer times of critically ill children after heart surgery	1
Catheter lab	Minimise transfer. Hybrid procedures	1
Cardiology ward	Above	2
CID	Above	3
NICU	Minimise transfer times of critically ill children for heart surgery	3
MRI	Minimise transfer. Combined procedures	1
6.Catheter Lab		
Cardiac theatre	Above	1
MRI	Minimise transfer. Combined procedures	1
PICU	Minimise transfer times of critically ill children	1
Cardiology ward	Above	2
Theatre Recovery	Allow use of theatre recovery area by patients undergoing catheterisation	2
CID	Above	3

*1= Essential adjacent
*2 = Important 2 minutes walking
*3 – Desirable 5 minutes walking

3. ACTIVITY

4. TRENDS

No major trends in overall activity anticipated. The planned development of a hypoplastic left heart service will lead to an increase in surgical procedures and some increase in investigations (some investigations already take place at RHSC). The aspiration to develop a combined adult and paediatric congenital heart service at the Southern general site in the future (not currently planned) would increase surgical and investigative activity by around 100 cases pa.

5. HOURS OF SERVICE

Outpatients

Current Hours of Service

Day	AM/PM	Clinic	Recurrence	Rooms
Monday	PM	Dr. Knight	Weekly	2
Tuesday	PM	Drs. Houston/Richens	Weekly	3
Wednesday	AM	Pacing clinic	Fortnightly	2
	PM	Drs. Mcleod/Knight	Weekly	2
Thursday	AM	Dr. Richens	Weekly	2
	AM	Transition clinic	Monthly	2
Thursday	PM	Drs. Houston/Walayat	Weekly	3
Friday	AM	Dr. Mcleod	Weekly	2
	AM	Pre assessment	Weekly	2

Proposed Hours of Service

1. Increase in workload of transition clinic to fortnightly or weekly clinics.
2. Integration of adult congenital service requiring additional 6 clinics per week needing 2 rooms at each.

Day Cases

N/a

Theatres

Current Hours of Service
All theatre sessions are entire day, covered 08.00 until 18.00, although often run later.

Cardiac Theatre

Day	Session
Monday	Mr.Macarthur/Mr.Danton alternately
Tuesday	Mr.Danton
Wednesday	Mr.Pollock
Thursday	Mr.Macarthur/Mr.Mclean
Friday	Urgent/emergency list (Shared with catheter intervention)

Cardiac Catheter Laboratory

Day	AM/PM	Session
Monday	AM	Pain
Monday	PM	Interventional radiology
Tuesday	All day	Dr.Knight
Wednesday	All day	Dr.Richens
Thursday	AM	Dr.Mcleod
Friday	All day	Urgent/emergency list (Shared with cardiac surgery)

Proposed Hours of Service
The hypoplastic left heart programme would increase theatre usage by one session per week on average.

6. WORKLOAD INDICATION (weekly)

Area of Service	Type of Activity	Current workload	Projected workload
Outpatients	Dr-led clinics	15 sessions	19 sessions
Cardiac Theatres	Consultant	15 sessions	23 sessions
Catheter Laboratory	Consultant	6 sessions	10 sessions
ECGs	Physiologist lead	10 sessions	10 sessions
Echocardiograms	Physiologist lead	25 sessions	30 sessions
Exercise tests	Physiologist lead	1 session	2 sessions

Session = 4 hours. Cardiac theatre normal day = 3 sessions, elsewhere 2 sessions.

Future incorporation of adult congenital service, 8 sessions in cardiac theatre and 4 sessions in catheter laboratory.

7. KEY OPERATIONAL PROCESSES/ISSUES

1. **Out patients**

a) Patients report into reception area and are taken by a nurse for height and weight
b) Patients are called into the examination room by the doctor where the consultation takes place, often with 1 or 2 medical students/trainees in attendance
c) On completion of the consultation there are a number of possible outcomes:
    - Go to CID for ECG/echo or 24hour tape before returning for a second consultation with the results (approx 60%)
    - Report back to reception to make a further appointment directly from consultation or after CID investigation (approx 85%)
    - Discharge from follow up directly from consultation or after CID investigation (approx 15%)
    - Go to ward for admission (approx 2%)

2. **Routine catheter**

Day 1
    a. Patients and 1 or 2 carers report to CID for routine ECG and echo
    b. Patients then take results and report to ward
    c. Shown to bed by staff nurse where baseline observations are undertaken and the patient admitted.

d. Seen and clerked in by middle grade medical staff
e. Sent for chest X ray
f. Cannula inserted and blood taken by middle grade medical staff
g. Seen by consultant anaesthetist
h. Seen and consented by consultant cardiologist
i. Overnight intravenous fluids started if appropriate

Day 2

j. Pre med given by nursing staff
k. Taken, fasted, down to catheter lab by ward nursing staff
l. Patient details checked and patient accepted by catheter lab nursing staff
m. Anaesthetised in anaesthetic room and transferred through to catheter lab table.
n. Catheter undertaken by consultant cardiologist, registrar in cardiology, scrub nurse, radiographer, physiologist and nurse “runner”.
o. Patient woken by anaesthetist and recovered in catheter lab.
p. Transferred back to ward by anaesthetist and nurse
q. Observed closely on the ward for 6 hours
r. Reviewed by cardiologists in evening and parents spoken to

Day 3

s. Mobilised around ward
t. Taken by carers to CID for check ECG and echo
u. Reviewed by cardiology middle grade prior to discharge
v. Discharged home by nursing staff

It is recognised that these arrangements will change over time with the provision of most investigative and interventional procedures on the basis of either a day case model or a single night stay

3. Routine surgery

Day 1

a. Patients and 1 or 2 carers report to CID for routine ECG and echo
b. Patients then take results and report to ward
c. Shown to bed by staff nurse where baseline observations are undertaken and the patient admitted. Surface swabs taken for MRSA
d. Seen and clerked in by middle grade medical staff
e. Sent for chest X ray
f. Cannula inserted and blood taken by middle grade medical staff
g. All prior data reviewed at length by consultant cardiologist and consultant surgeon and final decision on surgical procedure made.

- If any problems at this point an alternative case can be admitted to avoid wasting the slot

Day 2

h. Patient reviewed on cardiology ward round by consultant cardiologist
i. Patient and parents seen by consultant cardiac surgeon
j. Patient and parents seen by consultant anaesthetist
k. Overnight intravenous fluids started if appropriate

Day 3

l. Pre med given by nursing staff
m. Taken, fasted, down to cardiac theatre by ward nursing staff and porter
n. Patient details checked and patient accepted by cardiac theatre nursing staff
o. Anaesthetised in anaesthetic room, monitoring lines and urinary catheter inserted prior to transfer through to cardiac theatre

p. Operation performed by consultant cardiac surgeon, 2 middle grade surgical assistants, scrub nurse, three theatre “runner” nurses, 2 perfusionists and a cardiac physiologist .
q. As patient weaned off cardiopulmonary bypass, a second cardiac physiologist +/- consultant cardiologist called to perform open heart scan to look at result of surgery.
r. Patient transferred back to PICU, intubated and ventilated, accepted there by consultant intensivist, PICU fellow and PICU nurse.
s. Infusion pumps changed, blood tests sent, chest X ray taken.
t. Parents spoken to by consultant cardiac surgeon

Day 4

u. Patient usually weaned off ventilator and extubated in first 48 hours. Drug infusions weaned off, feeding commenced and drains removed.

Day 5

v. After further 24 – 48 hours in PICU/HDU patient transferred back to ward
w. Patient accepted and admitted by nurse and cardiology middle grade
x. Support gradually weaned and feeding reintroduced.

Day 6-9

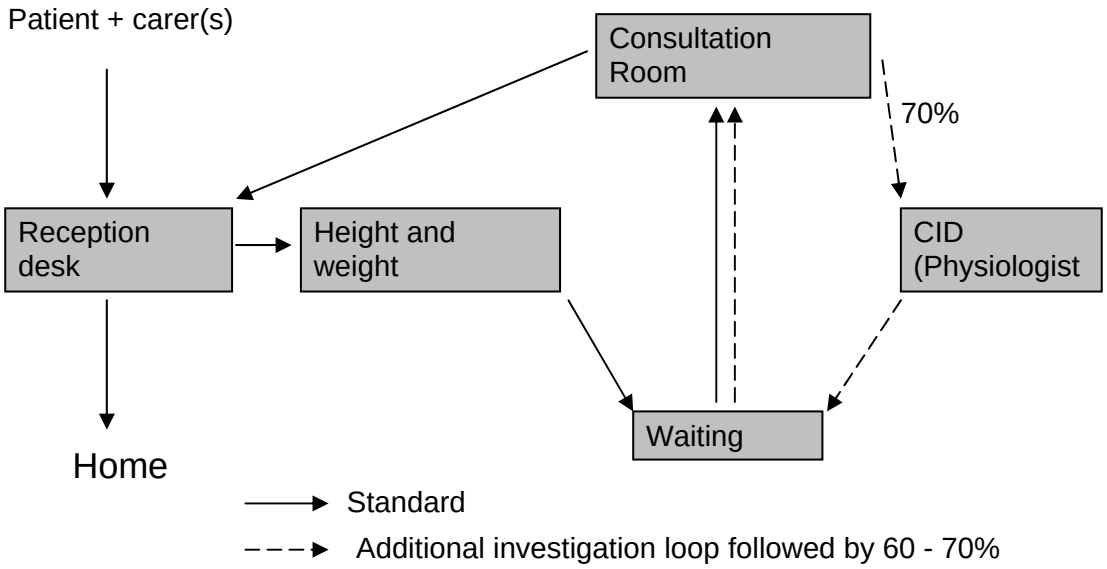
y. Gradual recovery
z. Pre discharge blood tests, chest X ray, echo and ECG performed
aa. If all satisfactory usually home D8-11

It is accepted that lengths of stay will reduce in the future. Specifically it is intended that pre-operative admission will be for no more than one night prior to surgery. Improved patterns of care may also reduce post-operative stay over time

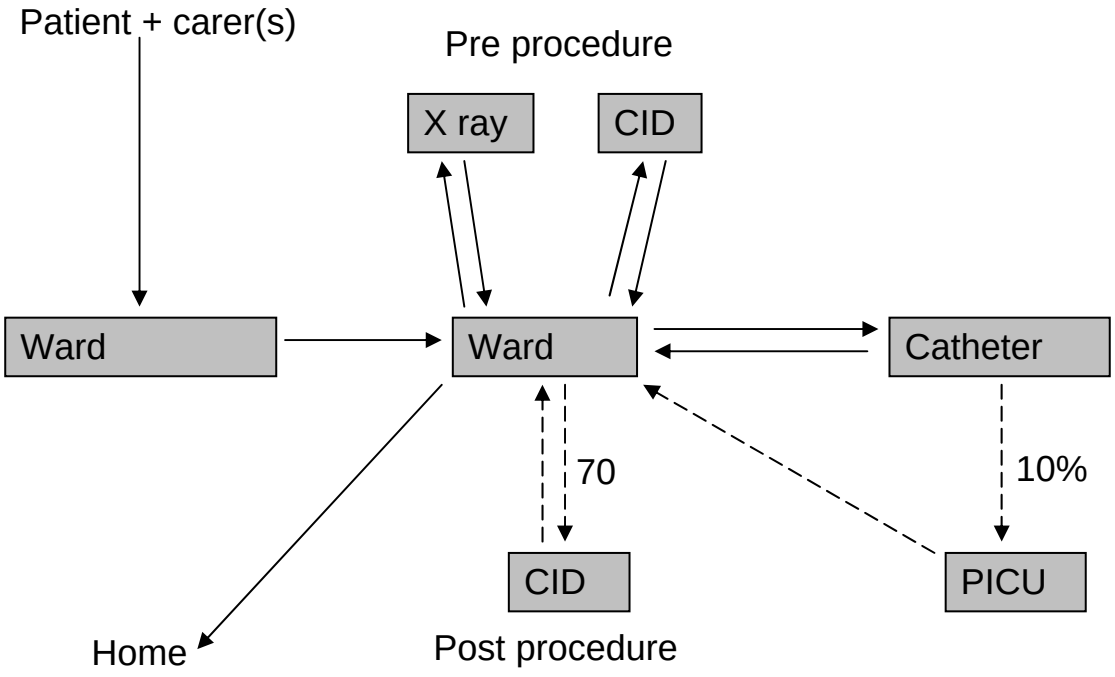
4. Work up of patients for elective surgery/catheter intervention

a. Initial referral
    i. Antenatal diagnosis with elective referral as newborn
    ii. Unexpected diagnosis in neonatal period
    iii. Routine out-patient referral
    iv. Urgent paediatric inpatient transfer
b. Diagnostic assessment
    i. Clinical history and examination (ward/OPD)100%
    ii. ECG, echo, ambulatory recording, ETT (CID)100%
    iii. MRI/CT (Radiology)10%
    iv. Diagnostic cardiac catheter 10%
c. Discussion at joint cardiac meeting (all cardiologists, cardiac surgeons, nurses, cardiac physiologists meet on a weekly basis to discuss cases needing surgery or catheter intervention as part of a clinical governance system)
d. Referral and listing for surgery or catheter intervention

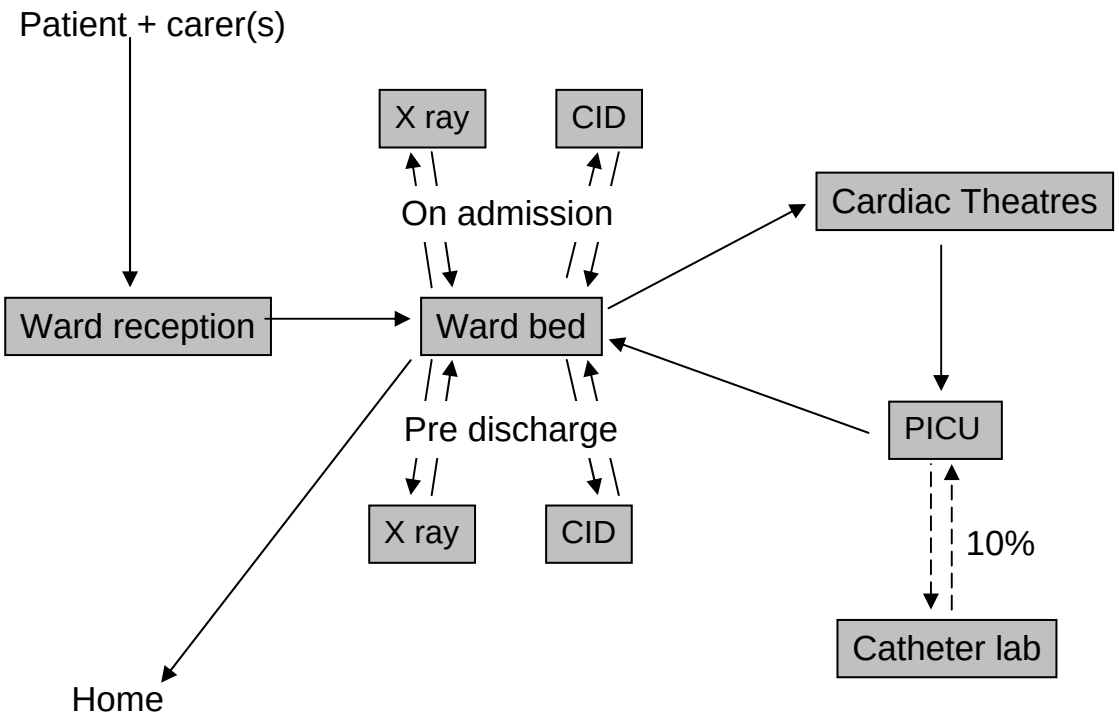
Out Patient Pathway



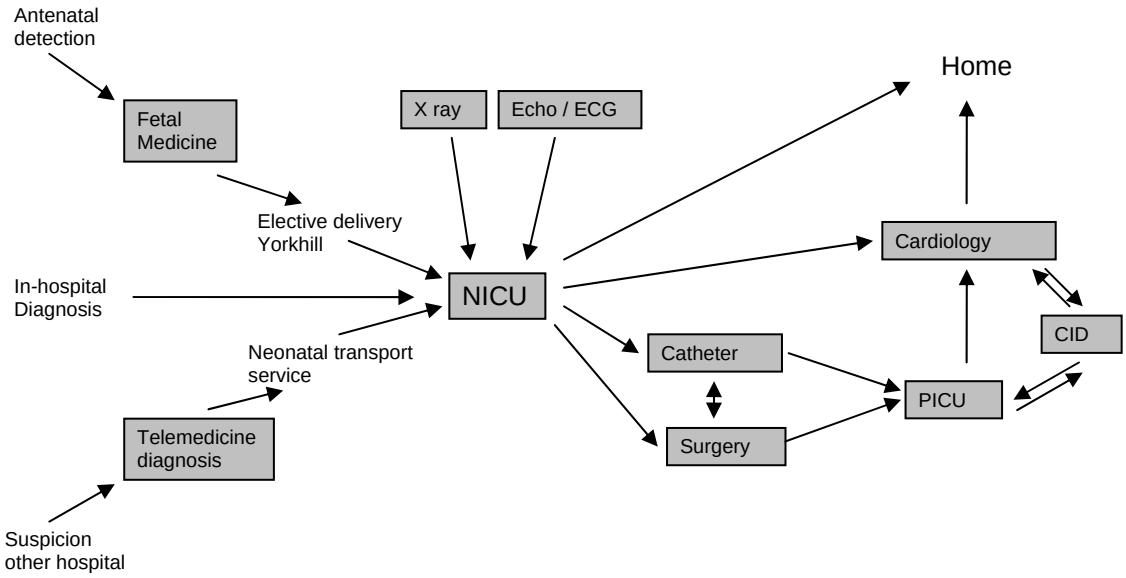
Elective Catheter Inpatient



Elective Surgical Inpatient Pathway



Neonatal Pathway



8. EQUIPMENT

Cardiac Catheter Lab
Biplane cardiac catheterisation equipment is a prerequisite for paediatric cardiac intervention. At present Yorkhill has the only cardiac biplane laboratory in the West of Scotland. Whilst single plane imaging is adequate for most adult procedures, it does not provide the minimum imaging requirements for the complex paediatric interventions now undertaken

Building Requirements
Radiation proofing of catheter lab and cardiac theatre
Dual plane flat plate intensifier with fixed C-arm mounts (floor based) may require reinforced floor area to take weight and movement.
The entire laboratory should be built to operating theatre specifications including positive atmospheric pressure and temperature control.

NEW CHILDREN'S HOSPITAL

Clinical Output Specification

AREA	PAEDIATRIC INTENSIVE CARE UNIT

1. INTRODUCTION

The Paediatric Intensive Care Unit provides a centralised national service supporting critically ill infants, children and young people. It will have 22 beds with a dispersed model of HDU beds which will be located in wards.

The critical care service supports emergency care of medical and surgical patients presenting to Yorkhill and provides a Transport & Retrieval service for patients that present to other hospitals.

The unit also provides a number of specialist programs and a proportion of patients cannot be effectively managed at any other facility in Scotland.

General paediatric intensive care services are also provided at the Royal Hospital of Sick Children in Edinburgh. The Edinburgh unit has eight intensive care beds and also provides a Transport & Retrieval service.

The Clinical Services provided include:

General/ emergency intensive care for infants and children (and young adults who are patients of the hospital)

Resuscitation support to inpatient units and emergency department

Post operative intensive care for specialist and general surgical programs

Intensive care support of national paediatric services:

- Cardiac surgery, invasive cardiology and associated cardiology patients
- Complex airway surgery
- Renal medicine and renal transplant services*
- Bone marrow transplant & oncology
- ECMO program
- Vein of Galen service

Intensive Care Transport Service, including advice and support to other sites managing seriously unwell patients

Provision of 'high level' High Dependency Care for all patient groups

* Provision of dialysis requires regulated pressure water and drainage services at agreed bed spaces. At present 3 bed spaces are equipped in this way.

2. LOCATION AND LINKS –

Close to	Reason	Category
Cardiac theatres Catheter lab CT scan	Routine transfer of complex and unstable patients with cumbersome equipment between areas. Transfer often urgent/ time critical. May require transfer on ECMO. Theatre teams intermittently require input from PICU & vice versa	1
General theatres	Ventilated patients are routinely transferred between theatres and ICU. Staff may be required to support care in the adjacent area. Theatre teams intermittently require input from PICU & vice versa	1
Theatre recovery	As with HDU/ PACU, any mutual staffing support depends on close proximity	1-2
Ambulance entrance Helicopter landing pad	Critically ill patients transferred from other hospitals with an ICU escort are resuscitated in the ICU, not the Emergency department. ICU requires un-impeded access from an ambulance entrance point	1-2
Emergency department	Resuscitation in the Emergency department is frequently supported by ICU staff. Easy access is required.	2
Oncology ward	The oncology ward manages a higher than normal proportion of complex and unstable patients who frequently require ICU input	2
Cardiac ward	A high proportion of ICU patients are discharged to the cardiology ward. High risk patient group.	2
Inpatient wards - other	ICU staff support resuscitation of ward patients. Some resuscitation equipment is kept centrally in the ICU.	2
Neonatal unit	There is opportunity to share resources and infrastructure between ICU and neonatal units. At present care models do not promote joint care of patients or mobility of patients between areas	2
ECMO set up area	ECMO facilities can be shared between neonatal, theatre and ICU areas and may be incorporated into any of these. Prompt access is required to and from all these. Fragile equipment is transferred to and from these areas. A separate ECMO clinical brief has been supplied.	2
Transport base	ICU transport services are provided by staff based in ICU. Transport services can be incorporated within the PICU or in close proximity.	2

*1= Essential adjacent
*2 = Important 2 minutes walking
*3 – Desirable 5 minutes walking

3. ACTIVITY

Activity	2000/2001	2007/08	2013 projections
PICU discharges (inc HDU)	568	629 (968)	750 (1200)
Bed days (inc HDU)	2605	4527 (5005)	7000 (7800)
Peak ICU occupancy	14	22*	30+

* at times of peak activity all HDU capacity entirely given over to accommodating ICU patients

4. TRENDS

There has been a gradual rise in the number of ICU patients over the last decade. However, as demonstrated by the above figures, it is principally increasing length of stay that has impacted on intensive care workload. This trend reflects increasingly aggressive and complex care in both PICU and related surgical and medical programs.

Most HDU admissions are transient so the relatively large increase in admissions associated with the HDU does not proportionally impact on bed days.

In the period between 2000 and 2007 no new patient groups or major new programs were introduced. The increase in activity relates to changing clinical practice and expectation. There is no reason to believe this trend will not continue. Examination of practice in North America supports the view that intensive care facilities must be continuously expanded to meet clinical expectations. Analysis undertaken during planning for the Dublin Children's Hospital suggested capacity would need to double over the next 10 years.

The activity projection for 2013 presented above optimistically assumes a slowing in the rate of increase observed over the last few years. There is no basis for this assumption and these figures must be treated with caution.

In addition to the general trend, during the period 2008 to 2013 the paediatric intensive care service will incorporate new patient groups and specific programs that will have an additional impact on both patient numbers and duration of stay.

Paediatric neurosurgical patients will be managed within the PICU. It is important to recognise that the culture of care within paediatric units is very different from that in adult services and it cannot be assumed that the number of bed days required by this patient group will remain the same.

Programs presently being planned will have a significant impact on the number of bed days used. These include development of a Hypoplastic Left Heart service and a Ventricular Assist program. These will result in patients who are presently managed elsewhere in the UK to require prolonged stays in the Glasgow PICU.

The 2013 projection assumes minimal further expansion in high dependency provision. It is important to recognise that this under represents likely demand for such services which will require to be provided in other parts of the hospital eg in association with an acute admitting unit; in an extended theatre recovery suite or in certain ward areas.

5. HOURS OF SERVICE

The service operates 24 hours per day with decreasing variation in day – night work intensity.

6. WORKLOAD INDICATION (weekly)

n/a

7. KEY OPERATIONAL PROCESSES/ISSUES

The specialist facilities required by the intensive care unit are described within the relevant HBN57. However, there are key differences between the requirements of specialist paediatric units and normal adult facilities. These mandate modification of this standard. Important differences include:

- The range of patient sizes and pathologies: this is greater than in adult units and results in a need for a greater array of equipment and supplies. Greater storage space and bed space flexibility is required.
- Specialist services related to paediatric intensive care, such as ECMO/ ECLS and Patient Transport, are accommodated within intensive care areas. These services are not recognised in the HBN and must be considered.
- Parents of sick children require a high level of access to their child. However, in the intensive care unit parents may not remain at their child's bed space to the same extent as in the ward. Consideration must be given to the needs of parents who require to be close to their critically ill child but must also continue to care for siblings eg breast feeding mothers.
- The specific need (right) of children to access play is not recognised in the HBN. It is important to dispel any notion that children in intensive care units are all unconscious. Consciousness and normal cycles of activity are preserved as much as possible. The storage space and flexibility of clinical areas required to allow play activities must be added.
- The workings of the Intensicve Care unit is very dependent on clinical IT systems

Retention of diurnal physiological patterns has a major positive impact on the outcome of intensive care patients. This is regulated by light and noise levels. Patients should be exposed to natural light and stimulation during the day but be looked after in subdued light with minimal noise at night.

Bright light is obviously necessary to allow emergency care and some clinical procedures.

The unit design should allow all patient bed spaces to be exposed to natural light and preferably allow the patient to see outside. Lighting should be locally controlled to allow bright illumination of individual bed spaces or tasks without impacting excessively on neighbouring patients.

7. EQUIPMENT

n/a

Department / Service	Quantity		Quantity	Size	Total		Notes
	Units			m2	m2		

DESIGN FOR STAGE 2

NCH SoA - Version 4

Reflects 240 beds with expansion for 16 beds embedded in wards etc Feb 09

Emergency Complex							
Emergency Department					1,719		
Acute Assessment Beds							See In-patient Servcies Wards
Critical Care Transport Base					97		
					1,815		

In-Patient Services - Wards							
	beds		**Wards**				
Emergency							
Observation ward	**20**		**1.00**	**878**	**878**		Located in Emergency Complex as Generic Clusters / ward
In-Patient Beds							
24 bed Wards	**72**		**3.00**	**986**	**2,958**		83% Single Rooms in wards / clusters of 8 beds
Ward Support Accommodation			**1.00**	**1,025**	**1,025**		FM / Admin support for generic beds + family / activity etc support for all beds
Observation Room			**1.00**	**13**	**13**		Required for sleep studies in one generic ward
Scoring Room			**1.00**	**13**	**13**		Required for sleep studies in one generic ward
Nephrology/Renal - Day Case					**71**		Part of Inpatient Ward - 4 dialysis points (1 Isolation @16m2 + 3 spaces @12 +circ)
Nephrology/Renal - Bio Engineering Room					**40**		Maintenance and repair of dialysis equipment
Acute Receiving Unit	**40**		**1.00**	**1,506**	**1,506**		80% Single Rooms in wards / clusters of 8 beds
Support for Acute Receiving Unit & Shiehallion			**1.00**	**340**	**340**		
Schiehallion Ward	**22**		**1.00**	**1,108**	**1,108**		
Day Case Unit, Treatment & Base	**4**		**1.00**	**452**	**452**		
Teenage Cancer Trust	**4**		**1.00**	**193**	**193**		Needs further clarification with NHS Board and TCT
Cardiology Beds							
Cardiology Beds	**14**		**1.00**	**690**	**690**		
Additional Accommodation Cardiology			**1.00**	**99**	**99**		
Critical Care Beds	**22**		**1.00**	**2,275**	**2,275**		
Total (before Psychiatry, Day & 23 hour)	**198**				**11,661**		

Department / Service	Quantity		Quantity	Size	Total		Notes
	Units			m2	m2		
Revised Bed Complement							
As Above	198						
Neo-natal Ward	12						In Maternity Building
Add: Child Psychiatry	6						See Supplementary Schedule
Add: MDU	10						See below
Add: Day & 23 Hour Unit	30						See below
Total Beds (excl dialysis & recovery)	**256**						*Per Decisions on Bed Numbers following CHKS & March 07 Reviews*

Operating Facilities, 23 Hour Unit, CT / MRI & Interventional Radiology							
Day & 23 Hour Unit	**30**		**1.00**		**0**		Included Theatre SoA
Operating Theatres & Recovery	9 Theatres		**1.00**	**4,447**	**4,447**		Includes anaesthetic department
CT & MRI Suite	1 MRI 1 CT		**1.00**	**657**	**657**		
Cardiac Catheter & Interventional Radiology	1 Cardiac Cath 1 Intervent Radiology		**1.00**	**492**	**492**		
					5,596		

Diagnostic / Support Departments							
Radiology							
Plain Film	3						DR Technology. Chest Bucky & Skull / OPG included in 2 rooms
Ultrasound	2						
Nuclear medicine							Part of joint facility with SGH
MRI	1						Additional MRI in theatre area
Fluoroscopy - Diagnostic	1						
Interventional Radiology Lab							In theatre area
Cardiac Catheter Lab							In theatre area
Bone Mineral Densitometry	1						
Radiology Total			**1.00**	**1,730**	**1,730**		
Pharmacy (OPD Dispensing & Non Sterile Prep)					**0**		Now incorporated into a Joint dispensary with SGH
Bio Engineering & Medical Devices Library					**90**		
Medical Illustration					**100**		Provisional estimate for clinical service only
					1,920		

Department / Service	Quantity		Quantity	Size	Total		Notes
	Units			m2	m2		
Other Patient / Support Departments							
Endoscopy							Carried out in generic theatres
Cardio / Respiratory Investigation					277		Includes Case Review / Viewing
Clinical Investigations / Medical Day Unit	Chairs &				450		
Rehab Suite - Physiotherapy & Orthotics					961		Gym, Parallel Bars, Treatment, Gait Analysis, Hydrotherapy & Orthotics
Special Feeds Prep Area					82		
					1,770		
Out-Patient Services							
Fracture Clinic							Allowance included in emergency and OPD SoAs
Outpatient Services					2,486		
OPD Addition for Psychology & Liaison Psychiatry					110		Include in a main OPD cluster
Child Protection Suite	100				69		
Lung Function Suite							Area within OPD
Audiology	4 x test rooms				444		Reflects expanded service and new national standards
					3,108		
Admin & Training & Education							See 10 November 2006 Briefing Note (transfer of 1500m2 to another project)
Management Offices & Meetings Rooms					273		Very provisional (Trust Offices & Op Management)
					273		
Main Entrance / Public Areas							
Main Entrance & Reception Area					811		
					811		
FM & Staff Facilities							Requires further FM input
Main Dining Room & Servery (900 meals)					0		Shared with SGH
End Kitchen (2800 Meals)					0		Shared with SGH
Occupational health centre					0		Shared with SGH
Staff changing - manual					0		Shared with SGH (allowances for clinical staff in depts & wards)
Staff Accommodation					0		
Junior Doctors' Mess					0		
Security					0		Included in main entrance
IT & Telephone services					0		Shared with SGH
Hotel Services & Domestic / Portering					100		Includes local Domestic Equip Store, Porters Base & FM Supervisors
Clean Laundry					0		See Clean Supplies
Laundry					0		External compound
Clean Supplies Unloading Area					0		Shared with SGH
Clean Supplies / Laundry Store & Distribution					150		Very provisional for local sorting - most shared with SGH
Creche / Nursery					0		Shared with SGH
					250		

Department / Service	Quantity		Quantity	Size	Total		Notes
	Units			m2	m2		
TOTAL					27,205		
ALLOWANCE FOR COMMUNICATION & PLANT SPACE (29.5%)					8,026		Based on OBC Pref Option 18.5% commiunication and 11% plant
GROSS AREA					35,231		
Supplementary Schedule							
Child Psychiatry							
Dept of Child Forensic Psychology					772		
					772		
TOTALS OF MAIN & SUPPLEMENTARY SCHEDULES							
Main Schedule - Gross Area					35,231		
Child Psychiatry - Gross Area					772		
TOTAL GROSS AREA					36,003		

EMERGENCY DEPARTMENT

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Entrance, reception & waiting facilities					
Car parking spaces for people with disabilities & parents with young children	1			G0927	In circulation allowance
Ambulance parking bay	1			G0905	In circulation allowance
Main entrance draught lobby	1	11.0	11.0	J0107	
Main entrance draught lobby	1	11.0	11.0	J0112	
Parking bay: 6 wheelchairs	1	4.0	4.0	G0119	
Parking bay: 3 accident trolleys & 3 wheelchairs	1	12.0	12.0	G0128	
Reception: 2 staff	1	10.0	10.0	J0206	
Waiting area: 25 - 30 persons including 2 wheelchair users incl Play Area	1	40.5	40.5	J1116	
Waiting play area: 10 children	1	18.0	18.0	J1410	
Public telephone: single booth, accessible	1	2.0	2.0	G0705	
Refreshment: drinking water dispenser	1	0.5	0.5	P0810	
Triage Rooms	2	12	24		
WC & handwash: semi ambulant	4	2.5	10.0	V1106	
WC & handwash: accessible, wheelchair assisted	1	4.5	4.5	V0904	
Nappy change room with handwash	1	4.0	4.0	V1113	
Infant feeding room	1	5.5	5.5	S0010	
Sub-Total			**157.0**		

Assessment & Treatment Facilities (Minors Area)					
Assess & Treatment room: Paediatric, A&E	6	16.0	96.0	C0304	Open Fronted Bays with curtains Include 1 x ENT & 1 x Ophthalmic.
Infant Feeds Pantry	1	6.0	6.0		
Staff Base - 3 person	1	11.0	11.0		
WC & handwash: specimen; accessible, wheelchair	1	4.5	4.5	V1406	
Waiting area: 10 persons including 1 wheelchair user	1	25.5	25.5	J1201	
Sub-Total			**143.0**		

Assessment & Treatment Facilities (Majors Area)					
Assess & Treatment room: A&E, multi-functional	12	16.0	192.0	X0242	
Assess / Treatment with Mental Health Issues	1	11.0	11.0		
Procedures Room	3	16.0	48.0		
Treatment room: Plaster	1	16.0	16.0	X0207	
Waiting Room for Family Members	1	12.0	12.0		
WC & handwash: accessible, wheelchair assisted	1	4.5	4.5	V0904	
Staff & communication base: 5 staff	1	30.0	30.0	T0212	
Clean Utility	1	12.0	12.0	T0316	
Sub-Total			**325.5**		

Patient resuscitation facilities					
Resuscitation room: 4 places	1	116.0	116.0	X0238	
Sub-Total			**116.0**		

Distressed & bereaved persons facilities					
Sitting & body viewing room	1	16.0	16.0	S0029	
Body viewing/bier room	1	10.0	10.0	L1612	
Sub-Total			**26.0**		

Support facilities: Clinical					
Near patient testing/status laboratory	1	8.5	8.5	L1305	
Dirty utility: bedpan disposal & urine test	2	12.0	24.0	Y0311	
Parking bay: ultrasound unit	1	1.0	1.0	G0139	
Sub-Total			**33.5**		

Staff support facilities: Rest and recreation					
Rest & dining room: 35 staff	1	40.0	40.0	D0407	
Beverage / Rest Point	1	18.0	18.0		
Sub-Total			**58.0**		

Staff support facilities: Sanitary & changing					
WC & wash: ambulant	8	2.0	16.0	V1005	
Shower: ambulant (non patient)	4	2.5	10.0	V0801	
Staff changing room: 30 places	1	16.0	16.0	V0517	
Staff changing room: 50 places	1	25.0	25.0	V0515	
Sub-Total			**67.0**		

Staff support facilities: Offices					
Office: 1 staff	2	9.0	18.0	M0219	
Office: 3 staff	2	18.0	36.0	M1002	
Office: 4 staff (workstations)	3	24	72	M1014	
Interview & counselling room: 5 persons	1	9.0	9.0	M0704	
Sub-Total			**135.0**		

Staff support facilities: Education and training					
Seminar & training room: 20 persons	1	37.5	37.5	H0513	
Library & study room: 5 persons	1	18.0	18.0	H0339	
Sub-Total			**55.5**		

Support facilities: Holding & storage					
Store: equipment & supplies	1	30.0	30.0	W1320	
Medicines Management Room	1	12.0	12.0		
Store: major incident equipment	1	6.0	6.0	W1303	
Store: ready to use medical gas cylinders	1	9.0	9.0	W1313	
Sub-Total			**57.0**		

Support facilities: Miscellaneous					
Hold: disposal	1	10.0	10.0	Y0614	
Cleaners (Housekeeping) room	1	7.0	7.0	Y1501	
Switchgear room	1	4.0	4.0	K0101	
Battery & UPS room	1	9.0	9.0	K0109	
Sub-Total			**30.0**		

Total Net			**1,203.5**
Planning	**5%**		**60.2**
Sub-Total			**1,263.7**
Engineering	**3%**		**37.9**
Circulation	**33.0%**		**417.0**
Total			**1,718.6**

Critical Care Transport Base					
Ambulance bay with 32amp hook up points with sufficient space behind each vehicle space for full length ramp extension	4		0.0		external
Additional Ambulance response car space	1				external
On call staff car parking spaces adjacent to base	6				external
Secure medical gas starage	1				external
Clinical work room with preparation area and work stations; comprehensive equipment store	1	30.0	30.0		
Trolley store: accommodation for 6 intensive care trolleys/incubators	1	30.0	30.0		
Protective Clothing Store	1	6.0	6.0		
Laundry/Drying room	1	9.0	9.0		
Sub-Total			**75.0**		

Total Net			**75.0**
Planning	**5%**		**3.8**
Sub-Total			**78.8**
Engineering	**3%**		**2.4**
Circulation	**20.0%**		**15.8**
Total			**96.9**

OBSERVATION WARD

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Entrance					
Enquiry & Admin Area (Staff base)	1	8.0	8.0		
Waiting & Play Area	1	25.0	25.0		
Sub Total			**33.0**		
Bed Area					
Single bedroom: Children/young people, with relatives overnight stay	18	16.5	297.0		
Isolation single bedroom: Children/young people, with relatives overnight stay	2	16.5	33.0		
Lobby: air lock to bedroom	2	7.0	14.0		
Shower, WC & wash: accessible, wheelchair assisted	20	4.5	90.0		
Office Area with workstations	1	18.0	18.0		
Staff & communication base, enclosed: 2 staff	1	8.0	8.0		
Sub Total			**460.0**		
Utility Area					
Clean utility	1	14.0	14.0		
Cleaners Room	1	7.0	7.0		
Parking bay: resuscitation trolley	1	1.0	1.0		
Medicines Management Room	1	12.0	12.0		
Dirty utility: bedpan disposal & urine test	1	12.0	12.0		
Hold: disposal & recycling	1	12.0	12.0		
Store: linen	1	3.0	3.0		
Store: clothing back-up	1	3.0	3.0		
Store: general	1	6.0	6.0		
Bed, Cot & Equipment Store	1	20.0	20.0		
Sub Total			**90.0**		
Patient Support Area					
Parking bay:	1	5.0	5.0		
Pantry: serving ward & Regeneration & Wash Up	1	12.0	12.0		
Visitor WC	2	2.5	5.0		
Ward Food trolley parking bay	1	1.5	1.5		
WC & handwash: ambulant - staff	2	2.0	4.0		
Sub Total			**27.5**		

Total net			**610.5**
Planning	**5%**		**30.5**
Sub-Total			**641.0**
Engineering	**3%**		**19.2**
Circulation	**34.0%**		**217.9**
Grand Total			**878.2**

GENERIC WARDS
INPATIENT FLOOR (3 WARDS)

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Bed Area					
Single bedroom: Children/young people, with relatives overnight stay	20	16.5	330.0		
Lobby: air lock to bedroom	2	7.0	8.0		
Shower, WC & wash: accessible, wheelchair assisted	20	4.5	90.0		
Multi-bed room & day space: Children/young people, 4 beds, with relatives overnight stay	1	68.0	68.0		
Shower, WC & wash: accessible, wheelchair assisted	1	7.0	7.0		
Office Area with workstations (x4)	1	18.0	18.0		
Office - clinical - 2 person	1	12.0	12.0		
Staff & communication base, open 2 staff	1	5.0	5.0		
Touchdown	2	2.0	4.0		
Sub Total			**542.0**		
Utility Area					
Bath, WC & wash: treatment, assisted	1	14.0	14.0		
Clean utility	1	14.0	14.0		
Cleaners Room	1	7.0	7.0		
Parking bay: resuscitation trolley	1	1.0	1.0		
Dirty utility: bedpan disposal & urine test	1	12.0	12.0		
Store: linen & Clothing Back-up	2	2.5	5.0		
Store: general	1	5.0	5.0		
Store: equipment	1	5.0	5.0		
Sub Total			**63.0**		
Patient Support Area					
Treatment room: child	1	16.5	16.5		
Interview & counselling room: 5 persons	1	9.0	9.0		
Parking bay:	1	5.0	5.0		
Pantry: serving ward	1	12.0	12.0		
Ward Food trolley parking bay	1	1.5	1.5		
WC & handwash: ambulant - staff	1	2.0	2.0		
Sub Total			**46.0**		
Recreation, Play & Dining Area					
Dining room & Playroom: 10 - 15 patients	1	25.0	25.0		
Store Room	1	5.0	5.0		
WC & handwash: accessible, wheelchair assisted	1	4.5	4.5		
Sub Total			**34.5**		

Total Net			**685.5**
Planning	**5%**		**34.3**
Sub-Total			**719.8**
Engineering	**3%**		**21.6**
Circulation	**34.0%**		**244.7**
Total			**986.1**

SUPPORT CENTRE

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Parent / Family Facilities					
Enquiry & Admin Area	1	10.0	10.0		
Sitting room with beverage & snack preparation bay: 20 visitors	1	45.0	45.0		
WC & handwash: accessible, wheelchair assisted plus shower	1	6.0	6.0		
WC - Ambulatory	2	2.0	4.0		
Nappy change room with WC & handwash, single side table access	1	7.5	7.5		
Infant feeding room	1	5.5	5.5		
Sub Total			**78.0**		
Activity, Play & Classroom Facilities					
Supervised Play for Inpatients - (Discharge Lounge)	1	100.0	100.0		
Medicinema	1	138.0	138.0		
WC & handwash: accessible, wheelchair assisted	1	4.5	4.5		
WC - Ambulatory	2	2.0	4.0		
Sub Total			**246.5**		
Social Work					
Social Workers	1	12.0	12.0		
Sub Total			**12.0**		
Staff Facilities					
Staff Rest with beverage point	1	15.0	15.0		
Staff WC/wash	4	3.0	12.0		
Staff locker room - F	1	30.0	30.0		100 handbag lockers.
Staff locker room - M	1	10.0	10.0		30 lockers.
Staff shower	2	4.0	8.0		
Accessible shower / WC	1	4.5	4.5		Includes lockers
Sub Total			**79.5**		

Total Net			**416.0**
Planning	**5%**		**20.8**
Sub-Total			**436.8**
Engineering	**3%**		**13.1**
Circulation	**25.0%**		**109.2**
Total			**559.1**

FM & ADMINISTRATION SUPPORT FOR 72 BEDS (3 x 24 BED WARDS)

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Staff Offices, Workstations, Education & Support					
Office - 4 Person	2	24.0	48.0		
Workstations x 6	3	24.0	72.0		
Medicines Management	1	15.0	15.0		
Near patient testing/status laboratory	1	8.5	8.5		
Seminar / Education Room (15 places)	2	28.0	56.0		
Sub Total			**199.5**		
Shared FM & Other Support					
Cleaners (Housekeeping) room	1	7.0	7.0		
Disposal Hold & Recycling Point	1	20.0	20.0		
Regen Kitchen	1	30.0	30.0		
Allowance for Wash Up	1	12.0	12.0		
Clean Equipment Store	1	8.0	8.0		
Bulk Fluid Store	1	15.0	15.0		
Sub Total			**92.0**		
Bed, Cot & Equipment Store	1	55.0	55.0		
Sub Total			**55.0**		

Total Net			**346.5**
Planning	**5%**		**17.3**
Sub-Total			**363.8**
Engineering	**3%**		**10.9**
Circulation	**25.0%**		**91.0**
Total			**465.7**

Total of FM / Admin Support + Support Centre **1,024.8**

ACUTE RECEIVING UNIT (40 BEDS)

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comments
Bed Area					
Single bedroom: Children/young people, with relatives overnight stay	32	16.5	528.0		
	2	7.0	8.0		
Shower, WC & wash: accessible, wheelchair assisted	32	4.5	144.0		
Multi-bed room & day space: Children/young people, 4 beds, with relatives overnight stay	2	68.0	136.0		
Shower, WC & wash: accessible, wheelchair assisted	2	7.5	15.0		
Office Area with workstations (x4)	1	18.0	18.0		
Office - clinical - 2 person	1	12.0	12.0		
Staff & communication base, open 2 staff	2	5.0	10.0		
Touchdown	3	2.0	6.0		
Sub Total			**877.0**		
Utility Area					
Bath, WC & wash: treatment, assisted	1	14.0	14.0		
Clean utility	1	14.0	14.0		
Cleaners Room	1	7.0	7.0		
Parking bay: resuscitation trolley	2	1.0	2.0		
Dirty utility: bedpan disposal & urine test	1	12.0	12.0		
Store: linen & Clothing Back-up	2	2.5	5.0		
Store: general	1	5.0	5.0		
Store: equipment	1	5.0	5.0		
Sub Total			**64.0**		
Patient Support Area					
Treatment room: child	2	16.5	33.0		
Interview & counselling room: 5 persons	2	9.0	18.0		
Parking bay:	1	5.0	5.0		
Pantry: serving ward	1	12.0	12.0		
Ward Food trolley parking bay	1	1.5	1.5		
WC & handwash: ambulant - staff	1	2.0	2.0		
Sub Total			**71.5**		
Younger Children's Play & Dining Area					
Dining room & Playroom: 10 - 15 patients	1	25.0	25.0		
Store Room	1	5.0	5.0		
WC & handwash: accessible, wheelchair assisted	1	4.5	4.5		
Sub Total			**34.5**		

Total Net			**1,047.0**
Planning	**5%**		**52.4**
Sub-Total			**1,099.4**
Engineering	**3%**		**33.0**
Circulation	**34.0%**		**373.8**
Total			**1,506.1**

ADDITIONAL SUPPORT ACCOMMODATION - Shiehallion & ARU

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comments
Staff Offices, Workstations, Education & Support					
Office - 2 Person	1	12.0	12.0		
Workstations x 6	2	24.0	48.0		
Medicines Management	1	15.0	15.0		
Sub Total			**75.0**		

Shared FM & Other Support					
Disposal Hold & Recycling Point	1	10.0	10.0		
Staff Rest with beverage point	1	15.0	15.0		
Group Activity (Adolescents)	1	60.0	60.0		Supports all adolescent needs and includes office & TCT Communal Area
Data Management & BMT Compliance Office	1	18.0	18.0		
Hospital at Night Office	1	12.0	12.0		
Regeneration Kitchen & Wash up (Check with FM)	1	30.0	30.0		
WC & handwash: ambulant - staff	2	2.5	5.0		
Seminar Room	1	28.0	28.0		Schiehallion
Sub Total			**178.0**		

Total Net			**253.0**
Planning	**5%**		**12.7**
Sub-Total			**265.7**
Engineering	**3%**		**8.0**
Circulation	**25.0%**		**66.4**
Total			**340.0**

SCHIEHALLION WARD (22 BEDS)

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comments
Bed Area					
Single bedroom: Children/young people, with relatives overnight stay	21	16.5	346.5		
Lobby: air lock to bedroom	8	7.0	56.0		
Shower, WC & wash: accessible, wheelchair assisted	21	4.5	94.5		
Office Area with workstations (x4)	1	18.0	18.0		
Office - clinical - 2 person	1	12.0	12.0		
Staff & communication base, open 2 staff	1	5.0	5.0		
Touchdown space	2	2.0	4.0		
Sub Total			**532.0**		
Utility Area					
Bath, WC & wash: treatment, assisted	1	14.0	14.0		
Clean utility	1	14.0	14.0		
Cleaners Room	1	7.0	7.0		
Parking bay: resuscitation trolley	1	1.0	1.0		
Dirty utility: bedpan disposal & urine test	1	12.0	12.0		
Store: linen & Clothing Back-up	2	2.5	5.0		
Store: general	1	5.0	5.0		
Store: equipment	1	5.0	5.0		
Sub Total			**63.0**		
Patient Support Area					
Treatment room: child	1	16.5	16.5		
Chemotherapy Room	1	12.0	12.0		
School Room	1	18.0	18.0		
Play Room	1	25.0	25.0		
Store Room	1	5.0	5.0		
Interview & counselling room: 5 persons	2	11.0	22.0		
Parking bay:	1	5.0	5.0		
Pantry: serving ward	1	12.0	12.0		
Ward Food trolley parking bay	1	1.5	1.5		
WC & handwash: ambulant - staff	1	2.0	2.0		
Sub Total			**119.0**		
Radiotherapy Treatment Suite					
Radiation shielded patient bedroom	1	20.0	20.0		Part of overall Schiehallion bed complement (22)
Radiation shielded toilet/shower (and drain)	1	4.5	4.5		
Secure shielded ante-room for storage of radioisotope/radioactive injection rig/radioactive waste	1	10.0	10.0		
Radiation shielded controlled lobby	1	6.0	6.0		
Adjoining relatives bed space	1	10.0	10.0		
Ensuite bathroom for relatives	1	6.0	6.0		
Sub Total			**56.5**		
External play area including covered area	1		**0.0**		
Sub Total			**0.0**		External Area

Total Net			**770.5**
Planning	**5%**		**38.5**
Sub-Total			**809.0**
Engineering	**3%**		**24.3**
Circulation	**34.0%**		**275.1**
Total			**1,108.4**

DAY CASE UNIT (Incl Treatment) & Staff Base

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comments
Day Unit					
Reception	1	5.0	5.0		
Waiting/Play area	1	20.0	20.0		
Consult/Exam/Treatment Room	4	16.5	66.0		Note specific requirements in Operational Policy
Haemophilia Unit Consult/Exam/Treatment Room	1	16.5	16.5		
Haemophilia Unit Office (2 Person)	1	12.0	12.0		Co-located with Haemophilia/Consult/Exam/Treatment room
Day Stay Ward	1	68.0	68.0		
Patient WC	2	2.5	5.0		Ensuite to Day Stay Ward
Disabled WC	1	4.5	4.5		
Patient WC	1	2.5	2.5		
BMT Waiting Area	1	9.0	9.0		FACT-JACIE requirement
BMT Day Stay Ward	1	36.0	36.0		
Store: linen & Clothing Back-up	1	2.5	2.5		
Store: general	1	5.0	5.0		
Clean Utility	1	14.0	14.0		
Dirty utility: bedpan disposal & urine test	1	12.0	12.0		
Managers Office	1	9.0	9.0		
Interview Room	1	9.0	9.0		
Office Area with workstations (x4)	1	18.0	18.0		
Sub Total			**314.0**		
Total Net			**314.0**		
Planning	**5%**		**15.7**		
Sub-Total			**329.7**		
Engineering	**3%**		**9.9**		
Circulation	**34.0%**		**112.1**		
Total			**451.7**		

TEENAGE CANCER TRUST

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comments
Teenage Cancer Trust Accomodation					Adjacent to Shiehallion Ward
Single bedroom: Children/young people, with relatives overnight stay	4	16.5	66.0		
Shower, WC & wash: accessible, wheelchair assisted	4	4.5	18.0		(As per HBN 04-01)
Contingency	1	50.0	50.0		
Sub Total			**134.0**		

Total Net			**134.0**
Planning	**5%**		**6.7**
Sub-Total			**140.7**
Engineering	**3%**		**4.2**
Circulation	**34.0%**		**47.8**
Total			**192.8**

CARDIOLOGY (14 BEDS)

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comments
Bed Area					
Single bedroom: Children/young people, with relatives overnight stay	10	16.5	165.0		
Lobby: air lock to bedroom	2	7.0	14.0		
Shower, WC & wash: accessible, wheelchair assisted	10	4.5	45.0		
Multi-bed room & day space: Children/young people, 4 beds, with relatives overnight stay	1	68.0	68.0		
Shower, WC & wash: accessible, wheelchair assisted	1	7.0	7.0		
Office Area with workstations (x4)	1	18.0	18.0		
Office - clinical - 2 person	1	12.0	12.0		
Clinical Workstations (x6)					
Staff & communication base, open 2 staff	1	5.0	5.0		
Touchdown	1	2.0	2.0		
Sub Total			**336.0**		
Utility Area					
Bath, WC & wash: treatment, assisted	1	14.0	14.0		
Clean utility	1	14.0	14.0		
Cleaners Room	1	7.0	7.0		
Parking bay: resuscitation trolley	1	1.0	1.0		
Dirty utility: bedpan disposal & urine test	1	12.0	12.0		
Store: linen & Clothing Back-up	1	3.0	3.0		
Store: general	1	5.0	5.0		
Store: equipment	1	5.0	5.0		
Sub Total			**61.0**		
Patient Support Area					
Treatment room: child	1	16.5	16.5		
Interview & counselling room: 5 persons	1	9.0	9.0		
Parking bay:	1	5.0	5.0		
Pantry: serving ward	1	12.0	12.0		
Ward Food trolley parking bay	1	1.5	1.5		
WC & handwash: ambulant - staff	2	2.0	4.0		
Sub Total			**48.0**		
Recreation, Play & Dining Area					
Dining room & Playroom: 10 - 15 patients	1	25.0	25.0		
Store Room	1	5.0	5.0		
WC & handwash: accessible, wheelchair assisted	1	4.5	4.5		
Sub Total			**34.5**		

Total Net			**479.5**
Planning	**5%**		**24.0**
Sub-Total			**503.5**
Engineering	**3%**		**15.1**
Circulation	**34.0%**		**171.2**
Total			**689.8**

ADDITIONAL ACCOMMODATION - Cardiology

Staff Offices, Workstations, Education & Support					
Office - 2 Person	1	12.0	12.0		
Workstations x 6	1	24.0	24.0		
Medicines Management	1	8.0	8.0		
Sub Total			**44.0**		

Shared FM & Other Support					
Cleaners (Housekeeping) room					
Disposal Hold & Recycling Point	1	10.0	10.0		
Regen Kitchen & Wash Up Allowance	1	12.0	12.0		
Clean Equipment & Fluid Store	1	8.0	8.0		
Sub Total			**30.0**		

Total Net			**74.0**
Planning	**5%**		**3.7**
Sub-Total			**77.7**
Engineering	**3%**		**2.3**
Circulation	**25.0%**		**19.4**
Total			**99.5**

CRITICAL CARE

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Entrance/Reception/Administration facilities			0.0		
Combined entrance	1		0.0		In circulation allowance
Visitors Foyer	1		0.0		In circulation allowance
Visitors waiting area:	1	15.0	15.0		
Visitors wc: Disabled/ wheelchair user	1	4.5	4.5		
Telephone area: single booth; low height	1	2.0	2.0		
Reception desk/office: 4 places					
Sub-Total			**21.5**		
Family & Friends facilities (adjacent to main entrance)			0.0		
Private (single) Family Sitting	2	10.0	20.0		
Relatives en-suite wc: Disabled/ wheelchair user	1	4.5	4.5		For 1 of the above rooms
Relatives sitting room: 12 places	1	16.0	16.0		
Relatives pantry/beverage bay	1	6.0	6.0		
Sub-Total			**46.5**		
Clinical areas			0.0		
Critical care bed area: single room; Isolation (access via gowning lobby)	6	25.5	153.0		
Gowning lobby: single bedroom	6	7.0	42.0		
Relatives interview room	2	9.0	18.0		close to 4 bed areas
Critical care bed area:	16	25.5	408.0		
Workstation & X-ray Viewing Area	2	12.0	24.0		
Central Communications / Staff Base + Reception	1	34.0	34.0		
Communications "Touch down bases"	11	2.0	22.0		(as per HBN 04-01) (1 per 2 rooms)
Sub-Total			**701.0**		
Utility/clinical area support facilities			0.0		
Clean utility (including blood bank area)	2	17.0	34.0		
Status laboratory	1	8.5	8.5		
Dirty utility with urine testing	1	12.0	12.0		
Dirty Utility with urine testing/equipment cleaning	1	18.0	18.0		
Disposal hold	2	10.0	20.0		
Housekeepers (cleaners) room	1	10.0	10.0		
Patients pantry	1	6.0	6.0		
Milk store	1	4.0	4.0		
Play Leader Base & Toy Store	1	16.0	16.0		
Medicines Management Room	1	18.0	18.0		
ECMO Prep Area + Ensuite Store & Office	1	24.0	24.0		
Patients assisted bathroom, wc & wash (Stretcher hoist)	1	16.0	16.0		
Sub-Total			**186.5**		
Storage/holding facilities			0.0		
Bulk supplies store	2	25.0	50.0		
Clinical equipment store	2	25.0	50.0		
Equipment service room	1	24.0	24.0		
Linen bay/store	2	4.0	8.0		
Furniture / Bed Store	1	20.0	20.0		
Ready use medical gas cylinders store	2	4.0	8.0		
Mobile imaging equipment bay (x-ray & Ultrasound) with image intensifiers	2	8.0	16.0		
Cardiac arrest/emergency trolley bay	2	3.0	6.0		
Sub-Total			**182.0**		

CRITICAL CARE

Staff facilities			0.0		
Clinical directors office: 1 place	1	12.0	12.0		
Office: 1 place	2	12.0	24.0		
Offices: 2 place	1	13.0	13.0		
Clinical staff office: 4 places	5	24.0	120.0		
Hot Desk Room / Library	1	18.0	18.0		
Meeting room/interview room (8 person)	1	20.0	20.0		
Staff rest room with dining area	1	30.0	30.0		
Staff snack/beverage preparation bay	1	8.0	8.0		
Staff changing facilities 30 places	1	15.0	15.0		
Staff changing facilities 50 places	1	25.0	25.0		
Staff shower	5	2.5	12.5		
Staff wc & wash: Ambulant user	5	2.0	10.0		
Seminar/training room: 25 places	1	30.0	30.0		
Staff office/restroom	1	13.0	13.0		
Staff office/restroom en-suite shower, wc & wash	1	5.0	5.0		
Sub-Total			**355.5**		

Engineering facilities			0.0		
Switchgear cupboard	2	2.0	4.0		
Battery/UPS room	2	9.0	18.0		
Sub-Total			**22.0**		

Total Net			**1515.0**
Planning	**5%**		**75.8**
Sub-Total			**1,590.8**
Engineering	**3%**		**47.7**
Circulation	**40.0%**		**636.3**
Total			**2,274.8**

OPERATING THEATRES

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Main Entrance/Reception Area					
Entrance Foyer	1	0.0	0.0		In circulation allowance
Reception, administration office & communication base: 4 staff	1	24.0	24.0		
Manager's Office	1	12.0	12.0		
Offices - 2 person	1	13.0	13.0		
Waiting & Play Area (unsupervised)	1	20.0	20.0		
Sub Total			**69.0**		
Multifunction Area (Pre-op Assess & AODOS)					
Nurses Station	1	8.0	8.0		
Duty porters area: 2 porters	1	5.0	5.0		
WC & handwash: accessible, wheelchair assisted	2	4.5	9.0		
Nappy Change	1	6.0	6.0		
Assessment/Pre-op/Changing Rooms (With couch)	4	14.0	56.0		
Assessment/Pre-op/Changing Rooms (With chair)	4	7.0	28.0		
Clothes Store Trolley Area	1	4.0	4.0		Lockable space for 2 x "patient/carer baggage trolleys" prior to their transfer to wards)
Pre-op Playroom (supervised)	1	45.0	45.0		Should be sub-dividable to support children with challenging behaviours
Playroom Store	1	6.0	6.0		En-suite to playroom
Adolescent's Mess Room	1	30.0	30.0		
Holding Area	2	13.5	27.0		
Cleaners (Housekeepers room)	1	7.0	7.0		
Sub Total			**231.0**		
Operating Theatre Entrance/Exit/Interface Area					
Lobby	1	12.0	12.0		
Additional Waiting Parking Area For Theatre Trolleys (4-5 empty trolleys)	1	10.0	10.0		
Sub Total			**22.0**		
Operating theatre suites facilities					
Operating theatre: general	4	55.0	220.0		
Operating theatre: ultra clean	3	55.0	165.0		
Operating Theatre - cardiac	2	63.0	126.0		
ECMO Prep Area + Ensuite Store	1	20.0	20.0		Accessible from both cardiac theatres
Anaesthetic room: bed space	9	19.0	171.0		
Scrub-up & gowning room	9	11.0	99.0		
Preparation room	9	12.0	108.0		
Exit/parking bay: theatre, 1 bed/trolley	9	12.0	108.0		
Store: equipment, local to theatre	5	2.0	10.0		1 between 2 theatres
Dirty utility: serving 2 theatres	4	14.0	56.0		1 between 2 theatres
Dirty utility: serving 1 theatre	1	12.0	12.0		
Offices - 2 person	2	13.0	26.0		Located within clinical areas to support management of the operating theatre/recovery function
WC & wash: ambulant	4	2.0	8.0		Servicing Theatres & Reception/Recovery
Sub Total			**1129.0**		

Reception/Recovery Unit Facilities					
Reception/Recovery bay: post anaesthetic, 1 place	18	13.5	243.0		
Recovery room: post anaesthetic, 1 place	3	16.5	49.5		
Nurses Station	1	8.0	8.0		
Charge Nurse/Sister's Office	1	9	9.0		
Clean utility	1	14.0	14.0		
Dirty utility: bedpan disposal & urine test	1	12.0	12.0		
Cleaners Room	1	7.0	7.0		
Sub Total			**342.5**		

Post Acute Recovery (23 hour ward)					
Clean Store & Utility	1	14.0	14.0		
Dirty Utility	1	8.0	8.0		
Store Room	1	8.0	8.0		
Linen Room	1	4.0	4.0		
Disposal Hold	1	8.0	8.0		
Cleaners Room	1	7.0	7.0		
Parents Changing Room (With WC & Shower) (Disabled access)	1	6.0	6.0		
Parents Room	1	22.0	22.0		
Parents pantry/beverage bay	1	6.0	6.0		en-suite to Parents room
Pantry/Beverage Area with Re-gen Area	1	16.0	16.0		
Staff Base	1	8.0	8.0		
Offices - 2 person	1	13.0	13.0		
Single Rooms	10	16.5	165.0		
Patients en-suite with chamfered shower as per HBN 00-02	10	4.5	45.0		En-suite to single rooms
4 Bed Bay	3	73.0	219.0		
En-suite WC, Wash & Shower	3	7.0	21.0		1 per 4 bed bay
Trolley Bay (8 trolley cubicles)	1	78.0	78.0		Forms part of the total ward of 20 beds / trolleys
En-suite WC, Wash & Shower	1	7.0	7.0		
Discharge Lounge for Adolescents & Young People	1	20.0	20.0		
Step Down Playroom (supervised)	1	35.0	35.0		
Staff WC	2	2.0	4.0		
WC - Disabled	1	4.5	4.5		
Sub Total			**718.5**		

Support facilities					
Office: medical reporting, 1 staff	1	10.5	10.5		
Blood bank refrigerator bay	1	3.0	3.0		
Near patient testing/status laboratory	1	8.5	8.5		
Store room: flexible endoscope	1	10.0	10.0		Equiped with endoscope storeage cabinets to support daily scope requirements
Generic Laboratory	1	16.0	16.0		
Service room: equipment	1	21.0	21.0		
Parking bay: mobile x-ray & ultrasound unit	2	5.0	10.0		
Parking bay: resuscitation trolley	1	1.0	1.0		
Parking bay: fibre optic bronchoscope light source trolley	1	1.0	1.0		
Store: satellite pharmacy	1	6.0	6.0		
Store: bulk supplies	3	35.0	105.0		
Store: clinical equipment	2	30.0	60.0		
Store: linen	1	6.0	6.0		
Store: ready to use medical gas cylinders	1	4.0	4.0		
Hold: disposal	1	15.0	15.0		
Cleaners (Housekeeping) room	1	7.0	7.0		
Switchgear room	1	4.0	4.0		
UPS & IT hub room	1	9.0	9.0		
Sub Total			**297.0**		

Staff support facilities					
Rest & dining room with beverage & snack preparation bay: 40 staff	1	56.0	56.0		include 6 IT points (NOT workstations)
Workstations (6)	1	24.0	24.0		Immediately adjacent to rest/dining area and joined by a flexible partition to allow whole area to be "opened up"
Utility: footwear washing	1	4.0	4.0		
Staff changing room including boot change: 40 places	1	20.0	20.0		Male staff
Staff changing room including boot change: 70 places	1	35.0	35.0		Female staff
WC & wash: ambulant	4	2.0	8.0		
WC & handwash: accessible, wheelchair assisted	1	4.5	4.5		
Shower: ambulant (non patient)	5	2.5	12.5		
Interview/meeting room: 8 persons	1	18.0	18.0		
Seminar room: 30 persons	1	55.0	55.0		
Library & study room: 10 persons	1	30.0	30.0		
Sub Total			**267.0**		

Anaesthetic Department Facilities					
Clinical Director's Office	1	14.0	14.0		
Office: 2 staff	9	13.0	117.0		
Office: 2 staff	1	13.0	13.0		
Office: 8 staff	1	40.0	40.0		
Office - Pain Team	1	15.0	15.0		
WCs	2	2.0	4.0		
WC - Disabled	1	4.5	4.5		
Store: general & stationery	2	9.0	18.0		
Cleaners Room	1	7.0	7.0		
Sub Total			**232.5**		

Total Net			**3308.5**
Planning	**5%**		**165.4**
Sub-Total			**3,473.9**
Engineering	**3%**		**104.2**
Circulation	**25.0%**		**868.5**
Total			**4,446.6**

CT, MRI and INTERVENTIONAL SUITE

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Cross-sectional Imaging facilities: CT					
Sub-waiting area: 5 places, incl. 1 wheelchair place	1	9.0	9.0		
Assisted patient changing cubicle	1	3.5	3.5		
Patients/staff belongings locker bay	1	2.0	2.0		
Anaesthetic Room/Minor procedures room	1	19.0	19.0		
CT scanner room	1	40.0	40.0		
Lead apron & protection gear holding area	2	0.5	1.0		
Counselling/interview room: 5 places	1	9.0	9.0		
Control Room	1	16.0	16.0		
Radiologists Office / Reporting area	1	8.0	8.0		
CT Prep Room (Clean Utility)	1	14.0	14.0		
Dirty Utility	1	9.0	9.0		
Sub Total			**130.5**		

Cross-sectional Imaging facilities: MRI					
Non Controlled Area:					
Sub-waiting area: 5 places, incl. 1 wheelchair place	1	9.0	9.0		
Interview & Patient / Staff locker bay	1	9.0	9.0		
Trolley / Transfer Area to MRI Compatible Trolley	1	16.0	16.0		
Dirty Utility	1	9.0	9.0		
Controlled Area:					
Controlled Lobby			0.0		In circulation allowance
Anaesthetic Room	1	19.0	19.0		NB If located within controlled area will need to be spec'd accordingly
Ambulant Changing Cubicle	1	1.5	1.5		
Assisted patient changing cubicle	1	4.5	4.5		
Visitors & patients wc: Disabled/ wheelchair user - asstd	1	4.5	4.5		
MRI scanner engineering/technical room	1	24.0	24.0		
MRI scanner room (3 Tesla):	1	84.0	84.0		
Cleaners' room with non-ferromagnetic equipment/materials	1	7.0	7.0		
Image Review / Analysis Workstation Room	1	8.0	8.0		
Prep & Store Room (Clean Utility)	1	14.0	14.0		
Control Room	1	20.0	20.0		Includes safety records and slave anaesthetic monitors
Sub Total			**229.5**		

Shared facilities: CT & MRI & Interventional Labs					
Sub-reception/administration/records area: 2 reception & 2 workstation position	1	16.0	16.0		
Waiting area: 15 places, incl. 2 wheelchair places	1	25.0	25.0		
Allowance for children wait / play	1	15.0	15.0		
Drinking water dispenser	1	0.5	0.5		
Supt Office (2 person)	1	15.0	15.0		
WC Ambulant Asstd	1	2.5	2.5		
Visitors & Patients WC - disabled / wheelchair user - asstd	1	4.5	4.5		
Patients bed/trolley sub-waiting area: 4 places	1	20.0	20.0		include medical gases - patients may be from critical care or ED & have to wait etc
Cleaners Room	1	7.0	7.0		
Store Rooms	2	6.0	12.0		
Sub Total			**117.5**		

Total Net			**477.5**
Planning	**5%**		**23.9**
Sub-Total			**501.4**
Engineering	**3%**		**15.0**

Circulation	**28.0%**		**140.4**
Total			**656.8**

INTERVENTIONAL RADIOGRAPHY AND ANGIOGRAPHY SUITE

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Interventional Radiology & Angiography Suite					
Store room (linen)	1	2.0	2.0		
Disposal Hold	1	6.0	6.0		Also used bty CT / MRI
Dirty utility	2	12.0	24.0		En-suite to labs
Prep Rooms - en-suite to Labs	2	12.0	24.0		ensuite to labs
Interventional Radiology laboratory	1	65.0	65.0		
Cardiac Catheter (Biplane) laboratory + Theatre Set Up / Capacity	1	75.0	75.0		
Control room - shared	1	20.0	20.0		
Catheter (angiography) laboratory computer/engineering services room	2	16.0	32.0		
Scrub-up/gowning room: 3 places	2	11.0	22.0		ensuite to labs
Anaesthetic room	2	19.0	38.0		ensuite to labs
Patient bed/trolley theatre exit bay parking bay: 1 place	2	12.0	24.0		
Interventional Sterile Supplies Storage Area	1	10	10		
Office / Reporting - 4 stations	1	16	16		
Sub Total			**358.0**		

Total Net			**358.0**
Planning	**5%**		**17.9**
Sub-Total			**375.9**
Engineering	**3%**		**11.3**
Circulation	**28%**		**105.3**
Total			**492.4**

RADIOLOGY - MAIN DEPT

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Main entrance, reception & waiting facilities					
Wheelchair parking bay: 6 wheelchairs	1	4.0	4.0		
Reception/appointments desk: 3 position	1	15.0	15.0		
Central waiting area: 55 places, incl. 3 wheelchair places	1	88.0	88.0		
Staff Base (Near A&E and OPD Entrances)	1	16.0	16.0		
Trolley Wait - 4 positions	1	20.0	20.0		
Resus Bay	1	1.0	1.0		
Paeds waiting area & play area	1	15.0	15.0		
Visitors & patients wc: Ambulant user	2	2.5	5.0		
Visitors & patients wc: Disabled/ wheelchair user	1	4.5	4.5		
Porters room: 2 person (enclosed)	1	5.0	5.0		
Staff WC	2	2.5	5.0		
Disposal Hold	1	10.0	10.0		
Cleaners Room	1	7.0	7.0		
Equipment store	1	12.0	12.0		
Baby/infant feeding room	1	6.0	6.0		
Sub Total			**213.5**		

General x-ray imaging facilities					
Ambulant patients pass through changing cubicle	3	2.5	7.5		
Disabled/wheelchair patients pass through changing cubicle	1	4.5	4.5		
Bone mineral densitometry imaging room incl. control area	1	18.0	18.0		
General computed radiography x-ray room incl. control cubicle	3	40.0	120.0		
Store Room	1	8.0	8.0		
Computed radiography imaging film processing/ viewing area serving 3 exam rooms	1	30.0	30.0		
Clean Utility	1	12.0	12.0		
Dirty Utility	1	9.0	9.0		
Linen Trolley Bay	1	2.0	2.0		
Sub Total			**211.0**		

Ultrasound imaging facilities					
Visitors & patients wc: Disabled/ wheelchair user	1	4.5	4.5		
Ambulant patients changing cubicle	2	1.5	3.0		
Disabled/wheelchair patients changing cubicle	1	3.5	3.5		
Patients belongings locker bay: 12 lockers	1	1.5	1.5		
General Ultrasound examination room	2	16.0	32.0		
Patients en-suite wc: Disabled/ wheelchair user	1	4.5	4.5		
Counselling/interview room: 5 places	1	16.0	16.0		*Also identified as "soft" expansion for future 3rd U/S)
Store Room	1	6.0	6.0		
Clean Utility	1	12.0	12.0		(Shared with fluroscopy)
Dirty Utility	1	9.0	9.0		(Shared with fluroscopy)
Linen Trolley Bay	1	2.0	2.0		(Shared with fluroscopy)
staff reception	1	11.0	11.0		(Shared with fluroscopy)
Sub Total			**105.0**		

Fluoroscopy & fluorography diagnostic imaging facilities					
Ambulant patients changing cubicle	1	1.5	1.5		
Disabled/wheelchair patients changing cubicle	1	3.5	3.5		
Patients belongings locker bay: 4 lockers	1	0.5	0.5		
Lead apron & protection gear holding area	1	0.5	0.5		
Universal or remote fluoroscopy room incl. control area	1	40.0	40.0		
Computed radiography imaging film processing/viewing area	1	15.0	15.0		
Patients en-suite wc: Disabled/ wheelchair user	1	4.5	4.5		
Store Room	1	6.0	6.0		
Sub Total			**71.5**		
Offices, Reporting & Admin facilities					
Manager / CD	1	14.0	14.0		
Consultant Office - 2 person	5	13.0	65.0		
Senior radiographers office: 3 place	3	15.0	45.0		
Radiologists Communal Reporting area:	1	48.0	48.0		6 to 8 positions
Lead clinician's room	1	16.0	16.0		2 positions
Image Analysis Laboratory & Reporting Room	1	26.0	26.0		near to MRI
Head of Paediatric Clinical Physics	1	13.0	13.0		with meetings area
Secretairal / Admin office:	1	30.0	30.0		
Office supplies store	1	6.0	6.0		
Radiographer's reporting room	1	18.0	18.0		
Photocopy room / Store	1	6.0	6.0		
Sub Total			**287.0**		

Whole Department: Staff facilities					
Staff wc & wash: Ambulant user	2	2.5	5.0		
Staff wc: Disabled/wheelchair user	1	4.5	4.5		
Staff shower	2	2.5	5.0		Split M:F
Staff Lockers	1	18.0	18.0		Split M:F
Seminar room: 20 places	1	35.0	35.0		Equiped with 4 workstations. (En-suite to hot desk/staff support to allow whole area to be "opened up" into an 80m2 space
Hot Desk/Staff Support Area (6 x workstations)	1	45.0	45.0		With 50/50 split via temporary partition between workstation and support area
Sub Total			**112.5**		

MRI Suite					
Non Controlled Area:					
Sub-reception/administration/records area	1	11.0	11.0		
Sub-waiting area / patient familiarisation / Simulator	1	26.0	26.0		
Interview & Patient / Staff locker bay	1	9.0	9.0		
Trolley / Transfer Area to MRI Compatible Trolley	1	16.0	16.0		Also supports secondary function as an infrequent "recovery area"
WC - Disabled	1	4.5	4.5		
Clean Utility	1	12.0	12.0		May be shared with ultrasound/fluro if design allows

Dirty Utility	1	9.0	9.0		May be shared with ultrasound/fluro if design allows
Linen Trolley Bay	1	2.0	2.0		May be shared with ultrasound/fluro if design allows
Controlled Area:					
Controlled Lobby	0	17.0	0.0		In circulation allowance
Ambulant Changing Cubicle	1	1.5	1.5		
Assisted patient changing cubicle	1	3.5	3.5		
Visitors & patients wc: Disabled/ wheelchair user - asstd	1	4.5	4.5		
MRI scanner engineering/technical room	1	24.0	24.0		
MRI scanner room (3 Tesla):	1	84.0	84.0		Size varies 65m2 to 84m2 according to position of room and if some of field is external to building and access restricted. Access to install / remove magnet is critical to design - identify exterrnal wall (panels?)
Cleaners' room with non-ferromagnetic equipment/materials	1	7.0	7.0		
Image Review / Analysis Workstation Room	1	8.0	8.0		
Patient Prep & Store Room	1	16.0	16.0		
Feed/sleep area	1	9.0	9.0		Transferred from CT & MRI Schedule
Control Room	1	20.0	20.0		Includes safety records and slave anaesthetic monitors
Sub Total			**267.0**		

Total Net			**1,267.5**
Planning	**5%**		**63.4**
Sub-Total			**1,330.9**
Engineering	**3%**		**39.9**
Circulation	**27%**		**359.3**
Total			**1,730.1**

CARDIOLOGY TESTING

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Testing Area					
Sub-reception: 1 position	1	8.0	8.0		
Sub-waiting area: 10 places, incl. 2 wheelchair	1	16.0	16.0		
Drinking water dispenser	1	0.5	0.5		
Patient Trolley / Chairs Bay	1	8.0	8.0		
Visitors & patients wc: Disabled/ wheelchair user	1	4.5	4.5		
Physical measurement bay	1	3.5	3.5		
Echocardiography room	3	18.0	54.0		
Exercise ECG room:	2	16.0	32.0		
Other Testing / Consult	2	16.0	32.0		Including Holter Tape
Sterile supplies store	1	6.0	6.0		
Equipment store	1	4.0	4.0		
Sub Total			**168.5**		

Case Conference / Pre Op Reviews					
Meetings / Seminar Room	1	30.0	30.0		With Audio-Visual equip
Sub Total			**30.0**		

Total Net			**198.5**
Planning	**5%**		**9.9**
Sub-Total			**208.4**
Engineering	**3%**		**6.3**
Circulation	**30%**		**62.5**
Total			**277.2**

CLINICAL INVESTIGATION/ MEDICAL DAY UNIT

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Entrance and Reception					
Reception & Nurse Base - 2 position	1	10.0	10.0		
Workstation Area - 4 positions	1	16.0	16.0		
Manager's Office	1	9.0	9.0		Opens into workstation / reception area
Waiting & Play Area	1	24.0	24.0		
Visitors wc: Ambulant user	1	2.5	2.5		
Visitor / Patients wc: Disabled/ wheelchair user	1	4.5	4.5		
Sub Total			**66.0**		
Patient investigation & treatment spaces					
Consulting/examination room: dual sided couch access	2	13.5	27.0		With med gas
Prep Room / Clean Store	1	8.0	8.0		
Treatment room	2	16.0	32.0		With Med Gas.
Dirty utility	1	9.0	9.0		
Day Room (8 chairs)	1	36.0	36.0		With Med gas for 8 chairs.
Ensuite	2	4.5	9.0		
Patient trolley area - 10 trolley cubicles	1	80.0	80.0		With Med gas and parent's chair for each trolley space
Sub Total			**201.0**		
Other areas					
Family Interview room	1	11.0	11.0		
Family Instruction / Staff Training Room	1	14.0	14.0		with clinical WHB
Beverage preparation bay	1	6.0	6.0		
Sub Total			**31.0**		
Sanitary facilities					
Staff WC	1	2.0	2.0		
Staff Lockers & change	2	5.0	10.0		
Patients wc: Disabled/ wheelchair user	1	4.5	4.5		
Sub Total			**16.5**		
Support spaces					
Resuscitation trolley parking bay: 1 trolley	1	1.0	1.0		
Notes Cupboard	1	2.0	2.0		
General store	1	4.0	4.0		
Disposal hold	1	6.0	6.0		
Linen Cupboard	1	2.0	2.0		
Sub Total			**15.0**		

Total Net			**329.5**
Planning	**5%**		**16.5**
Sub-Total			**346.0**
Engineering	**3%**		**10.4**
Circulation	**27%**		**93.4**
Total			**449.8**

REHABILITATION: THERAPY & ORTHOTICS

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Entrance & Waiting					
Sub-reception: 1 position	1	8.0	8.0		
Sub-waiting area: 20 places, incl. 2 wheelchair places	1	32.0	32.0		
Drinking water dispenser	1	0.5	0.5		
Social Work	1	12	12		
Visitors & patients wc: Ambulant user	2	2.5	5.0		
Allowance for Classroom(s) & Assoc Accomm	1	80.0	80.0		
Visitors & patients wc: Disabled/ wheelchair user	1	4.5	4.5		
Sub Total			**142.0**		
Hydotherapy Pool					
Staff base: 2 staff	1	6.0	6.0		
Waiting area: 3 persons including 1 wheelchair user	1	6.0	6.0		
Patient changing room with cubicles, 6 places, ambulant persons	1	12.0	12.0		
WC dual access & handwash: accessible, wheelchair assisted	1	5.5	5.5		
Hydrotherapy pool	1	30.0	30.0		
Store: equipment, hydrotherapy pool & cleaning	1	5.0	5.0		
Hydrotherapy: laundry & utility room	1	6.0	6.0		
Sub Total			**70.5**		
Therapy Treatment & Orthotics					
Small Gymnasium (Equipment Room)	1	24.0	24.0		
ADL Kitchen (small)	1	22.0	22.0		
Flexible Treatment / Consult Rooms	10	12.0	120.0		
Consult / Exam / Exam (Single Sided)	2.0	13.5	27.0		
Treatment - large	1	16.0	16.0		
Store: exercise equipment, activity area	1	6.0	6.0		
Store: exercise equipment, therapy treatment cubicles	1	6.0	6.0		
Therapy Room	1	14.0	14.0		
Group Teaching Room	1	15.0	15.0		
Machine Room	1	25.0	25.0		
Fabrication Workroom	1	50.0	50.0		
Store Room	1	28.0	28.0		
Cast Rectification Room	1	20.0	20.0		
Casting Rooms	3	10.0	30.0		
Store Room	1	8.0	8.0		
Sub Total			**411.0**		
Staff Facilities					
Offices -1 person	2	9.0	18.0		
Staff Base / Workstations	2	18.0	36.0		
OT Base	1	24.0	24.0		
Staff Restroom & Beverages	1	18.0	18.0		
Staff WCs	3	2.0	6.0		
Cleaners Room	1	7.0	7.0		
Sub Total			**109.0**		

Total Net			**732.5**
Planning	**5%**		**36.6**
Sub-Total			**769.1**
Engineering	**3%**		**23.1**
Circulation	**22%**		**169.2**
Total			**961.4**

OUTPATIENTS

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Outpatient Entrance					
Enquiry / reception point	1.0	10.0	10.0		
Vending Area & Telephones	1.0	3.0	3.0		
Sub Total			**13.0**		
Phlebotomy Room (1 position)	2.0	8.5	17.0		
Physical Measurement (5 Bays)	1.0	18.0	18.0		
Medicines Management Room / Dispensing	1.0	15.0	15.0		
Youth Booth	1.0	16.0	16.0		
Baby / Infant Feeding Room	1.0	5.0	5.0		
Nappy Change Room	1.0	4.0	4.0		
Toilets	4.0	2.5	10.0		
Disabled WC	1.0	4.5	4.5		
Store	1.0	6.0	6.0		
Cleaners Room	1.0	6.0	6.0		
Sub Total			**101.5**		
Total for Outpatient Entrance			**114.5**		

Admin & FM & Staff Areas etc					
Medical Records Sorting / Holding	1.0	15.0	15.0		
Disposal Hold	3.0	6.0	18.0		
Resus Bays	1.0	1.0	1.0		
OPD Manager	1.0	10.0	10.0		
OPD Sister	1.0	10.0	10.0		
Admin / Clinical Notes Workstations	1.0	16.0	16.0		
Changing & Shower / WC - Male Staff	1.0	8.0	8.0		
Changing & Shower / WC - Female Staff	1.0	18.0	18.0		
Sub Total			**96.0**		

Generic OPD Cluster A					
Waiting Area (incl parent supervised play)	1.0	45.0	45.0		
Reception / Office - 3 position	1.0	12.0	12.0		
WC - Disabled Size	1.0	4.5	4.5		
Nurse Base	1.0	4.0	4.0		Adjacent to waiting area
Relatives / Interview / Counselling Room	1.0	9.0	9.0		
Treatment Room (with prep area)	1.0	16.5	16.5		
Consult / Exam Room	8.0	16.5	132.0		
Equipment / General Store	1.0	5.0	5.0		
Sub Total			**228.0**		

Generic OPD Cluster B					
Waiting Area (incl parent supervised play)	1.0	30.0	30.0		
Reception / Office - 3 position	1.0	12.0	12.0		
WC - Disabled Size	1.0	4.5	4.5		
Nurse Base	1.0	4.0	4.0		Adjacent to waiting area
Relatives / Interview / Counselling Room	1.0	9.0	9.0		
Treatment Room (with prep area)	1.0	16.5	16.5		
Consult / Exam Room	8.0	16.5	132.0		
Equipment / General Store	1.0	5.0	5.0		
En-suite Bathroom / WC to Treatment Room			6.0		
Additional Space Allowance for Treatment Room			4.5		
Sub Total			**223.5**		

OPD Cluster C (Nephrology & Dental)					
Waiting Area (incl parent supervised play)	1.0	30.0	30.0		
Reception - 3 position	1.0	12.0	12.0		
WC - Disabled Size	1.0	4.5	4.5		
Nurse Base	1.0	4.0	4.0		Adjacent to waiting area
Dental Room (1 chair)	2.0	20.0	40.0		
Dental Lab	1.0	6.0	6.0		
Consult / Exam / Exam (Single Sided)	5.0	13.5	67.5		
Treatment Room (with prep area)	1.0	16.5	16.5		
Equipment / General Store	1.0	6.0	6.0		
Sub Total			**186.5**		

Generic OPD Cluster D					
As Cluster A			228.0		
Plaster Treatment Room & Store			36.0		4 couches + Desk etc + Store
Sub Total			**264.0**		

Utility Room Support for Clusters A & B					
Clean Utility	1.0	14.0	14.0		
Dirty Utility	1.0	9.0	9.0		
Store Room	1.0	8.0	8.0		
Specimen / Disabled WC	1.0	4.5	4.5		with hatch to dirty utility
Linen Cupboard	1.0	1.0	1.0		
Staff WC	1.0	2.0	2.0		
Cleaners Room	1.0	6.0	6.0		
Sub Total			**44.5**		

Utility Room Support for Clusters C & D					
As for Clusters A&B			44.5		
Sub Total			**44.5**		

OPD Cluster E (Ophthalmology & Dietician)					
Waiting Area (incl parent supervised play)	1.0	45.0	45.0		
Reception - 3 position	1.0	12.0	12.0		
WC - Disabled Size	1.0	4.5	4.5		
Nurse Base	1.0	4.0	4.0		Adjacent to waiting area
Orthoptic Examination Room	3.0	20.0	60.0		
Ophthalmology consulting/examination room	4.0	13.0	52.0		
Equipment / General Store	1.0	6.0	6.0		
Sub Total			**183.5**		

OPD Cluster F (Audiology)					
Waiting Area (incl parent supervised play)	1.0	30.0	30.0		
Reception - 3 position	1.0	12.0	12.0		
WC - Disabled Size	1.0	4.5	4.5		
Nurse Base	1.0	4.0	4.0		Adjacent to waiting area
Audiometric Test Room	4.0	30.3	121.2		
Lobby & Control Areas	4.0	8.0	32.0		with window to test room
Workshop	1.0	12.0	12.0		
Interview / Fitting / Consult / Vestibular Function	4.0	16.0	64.0		Sound dampened - see National standards
Equipment / General Store	1.0	6.0	6.0		
Sub Total			**285.7**		

Utility Room Support for Clusters E & F					
Electrophysiology Room	2.0	21.0	42.0		
Clean Utility	1.0	14.0	14.0		
Store Room	1.0	8.0	8.0		
Linen Cupboard	1.0	1.0	1.0		
Staff WC	1.0	2.0	2.0		
Sub Total			**67.0**		

OPD Cluster G (Neurology)					
Waiting Area (incl parent supervised play)	1.0	12.0	12.0		
Reception - 1 position	1.0	8.0	8.0		
WC - Disabled Size	1.0	4.5	4.5		
Staff WC	1.0	2.0	2.0		
Standard Single Sided Consult Rooms	4.0	13.5	54.0		
EEG	2.0	16.0	32.0		
Reporting / Viewing Room	1.0	25.0	25.0		
meeting rooms	2.0	20.0	40.0		
Treatment Room	1.0	16.0	16.0		
Family Room	1.0	13.5	13.5		
Assessment Classroom	1.0	12.0	12.0		
Library	1.0	12.0	12.0		
Sub Total			**231.0**		

Lung Function Suite					
Lung Volumes Lab	1	21.5	21.5		
Exercise Test lab	1	23	23		
Sweat Test Lab	1	12.5	12.5		
Infant Lung Function Lab	1	13	13		
Fitness to Fly Lab	1	12	12		
Clinical Prep/Store	1	7	7		
Reporting room	1	18	18		
Shower	1	6.5	6.5		
Sub Total			**113.5**		

Total Net			**2,082.2**
Planning	**5%**		**104.1**
Sub-Total			**2,186.3**
Engineering	**3%**		**65.6**
Circulation	**31%**		**677.8**
Total			**2,929.7**

Main OPD Area	**2,486.0**
Audiology	**443.7**

PSYCHOLOGY & LIAISON PSYCHIATRY

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Outpatient Area					Position alongside a main OPD Cluster
General Office & Reception	1	12.0	12.0		with overview of waiting area
Sub - Waiting Area	1	12.0	12.0		
WC - Asstd Ambulatory	1	2.5	2.5		
Clinical Interview Rooms	2	12.0	24.0		
Interview Room (Obs Family / Play)	1	20.0	20.0		
Observation Room	1	8.0	8.0		
Sub Total			**78.5**		

Total Net			**78.5**
Planning	**5%**		**3.9**
Sub-Total			**82.4**
Engineering	**3%**		**2.5**
Circulation	**30%**		**24.7**
Total			**109.6**

CHILD PROTECTION UNIT

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Child Protection Suite					
Consult / Treatment	2	16.5	33.0		Includes use of scopes. 2 way mirror
Family / Police Room	1	12.0	12.0		
Clinical Bathroom	1	6.0	6.0		
Sub Total			**51.0**		

Total Net			**51.0**
Planning	**5%**		**2.6**
Sub-Total			**53.6**
Engineering	**3%**		**1.6**
Circulation	**25%**		**13.4**
Total			**68.5**

DEPT OF CHILD FORENSIC PSYCHOLOGY

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
DCFP					
Reception	1	10	10		Reception / waiting combined
Large group interview room(Therapy room)	1	18	18		
Observation room	1	9	9		
Therapy Rooms	3	10	30		
Soft Play ball	1	100	100		
Staff room (max 10 people)	1	15	15		
Multi disciplinary team room (10 person)	1	20	20		
Assisted Bathroom	1	14	14		
Assisted Shower room	1	8	8		
Nurses Station	1	12	12		
Work Station room	1	15	15		
Dining room	1	20	20		
Living room	1	18	18		
Quiet room	1	10	10		
OT/SLT Therapy room	1	15	15		
Therapy room with wet and dry areas	1	15	15		
2 - Bed room	2	34	68		
1 - Bed room	3	16.5	49.5		
Ensuite WC & WHB	2	4.5	9		
Store - therapy equipment	1	5	5		
school - classrooms	1	10	10		
school - classrooms	1	15	15		
school - office (3 staff)	1	15	15		
school - store	1	5	5		
school - wc's (disabled)	2	4.5	9		
ward pantry	1	12	12		
clinic treatment room	1	16.5	16.5		
DSR	1	7	7		
Sluice	1	10	10		
Storage	1	10	10		
Ward Manager Office	1	9	9		
Sub Total			**579.0**		

Total Net			**579.0**
Planning	**5%**		**29.0**
Sub-Total			**608.0**
Engineering	**3%**		**18.2**
Circulation	**24%**		**145.9**
Total			**772.1**

MAIN ENTRANCE & PUBLIC AREAS

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Entrance					
Entrance draught lobby	1	12.0	12.0		
Entrance concourse	1	30.0	30.0		
Patient trolley/wheelchair parking bay:	1	6.0	6.0		
Refreshment vending machine bay	1	3.0	3.0		
Telephones w/chair height	1	1.5	1.5		
Telephones	2	1.0	2.0		
Shopping & pushchair bay	1	8.0	8.0		
Pay-on-foot car park ticket bay	1	6.0	6.0		
Sub Total			**68.5**		
Reception					
Main Reception & Information	1	15.0	15.0		
Cashiers office	1	12.0	12.0		With security hatch & safe
Waiting area: 25 places, incl. 3 wheelchair places	1	40.0	40.0		
Sub Total			**67.0**		
Sanitary facilities					
WC: visitor ambulant user	4	2.5	10.0		
WC: visitors disabled/ wheelchair user	2	4.5	9.0		
Baby/infant feeding room	1	5.5	5.5		
Nappy change room	1	4.0	4.0		
Disabled changing/WC	1	10	10		
Cleaners Room & Equipment Store	1	12.0	12.0		
Sub Total			**50.5**		
Elective Admission & Discharge Lounge					
Reception/admissions office	1	12	12.0		
Interview rooms	2	9	18.0		
Ambulance Crew Room	1	12.0	12.0		
Sub Total			**42.0**		
Security & Porters					
Security (local) & Porters room:	1	14.0	14.0		
Sub Total			**14.0**		
Chaplaincy					
Vestibule	1	5.0	5.0		
Washing Area	1	4.0	4.0		
Chapel	1	30.0	30.0		Multi - worship
Quiet / Counselling Room	1	9.0	9.0		
Vestry office: 2 places	1	13.0	13.0		
Sub Total			**61.0**		
Radio Lollipop & Siblings Creche					
Entrance / Office	1	10.0	10.0		
Lobby & Waiting to Studio & Creche	1	8.0	8.0		
Broadcasting Studio	1	12.0	12.0		
En-suite store to Studio	1	3.0	3.0		
Siblings Creche	1	25.0	25.0		
Sub Total			**58.0**		

Volunteers Service					
Office - 2 person	1	13.0	13.0		
Volunteers Lounge & Meetings Room	1	18.0	18.0		With Beverage area
Sub Total			**31.0**		

Family Bereavement Service					
Waiting Area (4 persons)	1	6.0	6.0		
Office -- 1 person + visitors	2	11.0	22.0		
Children's Therapy Room	1	11.0	11.0		
Counselling Room	2	9.0	18.0		
WC - Ambulatory Asstd	1	2.5	2.5		
Sub Total			**59.5**		

Patient Information & Support					
Patients advocates room	1	12.0	12.0		
Interview Room - 5 places	2	9.0	18.0		
Family Information & resource centre (including Internet & NHS Information Stations x 4)	1	25.0	25.0		
Office - 2 person	1	13.0	13.0		
Sub Total			**68.0**		

Total Net			**519.5**
Planning	**5%**		**26.0**
Sub-Total			**545.5**
Engineering	**3%**		**16.4**
Circulation	**25%**		**136.4**
Total			**698.2**

Retail & Café					Gross area allowances
General Retail Space			20.0		
Snack Bar (incl seating area)			48.0		
Gross Total			**68.0**		

Additional Atria Allowance

GROUND FLOOR TOTAL **766.2**

WC Allowance for Upper Floors
3 floors @ 15m2 per floor **45.0**

DEPARTMENT TOTAL **811.2**

CONSULTANT OFFICES AND SUPPORT ACCOMMODATION

Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment
Management & Meeting Rooms					
Management Offices	2	14.0	28.0		
Admin & Secretarial Support - 5 person (25m2) + files annexe (5m2)	1	30.0	30.0		
Other Operational Management Offies - 2 person	4	13.0	52.0		
Store Rooms	2	4.0	8.0		
Photocopying Rooms	1	6.0	6.0		
Conference / Meeting Rooms	2	25.0	50.0		
Beverage Bay	1	6.0	6.0		
Cleaner's Room	1	7.0	7.0		
WCs - Ambulant User	2	2.0	4.0		
WCs - Independent Wheelchair	1	4.5	4.5		
Sub Total			**195.5**		

Total Net			**195.5**
Planning	**5%**		**9.8**
Sub-Total			**205.3**
Engineering	**3%**		**6.2**
Circulation	**30%**		**61.6**
Total			**273.0**

NEW SOUTH GLASGOW HOSPITAL

Clinical Output Specification

AREA	EMERGENCY COMPLEX - EMERGENCY DEPARTMENT

1. INTRODUCTION

The Emergency Complex (EC) is a significant component of the new build and will bring together the Emergency Department (ED) and Acute Assessment Unit (AAU) into an integrated functional unit. The two areas have distinct functions but require a location that enables them to work synergistically to manage the majority of all acute presentations to the hospital.

1.1 The Services provided include:

The Emergency Department treats unselected, unheralded, undiagnosed or unstable patients requiring time-critical differentiation or time-critical management to save life or relieve suffering. It is open 24/7 and is also the default locus for patients felt to be in need of immediate management by NHS24, GPs or the ambulance service. The ED at the New SGH will also have a Minor Injuries Unit staffed by Emergency Nurse Practitioners and act as the base for major incident response for the hospital. It will be staffed by consultants in Emergency Medicine from 8am to midnight 7 days per week complemented by a range of Emergency Medicine medical and nursing staff.

The ED will have rapid access to the AAU, critical care areas, theatres, imaging and helicopter landing site (expectation of approximately 1 landing per day including transfers to the New Children's Hospital).

The core functions of the Emergency Department include:

- Resuscitation
- Majors (999, GP unstable, air and road transfer unstable, self referral) including:
  - Acute chest pain
  - Acute Stroke
  - Trauma
  - Unconsciousness
- Minors (See, Treat or Triage – nurse/ENP delivered)

1.2 The Services provided exclude:

Certain acute admissions will not be processed by the EC as at present:

- Planned transfers to ITU or CCU
- Planned transfers to Neurology or Neurosurgery (including Neuro-Intensive Care)
- Planned transfers to the National Spinal Injuries Unit
- Planned return transfers to wards (e.g. from Golden Jubilee National Hospital)
- GP referred or 999 calls related to impending maternity delivery
- Stable transfers for specialty review including ENT, oral surgery and ophthalmology

2. LOCATION AND LINKS

2.1 Clinical Facility Requirements

The ED will have an emergency 'blue light' entrance and an ambulatory entrance. It will be adjacent to the Children's Hospital ED. The main elements of the emergency department accommodation requirements are described below:

- Resuscitation Room
- Majors area (high dependency and acute) and minors area
- MIU Assess and Treatment Rooms
- Head and neck treatment rooms
- Gynaecological/examination rooms
- Major procedure room
- Decontamination facilities
- Isolation facilities
- Major incident facilities

2.2 Internal Relationships

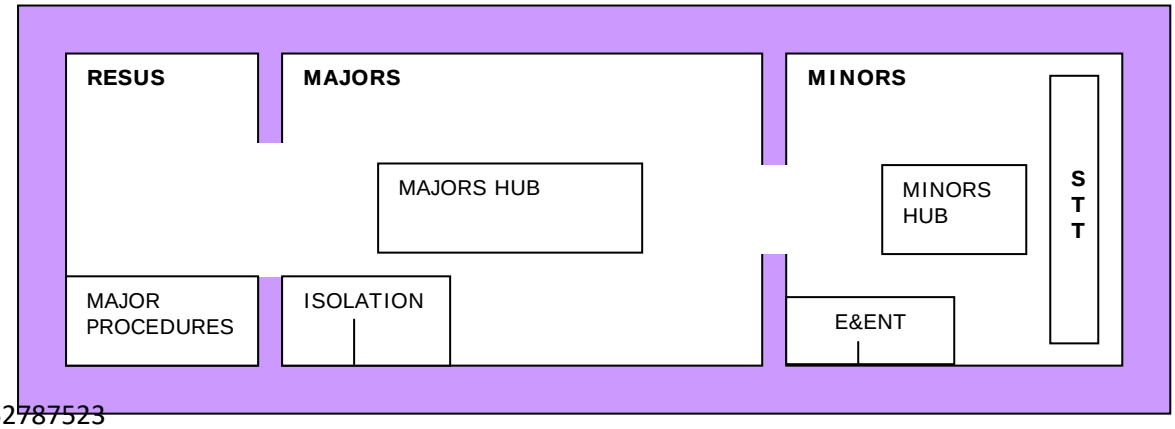
The majority of patients attending the ED will follow a pathway that will not involve an inpatient stay, however, a significant proportion will require a radiological investigation within the imaging department.

The second largest group of patients will be admitted to the Acute Assessment Unit and a much smaller group will be admitted to the inpatient wards.

2.2.1 The ED will have:

- 6 resuscitation room bays
- 2 major procedure rooms (part of the resuscitation room)
- 26 patient treatment spaces (16 for majors, 10 for minors)
    - 16 major spaces (including 2 negative pressure sealed rooms)
    - 10 minors cubicles
- 4 Minor Injury (See, Treat or Triage) rooms
- 1 Gynaecology/Examination room
- 2 Head & Neck (Eyes & ENT) rooms
- 1 secure examination/disturbed patient room
- Blood gas analyser within resuscitation
- Point of care testing room
- All appropriate facilities as specified in SHPN22

2.2.2 Diagram of functional relationship of ED areas (Note NOT to scale)



2.2.3 Resuscitation Room

The resuscitation room will open directly onto and into the majors area of the ED.
The resuscitation room of the ED is the main focus for acute activity in the hospital. It will be comprised of 6 full size bays each (and 2 major procedures bays) of which is configured to manage serious injury or illness up to and including:

- Emergency anaesthesia
- Intubation and ventilation
- Invasive monitoring
- Non-invasive ventilation
- Cardiopulmonary resuscitation
- Invasive procedures
- Resuscitative thoracotomy or laparotomy
- Emergency delivery/childbirth

Although designed for the care of adults and adolescents unsuitable for management in the children's hospital the resuscitation room may rarely be required to manage a newborn infant as a result of precipitous delivery in the department. It will therefore have neonatal resuscitation equipment and a resuscitaire within the resuscitation room ready to use but will not have one of the main bays specifically for paediatric cases.

The resuscitation room will have integral plain x-ray facilities with an overhead gantry and ultrasonography equipment based in the resuscitation room. There must be sufficient space for the x-ray gantry to be stored without compromising available space within any of the actual patient bays or cubicles.

The room will be divided with either partial walls/x-ray protective screens.

Potential workload will be influenced by the ability to monitor unwell patients who do not require active/invasive resuscitation and stabilisation in the majors area. Scaling up current levels of "true" resuscitation cases who are not suitable for a high specification majors area gives us a planning estimate for 10 cases per day (for at least 18 days per year).

	Resuscitation Room
Median	2
90th per	8
95th per	10
Max	12

2.2.4 Major Procedures Rooms

These two rooms will be contiguous to the resuscitation room or even form partitioned sections of it. It will be used for manipulation of distal limb fractures and limb dislocations. It will also be used for procedural sedation (including dissociative sedation) with the ability to act as a quiet room for recovery from sedation while maintaining the full resuscitative facilities of the adjacent resuscitation room.

This room will also act as an additional resuscitation area during major incidents or and as a secure resuscitation area for high-risk patients under police escort (which

the New SGH will require as the designated hospital for such patients). The room should have an access door so that high-risk escorted patients can be brought in and out without passing through the main ED clinical areas.

Scaling up current activity to the level of attendances at the New SGH gives us an median of 2 major procedures per day with at 7 procedures being carried out on at least 18 days per year.

	Major Procedures
Median	2
90th per	3
95th per	7
Max	12

2.2.5 Majors Area

Majors cubicles will have identical layouts and utilities will not be “mirrored”. They will have 3 solid walls with the fourth side consisting of a clear full length clear door which can be rendered opaque or screened easily. If solid, the fourth side must open outwards to ensure staff safety. Each area will allow the patient to be accessed on 4 sides if necessary.

The majors area will be orientated so that all cubicles face onto a central hub or station where medical and nursing staff will be based. This hub will act as a central monitoring point and will have vital signs monitoring relayed from the resuscitation and each of the majors cubicles.

This hub should be open on all four sides but should have enclosed worktops so that seated staff can complete documentation without being directly observed by patients. This can also be achieved by raising the central hub above the main floor level.

There should be an area where telephone calls can be made without being overheard by patients, relatives or other staff when required. This could be achieved with a separate office directly opening onto the majors area or by creating a semi-opaque bubble in the centre of the hub area. The majors area should also be directly adjacent and open directly into the resuscitation room to allow free movement of patients between the two areas.

All majors cubicles should have monitoring specification equivalent to that in the resuscitation room so that in extreme circumstances (ED overload, resuscitation room unavailable or major incidents) each of these bays can be converted into a resuscitation bay. Under normal circumstances these bays should be appropriate for invasive monitoring and non-invasive ventilation.

2.2.6 Isolation Facilities

The ED should have two majors cubicles which can be used to isolate high risk patients once they have been identified (e.g. multi-drug resistant TB, suspected haemorrhagic fever, severe neutropenia, and high risk infections e.g. SARS-like illness). This would act as a temporary holding area until a definitive destination was identified for such a patient.

These 2 rooms should be able to be used as a normal majors cubicle so that it is constant use and does not need to be specifically set up and will not lie empty for the majority of its time.

The rooms will have clear open outward doors and the ability to isolate its airflow. They will be sealed with negative pressure.

2.2.7 Minors Area

The minors area of the ED will be arranged around a separate but similar central station or hub as for the majors area. All cubicles will face onto and be visible to this area. All cubicles will be identical with room to access patient on 4 sides if necessary.

Care within the minors area will be largely but not exclusively delivered by Emergency Nurse Practitioners (ENPs). As distinct from the stand alone Minor Injury Units this area will also be involved in the training of medical staff for Emergency medicine and General Practice and as such there will be some involvement of training grade medical staff and the area will be overseen by senior medical and nursing staff in Emergency Medicine.

2.2.8 See, Treat or Triage (STT)

The model of care for minor injuries within the ED will be See, Treat or Triage (STT).

The first point of contact once patients are registered at the walking entrance of the department will be 3 or 4 parallel rooms where experienced ED nursing staff and ENPs will manage and discharge or triage patients following assessment and measurement of physiological parameters. These rooms will be used flexibly and staffed according to demand (for example only one room may be required during very quiet periods). Patients will either be discharged directly from these rooms or will be triaged and passed through to the appropriate area of the ED.

2.2.9 Plaster Room

A plaster room is required for the management of patients within the ED. The ED will have a satellite plaster room with 2 bays for application of plaster casts along with an adequate storage area for plastering supplies and walking aids. Restock of this area would be from the main plaster facility during daylight hours.

2.2.10 Decontamination Facilities

The chemical decontamination unit should be part of the building rather than an external feature. The decontamination unit should be easily accessed from the ambulance entrance. It will be composed of a vestibule area, a shower area and a dressing area.

The area will require the ability to isolate drained water into a separate tank for onward disposal. The decontamination unit will require negative pressure and the unit's air conditioning system will need to be isolated from the main air conditioning system.

The decontamination unit should have fixed oxygen and suction. The walls and floors must be of a material that can be washed down and decontaminated in line with the HAI-Scribe.

2.2.11 Head/Neck examination rooms

These two rooms should form part of the minors area room complement and should not be in a separate area. This allows them to be used for more than ENT and eye problems and allows potentially serious conditions such as epistaxis (nosebleeds) to be managed in an area with easy access to resuscitation facilities.

2.2.12 Disturbed adult/patient rooms

One room configured for violently disturbed patients will be situated adjacent to the majors area or at the junction of the majors and minors areas of the ED. The room will require 2 exits and safety features consistent with the latest Royal College of Psychiatry and SHPN guidance. Such patients are at high risk of physical deterioration and may require emergency sedation.

2.3 Access & Key Departmental Relationships

2.3.1 Access Requirements

The adult ED should be adjacent to the Children's Hospital ED. It will be important to test journey times and routes around the department generally and from the ambulatory entrance to resuscitation. In planning the ED facilitity, designers should understand that seriously ill patients may present at the ambulatory entrance and minor cases may present at the emergency entrance. Similarly, it is possible that a young person, under 16 years of age, might present at the SGH ED. In this regard, an extremely ill child presenting at the SGH ambulatory entrance should be able to gain immediate access to the Children's ED treatment areas within 1 minute of presentation, including access to a resuscitation room if necessary.

Road signage and wayfinding, generally, for the emergency departments is of critical importance, to ensure that patients and relatives are able to identify the correct entrance.

2.3.2 Functional Relationships

A table of functional relationship requirements is set out below. It should be noted that very large volumes of ED patients will enter into the imaging department and then return to ED. Thus, the location of the modalities concerned (principally, plain film, ultrasound and CT) must be as seamless as possible to ED and also allow for both ambulatory patients and patients on trolleys. Some of these links might be dedicated – e.g. a link from resuscitation to CT scanning

Vertical routes to theatres, critical care, scanning and wards are also required. A short route to the Acute Assessment Unit is also required. A route from the roof top helipad to resuscitation also needs to be demonstrated.

Close to	Reason	*Category
Emergency Ambulance bay / Major incident	Emergency admission of resus. patients and majors. Transfer of patients to other hospitals e.g. GRI for plastic surgery, Golden Jubilee for PPCI.	1
Pedestrian entrance	Access for GP & self-referred patients	1
Acute Assessment Unit (Immediate Assessment Area)	Rapid transfer for medical or surgical assessment	1
Operating theatres	Rapid transfer for emergency surgery	2
Imaging	Critical for rapid assessment	1
CCU	Rapid transfer of acutely sick patients	2
GEMS	Referral to Out-of-Hours Primary Care	1
Critical Care	Rapid transfer of acutely sick patients	2
General Wards	Transfer after admission decision	2
Stroke Unit	Rapid transfer for assessment & treatment	2

*1 = Essential adjacent
*2 = Important 2 minutes walking
*3 = Desirable 5 minutes walking

3. ACTIVITY INDICATORS

3.1 Future Projected Activity

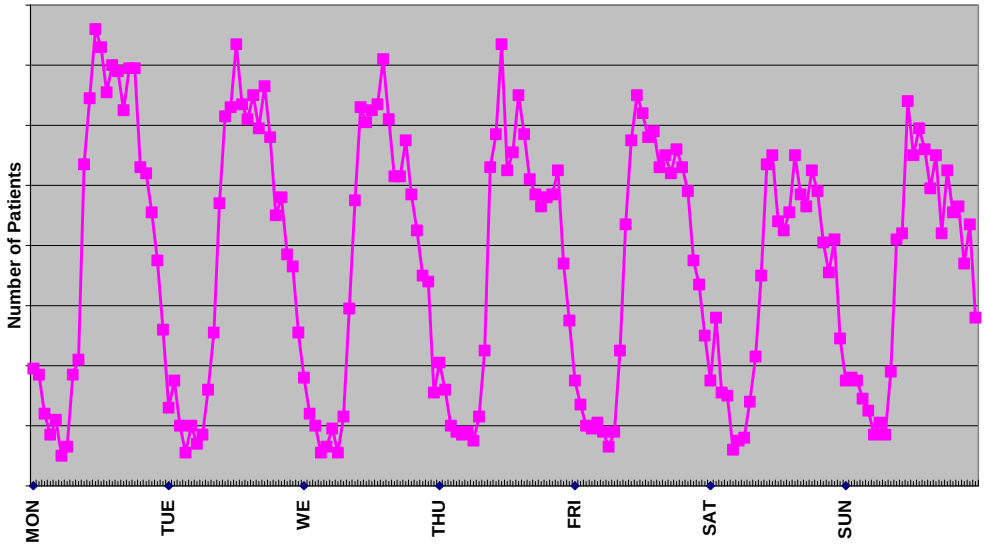
The Emergency Department will average 262 attendances per day (excluding minor injuries which number approximately 23,928 i.e. total of 327 per day)

Hospital	Mean	Median	5th percentile	95th percentile
New SGH	262	259	234	310

3.1.1 Excluding minors:

18 days per year it will have > 310 attendances
3-4 days per year it will have > 323 attendances

These attendances would not be in a steady stream but would fluctuate considerably (average of 11 new patients per hour ranging from 1 to 23) by day and hour in the following pattern.



3.1.2 Ambulance Arrivals

113 ambulance arrivals per day are expected

Hospital	Mean	Median	5th percentile	95th percentile
New SGH	113	112	86	140

3.1.3 Deaths & ITU Admissions

3 deaths or ITU admissions per day are projected (with a range of 1 to 8)

4. HOURS OF SERVICE AND WORK PATTERNS

The Emergency Department treats unselected, unheralded, undiagnosed or unstable patients requiring time-critical differentiation or time-critical management to save life or relieve suffering. It is open 24/7 and is also the default locus for patients felt to be in need of immediate management by NHS24, GPs or the ambulance service. The ED at the New SGH will also have a Minor Injuries Unit staffed by Emergency Nurse Practitioners and act as the base for major incident response for the hospital. It will be staffed by consultants in Emergency Medicine from 8am to midnight 7 days per week complimented by a range of Emergency Medicine medical and nursing staff.

5. ROOM OCCUPANCY REQUIREMENTS

Please refer to ADB sheets for this information

6. CARE MODEL, PATHWAY & PATIENT FLOWS

6.1 Care Model

Patients attending the hospital with unselected medical and traumatic emergencies who require time critical diagnosis or interventions will be managed in a consultant led; experienced staff delivered, and fully equipped Emergency Department. Critical care and advanced diagnostic skills will be used to provide the highest standard of care possible for major resuscitation and seriously ill patients. Minor injuries and emergencies will also be managed by experienced medical and nursing staff to the highest quality possible in a timely, efficient and professional manner.

The ED design will be based around the following principles:

6.1.1 Visibility

The ED will be designed to allow maximum visibility of patients within each area by arranging groups of patient spaces around a series of hubs (one each for resuscitation, majors and minors areas respectively). Glass and semi opaque partitions will be used wherever possible balanced against the need for privacy and dignity of each patient. This will maximise the ability of staff to monitor patients visually (backed up by centralised vital signs monitoring) and respond rapidly to changes in their condition.

6.1.2 Flow

The ED will be designed to allow an easy flow of patients (and as importantly staff) between the different clinical areas particularly the resuscitation and majors areas. This also includes aspects of flow between the ED and theatres, ED and radiology and the ED needs to be directly accessible from the rooftop helipad via a lift. Relatives accompanying ambulance patients should be able to easily flow to a single main waiting area (without passing through clinical areas of the ED) unless they are going into the relatives room for resuscitation patients. All areas must be clearly signed or routes marked.

6.1.3 Reducing Queues

The ED will have only four possible places for patients or their relatives to wait; the main waiting area next to the walk-in entrance and registration desk; the x-ray sub-waiting area; the interview rooms for resuscitation patients and the clinical spaces within the ED. There should not be other additional waiting areas as this will disrupt patient flows and increase risk of losing or misplacing patients in the busy ED.

6.1.4 Segregation

The ED will be separated into resuscitation, majors and minors areas which will be separate but flow into one another. The ED should however be closed to the main patient waiting areas and able to be locked down at night and at times of heightened security. Patient spaces will all be individual with the provision to isolate or cohort groups of patient spaces for clinical, infection or security reasons.

6.1.5 Security

The ED will have secure entry and exit points which can be locked if required. Electric swing doors will be configured to open automatically if approached by a

patient trolley. All other access will be by proximity card access by staff members. The NSGH will have facilities for the management of high security patients.

6.1.6 Flexibility and Redundancy

The ED is designed from the start to allow maximum ability to reconfigure uses of clinical areas. All resuscitation bays and majors area should have the ability to manage medical, surgical and trauma patients. All spaces will have medical gases and IT points such that all majors spaces can potentially become resuscitation rooms, all minors spaces can accommodate a trolley and become majors cubicles if required. Any isolation cubicles are equipped to function as normal majors spaces. The major procedures rooms in resuscitation can function as a normal resuscitation bay as required.

6.1.7 Scalability

The ED should be able to collapse to a smaller configuration during quieter periods (e.g. 2 to 8am) with the majority of patients cared for in the See, Treat or Triage rooms or the majors area when other sections of the ED are not required.

6.1.8 Patient management

The ED will see all self-referred patients (walking, 999 and air-transfer) as well us patients identified as requiring immediate intervention at the ambulance entrance triage point and transfers considered unstable or requiring immediate treatment (e.g. suspected leaking aneurysm).

All other expected patients will bypass the ED and go straight into the immediately adjacent acute receiving cluster of the AAU. It is assumed that patients leaving the ED will have had an appropriately thorough, documented assessment and any initial treatment commenced before being admitted via the AAU. This includes both medical, surgical and trauma patients.

Where indicated initial diagnostics including cross-sectional imaging will have been carried out prior to admission and if no immediate action is required these will be reviewed with laboratory results by senior staff in the AAU.

6.1.9 Signage

All signs pertaining to the ED should be clearly labelled as “Emergency Department” and not “A&E”. This is in keeping with UK DOH nomenclature and recommendations by the College of Emergency Medicine.

6.1.10 Reception

There will be a clerical reception area and the majority of patients would be expected to register their details before being seen on one of the three STT (See, Triage or Treat) rooms. From STT patients would be treated and discharged or triaged into the minors or majors areas of the ED. Patients arriving at the walking entrance obviously in distress or visibly unwell will be brought directly into the majors or resuscitation area of the ED and registered at the bedside by clerical staff.

Patients arriving by ambulance will come into the building via the common ambulance entrance. They will pass by a triage and registration station where they will have some basic details registered to the hospital information system along with a very rapid assessment to decide whether their proposed destination is correct. This

is designed to allow redirection of visibly unstable GP referred patients to the ED or direct expected stable patients to the AAU where the ambulance service have not been informed that the patient is expected by the receiving team. It is not anticipated that any detailed observations or interventions will be performed at the ambulance triage point.

Ambulance personnel would then transfer patients to the ED or AAU. On arrival in the appropriate area patients would be handed over to the nursing staff and registered at the bedside by clerical staff. Well or ambulatory patients arriving by ambulance could also be conveyed to the main ED reception area and directed to register themselves before being assessed by the STT staff.

6.1.11 Disturbed adult/patient rooms

One room configured for violently disturbed patients will be situated adjacent to the majors area or at the junction of the majors and minors areas of the ED. The room will require 2 exits and safety features consistent with the latest Royal College of Psychiatry and SHPN guidance. Such patients are at high risk of physical deterioration and may require emergency sedation.

6.1.12 Observational Medicine

With appropriate levels of senior staffing, the Emergency Department will have clinical responsibility for small numbers of inpatients with acute head injuries requiring less than 24 hours of care, acute toxicological emergencies and will share responsibility for patients admitted to the Clinical Decision Unit portion of the AAU.

6.1.13 HI&T Aspects of ED Design.

By the time the new SGH opens there will be a “paper-light” environment and there will be a requirement for IT hardware access wherever staff currently take a piece of paper. That will mean in every patient cubicle & bay, as well as in every office, work base, nurses station, reception & meeting room. The reception areas will require scanning facilities so that any paper we are given can be made “electronic”. The ED will need to be covered by a wireless network with sufficient bandwidth to handle PACS access (imaging). The size of the department will mandate some form of automatic tracking system for patients & possibly also for staff. This will need to cover waiting areas, radiology & the Acute Assessment Area in addition to the ED.

Sufficient space for docking stations & charging points in addition to the space required to put the device down safely when dealing with a patient. This will significantly increase the amount of worktop & desk space required over what has traditionally been supplied.

6.1.14 Helipad

The NSGH will be the main air transfer receiving site for the West of Scotland. In addition to the current transfers from rural and island health care facilities and transfers to the regional neurosurgical and national spinal injuries services there will be an increase in the number of aircraft from:

- Shock Team inter-ITU transfers which were previously transported to the Western Infirmary via the SECC

- Paediatric and Neonatal transfers for the Royal Hospital for Sick Children which also previously travelled via the SECC or airport. The transport arrangements for this last group would be greatly improved as a result of direct transport to definitive care for a greater number of patients.

The NSGH helipad will be configured as in DOH HBN guidance regarding Hospital Helipads. This includes the specifications for building requirements, fire safety, lighting, access and aviation regulation.

Access to the rooftop helipad will be by lift directly from the ED (or a lift immediately next to the ED). There will be storage facilities at the lift entrance for transfer equipment required for taking patients to and from the helipad.

"Helipads built on rooftops (ideally above the Accident and Emergency department to ensure a short transit for the patient) are the most effective from the aviation and a trust's strategic planning perspectives: they largely remove any constraints on future building plans, they provide the greatest choice of obstacle-free helicopter airways, and they reduce the environmental impact on the hospital and its neighbours".

See separate documentation which describes the requirements for the helipad in more detail.

6.1.15 Important points

The ambulance entrance requires to be sufficiently large to cope with surges in arrivals for both adult and child ambulance patients. This would be up to 10 per hour for adults with up to a further 5 per hour for children. Turnaround time is unlikely to be less than 20 minutes for an ambulance arrival therefore the arrival bay needs to be able to cope with up to 10 ambulances being parked simultaneously with space for more to be parked in an adjacent area.

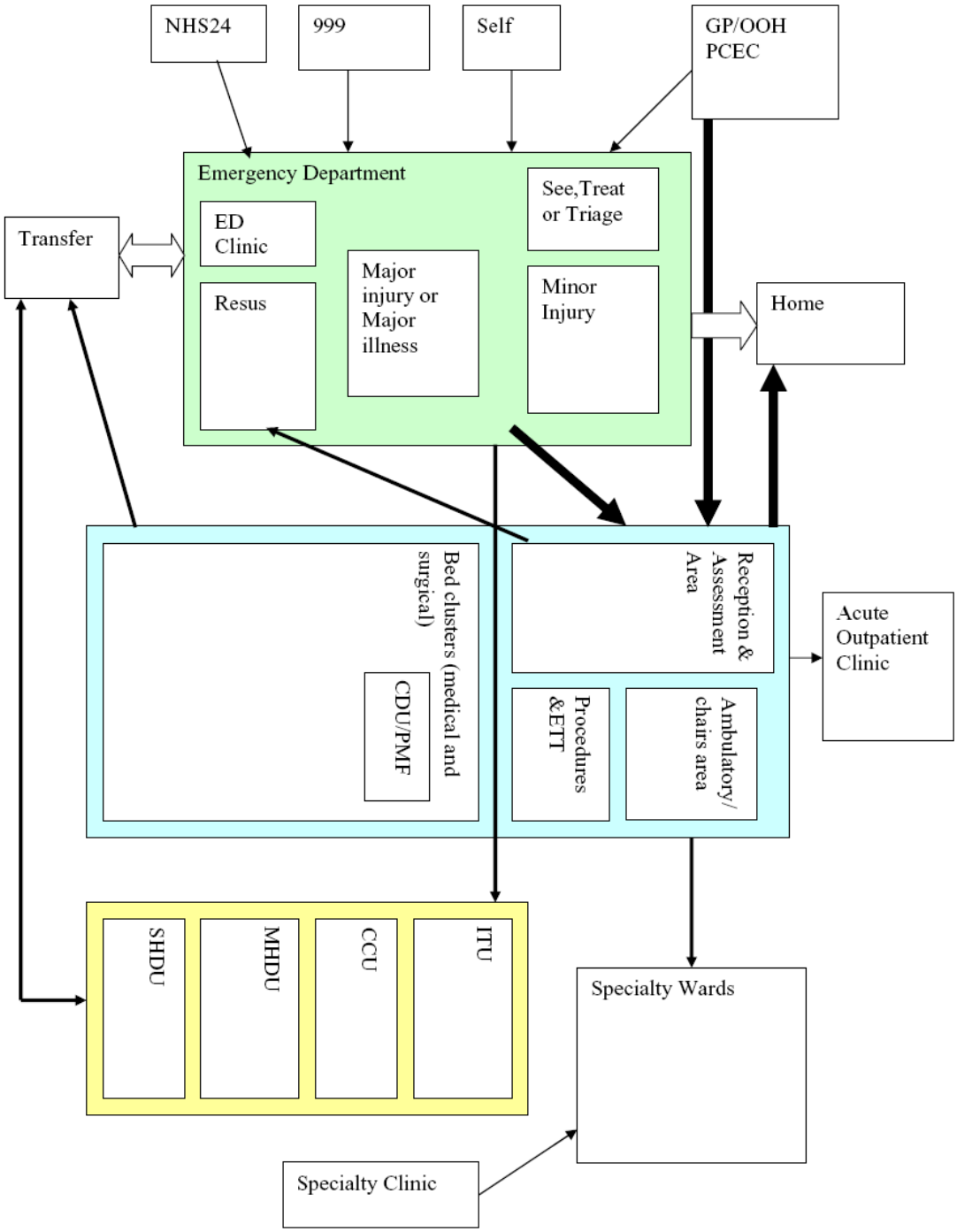
The ED with be paper light with the requirements that patients can be registered at the bed side by clerical staff either at a rugged workstation or using a tablet wireless PC . The majority of patients will be registered by clerical staff at a reception desk at the main walk in entrance to the ED.

The reception area requires a play area for children as although child patients will be managed in the parallel children's hospital, children may accompany patients and their relatives.

Relatives accompanying ambulance patients need to be able to easily access the main waiting area bypassing clinical areas of the ED. The only exceptions to this are relatives of resuscitation patients who may be directed to specific rooms for them.

6.2 <u>Patient / Process Flow & Service Delivery</u>

- **Functional Pathways for acute admissions NSGH**



7. DESIGN GUIDANCE

7.1 Design Requirements & Guidance

Design guidance is given in a separate overarching document relating to the whole development.

The nature of the Emergency department has the potential to cause distress to patients and their relatives. It is important, therefore, that when designing these facilities the patient experience is taken into account together with that of their relatives and carers. The emphasis should be on providing a pleasant but safe environment for patients paying particular attention to areas such as reception, way finding, privacy and dignity. It is also essential to consider the needs of staff and the impact that the working environment has on job satisfaction, recruitment and retention.

The design must be flexible enough to cater for all cultures and ethnicity. It should create an environment that will allow patients and their carers to feel at ease whilst contributing to efficient staff working and morale. Manual handling regulations and the requirements of the Disability Discrimination Act must be factored into the design.

Protecting the patient's privacy and dignity at all stages of the process is of paramount importance. In addition infection control, decontamination and radiological protection guidance must be taken into consideration when designing finishes and surfaces within the department.

Cognisance needs to given to radiological protection and laser management requirements as pertaining to the Emergency Department.

7.2 Environmental and Services Requirements

As previously stated, bed lifts must be sized to accommodate a fully laden and accompanied critical care bed (actual size is a procurement decision) and that there must be a sufficient number of bed lifts to ensure a total transfer time of less than 4 minutes to Imaging, Critical Care and inpatient beds.

Natural light in patient areas and staff office and training accommodation is essential. In the Emergency Department, availability of natural light is preferred but there must be blackout capability in rooms that may be used for ultrasound. Artificial lighting should include clinical task lighting in the resuscitation room and majors areas. This is essential for the continuous assessment of a patient's colour and general physical status.

The resuscitation room must conform to radiological protection specifications.

7.2.1 Other Services

The ED is reliant upon a number of departments that bring services, provisions etc into the facilities including:

FM: Catering

FM: Supplies

FM maintenance

FM: clean laundry

Pharmacy
Pathology
Operating Department (patient transfer)
Wards (patient transfer)
Critical care (patient transfer)
Imaging (staff and patient access)

Department / Service	Quantity		Quantity	Size	Total		Notes
	Units	Adj		m2	m2		
OBC SoA - ER Version							*updated April '09*
In-Patient Services - Wards							
	beds	beds	Wards / Units				
Generic Wards							
Surgical, Medical & Elderly	718		26.00	1,085	28,205		
ENT	28		1.00	1,107	1,107		
Rheumatology	28		1.00	1,107	1,107		
Dermatology	18		1.00	976	976		
Stroke	26		1.00	1,332	1,332		
Renal (80)							
22 Bed Renal Ward	44		2.00	900	1,801		
Additional Support for 22 Bed Wards			1.00	77	77		
16 Renal Ward & Day Unit	16		1.00	1,030	1,030		
20 Higher Acuity (Level 2 Renal Ward)	20		1.00	1,045	1,045		
Haemato-Oncology	14		1.00	827	827		14 + 4 day beds
Ward Clusters - Support Accommodation							
For 32 wards @ 4 per Cluster			8.00	345	2,758		
For 2 Wards			1.00	298	298		
GENERAL ACUTE BEDS							
Critical Care Beds (79)							
ICU	20						
Surgical HDU	23						
Medical HDU	16						
CCU	20						
					6,168		
AAU Beds	118						See Emergency Complex section for detail
Total Beds for SGH	**1,109**				**46,731**		See Beds Schedule for details of all new beds
Operating Facilities							
Main Operating Theatres							
Block A - 10 Theatres (Clean)	10	)					
Block B - 10 Theatres	10	)	20		6,479		
Endoscopy (Locate with Theatres)			3 rooms		420		
Decontamination					416		Allowance
					7,314		
Diagnostic / Support Departments							
Radiology							**DR Technology**
Plain Film	10						
Ultrasound	4						
Mammography	1						
CT	4						
Nuclear medicine (Joint with Children's)	3						
MRI	2						
Fluoroscopy - Diagnostic	2						
Interventional	2						NB Invasive cardiology at Golden Jubilee Hospital
OPG	1 included in plain film room						
Bone Mineral Densitometry	1						
Radiology Total					5,426		
Pharmacy							
Shared Pharmacy Local Dispensing					302		Supplies both NSGH & NCH
Aseptic Suite	11 isolators / cabinets				520		Supplies both NSGH & NCH
TSSU/CSSD Receipt / Distribution / Collection					202		Allowance, locate in FM area
Medical Physics					739		Includes SGH & NCH (excluding Med Equip Library). Critical care, theatre, renal and dialysis unit have dedicated med physics facilities.
Medical Photography					80		Allowance
					7,269		
Other Patient Departments							
MDU / Clinical Investigation Unit					767		22beds / trolleys unit (endrocrine & rheumatology significant users)
					767		
Out-Patient Services							
Outpatient Services					3,818		
Rehab Suite					1,008		
Dermatology					749		SGH will be Glasgow Hub and Spoke for local patients
Renal Dialysis	30		1 x 30 stations		1,460		
					7,035		
Emergency Complex							
Emergency Department					2,464		

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Department / Service	Quantity		Quantity	Size	Total	Notes
	Units	Adj		m2	m2	
Acute Assessment Cluster (28 Beds)	28				1,051	
Acute Cluster (30 beds)	30				1,150	
General Receiving Cluster (48 Beds)	48				1,745	
DME/Rehabilitation Cluster (12 Beds)	12				723.2	
Emergency Centre OPD Cluster					146	
Shared Accommodation					369	
					7,647	
Admin & Training & Education						
Meetings Rooms					70	
Health Records /Library / Coding / Central Bookings					523	
Bed Management / Operations Centre					50	Allowance
					643	
Main Entrance / Public Areas						
Main Entrance incl Atria & Retail					1,406	
					1,406	
FM & Staff Facilities						Requires further FM input
Main Dining Room & Servery					1,196	Shared with Children's Hospital
End Kitchen					982	
Staff changing - manual					187	Allowance
Staff Accommodation					128	8 rooms @ 16m2 gross
Telephone services	4000 extensions				150	Allowance
Hotel Services & Domestic / Portering etc					660	Allowance
Bed Management					165	
Specialist Bed Store					50	Allowance
Equipment Library/Store (non Bio-engineering)					250	Allowance
					3,768	NB External compound for waste, clinical waste, dirty laundry etc
TOTAL					82,580	
ALLOWANCE FOR COMMUNICATION & PLANT SPACE (29.5%)					24,361	Based on Pref Option 18.5% communication and 11% plant
GROSS AREA					106,941	

GENERIC WARDS

Number of Beds		**28**			
Percentage Single Rooms		**100%**			
Description	**Qty**	**Unit Area m²**	**Total Area m²**	**ADB Code**	**Comment**
Bed area facilities					
Acute single bedroom (incl family & clinical support space)	28	16.5	462.0	B0303	(100% Single rooms)
Patients en-suite wc & wash double assist	28	4.5	126.0	V1610	(as per HBN 00-02)
Gowning lobby: single bedroom	1	5.0	5.0		
Sub-Total			**593.0**		
Patient support facilities					
Interview/sitting room	1	9.0	9.0		
Resuscitation trolley parking bay: 1 trolley	1	2.0	2.0		
Pantry/Beverage making area	1	12.0	12.0		
Ward Food trolley parking bay	1	1.5	1.5		
Wheelchair bay	1	4.0	4.0		
Nurses Station	1	8.0	8.0		
Touch Down Spaces	4	2.0	8.0		(as per HBN 04-01)
Sub-Total			**44.5**		
Backup Storage					
Linen trolley parking bay	1	1.5	1.5		
Clinical supplies trolley	1	1.5	1.5		
Clinical Store/Controlled drug Cupboard	1	1.5	1.5		
Clean Utility Room	1	12.0	12.0	T0505	
Large Eqpt Store	1	7.5	7.5		
Sub-Total			**24.0**		
Utilities					
Dirty utility/Sluice/Test Room - small	1	6.5	6.5		
Dirty utility/Disposal hold	1	8.0	8.0	Y0315	Interim Disposal Hold on Ward
Cleaners room	1	7.0	7.0		
WC/WHB - type 1	1	2.0	2.0		
Switchgear cupboard	1	1.0	1.0		
Sub-Total			**24.5**		
Office and Administrative Services					
Reception - 2 position - open	1	8.0	8.0		
Office - 1 position + meeting area	1	12.0	12.0		
Charge Nurse/Sister's Office	1	9.0	9.0		
Printer/IT/Admin Store Room	1	6.0	6.0		
Waiting Area - 5-10 persons	1	16.0	16.0		
Sub-Total			**51.0**		
Additional Accomodation and Services					
Socialisation Space	1	24.0	24.0		Could be dispersed and/or informal socialisation space
Medical Hot Desking (2 Places)	1	10.0	10.0		
Sub-Total			**34.0**		

Total net (Incl Optional Accom)			771.0
Planning	5%		38.6
Sub-Total			809.6
Engineering	3%		24.3
Circulation	31%		251.0
Total			**1084.8**

ENT WARD

Number of Beds		**28**			
Percentage Single Rooms		**100%**			
Description	**Qty**	**Unit Area m²**	**Total Area m²**	**ADB Code**	**Comment**
Bed area facilities					
Acute single bedroom (incl family & clinical support space)	28	16.5	462.0	B0303	(100% Single rooms)
Patients en-suite wc & wash double assist	28	4.5	126.0	V1610	(as per HBN 00-02)
Gowning lobby: single bedroom	1	5.0	5.0		
Sub-Total			**593.0**		
Patient support facilities					
Treatment Room	1	16.0	16.0		
Interview/sitting room	1	9.0	9.0		
Resuscitation trolley parking bay: 1 trolley	1	2.0	2.0		
Pantry/Beverage making area	1	12.0	12.0		
Ward Food trolley parking bay	1	1.5	1.5		
Wheelchair bay	1	4.0	4.0		
Nurses Station	1	8.0	8.0		
Touch Down Spaces	4	2.0	8.0		(as per HBN 04-01)
Sub-Total			**60.5**		
Backup Storage					
Linen trolley parking bay	1	1.5	1.5		
Clinical supplies trolley	1	1.5	1.5		
Clinical Store/Controlled drug Cupboard	1	1.5	1.5		
Clean Utility Room	1	12.0	12.0	T0505	
Large Eqpt Store	1	7.5	7.5		
Sub-Total			**24.0**		
Utilities					
Dirty utility/Sluice/Test Room - small	1	6.5	6.5		
Dirty utility/Disposal hold	1	8.0	8.0	Y0315	Interim Disposal Hold on Ward
Cleaners room	1	7.0	7.0		
WC/WHB - type 1	1	2.0	2.0		
Switchgear cupboard	1	1.0	1.0		
Sub-Total			**24.5**		
Office and Administrative Services					
Reception - 2 position - open	1	8.0	8.0		
Office - 1 position + meeting area	1	12.0	12.0		
Charge Nurse/Sister's Office	1	9.0	9.0		
Printer/IT/Admin Store Room	1	6.0	6.0		
Waiting Area - 5-10 persons	1	16.0	16.0		
Sub-Total			**51.0**		
Additional Accomodation and Services					
Socialisation Space	1	24.0	24.0		Could be dispersed and/or informal socialisation space
Medical Hot Desking (2 Places)	1	10.0	10.0		
Sub-Total			**34.0**		

Total net			787.0
Planning	5%		39.4
Sub-Total			826.4
Engineering	3%		24.8
Circulation	31%		256.2
Total			**1107.3**

RHEUMATOLOGY WARD

Number of Beds		**28**			
Percentage Single Rooms		**100%**			
Description	**Qty**	**Unit Area m²**	**Total Area m²**	**ADB Code**	**Comment**
Bed area facilities					
Acute single bedroom (incl family & clinical support space)	28	16.5	462.0	B0303	(100% Single rooms)
Patients en-suite with chamfered shower as per HBN 00-02	28	4.5	126.0	V1610	
Gowning lobby: single bedroom	1	5.0	5.0		
Sub-Total			**593.0**		
Patient support facilities					
Interview/sitting room	1	9.0	9.0		
Resuscitation trolley parking bay: 1 trolley	1	2.0	2.0		
Pantry/Beverage making area	1	12.0	12.0		
Ward Food trolley parking bay	1	1.5	1.5		
Wheelchair bay	1	4.0	4.0		
Nurses Station	1	8.0	8.0		
Touch Down Spaces	4	2.0	8.0		(as per HBN 04-01)
Sub-Total			**44.5**		
Backup Storage					
Linen trolley parking bay	1	1.5	1.5		
Clinical supplies trolley	1	1.5	1.5		
Clinical Store/Controlled drug Cupboard	1	1.5	1.5		
Clean Utility Room	1	12.0	12.0	T0505	
Large Eqpt Store	1	7.5	7.5		
Sub-Total			**24.0**		
Utilities					
Dirty utility/Sluice/Test Room - small	1	6.5	6.5		
Dirty utility/Disposal hold	1	8.0	8.0	Y0315	Interim Disposal Hold on Ward
Cleaners room	1	7.0	7.0		
WC/WHB - type 1	1	2.0	2.0		
Switchgear cupboard	1	1.0	1.0		
Sub-Total			**24.5**		
Office and Administrative Services					
Reception - 2 position - open	1	8.0	8.0		
Office - 1 position + meeting area	1	12.0	12.0		
Charge Nurse/Sister's Office	1	9.0	9.0		
Printer/IT/Admin Store Room	1	6.0	6.0		
Waiting Area - 5-10 persons	1	16.0	16.0		
Sub-Total			**51.0**		
Essential Complementary Accomodation					
Assisted Bathroom	1	16.0	16.0		
Sub-Total			**16.0**		
Additional Accomodation and Services					
Socialisation Space	1	24.0	24.0		Could be dispersed and/or informal socialisation space
Medical Hot Desking (2 Places)	1	10.0	10.0		
Sub-Total			**34.0**		

Total net (Incl Optional Accom)			787.0
Planning	5%		39.4
Sub-Total			826.4
Engineering	3%		24.8
Circulation	31%		256.2
Total			**1107.3**

16 Bed Ward & Day Unit

Number of Beds		**16**			
Percentage Single Rooms		**100%**			
Description	**Qty**	**Unit Area m²**	**Total Area m²**		**Comment**
Bed area facilities					
Acute single bedroom (incl family & clinical support space)	16	16.5	264.0	B0303	(100% Single rooms)
Patients en-suite wc & wash double assist	16	4.5	72.0	V1610	(as per HBN 00-02)
Gowning lobby: single bedroom	2	5.0	10.0		
Quite sitting space / Additional Social Space	1	9.0	9.0		
Sub-Total			**355.0**		
Day Assessment & Treatment Area					
Minor Procedures & Treatment Room (incl prep)	1	21.0	21.0	X0240	NB: Air handling & Gases required
Consult Exam Room	3	16.5	49.5		
Waiting Area	1	12.0	12.0		
4 Day Trolley Spaces	4	13.5	54.0		May be cubicles or open space dependent upon IC advice.
Patients en-suite assisted shower, wc & wash	1	4.5	4.5		
Staff Base	1	8.0	8.0		
WC - W'chair	1	4.5	4.5		
Sub-Total			**153.5**		
Inpatient Dialysis Centre					***Supervised area for inpatients***
Dialysis Stations	4	13.5	54.0	X0253	May be cubicles or open space dependent upon IC advice.
Sub-Total			**54**		
Patient support facilities					
Consulting/examination (or treatment) room	1	16.5	16.5		
Interview/sitting room: 5 places	1	9.0	9.0		
Resuscitation trolley parking bay: 1 trolley	1	2.0	2.0		
Pantry/Beverage making area	1	12.0	12.0		
Ward Food trolley parking bay	1	1.5	1.5		
Touch Down Spaces	3	2.0	6.0		(as per HBN 04-01)
Sub-Total			**47.0**		
Backup storage					
Linen trolley parking bay	1	2.5	2.5		
Clean Utility Room	1	12.0	12.0		
Consumables Store	1	12.0	12.0		
Equipment store	1	5.0	5.0		Plumbed Storage for Dialysis Machines
Mobile equipment bay	1	4.0	4.0		
Sub-Total			**35.5**		
Utilities					***co-locate with day unit***
Dirty utility/disposal hold	1	8.0	8.0	Y0315	Interim Disposal Hold on Ward
Cleaners room	1	7.0	7.0		
Staff wc & wash: Ambulant user	1	2.0	2.0		
Switchgear cupboard	1	1.0	1.0		
Sub-Total			**18.0**		
Office and administration services					
Reception / Clerk:- 1 position open to corridor	1	6.0	6.0		
Office incl.meeting area	1	12.0	12.0		
Printer/IT/Admin Store Room	1	6.0	6.0		
Waiting area: 3 places	1	4.0	4.0		Opposite Reception office
Workstation Area + Case Notes: 3 Person	1	15.0	15.0		
Sub-Total			**43.0**		
Other & Shared Accommodation					
Staff / Nurse Bases	2	5.0	10.0		
Sub-Total			**10.0**		

RENAL WARDS & MAIN DEPARTMENT
Total Bed Numbers = 80
NB: All beds are to be plumbed for haemodialysis

Number of Beds		**22**			2 No 22 Bed Wards to be Provided
Percentage Single Rooms		**100%**			
Description	**Qty**	**Unit Area m²**	**Total Area m²**	**ADB Code**	**Comment**
Bed area facilities					
Acute single bedroom (incl family & clinical support space)	22	16.5	363.0	B0303	(100% Single rooms)
Patients en-suite wc & wash double assist	22	4.5	99.0		(as per HBN 00-02)
Gowning lobby: single bedroom	2	5.0	10.0		
Sub-Total			**472.0**		
Patient support facilities					
Consulting/examination (or treatment) room	1	16.5	16.5		
Quiet sitting space / Additional Social Space	1	9.0	9.0		
Interview/sitting room: 5 places	1	9.0	9.0		
Resuscitation trolley parking bay: 1 trolley	1	2.0	2.0		
Pantry/Beverage making area	1	12.0	12.0		
Ward Food trolley parking bay	1	1.5	1.5		
Wheelchair bay	1	4.0	4.0		
Nurses Station	1	8.0	8.0		
Touch Down Spaces	4	2.0	8.0		
Sub-Total			**70.0**		
Backup storage					
Linen trolley parking bay	1	1.5	1.5		
Consumables Store	1	14.0	14.0		
Clean Utility Room	1	12.0	12.0		
Equipment store	1	5.0	5.0		Plumbed Storage for Dialysis Machines
Mobile equipment bay	1	4.0	4.0		
Sub-Total			**36.5**		
Utilities					
Dirty Utility/sluice/Test Room - small	1	6.5	6.5		
Dirty utility/Disposal hold	1	8.0	8.0	Y0315	Interim Disposal Hold on Ward
Cleaners room	1	7.0	7.0		
Staff wc & wash: Ambulant user	1	2.0	2.0		
Switchgear cupboard	1	1.0	1.0		
Sub-Total			**24.5**		
Office and administration services					
Reception / Clerk:- 1 position open to corrido	1	6.0	6.0		
Office - 1 position + meeting area	1	12.0	12.0		
Charge Nurse/Sister's Office	1	9.0	9.0		
Printer/IT/Admin Store Room	1	6.0	6.0		
Waiting area: 3 places	1	4.0	4.0		Opposite Reception office
Sub-Total			**37.0**		

Total net			**640.0**
Planning	5%		32.0
Sub-Total			672.0
Engineering	3%		20.2
Circulation	31%		208.3
Total			**900.5**

Additional Space To support both 22 bed wards:					
Major General Storage for Department	1	31.0	31.0		
Workstations (6 x clinical)	1	24.0	24.0		
Sub-Total			**55.0**		

Total net			**55.0**
Planning	5%		2.8
Sub-Total			57.8
Engineering	3%		1.7
Circulation	31%		17.9
Total			**77.4**

Other Support Acommodation					
Equipment Store	1	16.0	16.0		
Sub-Total			**16.0**		

Total net			**732.0**
Planning	5%		36.6
Sub-Total			768.6
Engineering	3%		23.1
Circulation	31%		238.3
Total			**1029.9**

20 Bed Higher Acuity (Level 2 Ward)

Number of Beds		**20**			
Percentage Single Rooms		**100%**			
Description	**Qty**	**Unit Area m²**	**Total Area m²**		**Comment**
Bed area facilities					
Single Room bed area:	20	20.0	400.0		
Gowning lobby: single bedroom	4	5.0	20.0		
Patients en-suite wc & wash double assist	12	4.5	54.0		(as per HBN 00-02) These are to be associated with single rooms with gowning lobbies and 8No rooms
Shower / WC - Assisted	2	7.0	14.0		To support rooms without en-suites
Staff Meeting / Interview	1	16.0	16.0		
Communications / Staff Base	2	8.0	16.0		
Sub-Total			**520.0**		
Entrance/Reception/Administration facilities					
Reception desk/office: 2 places	1	12.0	12.0		Adjacent to entrance
Visitors sitting & waiting room (with beverages)	1	15.0	15.0		
Visitors wc: Disabled/ wheelchair user	1	4.5	4.5		
Telephone area: single booth; low height	1	2.0	2.0		
Sub-Total			**33.5**		
Utility/clinical area support facilities					
Clean utility	1	14.0	14.0		
Status laboratory	1	8.5	8.5		
Dirty utility with urine testing	2	12.0	24.0		
Staff wc & wash: Ambulant user	1	2.0	2.0		
Housekeepers (cleaners) room	1	7.0	7.0		
Patients pantry	1	12.0	12.0		
Sub-Total			**67.5**		
Office and administration services					
Relatives Rooms	2	14.0	28.0		
Charge Nurse/Sister's Office	1	9.0	9.0		
Flexible office accomodation (6 spaces)	1	24.0	24.0		
Administration store room	1	2.0	2.0		
Sub-Total			**63.0**		
Storage/holding facilities					
Bulk supplies store	1	15.0	15.0		
Clinical equipment store	1	18.0	18.0		
Linen bay/store	2	2.5	5.0		
Ready use medical gas cylinders store	1	4.0	4.0		
Mobile equipment bay	1	4.0	4.0		
Cardiac arrest/emergency trolley bay	2	1.0	2.0		
Sub-Total			**48.0**		
Engineering facilities					
Switchgear cupboard	1	2.0	2.0		
Battery/UPS room	1	9.0	9.0		
Sub-Total			**11.0**		

Total net			**743.0**
Planning	5%		37.2
Sub-Total			780.2
Engineering	3%		23.4
Circulation	31%		241.8
Total			**1045.4**

HAEMATO-ONCOLOGY WARD

NB: 3 Beds are to be plumbed for haemodialysis

NB: All bedrooms will require positive pressure

Number of Beds		**14+ 4 day recliners**			
Percentage Single Rooms		**100%**			
Description	**Qty**	**Unit Area m²**	**Total Area m²**	**ADB Code**	**Comment**
Bed area facilities					
Acute single bedroom (incl family & clinical support space)	14	16.5	231.0		Positive Pressure
Patients en-suite wc & wash double assist	14	4.5	63.0	V1610	(as per HBN 00-02)
Sub-Total			**294.0**		
Day Case Zone					
Day Case Room - Recliner Space	4	13.5	54.0		
Staff Base	1	3.0	3.0		
Treatment Room	1	16.5	16.5		
WC - W'chair	1	4.5	4.5		
Sub-Total			**78.0**		
Patient support facilities					
Consulting/examination (or treatment) room	1	16.5	16.5		pentamidine treatment
Treatment Room	1	16.5	16.5		Intrathecal chemotherapy
Interview/sitting room	1	9.0	9.0		
Resuscitation trolley parking bay: 1 trolley	1	2.0	2.0		
Pantry/Beverage making area	1	12.0	12.0		
Ward Food trolley parking bay	1	1.5	1.5		
Wheelchair bay	1	4.0	4.0		
Nurses Station	1	8.0	8.0		
Touch Down Spaces	4	2.0	8.0		(as per HBN 04-01)
Sub-Total			**77.5**		
Backup Storage					
Linen trolley parking bay	1	1.5	1.5		
Clinical supplies trolley	1	1.5	1.5		
Clinical Store/Controlled drug Cupboard	1	1.5	1.5		
Clean Utility Room	1	12.0	12.0	T0505	
Large Eqpt Store	1	20.0	20.0		
Sub-Total			**36.5**		
Utilities					
Dirty utility/Sluice/Test Room - small	1	6.5	6.5		
Dirty utility/Disposal hold)	1	8.0	8.0	Y0315	Interim Disposal Hold on Ward
Cleaners room	1	7.0	7.0		
WC/WHB - type 1	1	2.0	2.0		
Switchgear cupboard	1	1.0	1.0		
Sub-Total			**24.5**		
Office and Administrative Services					
Reception - 2 position - open	1	8.0	8.0		
Office - 1 position + meeting area	1	12.0	12.0		
Charge Nurse/Sister's Office	1	9.0	9.0		
Printer/IT/Admin Store Room	1	6.0	6.0		
Waiting Area - 5-10 persons	1	16.0	16.0		
Sub-Total			**51.0**		

Essential Complementary Accomodation					
Assisted Bathroom	1	16.0	16.0		
Sub-Total			**16.0**		

Additional Accomodation and Services					
Medical Hot Desking (2 Places)	1	10.0	10.0		
Sub-Total			**10.0**		

Total net			**587.5**
Planning	5%		29.4
Sub-Total			616.9
Engineering	3%		18.5
Circulation	31%		191.2
Total			**826.6**

DERMATOLOGY WARD

Number of Beds		**18**			
Percentage Single Rooms		**100%**			
Description	**Qty**	**Unit Area m²**	**Total Area m²**	**ADB Code**	**Comments**
Bed area facilities					
Acute single bedroom (incl family & clinical support space)	18	16.5	297.0	B0303	(100% Single rooms)
Patients en-suite wc & wash double assist	18	4.5	81.0	V1610	(as per HBN 00-02)
Sub-Total			**378.0**		
Treatment Area					
Day bed area - 3 recliners/trolleys	1	28.0	28.0		
ensuite to day bed area - shower/wc/whb	1	4.5	4.5		
Treatment Rooms with Prep Area (Biopsy, procedures etc)	4	16.5	66.0		
Clean Utility & Prep Room	1	12.0	12.0		
Procedure Room	1	13.5	13.5		
Clinical Investigation Room (single sided consult / exam)	1	13.5	13.5		
Sub-Total			**137.5**		
Patient support facilities			0.0		
Interview/sitting room: 5 places	1	9.0	9.0		
Resuscitation trolley parking bay: 1 trolley	1	2.0	2.0		
Pantry/Beverage making area	1	12.0	12.0		
Ward Food trolley parking bay	1	1.5	1.5		
Wheelchair bay	1	4.0	4.0		
Nurses Station	1	8.0	8.0		
Touch Down Spaces	4	2.0	8.0		(as per HBN 04-01)
Sub-Total			**44.5**		
Backup storage			0.0		
Linen trolley parking bay	1	1.5	1.5		
Clinical supplies trolley	1	1.5	1.5		
Clinical Store/Controlled drug Cupboard	1	1.5	1.5		
Large equipment store	1	7.5	7.5		
Sub-Total			**12.0**		
Utilities			0.0		
Dirty utility/Sluice/Test Room - small	1	6.5	6.5		
Dirty utility/Disposal hold	1	8.0	8.0	Y0315	Interim Disposal Hold on Ward
Cleaners room	1	7.0	7.0		
WC/WHB - type 1	1	2.0	2.0		
Switchgear cupboard	1	1.0	1.0		
Sub-Total			**24.5**		
Office and administration services			0.0		
Reception / Clerk: 1 position open to corridor	1	6.0	6.0		
Office - 1 position + meeting area	1	12.0	12.0		
Charge Nurse/Sister's Office	1	9.0	9.0		
Printer/IT/Admin Store Room	1	6.0	6.0		
Waiting Area: 3 places	1	4.0	4.0		
Sub-Total			**37.0**		

Essential Complementary Accomodation					
Assisted Bathroom	2	16.0	32.0		
Sub-Total			**32.0**		

Additional Accomodation and Services					
Socialisation Space	1	18.0	18.0		
Medical Hot Desking (2 Places)	1	10.0	10.0		
Sub-Total			**28.0**		

Total net			**693.5**
Planning	5%		34.7
Sub-Total			728.2
Engineering	3%		21.8
Circulation	31%		225.7
Total			**975.8**

STROKE WARD

Number of Beds		**26**			
Percentage Single Rooms		**1**			
Description	**Qty**	**Unit Area m²**	**Total Area m²**	**ADB CODE**	**Comment**
Bed area facilities					
Acute single bedroom (incl family & clinical support space)	26	16.5	429.0		
Patients en-suite with chamfered shower as per HBN 00-02	26	4.5	117.0		
Sub-Total			**546.0**		
Patient support facilities			0.0		
Consulting/examination (or treatment) room	1	16.5	16.5		
Interview/sitting room: 5 places	1	9.0	9.0		
Resuscitation trolley parking bay: 1 trolley	1	2.0	2.0		
Pantry/Beverage making area + Regen & Wash Up	1	26.0	26.0		
Ward Food trolley parking bay	2	1.5	3.0		
Wheelchair bay	1	4.0	4.0		
Nurses station	1	8.0	8.0		
Touch down spaces	4	2.0	8.0		(as per HBN04-01)
Sub-Total			**76.5**		
Backup storage			0.0		
Linen trolley parking bay	1	1.5	1.5		
Clinical supplies trolley	1	1.5	1.5		
Clinical Store/Controlled drug Cupboard	1	1.5	1.5		
Clean Utility Room	1	12.0	12.0	T0505	
Medicines Management Room	1	14.0	14.0		
Equipment store	1	8.0	8.0		
Sub-Total			**38.5**		
Utilities			0.0		
Dirty utility/sluice/test room - small	1	6.5	6.5		
Dirty utility/Disposal hold	1	8.0	8.0	Y0315	Interim Disposal Hold on Ward
Cleaners room	1	7.0	7.0		
WC/WHB - type 1	1	2.0	2.0		
Switchgear cupboard	1	1.0	1.0		
Sub-Total			**24.5**		
Office and administration services			0.0		
Reception / Clerk : 2 position open	1	8.0	8.0		
Office incl.meeting area: 1 place	1	12.0	12.0		
Charge Nurse/Sisters office	1	9.0	9.0		
Printer/IT/Admin Store room	1	6.0	6.0		
Waiting area: 5 places - opposite reception point	1	16.0	16.0		
Sub-Total			**51.0**		
Other & Shared Accommodation					
Assisted Bathrooom	1.00	16.0	16.0		
Seminar Room / Meetings / Health Education	1.00	30.0	30.0		
Medical hot desking (2 places)	1.00	10.0	10.0		
Workstations x2	1.00	8.0	8.0		
Socialising space	1.00	24.0	24.0		

Disposal hold & recycling point	1.00	8.0	8.0		
Staff Change, WCs, Showers & Lockers - Male			12.0		
Staff Change, WCs, Showers & Lockers - Female			22.0		
Sub-Total			**130.0**		

Additional Allowance					
Therapy Space on or immmediately adjacent to ward:					
ADL Bath Room & WC	1.00	13.0	13.0	Q0124	
Therapy Area	1.00	55.0	55.0	X0312	
Therapy Store	1.00	12.0	12.0		
Sub-Total			**80.0**		

Total net			**946.5**
Planning	5%		47.3
Sub-Total			993.8
Engineering	3%		29.8
Circulation	31%		308.1
Total			**1331.7**

WARD SUPPORT CORE

For Floor with 4 wards

	Qty	Unit Area m²	Total Area m²	ADB Code	Comment
Shared Ward Support Facilities					
Regen Kitchen	1	30.0	30.0		
Allowance for Wash Up	1	12.0	12.0		
Disposal Hold & Recycling Point	1	24.0	24.0		
Workstations x 6	1	24.0	24.0		
Medicines Management	1	12.0	12.0		
Staff WC/wash	3	2.0	6.0		2f & 1m
Staff locker room - F	1	24.0	24.0		100 half height lockers
Staff locker room - M	1	8.0	8.0		20 half height lockers
Staff shower	2	4.0	8.0		
Accessible shower / WC	1	4.5	4.5		Includes lockers
Cleaners Room	1	7.0	7.0		
WC - Wheelchair Visitor	2	4.5	9.0		
WC/WHB - Visitor	4	2.0	8.0		
Multi Functional Cluster	1	80.0	80.0		Varies by Floor it may be type A, B, C or D see below.
Sub Total			**256.5**		

Total Net			**256.5**
Planning	5%		12.8
Sub-Total			269.3
Engineering	3%		8.1
Circulation	25%		67.3
Total			**344.7**

Multi Functional Cluster A (1no)					
Seminar / Education Room	*1*	*40.0*	*40.0*		
Therapy Room (ADL beverage assessment)	*1*	*12.0*	*12.0*		
Bulk Fluids & Clean Dressings etc Store	*1*	*28.0*	*28.0*		
			80.0		

Multi Functional Cluster B (3no)					
Therapy Area and Store	*1*	*80.0*	*80.0*		*3 plinths, steps/stairs, table, parallel bars*
			80.0		

Multi Functional Cluster C (2no)					
Seminar / Education Room	*1*	*80.0*	*80.0*		
			80.0		

Multi Functional Cluster D (2no)					
Seminar / Education Room	*1*	*40.0*	*40.0*		
Bulk Fluids & Clean Dressings etc Store	*1*	*40.0*	*40.0*		
			80.0		

For Floor with 2 wards

	Qty	Unit Area m²	Total Area m²		
Shared Ward Support Facilities					
Regen Kitchen	1	24.0	24.0		
Allowance for Wash Up	1	10.0	10.0		
Disposal Hold & Recycling Point	1	16.0	16.0		
Seminar / Education Room	1	40.0	40.0		
Workstations x 6	1	24.0	24.0		
Therapy / AHP / Multi Purpose Assess / Treat	1	40.0	40.0		

Medicines Management	1	12.0	12.0		
Staff WC/wash	3	2.0	6.0		
Staff locker room - F	1	16.0	16.0		
Staff locker room - M	1	6.0	6.0		
Staff shower	2	4.0	8.0		
Accessible shower / WC	1	4.5	4.5		Includes lockers
Cleaners Room	1	7.0	7.0		
WC - Wheelchair Visitor	1	4.5	4.5		
WC/WHB - Visitor	2	2.0	4.0		
Sub Total			**222.0**		

Total Net			**222.0**
Planning	5%		11.1
Sub-Total			233.1
Engineering	3%		7.0
Circulation	25%		58.3
Total			**298.4**

CRITICAL CARE FACILITY

ICU	20 beds	(2 "pods" of 10)
HDU (Med & Surgical)	39 beds	(4"pods" 3 of 10, 1 of 9)
CCU	20 beds	(2 "pods" of 10)

NB - Dialysis plumbing to 5 beds - distributed between ICU and HDU

GLOBALLY SHARED FACILITIES

Description	Qty	Unit Area m²	Total Area m²	ADB Code	Notes
Combined Entrance/Reception/Administration Facilities					
Combined entrance	1				included in circulation area
Visitors Foyer	1				included in circulation area
Visitors waiting area:	1	100.0	100.0		
Visitors wc: Disabled/ wheelchair user	3	4.5	13.5		
Reception desk/office: 8 places	1	40.0	40.0		
Sub-Total			**153.5**		
Family Support and Communication Area					
Relatives room	6	14.0	84.0		(May be split into groups)
Relatives wc: Disabled/ wheelchair user	2	4.5	9.0		To be adjacent to relative areas
Sub-Total			**93.0**		
Office Area					
Clinical directors office: / Manager 1 place	1	14.0	14.0		
Managers office: 2 place	2	13.0	26.0		
Consultant Offices - 2 person rooms	7	13.0	91.0		
Clinical staff office/IT resource room: 4 places	4	24.0	96.0		
Outreach office: 4 places	1	18.0	18.0		
Seminar/training room: 40 - 45 places	1	60.0	60.0		
Teaching & research office 2 places, teaching and research staff	3	13.0	39.0		
Meeting Room/Interview/Relatives room (8 person)	1	16.0	16.0		
Sub-Total			**360.0**		
Staff facilities					
Staff Lounge (Including pantry area)	1	140.0	140.0		
Staff changing facilities 60 places	1	30.0	30.0		
Staff changing facilities 160 places	1	70.0	70.0		
Staff shower	6	2.5	15.0		
Staff wc & wash: Ambulant user	15	2.0	30.0		
WC / Shower / Change - Disabled	2	4.5	9.0		
Sub-Total			**294.0**		

Total Net			**900.5**
Planning	5%		45.0
Sub-Total			945.5
Engineering	3%		28.4
Circulation	31%		293.1
Total			**1267.0**

CRITICAL CARE: ICU/HDU (Medical & Surgical) AREAS

Clinical areas					
Critical care bed area: single room; Isolation (access via gowning lobby)	10	26.0	260.0		2 beds in each of 5 "pods" (Including both ICU "pods")
Gowning lobby: single bedroom	10	7.0	70.0	G0507	2 beds in each of 5 "pods" (Including both ICU "pods")
Single Room/Equivalent bed space	49	26.0	1274.0	B1602	

Patients en-suite wc & wash double assist	8	4.5	36.0		(as per HBN 00-02) En-suite to the 6 single rooms with isolation lobbys in HDU "pods" and 2 further rooms in the remaining HDU pod with no associated gowning lobby
Shower / WC - Assisted	6	7.0	42.0		Aligned to 4 HDU "pods"
Staff Resource Room	3	11.0	33.0		1 per 2 "pods"
Staff Office / Rest	1	12.0	12.0		Associated with the 2 ICU "pods"
Staff WC	6	2.0	12.0		1 per "pod"
Staff Meeting / Interview	3	16.0	48.0		1 per 2 "pods"
Communications / Staff Base	6	11.0	66.0		1 per "pod"
Sub-Total			**1853.0**		

Utility/clinical area support facilities					
Clean utility	3	14.0	42.0		1 each between 2 "pods"
Status laboratory	3	8.5	25.5		1 each between 2 "pods"
Dirty utility with urine testing	5	12.0	60.0		1 each per "pod"
Dirty Utility with urine testing/equipment cleaning	1	18.0	18.0		Aligned to remaining "pod" which should be in ICU
Pharmacy Support Area	1	18.0	18.0		Specific Client Request Supported By Pharmacy
Blood Bank Fridge Area	1	6.0	6.0		Located centrally for all Critical care Facilities (Sized for 2 x fridges as required)
Disposal hold	3	15.0	45.0		1 each between 2 "pods"
Housekeepers (cleaners) room	3	7.0	21.0		1 each between 2 "pods"
Patients pantry & Regeneration Area	2	12.0	24.0		Aligned to 4 HDU "pods"
Patients assisted bathroom, wc & wash (Stretcher hoist)	1	16.0	16.0		Located such that it can be used by the whole CCF as required
Sub-Total			**275.5**		

Storage/holding facilities					
Bulk supplies store	1	95.0	95.0		Based on "Just In Time" supplies delivery Note: It may be necessary to split storage areas to reduce travel distances.
Clinical equipment store	1	130.0	130.0		Based on equipment being wall/ceiling mounted as far as possible. It may be necessary to split storage areas to reduce travel distances.
Equipment Service Room	2	24.0	48.0		
Linen bay/store	6	4.0	24.0		1 each per "pod"
Furniture store	1	85.0	85.0		
Ready use medical gas cylinders store	3	4.0	12.0		1 per 2 "pods"
Mobile imaging equipment bay (x-ray & Ultrasound) with image intensifiers	4	8.0	32.0		1 each per ICU "pod" , 1 between 2 HDU "pods"
Cardiac arrest/emergency trolley bay	6	1.0	6.0		1 each per "pod"
Sub-Total			**432.0**		

Engineering facilities					
Switchgear cupboard	3	2.0	6.0		
Battery/UPS room	3	9.0	27.0		
Sub-Total			**33.0**		

Total net			**2593.5**
Planning	5%		129.7
Sub-Total			2723.2
Engineering	3%		81.7
Circulation	40%		1089.3
Total			**3894.1**

CRITICAL CARE: CCU AREAS

Clinical areas					

Coronary care bed area: single room	20	20.0	400.0	B0303A	All with suitable radiological protection to support emergency pacing
Patients en-suite wc & wash double assist	20	4.5	90	V1610	(as per HBN 00-02)
Staff Resource Room	1	11.0	11.0		
Staff Meeting / Interview	1	16.0	16.0		
Staff WC	2	2.0	4.0		One of these toilets should be close to the staff meeting/interview room
Communications / Staff Base	2	8.0	16.0		
Sub-Total			**537.0**		

Utility/clinical area support facilities					
Clean utility / Prep	1	17.0	17.0		
Clean utility / Store	1	14.0	14.0		
Status laboratory	1	8.5	8.5		
Dirty Utility with Urine Testing	1	12.0	12.0		
Disposal Hold	1	10.0	10.0		
Housekeepers (cleaners) room	1	7.0	7.0		
Clinical directors office: / Manager 1 place	1	14.0	14.0		
Managers office: 2 place	1	13.0	13.0		
Patients pantry & Regeneration Area	1	12.0	12.0		
Sub-Total			**107.5**		

Storage/holding facilities					
Bulk supplies store	1	18.0	18.0		
Clinical equipment store	1	20.0	20.0		
Linen bay/store	2	4.0	8.0		
Ready use medical gas cylinders store	1	4.0	4.0		
Mobile imaging equipment bay (x-ray & Ultrasound) with image intensifiers	1	8.0	8.0		
Cardiac arrest/emergency trolley bay	2	1.0	2.0		
Sub-Total			**60.0**		

Engineering facilities					
Switchgear cupboard	1	2.0	2.0		
Battery/UPS room	1	9.0	9.0		
Sub-Total			**11.0**		

Total net			**715.5**
Planning	5%		35.8
Sub-Total			751.3
Engineering	3%		22.5
Circulation	31%		232.9
Total			**1006.7**

TOTAL OVERALL CRITICAL CARE FACILITY	**6167.9**

OPERATING THEATRES
THEATRE BLOCK - 20 THEATRES

Room Type	Quantity	Size	Total	ADB Code	Comments
		M2	M2		
Entrance, reception & waiting facilities with admissions suite (AODOS Area)					
Entrance lobby: controlled access	1				Within circulation allowance
Reception area (Open)	1	20.0	20.0		To support AODOS admin
Porters Base	1	6.0	6.0		Configured as an "open" area
Waiting room /lounge (60 places)/Doubles as Shared Seminar Space	1	90.0	90.0		To support AODOS
Secondary Waiting Areas (M & F)	2	24.0	48.0		
Locked store off waiting room/lounge	1	10.0	10.0		For secure storeage of seminar eqpt
Locked area for storeage of patients bags on baggage trolleys off waiting room/lounge	1	6.0	6.0		Space for 2 x "baggage trolleys" in a secure area
WC & handwash: accessible, wheelchair assisted	2	4.5	9.0		
Visitors & patients wc: Ambulant user	4	2.5	10.0		
Consulting, examination and changing room	3	10.0	30.0		
Consulting, examination and changing room	13	7.0	91.0		To support AODOS
Changing rooms	6	3.5	21.0		To support AODOS
Sub-Total			**341.0**		
Operating theatre suites facilities					
Operating theatre: general	10	55.0	550.0		
Operating theatre: ultra clean	10	55.0	550.0		
Control Rooms	2	10.5	21.0		For imaging theatres
Machine Rooms	2	9.0	18.0		To support imaging theatre eqpt
Anaesthetic room: bed space	20	19.0	380.0		
Scrub-up & gowning room: 3 places	20	11.0	220.0		May be shared between 2 theatres (But same space required per theatre)
Preparation room (Daily Use Store): Serving	10	16.0	160.0		
Exit/parking bay: theatre, 1 bed/trolley	20	12.0	240.0		May be shared between 2 theatres (But same space required per theatre) This area should include identified "dictation space" with IT accessl
Store: equipment, local to theatre	4	6.0	24.0		(Assumes 4 "pods" of theatres - 1 per pod)
Dirty utility	20	12.0	240.0		
Sub-Total			**2403.0**		
Recovery Area					
Reception/Recovery bay 1 place	40	13.5	540.0		
Recovery room: post anaesthetic, 1 place	2	16.5	33.0		Glazed with audio link
Staff & communication base, open 5 staff	2	20.0	40.0		area to support recovery/reception (May be further sub-divided to optimise service delivery)
Clean utility	1	14.0	14.0		May be combined with staff bases
Dirty utility: bedpan disposal & urine test	2	12.0	24.0		
Parking bay: resuscitation trolley	1	1.0	1.0		
Cleaners (Housekeeping) room	1	7.0	7.0		
Sub-Total			**659.0**		
Support facilities					
Clinical Manager Office: 1 staff	1	12.0	12.0		This office should be located within the theatre area as it supports a direct theatre day to day management function
Theatre Management Office	1	30.0	30.0		This office should be located within the theatre area as it supports a direct theatre
Theatre Management Office	1	18.0	18.0		This office should be located within the theatre area as it supports a direct theatre day to day management function
Blood bank refrigerator bay space	1	6.0	6.0		Adjacent to reception/recovery and accesible to all theatres
Near patient testing/status laboratory	1	8.5	8.5		Should be centrally located and aligned to recovery area
Utility: cleaning & store room, flexible endos	1	24.0	24.0		Shared with endoscopy decontamination
Service room: equipment	1	21.0	21.0		For Med Physics use

Parking bay: mobile x-ray & ultrasound unit	4	5.0	20.0		(Assumes 4 "pods" of theatres - 1 per pod) NB This space should be configured so as to be in the correct proportions for the eqpt in use
Parking bay: resuscitation trolley	4	1.0	4.0		(Assumes 4 "pods" of theatres - 1 per pod)
Parking bay: e.g. fibre optic bronchoscope l	2	4.0	8.0		(With wall hung clean storage cabinet for intubating bronchoscope)
Store: satellite pharmacy	1	12.0	12.0		
Store: bulk supplies	2	90.0	180.0		
Store: clinical equipment	2	40.0	80.0		
Store: Orthopaedic Specific (For implants, e	1	30.0	30.0		
Store: linen	2	6.0	12.0		Store or linen exchange trolley options
Store: ready to use medical gas cylinders	2	4.0	8.0		
Hold: disposal	4	8.0	32.0		(Assumes 4 "pods" of theatres - 1 per pod)
Cleaners (Housekeeping) room	2	10.0	20.0		
Switchgear room	2	5.0	10.0		
UPS & IT hub room	2	9.0	18.0		
Sub-Total			**553.5**		
Staff support facilities					
Rest & dining room with beverage & snack preparation bay: 40 staff	1	116.0	116.0		
Small rest room	1	24.0	24.0		En-suite to rest/dining area
Workstations (6 persons)	1	24.0	24.0		En-suite to small rest room
Sub Total			**164.0**		
Shared support facilities: Theatre & anaesthetic department					
Staff changing room including boot change:	1	50.0	50.0		Male staff
Staff changing room including boot change:	1	90.0	90.0		Female staff
Utility: footwear washing	2	4.0	8.0		1 For Male staff, 1 For Female staff
WC Wheelchair user & changing / shower	2	4.5	9.0		1 For Male staff, 1 For Female staff
WC & wash: ambulant	16	2.0	32.0		10 x f and 6 x m
WC & handwash: accessible, wheelchair as	2	4.5	9.0		
Shower: ambulant (non patient)	10	2.5	25.0		6 x f and 4 x m
Sub Total			**223.0**		
Anaesthetic/Theatre Management Facilities					
Main entrance foyer	1		0.0		Included in circulation space
Waiting Area: 3 persons	1	4.5	4.5		
Interview/meeting room: 6 persons	2	14.0	28.0		
Workstation Area	1	36.0	36.0		With 6 workstations and study space
Practice Development Team: 3 staff	1	18.0	18.0		
Clinical Director	1	14.0	14.0		
Office: 3 staff	2	18.0	36.0		Secretarial staff
Consultant / SPRs 5 person offices	5	30.0	150.0		
Break-out / interview rooms re above	2	10.0	20.0		
Audit Office	1	15.0	15.0		3 persons
Store: general & stationery	1	6.0	6.0		
On-call overnight stay room	1	13.0	13.0		
Shower, WC &wash: ambulant (non patient)	1	5.0	5.0		En-suite to on-call room
WCs	4	2.0	8.0		
Disabled WC	1	4.5	4.5		
Cleaners (Housekeeping) room	1	7.0	7.0		
Sub Total			**365.0**		
TSSU/CSSD Support					
TSSU / CSSD Theatre Store (Deliver to / Collect from)			112.0		
Sub Total			**112.0**		
Total Net			**4820.5**		
Planning allowanc	5%		241.0		
Sub-total			5061.5		
Engineering Allowance	3%		151.8		
Circulation	25%		1265.4		
TOTAL			**6478.8**		

ENDOSCOPY - INPATIENT
Co-located with theatres

Room Type	Quantity	Size	Total	ADB Code	Comments
		M2	M2		
Enrtance and Reception					
Reception / General office: 2 places	1	13.5	13.5		
Patients trolley waiting area: 1 place	3	13.5	40.5		
WC: Disabled/ wheelchair user	2	4.5	9.0		
Sub Total			**63.0**		
Patients preparation areas					
Patients changing room: 1 place	1	6.5	6.5		
Sub Total			**6.5**		
Patient treatment facilities					
Endoscopy room (with C-arm)	1	26.0	26.0		
Endoscopy room	2	22.0	44.0		
Patients local recovery	4	13.5	54.0		
Recovery staff base/utility	1	10.5	10.5		
Scope storeage area (Sized for 40 scopes ir	1	40.0	40.0		
Resuscitation trolley parking bay: 1 trolley	1	1.0	1.0		
Sub Total			**175.5**		
Patients sanitary facilities					
Patients wc/bidet/wash (Type 7)	2	4.0	8.0		
Sub Total			**8.0**		
Staff facilities					
Charge Nurse/Sister's Office	1	9.0	9.0		
Flexible office space: 3 spaces	1	12.0	12.0		
Sub Total			**21.0**		
Support spaces					
Dirty utility	1	6.5	6.5		
General store	1	12.0	12.0		
Cleaners room	1	7.0	7.0		
Disposal hold	1	8.0	8.0		
Sub Total			**33.5**		
Total Net			**307.5**		
Planning allowance @ 5%	5%		15.4		
Sub-total			322.9		
Engineering Allowance @ 3%	3%		9.7		
Circulation @ 27%	27%		87.2		
TOTAL			**419.7**		

Radiology

Room Type	Quantity	Size	Total	ADB Code	Comments
		M2	M2		
ED & Outpatient Support (Ground Floor)					
Main entrance, reception & waiting facilities					
Entrance foyer/concourse	1				In circulation allowance
Waiting area: 40 places, incl. 4 wheelchair places	1	66.0	66.0		
Wheelchair parking bay: 6 wheelchairs	1	4.0	4.0		For Portering Chairs
Patients bed/trolley sub-waiting area: 2 places	2	8.0	16.0		A total of 4 places for all modalities (for ED & any inpatients using GF rooms)
Reception/appointments desk: 3 position	1	13.0	13.0		
Office: 4 places	1	24.0	24.0		
Refreshment vending machines	1	3.0	3.0		
Visitors & patients wc: Ambulant user	4	2.5	10.0		
Visitors & patients wc: Disabled/ wheelchair user	1	4.5	4.5		
Staff WC	2	2.0	4.0		
Sub Total			**144.5**		
General x-ray imaging facilities					
Sub-waiting area: 20 places, incl. 2 wheelchair pl	1	33.0	33.0		
Staff Base	1	8.0	8.0		
Ambulant patients pass through changing cubicle	12	2.5	30.0		
Disabled/wheelchair patients pass through chang	2	4.5	9.0		
Patients belongings locker bay: 8 lockers	1	1.0	1.0		
Dirty Utility	1	9.0	9.0		Shared with CT
Clean Utility	1	12.0	12.0		Shared with CT
General computed radiography x-ray room incl. control cubicle	7	30.0	210.0		NB 2 of these + supporting accommodation to be capable of conversion into CT in the future One room (A&E end) to accommodate OPG
QA Room	2	24.0	48.0		
Visitors & patients wc: Disabled/ wheelchair user	2	4.5	9.0		
Visitors & patients wc: Ambulant user	2	2.5	5.0		
Cardiac arrest/emergency trolley bay	1	1.0	1.0		
Sub Total			**375.0**		
General fluoroscopic & fluorography imaging facilities					
Sub-waiting area: 5 places, incl. 1 wheelchair pla	1	9.0	9.0		
Staff Base	1	8.0	8.0		
Patients Changing with WC and shower (Disable	2	7.0	14.0		
Patients belongings locker bay: 4 lockers	1	0.5	0.5		
Universal or remote fluoroscopy room incl. contro	1	40.0	40.0		
Dirty utility	1	9.0	9.0		
Clean utility	1	12.0	12.0		
Sub Total			**92.5**		
Ultrasound imaging facilities					
Sub-reception/administration/records area: 1 reception & 2 workstation positions	1	30.0	30.0		
Sub-waiting area: 13 places, incl. 2 wheelchair pl	1	21.0	21.0		
Staff Base	1	8.0	8.0		
Ambulant patients changing cubicle	2	1.5	3.0		
Disabled/wheelchair patients changing cubicle	1	3.5	3.5		
Dirty Utility	1	9.0	9.0		
Clean Utility	1	12.0	12.0		
Patients belongings locker bay: 12 lockers	1	1.5	1.5		
General Ultrasound examination room	2	16.0	32.0		
Patients en-suite wc: Disabled/ wheelchair user	2	4.5	9.0		
Counselling/interview room: 5 places	1	9.0	9.0		
Cardiac arrest/emergency trolley bay	1	1.0	1.0		
Sub Total			**139.0**		
Cross-sectional Imaging facilities: CT					
Sub-waiting area: 10 places, incl. 1 wheelchair pl	1	16.0	16.0		
Assisted patient changing cubicle	2	3.5	7.0		
Ambulant patients changing cubicle	2	1.5	3.0		
Patients/staff belongings locker bay	1	2.0	2.0		Locate close to MR & CT
Visitors & patients wc: Disabled/ wheelchair user	1	4.5	4.5		
CT scanner room	2	40.0	80.0		
Lead apron & protection gear holding area	2	0.5	1.0		
Counselling/interview room: 5 places	1	9.0	9.0		
Control Room - shared for 2 CT rooms	1	24.0	24.0		
Radiologists Office / Reporting area	1	12.0	12.0		
CT Prep Room (2 bays)	1	22.0	22.0		Two sided access with patient on trolley
CT Engineering /Technical room	1	15.0	15.0		
Sub Total			**195.5**		

Shared facilities: CT & MRI					
Sub-reception/administration/records area: 2 reception & 2 workstation position	1	16.0	16.0		
Waiting area: 15 places, incl. 2 wheelchair places	1	25.0	25.0		
Supt Office (2 person)	1	13.0	13.0		
Patients bed/trolley sub-waiting area: 4 places	1	20.0	20.0		Include medical gases - patients may be from critical care or ED & have to wait etc
Store Rooms	1	6.0	6.0		
Cardiac arrest/emergency trolley bay	1	1.0	1.0		
Sub Total			**81.0**		

Cross-sectional Imaging facilities: MRI					
Non Controlled Area:					
Sub-waiting area: 10 places, incl. 1 wheelchair pl	1	16.0	16.0		Inpatients
Interview & Patient / Staff locker bay	1	9.0	9.0		
Anaesthetic Recovery	1	19.0	19.0		
Ambulant Changing Cubicle	1	1.5	1.5		
Assisted patient changing cubicle	1	4.5	4.5		
Visitors & patients wc: Disabled/ wheelchair user	1	4.5	4.5		
Clean Utility	1	12.0	12.0		
Dirty Utility	1	9.0	9.0		
Controlled Area:					
Controlled Lobby			0.0		In circulation space
MRI scanner engineering/technical room	2	24.0	48.0		
MRI scanner room (3 Tesla is a possibility - may l	2	84.0	168.0		
Cleaners' room with non-ferromagnetic equipmen	1	7.0	7.0		
Prep & Store Room	2	10.0	20.0		
Control Room - Shared by 2 scanner rooms	1	26.0	26.0		Includes safety records and slave anaesthetic monitors
Sub Total			**344.5**		

Whole Centre facilities: Support accommodation					
Image review/reporting area: 2 workstations	4	16.0	64.0		
Counselling/interview room: 5 places	2	9.0	18.0		
Cleaners room	3	7.0	21.0		
General store	2	6.0	12.0		
Equipment store	2	6.0	12.0		
Disposal hold	1	10.0	10.0		
Linen store	3	4.0	12.0		
Mobile x-ray equipment bay: 2 machines	1	5.0	5.0		
Mobile x-ray equipment maintenance/service wor	1	11.0	11.0		
Sub Total			**165.0**		

Outpatient Support (Ground Floor) TOTAL			**1537.0**		

Inpatient Support (First Floor)					
Main entrance, reception & waiting facilities(ambulant and chairs)					
Reception/ Staff Area	1	30.0	30.0		
Waiting area	1	70.0	70.0		
Visitors & patients wc: Disabled/ wheelchair user	2	4.5	9.0		
Staff wc & wash	2	2.0	4.0		
Sub Total			**113.0**		

Central Reception/Recovery (Bed/trolley) Area					
Reception/Recovery Staff Base	1	10.0	10.0		
Reception/Recovery Spaces	10	13.5	135.0		Configured as theatre reception/recovery area
Nursing Staff Office	1	12.0	12.0		
Clean Utility	1	12.0	12.0		
Dirty Utility	1	9.0	9.0		
Visitors & patients wc: Disabled/ wheelchair user	1	4.5	4.5		
Cardiac arrest/emergency trolley bay	1	1.0	1.0		
Linen Trolley Bay	1	2.0	2.0		
Staff wc: Disabled/wheelchair user (with locker for disabled staff)	1	5.0	5.0		
Sub Total			**190.5**		

General x-ray imaging facilities					
Ambulant patients pass through changing cubicle	3	2.5	7.5		(1 per x-ray room)
Disabled/wheelchair patients pass through chang	3	4.5	13.5		(1 per x-ray room)
General computed radiography x-ray room incl. control cubicle	3	30.0	90.0		
PACS Room	1	24.0	24.0		
QA Room	2	18.0	36.0		
Dirty utility	1	9.0	9.0		(Shared with U/S and mammography)
Clean utility	1	12.0	12.0		(Shared with U/S and mammography)
Linen Trolley Bay	1	2.0	2.0		(Shared with U/S and mammography)
Cardiac arrest/emergency trolley bay	1	1.0	1.0		
Visitors & patients wc: Disabled/ wheelchair user	2	4.5	9.0		
Sub Total			**204.0**		

X-ray mammography imaging facilities					
Symptomatic mammography x-ray examination r	1	15.0	15.0		
Sub Total			**15.0**		

Ultrasound imaging facilities					
Disabled/wheelchair patients changing cubicle	2	3.5	7.0		
General Ultrasound examination room	2	16.0	32.0		
Patients en-suite wc: Disabled/ wheelchair user	2	4.5	9.0		
Sub Total			**48.0**		

General fluoroscopic & fluorography imaging facilities					
Universal or remote fluoroscopy room incl. contro	1	40.0	40.0		
Patients Changing with WC and shower (Disable	2	7.0	14.0		En-suite to fluroscopy room
Patients belongings locker bay: 4 lockers	1	0.5	0.5		
Dirty utility	1	9.0	9.0		
Clean utility	1	12.0	12.0		
Linen Trolley Bay	1	2.0	2.0		
Sub Total			**77.5**		

Interventional Radiology					
Reception / Base	1	11.0	11.0		
Patients wc: Disabled/ wheelchair user	1	4.5	4.5		
Ambulant patients pass through changing cubicle	2	2.5	5.0		
Disabled/wheelchair patients pass through chang	2	4.5	9.0		
Staff Changing	2	10.0	20.0		(Split M&F)
Staff shower	2	2.5	5.0		(Associated with changing areas)
Staff wc & wash:	2	2.0	4.0		(Associated with changing areas)
Clean utility/preparation	1	12.0	12.0		
Dirty utility	1	14.0	14.0		Shared between theatres
Linen Trolley Bay	1	2.0	2.0		
Radiological / Surgical Endovascular Laboratory	2	65.0	130.0		
Control room - shared	1	24.0	24.0		Controlling both endo-vascular rooms
Laboratory Theatre computer/engineering service	2	16.0	32.0		
Scrub-up/gowning room: 3 places	2	11.0	22.0		
Anaesthetic room/ante room (angiography suite)	1	19.0	19.0		
Patient bed/trolley theatre exit bay parking bay: 1	2	12.0	24.0		
Interventional Sterile Supplies Storeage Area	1	20.0	20.0		
Cardiac arrest/emergency trolley bay	1	1.0	1.0		
Sub Total			**358.5**		

Cross-sectional Imaging facilities: CT					
Supt Office (2 person)	1	13.0	13.0		
Assisted patient changing cubicle	2	3.5	7.0		
Patients/staff belongings locker bay	1	2.0	2.0		
Visitors & patients wc: Disabled/ wheelchair user	1	4.5	4.5		
CT scanner room	2	40.0	80.0		
Lead apron & protection gear holding area	2	0.5	1.0		1 per CT Room
Control Room	1	24.0	24.0		Shared between both CT rooms
Machine Rooms	2	9.0	18.0		1 per CT Room
Radiologists Office / Reporting area	1	12.0	12.0		
Store Rooms	2	6.0	12.0		1 per CT Room
CT Prep Room (2 bays)	1	22.0	22.0		Two sided access with patient on trolley
Dirty Utility	1	9.0	9.0		
Clean utility	1	12.0	12.0		
Linen Trolley Bay	1	2.0	2.0		
Cardiac arrest/emergency trolley bay	1	1.0	1.0		
Sub Total			**219.5**		

Whole Centre facilities: Clinical Support accommodation					
Radiological Review/Reporting Areas: 6 place	2	48.0	96.0		
Radiological Review/Reporting Areas: 2 place	5	20.0	100.0		
Disposal hold	1	14.0	14.0		
Cleaners room	3	7.0	21.0		
General store	2	6.0	12.0		
Equipment store	2	6.0	12.0		
Mobile x-ray equipment bay: 2 machines	1	5.0	5.0		
Mobile x-ray equipment maintenance/service wor	1	11.0	11.0		
Beverage preparation bay (Patient pantry)	1	12.0	12.0		
Counselling/interview room: 5 places	1	9.0	9.0		
Sub Total			**292.0**		

Administration facilities					
Office: 1 place with large meeting area	1	16.0	16.0		
Office: 1 place with meeting area	1	12.0	12.0		
Superintendent radiographers office: 1 place	2	10.5	21.0		
Senior radiographers: 2 places	3	13.0	39.0		
Secretarial office: Shared - 3 place + Filing	4	18.0	72.0		
Clerical office: 6 place	1	30.0	30.0		
Office supplies store	2	6.0	12.0		
Meeting room/interview room (6 person)	1	14.0	14.0		

Photocopy room	1	8.0	8.0		
Staff wc & wash:	2	2.0	4.0		
Seminar room: 35 places	1	60.0	60.0		
Library/study area: 10 places	1	32.0	32.0		En-suite to seminar room
Sub Total			**320.0**		

Inpatient Support (First Floor) TOTAL **1838.0**

Joint Nuclear Medicine Dept

ADULT					
Reception office	1	14.0	14.0		
Wheelchair bay	1	2.0	2.0		
Bed / Trolley wait - pre admin	1	6.0	6.0		"cold" i.e. DXA, other pts pre-admin of radiopharmaceutical
Waiting area: pre admin	1	20.0	20.0		assisted / wheelchair & "cold" i.e. DXA, other pts pre-admin of radiopharmaceutical
Patients WC	1	4.5	4.5		
Water Dispenser	1	0.5	0.5		
Waiting area: post admin	1	15.0	15.0		"hot" (post admin of radiopharmaceutical) and with beverage counter
Bed / Trolley wait - post admin	1	6.0	6.0		"hot" (post admin of radiopharmaceutical)
Patients wc: Disabled/ wheelchair user - post admin	1	4.5	4.5		assisted / wheelchair & "hot" i.e. post admin of radiopharmaceutical
Imaging room (radionuclide) - SPECT-CT	1	40.0	40.0		
Control room (radionuclide) - SPECT-CT	1	13.0	13.0		
Radionuclide store & dispensary	1	12.0	12.0		
Radionuclide administration room	1	12.0	12.0		
Dirty utility / sluice	1	8.0	8.0		
Disposal hold	1	8.0	8.0		NB. radioactive waste storage.
Blood cell Labeling Room	1	10.0	10.0		Clean room NB EXHAUST DUCTING REQUIRED
Sample Countiers	1	8.0	8.0		
Cardiac Room	1	13.0	13.0		
Clean Utility / Laboratory	1	12.0	12.0		
Clinical / examination room	1	10.0	10.0		
Store	1	8.0	8.0		
Therapy Room	1	6.0	6.0		
Reporting Room	1	12.0	12.0		
Cardiac arrest/emergency trolley bay	1	2.0	2.0		
Consultant Physicist	1	14.0	14.0		1 person + meeting
Office: 4 place	1	18.0	18.0		
Staff base	1	8.0	8.0		
Staff changing facilities: 4 places	1	6.0	6.0		male
Staff changing facilities: 8 places	1	10.0	10.0		female
Staff wc & wash & shower	1	4.5	4.5		
Photocopier Bay	1	2.0	2.0		
Patient changing cubicle (disabled)	1	4.5	4.5		
Imaging room (DXA)	1	20.0	20.0		
Interview room	1	9.0	9.0		
Sub Total			**342.5**		

CHILDRENS					
Reception / Staff Base	1	14.0	14.0		
Waiting area: pre admin	1	12.0	12.0		"cold" i.e. pre-admin of radiopharmaceutical
Patients WC	1	4.5	4.5		Non-radioactive - patients & accompanying persons
Water Dispenser	1	0.5	0.5		
Waiting area: post admin	1	12.0	12.0		hot (post admin of radiopharmaceutical) and with beverage counter
Bed / Trolley wait - post admin	1	6.0	6.0		hot (post admin of radiopharmaceutical) and with beverage counter
Patients wc: Disabled/ wheelchair user - post admin	1	4.5	4.5		assisted / wheelchair & "hot" i.e. post admin of radiopharmaceutical
Imaging room (radionuclide)	1	40.0	40.0		
Control area -(radionuclide)	1	5.0	5.0		
Equipment area (radionuclide)	1	5.0	5.0		
Radionuclide store & dispensary	1	11.0	11.0		
Radionuclide administration room	1	12.0	12.0		
Dirty utility / sluice	1	8.0	8.0		Direct access from imaging room
Disposal hold	1	8.0	8.0		Adjacent to injection room. Clinical & domestic waste, dirty linen, radioactive waste.
Blood cell Labeling Room	1	10.0	10.0		Clean room NB EXHAUST DUCTING REQUIRED
QC eqpt storage bay	1	2.0	2.0		Near gamma camera rm 1
Staff changing facilities: 1 places	1	3.0	3.0		male
Staff changing facilities: 3 places	1	5.0	5.0		female
Staff wc & wash & shower	1	4.5	4.5		
Cardiac arrest/emergency trolley bay	1	2.0	2.0		
Sub Total			**169.0**		

JOINT					
Imaging room (radionuclide) - SPECT-CT	1	40.0	40.0		
Control room (radionuclide) - SPECT-CT	1	11.0	11.0		
Cleaners store	1	7.0	7.0		
Sub Total			**58.0**		

Joint Nuclear Medicine Dept			**569.5**		

Total Net			**3944.5**
Planning allowance @ 5%	5%		197.2
Sub-total			4141.7
Engineering Allowance @ 3%	3%		124.3
Circulation @ 28%	28%		1159.7
TOTAL			**5425.7**

ASEPTIC DISPENSARY

Activity	Qty	Unit Area m²	Total Area m²	ADB Code	Comments
Aseptic suite					
TOTAL ALLOWANCE			**520.0**		*Block allowance*

PHARMACY DISPENSARY

Activity	Qty	Unit Area m²	Total Area m²	Room code	Comments
Dispensary					
Waiting	1	15.0	15.0		
Interview room	1	5.0	5.0		
Dispensary	1	120.0	120.0		Includes storage, hot desks and autodispenser
Dispensary extemporaneous preparation area & store	1	10.0	10.0		
Goods reception/unpacking area	1	10.0	10.0	W0202	
Temperature controlled store - freezer	1	5.0	5.0	W0204	Alarmed to switchboard with continuous temperature recording. Back up for general temp. controlled store
Temperature controlled store - general	1	5.0	5.0		Alarmed to switchboard with continuous temperature recording.
Unlicenced medicines	1	5.0	5.0	W0244	
Controlled drugs store	1	10.0	10.0		
Clinical trials preparation	1	15.0	15.0	W0244	
Sub-Total			**200.0**		

Staff Facilities					
WC & wash, shower & lockers: male staff	1	8.0	8.0		
WC & wash, shower & lockers: female staff	1	15.0	15.0		
Cleaners room	1	7.0	7.0	Y1501	
Sub-Total			**30.0**		

Total net			**230.0**
Planning	5%		11.5
Sub-Total			241.5
Engineering	3%		7.2
Circulation	22%		53.1
Total			**301.9**

MEDICAL DAY UNIT

Room Type	Quantity	Size	Total	ADB Code	Comments
		M2	M2		
Entrance and Reception					
General office: 2 places	1	13.0	13.0		
Medical records trolley store	1	3.5	3.5		
Waiting area: 12 places, incl. 2 wheelchair places	1	20.0	20.0		
Visitors wc: Ambulant user	2	2.5	5.0		
Patients wc: Disabled/ wheelchair user	1	4.5	4.5		
Refreshment vending machine bay	1	3.0	3.0		
Sub Total			**49.0**		
Patient investigation & treatment spaces					
Consulting/examination room: dual sided couch access	2	16.5	33.0		
Staff base: 2 place	1	4.5	4.5		
Physical Measurement / Phlebotomy	1	8.5	8.5		
Small Lab(endocrinology)	1	10.0	10.0		
INR testing Bay	1	1.0	1.0		
Treatment room/ cons/exam	2	16.5	33.0		
Patient trolley/wheelchair parking bay: 1 trolley & 4 wheelchairs	1	5.0	5.0		
Interview room/cons/exam	1	16.5	16.5		
Sub Total			**111.5**		
Patient recovery areas					
Day space (cubicles - glass partition dividers)	21	13.5	283.5		
Single bedroom	1	16.5	16.5		
Ensuite wc to single bedroom	1	4.5	4.5		
Beverage preparation bay	1	8.0	8.0		
Sub Total			**312.5**		
Sanitary facilities					
Patients wc: Disabled/ wheelchair user	6	4.5	27.0		
Sub Total			**27.0**		
Support spaces					
Resuscitation trolley parking bay: 1 trolley	1	2.0	2.0		
Dirty utility	1	9.0	9.0		
clean utility	1	10.0	10.0		
General store	1	12.0	12.0		
Disposal hold	1	8.0	8.0		
Switchgear room	1	4.0	4.0		
Sub Total			**45.0**		

Total Net			**545.0**
Planning	5%		**27.3**
			572.3
Engineering	3%		**17.2**
Circulation	31%		**177.4**
Total			**766.8**

REHAB & THERAPY DEPARTMENT

Main Facilities

inpatient service co-located with wards

Activity	Qty	Unit Area m²	Total Area m²	Room code	Comments
Entrance, reception & waiting facilities					
Vehicle drop-off point	1		0.0		External allowance
Car parking spaces	1		0.0		External allowance
Car parking spaces for people with disabilities	1		0.0		External allowance
Parking bay: 3 wheelchairs	1	2.0	2.0		
Reception: 2 staff	1	10.0	10.0		
Waiting area: 10 persons including 3 wheelchair users	1	19.5	19.5		
Refreshment: drinking water dispenser	1	0.5	0.5		
Refreshment: vending machine	1	3.0	3.0		
WC dual access & handwash: accessible, wheelchair assisted	2	5.5	11.0		
WC & handwash: semi ambulant	3	2.5	7.5		
Sub Total			**53.5**		
Administration facilities					
Office: 6 staff base	3	27.5	82.5		
Conference/meeting room: 10 persons	1	20.0	20.0		
Sub Total			**102.5**		
Orthotics /OT					
Preparation & splint fitting room:	1	35.0	35.0		
Splint Store	1	6.5	6.5		
Treatment Room	1	30.0	30.0		
Treatment cubicles: 2 patients	1	20.0	20.0		
Sub Total			**91.5**		
Physiotherapy facilities					
Activity area: Physiotherapy, 5 patients	1	50.0	50.0		
Activity area/gymnasium: Physiotherapy, 15 patients	1	100.0	100.0		also for exercise / classes 20 to 30 people
Treatment cubicles: Physiotherapy, 10 patients	1	100.0	100.0		
Sub Total			**250.0**		
Shared Treatment Rooms					
Group Area - Shared	1	50.0	50.0		
Treatment Room - 1 patient	6	15.0	90.0		
Patient changing room with cubicles, shower & wash: 10 places	1	15.5	15.5		
Patient changing room with cubicles, shower & wash: 10 places	1	15.5	15.5		
Store: exercise equipment, activity area	1	6.0	6.0		
Store: exercise equipment, activity area	1	9.0	9.0		
Store: exercise equipment, therapy treatment cubicles	1	6.0	6.0		
Sub Total			**192.0**		
Staff support facilities					
Staff changing room with cubicle & handwash, 10 places	1	14.0	14.0		
Staff changing room with cubicle & handwash, 20 places	1	18.0	18.0		
WC & handwash: accessible, wheelchair assisted	1	4.5	4.5		
WC & wash: ambulant	3	2.0	6.0		
Shower: ambulant (non patient)	1	2.5	2.5		
Sub Total			**45.0**		

Support facilities					
Parking bay: resuscitation trolley	1	1.0	1.0		
Clean utility: no controlled drugs	1	9.0	9.0		
Dirty utility: urine test	1	9.0	9.0		
Store: general	1	6.0	6.0		
Cleaners (Housekeeping) room	1	7.0	7.0		
Hold: disposal	1	6.0	6.0		
Switchgear cupboard	1	2.0	2.0		
Sub Total			**40.0**		

Sub Total			**774.5**
Planning	5%		38.7
			813.2
Engineering	3%		24.4
Circulation	21%		170.8
Total			**1,008.4**

OUTPATIENTS

Room Type	Quantity	Size	Total	ADB Code	Comments
		M2	M2		
Outpatient Entrance					
Entrance / Concourse	1	30.0	30.0		From Hospital main entrance
Enquiry / reception point					Patients go straight to reception desk
Vending Area & Telephones	1	3.0	3.0		
Sub Total			**33.0**		
Toilets	4	2.5	10.0		Ambulant WC - on F1 (GF use main ent WCs)
Disabled WC	1	4.5	4.5		Assisted WC - on F1 (GF use main ent WCs)
Store	1	8.0	8.0		
Sub Total			**22.5**		
Total for Outpatient Entrance			**55.5**		
Admin & FM & Staff Areas etc					
Medical Records Sorting / Holding	1	16.0	16.0		Excludes main Med Recs Store / Dept
Disposal Holds	3	6.0	18.0		Convenient to clusters
Resus Bays	3	1.0	3.0		one per floor - 3 floors
OPD Manager	1	11.0	11.0		
OPD Sister / Nurse Specialists Office	1	16.0	16.0		
Admin / Clinical Notes Workstations	1	16.0	16.0		
Meetings / Seminar	1	28.0	28.0		
Cleaners Room	2	6.0	12.0		Convenient to clusters
Sub Total			**120.0**		
Generic OPD Cluster (4no)					
Waiting Area	1	36.0	36.0		
Reception	1	10.0	10.0		
WC - Disabled Size	1	4.5	4.5		
Nurse Base & Physical Measurement Bay	1	8.0	8.0		Adjacent to waiting area
Consult / Exam Room	6	16.5	99.0		
Clean Utility or Store	1	12.0	12.0		
Dirty Utility	1	6.0	6.0		
Store Room	2	4.0	8.0		
Specimen / Disabled WC	1	4.5	4.5		With hatch to dirty utility
Treatment Room (with prep area)	1	16.5	16.5		Locate next to shared Clean & Dirty Utility Rooms
Linen Cupboard	1	1.0	1.0		
Staff WC	1	2.0	2.0		
Consulting / Relatives / Interview / Counselling	1	13.5	13.5		
Sub Total for cluster			**221.0**		
Total for 4no generic cluster			**884.0**		
ENT & Audiology					Associate with an OPD Generic Cluster
ENT Treatment/Consulting room	3	13.5	40.5		
Audiometeric Test Room	2	16.0	32.0		NB - Refer to New National Standards
Interview / Hearing Aid/Consulting room	3	13.5	40.5		
Sub Total			**113.0**		
Pre Op Assessment Area					
Waiting Area	1	20.0	20.0		
Reception	1	11.0	11.0		
WC - Disabled Size	1	4.5	4.5		
Consult / Exam Room	8	13.5	108.0		Single sided access
Treatment room	1	13.5	13.5		
Clean Utility / Store	1	8.0	8.0		
Dirty Utility	1	6.0	6.0		

Nurse base & Physical measurement bay	1	8.0	8.0		
Phlebotomy room	1	8.0	8.0		
Store Room	1	4.0	4.0		
Specimen / Disabled WC	1	4.5	4.5		With hatch to dirty utility
Linen Cupboard	1	1.0	1.0		
Staff WC	1	2.0	2.0		
Sub Total			**198.5**		

Orthopaedic / Fractures Clinic					Link with Generic OPD Cluster
Orthotics Base & Fitting Room	1	24.0	24.0		
Staff Base / Reception Point	1	5.0	5.0		
Waiting Area	1	24.0	24.0		Link back to back with generic OPD cluster's waiting area
Plaster Room (with 4 cubicles) & Store	1	32.0	32.0		
Store: Plaster	1	3.0	3.0		
Store: Equipment	1	6.0	6.0		
Consult / Exam	8	13.5	108.0		
Sub Total			**202.0**		

Diabetic Centre					
Staff Base / Reception Point	1	5.0	5.0		
Waiting Area	1	18.0	18.0		
Height & Weight Bay	1	3.5	3.5		
Clinic Nurse (BP + Vision)/ consulting room	1	13.5	13.5		
Phlebotomy + Blood Testing Lab	1	12.0	12.0		
Consult / Exam Room	2	13.5	27.0		These are linked to Lab
Consult / Exam Room	2	13.5	27.0		
Interview / Office/ consulting room	2	13.5	27.0		
Podiatry Room	1	24.0	24.0		With low level sink. Chair side on to good daylight split room
Multi-function / Sp Nurse/cons/exam	1	13.5	13.5		
Storage Cupboards	6	0.5	3.0		0.5m deep & 1m high doubles
Staff Resource / Education / Meetings	1	40.0	40.0		
Clean Store	1	4.0	4.0		
speciman/disabled WC	1	4.5	4.5		
Sub Total			**222.0**		

Ophthalmology Clinic					
Retinal Screening	1	13.5	13.5		Locate with Ophthalmology, but separate service
Staff Base / Reception Point	1	5.0	5.0		
Waiting Area	1	15.0	15.0		
Orthoptic Examination Room/consulting	1	18.5	18.5		With 6m Snellen line
Optometry room/consulting	1	13.5	13.5		
Visual acuity testing/ cons room	1	20.0	20.0		
OCT examination room	1	18.5	18.5		
Flourine angiogram room	1	18.5	18.5		
Laser Room	1	13.5	13.5		
Fields Testing/cons/exam room	1	13.5	13.5		
Consult / Exam	7	13.5	94.5		
Sub Total			**244.0**		

Multi Test Areas					
Lung Function Lab	1	40.0	40.0		
Respiratory Investigation/Exercise test room	1	20.0	20.0		
Vascular Lab	1	16.0	16.0		
Sub Total			**76.0**		

Urology Clinic - Urodynamics					
Sub-waiting with Vending	1	11.0	11.0		
Treatment room (with prep area)	1	16.5	16.5		
Ensuite WC (to treatment room)	1	4.5	4.5		
Patient WC (disabled)	2	4.5	9.0		
Technical area	1	44.0	44.0		
Sub Total			**85.0**		

Total Net			**2200.0**
Planning allowance	0.05		110.0
Sub-total			2310.0
Engineering Allowance	0.03		69.3
Circulation	0.31		716.1
Total			**3095.4**

Cardiology OPD & Testing			**431.2**		see below for schedule
Cardic Rehab			**291.2**		see below for schedule
TOTAL: OPD, Cardiology & Cardiac Rehab			**3817.9**		

CARDIOLOGY - OUTPATIENTS & TESTING

Room Type	**Quantity**	**Size**	**Total**		**Comments**
		M2	**M2**		
All Rooms					
Sub-reception / Admin / Staff Base	1	14.0	14.0		
Patients bed/trolley waiting area: 1 place	1	6.0	6.0		
Sub-waiting area: 15 places, incl. 2 wheelchai	1	25.5	25.5		
Drinking water dispenser	1	0.5	0.5		
Visitors & patients wc: Ambulant user	1	2.5	2.5		
Visitors & patients wc: Disabled/ wheelchair u	1	4.5	4.5		
Ambulant patients changing cubicle	2	1.5	3.0		
Disabled/wheelchair patients changing cubicle	1	3.5	3.5		
Linen bay/dirty linen (patient changing)	1	0.5	0.5		
Day case multi bed space: 4 bed/reclining cha	1	36.0	36.0		
Dirty Utility - OPD Type	1	6.0	6.0		
Resuscitation Trolley Space	1	1.0	1.0		
Echocardiography room	3	18.0	54.0		
Exercise ECG room	2	18.0	36.0		
Echocardiograph viewing room: 2 workstation	1	12.0	12.0		
Tilt table room	1	16.0	16.0		
Consulting / Examination room	2	16.5	33.0		
Consulting / Examination room - single sided	1	13.5	13.5		
Counselling/interview room: 5 places	1	9.0	9.0		
Technicians Tape Reading Office: 3 places	1	18.0	18.0		
Sterile supplies store	1	6.0	6.0		
Equipment store	1	6.0	6.0		

Total Net			**306.5**
Planning allowance @ 5%	0.05		15.3
Sub-total			321.8
Engineering Allowance @ 3%	0.03		9.7
Circulation @ 31%	0.31		99.8
Total			**431.2**

CARDIAC REHAB

Gym/ Main excerse area	1	135.0	135.0		
Physiotherapy - assessment/treatment	1	16.0	16.0		
Lockers/changing - male	1	20.0	20.0		
Lockers/changing - female	1	20.0	20.0		
Shower rooms	4	4.0	16.0		

Sub Total			**207.0**
Planning allowance @ 5%	0.05		10.4
Sub-total			217.4
Engineering Allowance @ 3%	0.03		6.5
Circulation @ 31%	0.31		67.4
Total			**291.2**

DERMATOLOGY OUTPATIENT & DAY CASE DEPT

Room Type	Quantity	Size	Total	ADB Code	Comments
		M2	M2		
Staff Base / Reception	1	16.0	16.0		
Physical Measurement	1	8.0	8.0		
Waiting Area (30 persons incl 4 w'chair spaces)	1	48.0	48.0		May be split to allow for a sub waiting area near treatment rooms
WCs - ambulatory asstd	2	2.5	5.0		
WC - Wchair	1	4.5	4.5		
Consult / exam Room (dual sided access)	6	16.5	99.0		
Consult / exam Room (single sided access)	4	13.5	54.0		
Prep Room / clean utility room	2	12.0	24.0		
Biopsy Room with Prep area	3	16.5	49.5		
Leg Ulcer Treatment Room	1	16.5	16.5		With low level sink
Treatment room - general	3	16.5	49.5		
Counsel / Interview	1	13.5	13.5		
Shower / WC / WHB	1	6.0	6.0		
Patients Waiting (following and between treatments)	1	14.0	14.0		
Resuscitation trolley parking bay: 1 trolley	1	1.0	1.0		
Phototherapy Suite (UVA / UVB / Hand & Foot) Suite	1	40.0	40.0		Includes 2 x changing cubicles. Run by 1 nurse - so each box / booth in open view moved from ward
Dirty Utility	1	9.0	9.0		
Staff WC	1	2.0	2.0		
Resource Library/patient information	1	18.0	18.0		
2 Person Offices	1	12.0	12.0		
workstation area (x 6)	1	24.0	24.0		
Disposal Hold	1	10.0	10.0		
Cleaners Room	1	7.0	7.0		
Linen Cupboard	1	2.0	2.0		
Sub Total			**532.5**		

Dermatology Sub Total			**532.5**
Planning allowance	5%		26.6
Sub-total			559.1
Engineering Allowance	3%		16.8
Circulation	31%		173.3
TOTAL			**749.2**

Dialysis Unit (30 Stations)

Room Type	Quantity	Size	Total	ADB Code	Comments
		M2	M2		
Entrance, reception & waiting facilities					
Vehicle drop-off point	1		0.0		External allowance. Designated
Car parking spaces	12		0.0		External allowance. Dedicated space
Car parking spaces for people with disabilitie	4		0.0		External allowance. Dedictaed space
Main entrance draught lobby	1	11.0	11.0		Includes entrance canopy area
Public telephone: single booth	1	1.5	1.5		
Public telephone: single booth, accessible	1	2.0	2.0		
Reception & office: 6 staff	1	36.0	36.0		Includes record storage
Waiting area: 30 persons including 2 wheelch	1	44.0	44.0		
Parking bay: 5 wheelchair spaces	1	5.0	5.0		
Refreshment: vending machine	1	3.0	3.0		
Sub Total			**102.5**		
Counselling, interview, consulting/examination & treatment facilities					
Physical measurement area: Renal	3	8.0	24.0		
Consulting & examination room: single side c	2	13.5	27.0		
Treatment cubicle: dialysis, 1 patient	20	13.5	270.0		
Treatment room: dialysis, 1 patient	6	13.5	81.0		Bed space in rooms
Isolation treatment room: dialysis, 1 patient	4	13.5	54.0		
Treatment room: Continuous ambulatory peri	2	16.5	33.0		
Training room & office: Peritoneal Dialysis (P	1	16.5	16.5		
Sub Total			**505.5**		
Support facilities: Clinical					
Staff base: 4 staff	2	12.0	24.0		
Clean utility	2	14.0	28.0		
Dirty utility: bedpan disposal & urine test	2	12.0	24.0		
Sub Total			**76.0**		
Visitors & patients support facilities					
Patient changing room: 15 places	2	15.0	30.0		
Shower & wash: assisted	3	4.5	13.5		
WC & handwash: semi ambulant	4	2.5	10.0		
WC & handwash: accessible, wheelchair ass	1	4.5	4.5		
Pantry: serving 30 persons	1	12.0	12.0		
Sub Total			**70.0**		
Staff support facilities: Offices					
Interview & counselling room: 5 persons	2	9.0	18.0		
Office: 1 staff	1	10.5	10.5		
Office: 2 staff	1	13.0	13.0		
Sub Total			**41.5**		
Staff support facilities: Sanitary & changing					
Staff changing room: 10 places	1	8.0	8.0		
Staff changing room: 20 - 30 places	1	16.0	16.0		
Shower: ambulant (non patient)	3	2.5	7.5		Separate males & females
WC & wash: ambulant	4	2.0	8.0		Separate males & females
WC & handwash: accessible, wheelchair ass	1	4.5	4.5		
Sub Total			**44.0**		
Staff support facilities: Education & training					
Seminar room: 20 persons	1	30.0	30.0		To be located such that it can provide future expansion space for dialysis stations
Sub Total			**30.0**		
Support facilities: Holding & storage					
Parking bay: resuscitation trolley	1	1.0	1.0		
Store: furniture, equipment & disposables	1	40.0	40.0		
Store: equipment & renal consumables	1	25.0	25.0		
Store: linen	1	9.0	9.0		
Cleaners (Housekeeping) room	1	7.0	7.0		
Hold: disposal	1	10.0	10.0		
Sub Total			**92.0**		

Support facilities: Equipment maintenance					
Equipment Servicing	2	24.0	48.0		Covers whole renal service
Live Test Area	1	6.0	6.0		Covers whole renal service
Ready Use Equipment / Out Lobby	1	9.0	9.0		Covers whole renal service
Component Store	2	16.0	32.0		Covers whole renal service
Sub Total			**95.0**		

Support facilities: Engineering & plant					
Switchgear room	1	4.0	4.0		
Computer communication: IT hub room	1	9.0	9.0		
Plant room: water treatment					See M&E Specification for water treatment plant and space required.
			13.0		

Total Net			**1069.5**
Planning allowance @ 5%	5%		53.5
Sub-total			1123.0
Engineering Allowance @ 3%	3%		33.7
Circulation @ 27%	27%		303.2
TOTAL OF DIALYSIS			**1459.9**

ACCIDENT & EMERGENCY DEPARTMENT

Activity Space	No:	Unit Area m²	Total Area m²	ADB Code	Comments
Entrance, reception & waiting facilities					
Car parking spaces for people with disabilities & parents with young children					
Main entrance draught lobby	1	11.0	11.0		Ambulatory Entrance
Main entrance draught lobby	1	15.0	15.0		Ambulance Entrance
Decontamination Capsule	1	75.0	75.0		
Parking bay: 6 wheelchairs	2	6.0	12.0		
Parking bay: 3 accident trolleys & 3 wheelchairs	2	12.0	24.0		
Reception: 4/5 staff	1	12.5	12.5		
Notes store & Photocopying	1	10.0	10.0		Behind reception
Waiting area: 60 persons including 5 wheelchair users	1	85.0	85.0		
Waiting play area: 10 children	1	18.0	18.0		
Public telephone: single booth, accessible	3	2.0	6.0		
Refreshment: drinking water dispenser	2	0.5	1.0		
Refreshment: vending machine	2	3.0	6.0		
WC & handwash: semi ambulant	8	2.5	20.0		Seperate Male & Female
WC & handwash: accessible, wheelchair assisted	1	4.5	4.5		
Nappy change room with handwash	1	4.0	4.0		
Infant feeding room	1	5.5	5.5		
Sub Total			**309.5**		

CPN, Social care & distressed/disturbed persons facilities					
Interview Room	1	11.0	11.0		Dual access required
CPN / Social Work Bases / Police Office	1	40.0	40.0		Block Allowance
WC & handwash: accessible, wheelchair independent/assisted	1	4.5	4.5		
Special room: distressed/disturbed patient	1	11.0	11.0		Dual access required
WC & handwash: accessible, wheelchair independent/assisted	1	4.5	4.5		
Sub Total			**71.0**		

Assessment & Treatment facilities					
Generic Assess / Treatment room: A&E	26	12.0	312.0		Cubicles, not rooms with easy escape e.g. curtain front not door / wall. Size and design to be confirmed. Access should be from patients r.h. side - allow for 2 negative pressure sealed rooms
MIU Assess & Treat Room	4	13.5	54.0		Dual Access Rooms (i.e. 2 doors)
Waiting area: 10 persons including 1 wheelchair user	2	16.5	33.0		
WC & handwash: specimen; accessible, wheelchair	2	4.5	9.0		
Treatment room: A&E, head & neck & Opthalmology	2	16.0	32.0		With monitoring
Treatment room: A&E, gynaecology/genitourinary colposcopy	1	16.0	16.0		With monitoring
WC & handwash: accessible, wheelchair assisted	1	4.5	4.5		
Plaster Room (with 3 cubicles) & Store	1	32.0	32.0		
Staff & communication base: 15 staff	1	35.0	35.0		
Supplies base	1	20.0	20.0		
Patient resuscitation facilities					
Resuscitation room: 6 places	1	172.0	172.0		One bay equipped for babies, children & young people ??
Major Procedures Room	2	29.0	58.0		

CDU / Assessment - First 4 Hours					
Distressed & bereaved persons facilities					
Relatives sitting room	2	16.0	32.0		Family and friends
WC & handwash: accessible, wheelchair assisted	2	4.5	9.0		En-suite
Body viewing/bier room	2	10.0	20.0		Dual access
Support facilities: Clinical					
Dirty utility: bedpan disposal & urine test	2	12.0	24.0		
Parking bay: ultrasound unit	1	1.0	1.0		
Sub Total			**863.5**		

Staff Support Facilities					
Staff Facilities Area					
Rest, Office with Shower	1	50.0	50.0		Block Allowance
Sanitary & changing					
WC & wash: ambulant	12	2.0	24.0		
Shower: ambulant (non patient)	4	2.5	10.0		
Staff changing room: 40 places	1	20.0	20.0		
Staff changing room: 80 places	1	40.0	40.0		
Staff support facilities: Offices					
Office: 1 staff	4	10.5	42.0		
Office: 2 staff	2	13.0	26.0		
Office: 4 staff	2	24.0	48.0		
Interview & counselling room: 5 persons	2	9.0	18.0		
Interview/meeting room: 6 persons	2	20.0	40.0		
Education and training					
Seminar & training room: 30 persons	1	50.0	50.0		
Library & study room: 5 persons	1	20.0	20.0		
Holding & storage					
Store: equipment & supplies	1	50.0	50.0		
Store: sterile supplies	2	15.0	30.0		1 shared with Pharmacy
Linen Store	2	4.0	8.0		
Store: major incident equipment	1	12.0	12.0		
Store: ready to use medical gas cylinders	1	9.0	9.0		
Store: ambulance equipment	1	6.0	6.0		
Service room: equipment	1	21.0	21.0		
Miscellaneous					
Hold: disposal	1	10.0	10.0		
Cleaners (Housekeeping) room	2	7.0	14.0		
Switchgear room	1	4.0	4.0		
Battery & UPS room	1	9.0	9.0		
Sub Total			**561.0**		

Net Total			**1805.0**
Planning allowance	5%		90.3
Sub-total			1895.3
Engineering Allowance	3%		56.9
Circulation	27%		511.7
TOTAL OF Emergency Department			**2463.8**

ACUTE ASSESSMENT CLUSTER

Number of Beds		**28.0**			
Percentage Single Rooms		**1.0**			
Description	**Qty**	**Unit Area m²**	**Total Area m²**	**ADB Code**	**Comments**
Bed and Sanitary Facilities					
Acute single bedroom (incl family & clinical support space)	28	16.5	462.0		
Sub-Total			**462.0**		
Patient Support Facilities			0.0		
Assisted shower/wc/whb	8	4.5	36.0		
Interview/sitting room: 5 places	1	9.0	9.0		
Nurses Station	1	8.0	8.0		
Resuscitation trolley parking bay: 1 trolley	1	2.0	2.0		
Pantry/Beverage making area	1	12.0	12.0		
Ward Food trolley parking bay	1	1.5	1.5		
Wheelchair bay	1	4.0	4.0		
Touchdown spaces	4	2.0	8.0		
Sub-Total			**80.5**		
Backup storage			0.0		
Linen trolley parking bay	1	1.5	1.5		
Clinical store/Controlled Drug Cupboard	1	1.5	1.5		
Store - Equipment - Large	1	15.0	15.0		
Sub-Total			**18.0**		
Utilities			0.0		
Dirty utility/Sluice/Test Room - small	1	6.5	6.5		
Clean Utility Room	1	12.0	12.0		
Disposal hold/bay - large	1	8.0	8.0		
Cleaners room	1	7.0	7.0		
Staff wc & wash: Ambulant user	2	2.0	4.0		
Switchgear cupboard	1	1.0	1.0		
Sub-Total			**38.5**		
Office and administration services			0.0		
Reception / Clerk: 2 position open to corridor	1	8.0	8.0		
Office incl.meeting area: 1 place	1	12.0	12.0		
Charge Nurse Office	1	9.0	9.0		
Printer/IT/administration store	1	6.0	6.0		
Waiting area: 5-10 persons	1	16.0	16.0		
Staff locker bay	1	1.5	1.5		
Sub-Total			**52.5**		
Control Room Area					
Reception / Clerk: 1 position open to corridor	1	8.0	8.0		
Open Plan Control Area (6 work stations)	1	27.5	27.5		
Office 1 person	2	12.0	24.0		
Office 3 Person	2	18.0	36.0		
Sub-Total			**95.5**		

Total net			**747.0**
Planning allowance	5%		37.4
Sub-total			784.4
Engineering Allowance	3%		23.5
Circulation	31%		243.1
TOTAL			**1051.0**

ACUTE CLUSTER

Number of Beds		**30**			
Percentage Single Rooms		**100%**			
Description	**Qty**	**Unit Area m²**	**Total Area m²**	**ADB Code**	**Comments**
Bed and Sanitary Facilities					
Acute single bedroom (incl family & clinical support space)	30	16.5	495.0		
Ante-room access to isolation bedroom	1	9.0	9.0		
En-suite assisted shower/wc/whb	30	4.5	135.0		
Sub-Total			**639.0**		
Patient Support Facilities					
Diagnostic Testing Room (Exercise Testing/Echo)	1	16.5	16.5		
Interview/sitting room: 5 places	1	9.0	9.0		
Nurses Station	1	8.0	8.0		
Resuscitation trolley parking bay: 1 trolley	1	2.0	2.0		
Pantry/Beverage making area	1	12.0	12.0		
Ward Food trolley parking bay	1	1.5	1.5		
Wheelchair bay	1	4.0	4.0		
Touchdown spaces	4	2.0	8.0		
Sub-Total			**61.0**		
Backup storage					
Linen trolley parking bay	1	1.5	1.5		
Clinical store/Controlled Drug Cupboard	1	1.5	1.5		
Store - Equipment - Large	1	15.0	15.0		
Sub-Total			**18.0**		
Utilities					
Dirty utility/Sluice/Test Room - small	1	6.5	6.5		
Clean Utility Room	1	12.0	12.0		
Disposal Hold/bay - large	1	8.0	8.0		
Cleaners room	1	7.0	7.0		
Staff wc & wash: Ambulant user	2	2.0	4.0		
Switchgear cupboard	1	1.0	1.0		
Sub-Total			**38.5**		
Office and administration services					
Reception / Clerk: 1 position open to corridor	1	8.0	8.0		
Office incl.meeting area: 1 place	1	12.0	12.0		
Charge Nurse Office	1	9.0	9.0		
Waiting area: 5-10 persons	1	16.0	16.0		
Staff locker bay	1	1.5	1.5		
Sub-Total			**46.5**		
Additional Area's					
WC & handwash: accessible, wheelchair assisted	1	4.5	4.5		
Body viewing/bier room	1	10	10		
Sub-Total			**14.5**		

Total net			**817.5**
Planning allowance	5%		40.9
Sub-total			858.4
Engineering Allowance	3%		25.8
Circulation	31%		266.1
TOTAL OF Acute Cluster Department			**1150.2**

GENERAL RECEIVING CLUSTER

Number of Beds		**48**			
Percentage Single Rooms		**100%**			
Description	**Qty**	**Unit Area m²**	**Total Area m²**	**ADB Code**	**Comments**
Bed and Sanitary Facilities					
Acute single bedroom (incl family & clinical support space)	48	16.5	792.0		(100% Single rooms)
Ante-room access to isolation bedroom	2	9.0	18.0		
En-suite assisted shower/wc/whb	48	4.5	216.0		(as per HBN 00-02)
Sub-Total			**1026.0**		
Patient Support Facilities					
Consultation/Examination Room	1	16.5	16.5		
Interview/sitting room: 5 places	2	9.0	18.0		
Nurses Station	2	8.0	16.0		
Resuscitation trolley parking bay: 1 trolley	2	2.0	4.0		
Pantry/Beverage making area	1	12.0	12.0		
Ward Food trolley parking bay	1	1.5	1.5		
Wheelchair bay	1	6.0	6.0		
Touchdown spaces	4	2.0	8.0		
Sub-Total			**82.0**		
Backup storage					
Linen trolley parking bay	2	1.5	3.0		
Clinical store/Controlled Drug Cupboard	2	1.5	3.0		
Store - Equipment - Large	2	15.0	30.0		
Sub-Total			**36.0**		
Utilities					
Dirty utility/Sluice/Test Room - small	1	6.5	6.5		
Clean Utility Room	1	12.0	12.0		
Disposal Hold/bay - large	1	8.0	8.0		
Cleaners room	1	7.0	7.0		
Staff wc & wash: Ambulant user	2	2.0	4.0		
Switchgear cupboard	1	1.0	1.0		
Sub-Total			**38.5**		
Office and administration services					
Reception / Clerk: 1 position open to corridor	1	8.0	8.0		
Office incl.meeting area: 1 place	1	12.0	12.0		
Charge Nurse Office	1	9.0	9.0		
Waiting area: 15 persons inc. 2 wheelchair users	1	25.5	25.5		
Staff locker bay	2	1.5	3.0		
Sub-Total			**57.5**		

Total net			**1240.0**
Planning allowance	5%		62.0
Sub-total			1302.0
Engineering Allowance	3%		39.1
Circulation	31%		403.6
TOTAL OF General Cluster Department			**1744.7**

Complex Needs Cluster

Number of Beds		**12**			
Percentage Single Rooms		**100%**			
Description	**Qty**	**Unit Area m²**	**Total Area m²**	**ADB Code**	**Comments**
Bed and Sanitary Facilities					
Acute single bedroom (incl family & clinical support space)	12	16.5	198.0		(100% Single rooms)
Ante-room access to isolation bedroom	1	9.0	9.0		
En-suite assisted shower/wc/whb	12	4.5	54.0		(as per HBN 00-02)
Sub-Total			**261.0**		
Patient Support Facilities					
Consultation/Examination Room	1	16.5	16.5		
Interview/sitting room: 5 places	1	9.0	9.0		
Nurses Station	1	8.0	8.0		
Resuscitation trolley parking bay: 1 trolley	1	2.0	2.0		
Pantry/Beverage making area	1	12.0	12.0		
Ward Food trolley parking bay	1	1.5	1.5		
Wheelchair bay	1	4.0	4.0		
Sub-Total			**53.0**		
Backup storage					
Linen trolley parking bay	1	1.5	1.5		
Clinical store/Controlled Drug Cupboard	1	1.5	1.5		
Store - Equipment - Large	1	15.0	15.0		
Sub-Total			**18.0**		
Utilities					
Dirty utility/Sluice/Test Room - small	1	6.5	6.5		
Clean Utility Room	1	12.0	12.0		
Disposal Hold/bay - large	1	8.0	8.0		
Cleaners room	1	7.0	7.0		
Staff wc & wash: Ambulant user	2	2.0	4.0		
Switchgear cupboard	1	1.0	1.0		
Sub-Total			**38.5**		
Office and administration services					
Reception / Clerk: 1 position open to corridor	1	8.0	8.0		
Office incl.meeting area: 1 place	1	12.0	12.0		
Charge Nurse Office	1	9.0	9.0		
Printer/IT/administration store	1	6.0	6.0		
Waiting area: 5-10 persons	1	16.0	16.0		
Staff locker bay	1	1.5	1.5		
Sub-Total			**52.5**		
Rehabilitative Therapy Area					
ADL bedroom with living assessment	1	18.0	18.0		
ADL wc/bathroom/shower	1	13.0	13.0		
Light activities area	1	40.0	40.0		
Equipment Store	1	20.0	20.0		
Sub-Total			**91.0**		

Total net			**514.0**
Planning allowance	5%		25.7
Sub-total			539.7
Engineering Allowance	3%		16.2
Circulation	31%		167.3
Total			**723.2**

OPD CLUSTER

Based on Generic OPD Cluster

Emergency Centre OPD Cluster				
Waiting Area	1.0	12.0	12.0	
WC - Disabled Size	1.0	4.5	4.5	
Nurse Base & Physical Measurement Bay	1.0	8.0	8.0	Adjacent to waiting area
Consult / Exam Room	3.0	16.5	49.5	
Clean Utility or Store	1.0	12.0	12.0	
Dirty Utility	1.0	6.0	6.0	
Store Room	1.0	4.0	4.0	
Specimen / Disabled WC	1.0	4.5	4.5	With hatch to dirty utility
Linen Cupboard	1.0	1.0	1.0	
Staff WC	1.0	2.0	2.0	
Sub Total			**103.5**	

Total net			**103.5**
Planning allowance	5%		5.2
Sub-total			108.7
Engineering Allowance	3%		3.3
Circulation	31%		33.7
Total			**145.6**

SHARED EMERGENCY CLUSTER SUPPORT CORE

	Qty	Unit Area m²	Total Area m²	ADB Code	Comments
Shared Cluster Support Facilities					
Regen Kitchen	1	30.0	30.0		
Allowance for Wash Up	1	12.0	12.0		
Disposal Hold & Recycling Point	1	24.0	24.0		
Seminar / Education Room	1	40.0	40.0		
Near-patient testing/status laboratory	1	8.5	8.5		
Blood Fridge	1	6.0	6.0		
Workstations x 6	1	24.0	24.0		
Therapy / AHP / Multi Purpose Assess / Treat	1	38.0	38.0		
Medicines Management	1	12.0	12.0		
Staff WC/wash	2	3.0	6.0		
Staff locker room - F	1	24.0	24.0		100 half height lockers
Staff locker room - M	1	8.0	8.0		20 half height lockers
Staff shower	2	4.0	8.0		
Accessible shower / WC	1	4.5	4.5		Includes lockers
Cleaners Room	1	7.0	7.0		
Printer/IT/administration store	1	10.0	10.0		
Sub Total			**262.0**		

Total Net			**262.0**
Planning allowance	5%		13.1
Sub-total			275.1
Engineering Allowance	3%		8.3
Circulation	31%		85.3
Total			**368.6**

MEDICAL RECORDS

Room Type	Quantity	Size	Total	ADB Code	Comments
		M2	M2		
Clinical Coding					
Open Plan Office for 20 persons	1.0	45.0	45.0		
Printer Stations	5.0	3.0	15.0		
Sub Total			**60.0**		
Total			**60.0**		
Planning allowance	5%		3.0		
Sub-total			63.0		
Engineering Allowance	3%		1.9		
Circulation	30%		18.9		
Total			**83.8**		

Medical Records Offices					
Audit Room	1.0	18.0	18.0		4 workstation positions
Legal Room/Viewing room	1.0	11.0	11.0		2 workstation positions
Copying Room	1.0	6.0	6.0		
General Receipt/Sorting & Scanning	1.0	45.0	45.0		Open fronted office, with counter.
WC/WHB - Type 1	3.0	2.0	6.0		
WC: Disabled/ wheelchair	1.0	4.5	4.5		
Main Records staff area	40.0	4.5	180.0		
Office - 1 position + filing	1.0	13.0	13.0		
Admin Store	1.0	6.0	6.0		
Office - 1 position + meeting area	1.0	14.0	14.0		
Deputy Manager(s)	1.0	11.0	11.0		
Sub Total			**314.5**		

Total Net			**314.5**
Planning allowance	5%		15.7
Sub-total			330.2
Engineering Allowance	3%		9.9
Circulation	30%		99.1
Total			**439.2**

TOTAL FOR DEPARTMENT	**523.0**

MAIN ENTRANCE & PUBLIC AREAS

Activity Space	No:	Unit Area m²	Total Area m²	ADB Code	Comments
Entrance					
Entrance draught lobby	1	20.0	20.0		
Entrance concourse	1	40.0	40.0		
Patient trolley/wheelchair parking bay: 2 trolleys & 8 wheelchairs (& Shop Mobility Allowance)	1	10.5	10.5		
Refreshment vending machine bay	2	3.0	6.0		
Telephones w/chair height	2	1.5	3.0		
Telephones	4	1.0	4.0		
Shopping & pushchair bay	1	10.0	10.0		
Net Total			**93.5**		
Reception					
Main Reception & Information	1	20.0	20.0		
Waiting area: 30 places, incl. 5 wheelchair places	1	45.0	45.0		
Net Total			**65.0**		
Sanitary facilities					
WC: visitor ambulant user	8	2.5	20.0		
WC: visitors disabled/ wheelchair user	2	4.5	9.0		
Baby/infant feeding room	1	5.5	5.5		
Nappy change room	1	4.0	4.0		
Adult changing/WC (disabled)	1	12.0	12.0		weight bearing facility reference www.changing-places.org
Cleaners Room - Large Equipment Store	1	16.0	16.0		
Switchgear cupboard	1	2.0	2.0		
Net Total			**68.5**		
Admissions					
Reception/ admissions office	1	18.0	18.0		
Interview rooms	4	9.0	36.0		
Net Total			**54.0**		
Discharge Lounge					
Patients & visitors discharge lounge	1	74.0	74.0		Includes staff base
Nurse Base	1	6.0	6.0		
Ambulance staff duty room: 5 place	1	10.0	10.0		
Ambulance Office (Board Staff)	1	18.0	18.0		
Resus Bay	1	2.0	2.0		
Hoist Bay	1	4.5	4.5		
Consulting / Examination Room: single	1	13.5	13.5		
Beverage bay	1	6.0	6.0		
Food trolley bay	1	1.5	1.5		
Dirty Utility	1	9.0	9.0		
Equipment store	1	6.0	6.0		
Clean store	1	4.0	4.0		
Staff WC	1	2.5	2.5		
WC: Ambulant - patient	2	2.5	5.0		
WC: Independent wheelchair	1	4.5	4.5		
Net Total			**166.5**		
Security & Porters					
Security (local) & Porters room:	1	26.0	26.0		
Net Total			**26.0**		
FM Offices					
Domestic & Portering Manager	1	20.0	20.0		
Assistant Domestic & Portering Managers	1	20.0	20.0		
Quality/Training Managers	1	20.0	20.0		

Supervisors (hot desk)	1	30.0	30.0		
Net Total			**90.0**		

Patient Information & Support					
Cashiers office	1	18.0	18.0		With security hatch & safe
Internet & NHS Information Stations	3	2.0	6.0		
Patients advocates room	1	16.0	16.0		
Interview room: 5 places	1	9.0	9.0		
Voluntary Services - allowance	1	15.0	15.0		
Net Total			**64.0**		

Spiritual Care Facility					
Reception	1	5.0	5.0		
Beverage bay	1	4.0	4.0		
Large Sanctuary Area	1	35.0	35.0		
Adjacent Ablution Facilities	1	5.0	5.0		
Vestry / Office - 3 person	1	15.0	15.0		
Single Ofice with Meeting Space	1	12.0	12.0		
			76.0		

Total Net			**703.5**
Planning allowance	5%		35.2
Sub-total			738.7
Engineering Allowance	3%		22.2
Circulation	25%		184.7
Total			**945.5**

Bidder Items - Retail & Café		Gross area allowances
Additional Retail Space	250.0	
Snack Bar (incl seating area)	90.0	
Net Total	**340.0**	
Additional Atria Allowance	**120.0**	
Department Total	**1405.5**	

BED MAINTAINENCE

Activity Space	No:	Unit Area m²	Total Area m²	ADB Code	Comments
Bed Maintenance					
Ready to use bed store	1	33.0	33.0		10 beds
Ready to use transit chair store	1	19.0	19.0		25 chairs
Ready to use transit trolley store	1	36.0	36.0		25 trolleys
Bed, trolley, chair maintenance	1	24.0	24.0		
Bed, trolley, chair decontamination	1	16.0	16.0		

Sub Total **128.0**

Total Net			**128.0**
Planning allowance	5%		6.4
Sub-total			134.4
Engineering Allowance	3%		4.0
Circulation	20%		26.9
TOTAL			**165.3**

KITCHEN & CATERING

Activity Space	No:	Unit Area m²	Total Area m²	ADB Code	Comments
Catering					
Restaurant and coffee lounge					
Entrance lobby	1	20.0	20.0		
Food store	1	7.5	7.5		
Dining servery	1	130.0	130.0		
Restaurant	1	375.0	375.0		
Additional Overflow for Dining	1	220.0	220.0		
Coffee lounge servery	1	30.0	30.0		
Coffee lounge	1	150.0	150.0		
Supervisiors office: 1 place	1	7.0	7.0		
Restaurant & coffee lounge furniture store	1	12.0	12.0		
Linen & disposable goods store	1	4.5	4.5		
Cleaners room	1	7.0	7.0		
Switchgear cupboard	1	2.0	2.0		
Sub Total			**965.0**		

Total Net			**965.0**
Planning allowance	5%		48.3
Sub-total			1013.3
Engineering Allowance	3%		30.4
Circulation	15%		152.0
Total			**1195.6**

Kitchen					
Delivery Area					
Delivery bay	1	50.0	50.0		
Storekeepers office: 1 place	1	9.0	9.0		
Returns empties store	1	45.0	45.0		
CFPU returned containers trolley parking bay (outward)	1	55.0	55.0		
Food stores					
Provisions store	1	60.0	60.0		
Bread store	1	15.0	15.0		
Diet food store	1	10.0	10.0		
Diary products cold store	1	18.0	18.0		
Bulk chilled food store	2	100.0	200.0		
General cold store	1	12.0	12.0		
Food preparation rooms					
Hygiene control bay	1	6.5	6.5		
Meal despatch					
Ward bulk distribution - temp controlled	1	40.0	40.0		
Staff food service room	1	60.0	60.0		
Returned ward food trolley parking bay					
Central wash-up & pot wash bay	1	80.0	80.0		Restaurant only
Trolley wash bay	1	7.0	7.0		
Offices & Staff accommodation					
Male staff shower	4	2.5	10.0		
Male staff wc & wash: Ambulant user	4	2.0	8.0		
Female staff shower	4	2.5	10.0		
Female staff wc & wash: Ambulant user	4	2.0	8.0		
Staff rest room: 40 places	1	45.0	45.0		
Support spaces					
Detergents store	1	7.0	7.0		
Cleaners room	2	7.0	14.0		
Clean linen & uniform store	1	7.0	7.0		
Dirty linen & uniform store	1	7.0	7.0		
Switchgear room	1	4.0	4.0		
Gas meter room	1	5.0	5.0		
Sub Total			**792.5**		

Total Net			**792.5**
Planning allowance	5%		39.6
Sub-total			832.1
Engineering Allowance	3%		25.0
Circulation	15%		124.8
Total			**981.9**

NEW CHILDREN'S HOSPITAL

Clinical Output Specification

AREA	EMERGENCY DEPARTMENT

1. INTRODUCTION

The Paediatric Emergency Department (ED) is the area within the New Children's Hospital (NCH) that will deal with children presenting in need of urgent medical care, and as such fulfill a vital 'front door' access function for the hospital. The Paediatric ED will serve the population of Greater Glasgow, but a proportion of attenders will come from outwith this area. The Paediatric ED will see patients up to their 16th birthday.

The Paediatric ED will provide a Consultant based service for at least 12 hours a day/7 days a week and be set up to cope with undifferentiated paediatric clinical presentations across all specialties, from the life threatening to the self-limiting. Patients will be managed across several distinct clinical spaces including a resuscitation room, majors/minors assessment areas and an ED Observation Ward. All children presenting to the department will undergo a common triage process to ensure that patients are seen according to clinical acuity/need.

The Paediatric ED will have the role of coordinating all medical and surgical resuscitations, taking appropriate steps to stabilise and treat critically ill and injured children. For other attenders, ED staff will have to safely and effectively identify those children needing admission and those who can be safely discharged. This will need to be an efficiently managed process, in the context of the Unscheduled Care Collaborative (UCC) target of moving 98% of all patients through the ED within a 4 hour time period.

The department will have an Emergency Nurse Practitioner service for patients attending with minor injury.

The Paediatric ED will run an in-house Outpatient Review Clinic dealing with soft tissue injuries, wound reviews, minor fractures, minor burns and limping children.

The Paediatric ED will have a central role in Major Incident Planning for the NCH.

The Paediatric ED will have responsibility for delivering a number of in-house teaching programmes for medical and nursing staff.

2. LOCATION AND LINKS –

External Department Links

The Paediatric ED will be the 'front door' of the NCH and if sited adjacent to the adult ED, it is essential that it is separate and has its own identity.

An absolute requirement for a Paediatric ED is complete audio-visual separation from adult patients. Design of the entrance area must ensure that children will not be exposed to the sometimes inappropriate or aggressive behaviour of some adult attenders.

Another significant difference between paediatric and adult emergency practice is the fact that at least half of the sickest patients do not arrive by ambulance. Therefore the main patient entrance, the ambulance entrance, triage and the resuscitation room have an essential adjacency in a Paediatric ED which must be reflected in the NCH ED design.

Close to	Reason	*Category
Ambulance access	Reception of seriously ill / injured children	1
Adequate patient car parking	Many seriously ill children arrive by car	1
X-Ray / USS facilities	High number of ED patients require X-Ray to inform diagnosis / treatment	1
CT Scanner	Ease of access for intubated & ventilated patients requiring CT scan	1
PICU	1. Require rapid / straightforward transfer of critically ill / injured patients to PICU 2. Ease of access for PICU staff to support management of patients in the ED resuscitation area	1
Operating Theatres	Small volume critically ill / injured patients moving from ED	2
Acute Receiving Ward	High number of ED patients admitted to this area with ED nurse escorts	2
Physiotherapy	ED will be high/regular service user	2
Pharmacy	ED will be high service user for discharge prescriptions	3

*1 = Essential Adjacent
*2 = Important 2 minutes walking
*3 = Desirable 5 minutes walking

3. ACTIVITY

Current RHSC Emergency Department Activity

The table below illustrates the monthly pattern of activity over the past four consecutive fiscal years.

RHSC Emergency Department Attendances

	2004 / 05	2005 / 06	2006 / 07	2007 / 08
April	2868	2932	3516	3804
May	3154	3316	3821	3746
June	2841	3214	3341	3473
July	2584	2736	2968	2984
August	2753	2761	2879	3007
September	2761	2958	2940	3167
October	2566	2808	3057	3317
November	2794	2960	3117	3454
December	3120	3506	3480	3685
January	2734	3398	3130	2990
February	2776	3320	3175	3289
March	3603	3760	3378	3801
Total	**34554**	**37669**	**38802**	**40717**

As can be seen from the final row of the table, there has been a significant increase in the total annual number of ED attenders between 2004/05 and 2007/08, with these figures representing an 18% increase in ED activity over the past four years.

The RHSC experience mirrors a similar wider recent trend of a remorselessly increasing demand for ED services across the NHS. This has been largely attributed to increased parental expectations of care, the reorganisation of out-of-hours primary care services and the increasing reluctance of General Practitioners to diagnose and treat children independently. The expectation is that this recent trend of year-on-year increase will continue to impact on ED attendance figures for the foreseeable future.

Upper Paediatric Age Limit

Children and young people aged between >13 and <16 years inclusive receiving inpatient or outpatient secondary care within Greater Glasgow, including ED attenders, are currently cared for within adult hospital services.

Recommendations from key documents including the Kerr Report, "Building a Health Service Fit for the Future", and the Action Framework for Children and Young People's Health propose that these patients will be cared for in the future within children's hospital services.

The Scottish Executive has accepted that the age for admitting children and young people to acute paediatric care facilities should be raised from their 13th birthday to their 16th birthday, and to the age of 18 years dependent on clinical need and patient choice.

NHSGGC have confirmed that the revised upper age limit for paediatric attenders will apply at the NCH, and therefore this needs to be a considered when projecting NCH ED activity.

Patients >13 and <16 Years Attending Adult Glasgow Hospital ED Sites

Hospital	Patients >13 & <16 years January – December 2006
Glasgow Royal Infirmary	2,142
Stobhill Hospital	2,709
Western Infirmary	1,827
Victoria Infirmary	2,861
Southern General Hospital	1,844
Total	**11,383**

Centralisation of Paediatric Emergency Care

Children aged <13 years and under continue to be seen in EDs in all of the hospitals across Glasgow, apart from the Western Infirmary, given its close proximity to RHSC Yorkhill.

Following extensive discussions within NHS Greater Glasgow dating back to 2001/2002, an Acute Services Review Group and a Paediatric Accident and Emergency Review Group both reached the conclusion that paediatric accident and emergency activity should be centralised at RHSC Yorkhill. For various reasons this planned centralisation has not yet come to pass.

However, figures suggest that an informal migration of patients <13 years from adult Glasgow hospital ED sites towards RHSC ED may already be underway to a certain extent.

NHSGGC have recognised that the NCH project provides an ideal focus for a more strategic approach to the future development of paediatric emergency care in Glasgow, and want the centralisation of such care to form an integral part of the planning process for the NCH ED.

Patients <13 Years attending Adult Glasgow Hospital ED Sites

Hospital	Patients <13 years January – December 2006
Glasgow Royal Infirmary	3,131
Stobhill Hospital	3,837
Western Infirmary	144
Victoria Infirmary	6,740
Southern General Hospital	3,912
Total	**17,764**

In summary, the table below illustrates the significant uplift effect that these important issues will have on projected NCH ED activity.

Projected NCH ED Activity

	Annual ED Attenders
Current ED RHSC Activity 2007/08	40,717
Year-on-Year Increase to 2013 @ ~ 15%	6,000
Upper Paediatric Age Limit to 16th Birthday	11,383
Centralisation of Paediatric Emergency Care	17,764
Projected NCH ED Total Annual Attenders	**75,864**

Drift of Children from Other Sites

The opening of a brand new children's hospital in Glasgow will inevitably have the effect of attracting new patients who might otherwise have gone elsewhere. Some of this will occur as part of a planned process, for example the proposed change in upper paediatric age limit and the centralisation of paediatric emergency care, and is easier to predict.

However, some unplanned paediatric patient drift from surrounding hospitals to the new facility will undoubtedly occur and is more difficult to quantify.

For example, given their geographical proximity and excellent road links, it is likely that the NCH ED will attract a number of paediatric patients who would currently attend the Royal Alexandra Hospital (RAH) in Paisley. This will probably apply to both self presenting patients and GP referrals. The extent to which this might happen is uncertain, but should be considered.

The RAH ED saw 11,551 new paediatric attenders <16 years in 2007, and Inverclyde Hospital 5,450. These totals do not include GP referrals.

Minor Injury Units

In the planning process for the NCH ED, just as there are a number of factors to be considered that will increase ED activity levels, there are others that may mitigate this increase to some extent.

The NHSGG Acute Services Review (ASR) determined that emergency care will be ultimately delivered on two single sites, Glasgow Royal Infirmary and the Southern General Hospital. The parallel development of Minor Injury Units (MIUs) at other sites across Glasgow was planned to ensure that those patients with less severe problems could be dealt with nearer to home. This will be an Emergency Nurse Practitioner (ENP) delivered service.

With centralisation at the heart of such a major health infrastructure project, the importance of still delivering some locally based health care services, particularly in the current political climate, has led to a NHSGGC commitment that children will be seen at the new MIUs.

The 5 new MIUs will be located at Glasgow Royal Infirmary, the Southern General Hospital, the new Stobhill and Victoria Ambulatory Care Hospitals (ACHs) and at Gartnavel General Hospital.

How will this impact on projected NCH ED activity?

Data from 2006 shows that 29,147 patients <16 years attended adult Glasgow hospital ED sites. Further analysis of this data allows a **limited** assessment of the extent to which MIUs may mitigate the increase in ED activity at the NCH described.

The MIU located at the Southern General Hospital will obviously be located on the same site as the NCH. In the interests of simplicity and uniformity of process, plus cost and service efficiency, it would seem sensible that all patients <16 years of age arriving at the redeveloped Southern General Hospital site, including those with minor injury, should attend the NCH ED. The 2006 data shows that 5,756 patients <16 years attended the Southern General ED. These patients would, in the future, be seen at the NCH ED.

With regard to the UCC, those patients in Flow Groups 2, 3 and 4, by definition, would all attend the NCH ED - a total of 1,691 patients across adult Glasgow hospital ED sites in 2006.

Adding this figure to the 5,756 patients at the Southern General Hospital, gives a total of 7,447 out of the 29,147 patients <16 years attending adult Glasgow hospital ED sites in 2006, who would be predicted to attend the NCH ED in the future.

What of the remaining 21,700 children categorised in Flow Group 1 with a minor illness or injury?

Is it possible to determine how many of these children had a minor illness, and are therefore likely to attend either the NCH ED or Primary Care team, and how many had a minor injury, and are therefore patients who might attend one of the new MIUs?

Using the data collected from adult Glasgow hospital ED sites during 2006 on presenting complaint, it is possible to produce a rough estimate of the proportion of patients <16 years attending with a minor illness, which lies somewhere between 20-25%, leaving the majority, 75-80%, presenting with a minor injury.

Thus, by a less than perfect process using data of inadequate quality, it is possible to arrive at a guesstimate that perhaps just over half of the 29,147 patients <16 years attending adult Glasgow hospital ED sites during 2006 presented with a minor injury, and therefore could potentially appropriately attend one of the new MIUs.

It should be pointed out of course that just because a patient appears 'suitable' for attendance at one of the new MIUs, it does not automatically follow that is where they will go. The element of patient choice, or in the case of the majority of paediatric cases parent/carer choice, means that it is difficult to be certain where these children will go to be seen.

Conclusion

The importance to the planning process of an accurate as possible a projection of NCH ED attendance/activity cannot be overstated. The predicted numbers of patients attending will influence the operational service model, the bricks and mortar physical design and medical/nursing workforce planning.

Allowing for the impact of the new MIUs, the projected NCH ED total annual attendance of 75,647 quoted earlier can probably be revised significantly downwards. Taking the information/available data as a whole, a best guesstimate of projected NCH ED activity of somewhere between **60,000 - 65,000 patients/year** seems reasonable, which represents a potential 60% uplift on 2007/08 activity.

ED Out Patient Review Clinics

The RHSC ED runs an Outpatient Review Clinic 4 mornings a week, dealing with soft tissue injuries, wound reviews, minor fractures, minor burns and limping children.

It is anticipated that the ED Review Clinic will continue to be held within the ED itself and not round in the Outpatient Clinic area.

The total number of ED Review Clinic attenders for 2006/07 was 1,983.

This would equate to an average of approximately 10 patients per clinic, but given the type of patients attending, there is a marked seasonality to workload distribution.

Projecting future ED Review Clinic activity at the NCH is difficult, given the degree of uncertainty surrounding the planned MIUs. This includes who will be responsible for the clinical follow up of those patients attending the new MIUs.

4. TRENDS

- Steadily increasing demand for ED services across the NHS
- Scotland-wide shift of the upper age limits for children's hospitals from 13th to 16th birthday
- Agreed centralisation of all paediatric emergency care activity across Greater Glasgow to the NCH site
- UCC target of 98% of patients passing through the ED within 4-hours
- High rates of social disadvantage/deprivation within the Greater Glasgow area
- Proposed development of new MIUs at the Stobhill and Victoria ACH sites and possibly also at Glasgow Royal Infirmary and Gartnavel Hospital.
- Unplanned paediatric patient drift from surrounding hospitals to the NCH
- Medical/nursing workforce planning

5. HOURS OF SERVICE

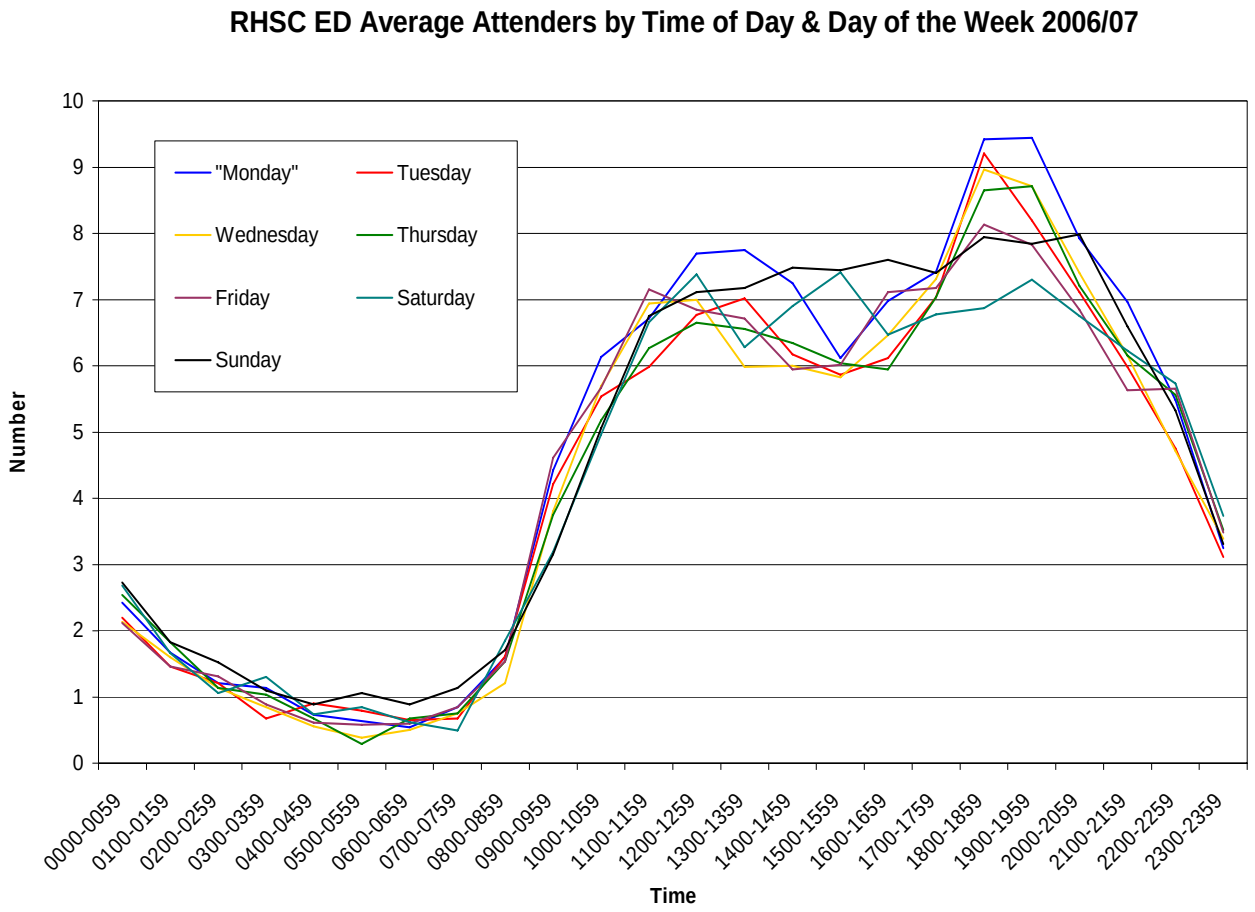
It has been agreed that activity figures from 2006/07 will form the common core data set for use in service redesign work for the NCH project.

Activity data for 2006/07 show that over this 12 month period, 38,802 patients attended RHSC ED.

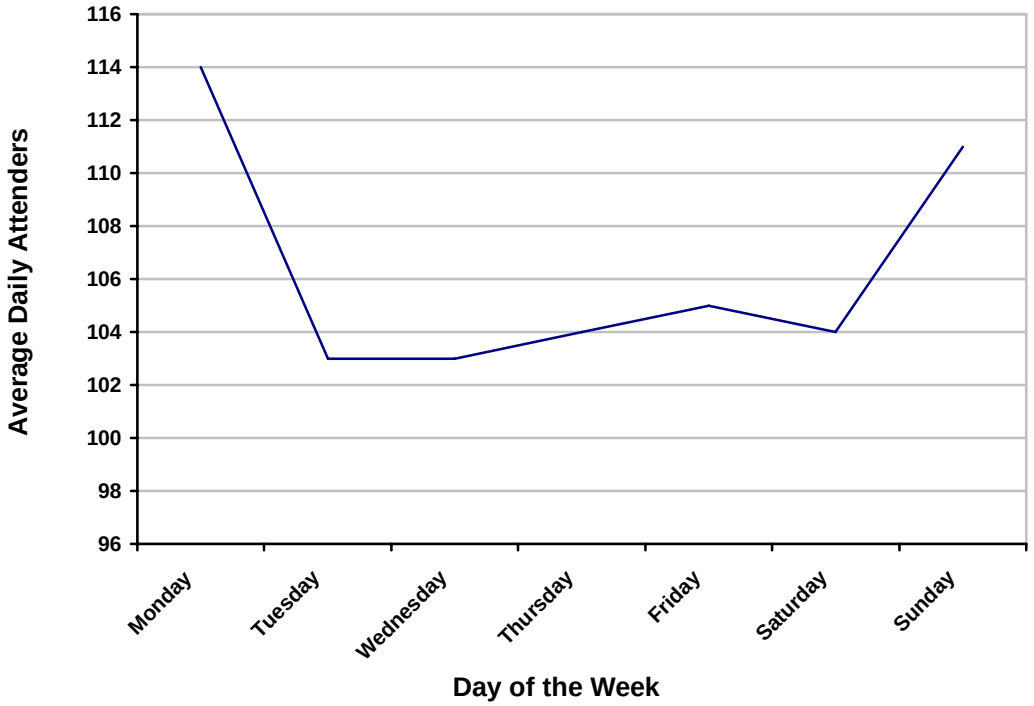
84% of these patients were from the Greater Glasgow area, 7% from Lanarkshire and a further 6% from Clyde. All other postcode areas were less than 1% each.

The 2006/07 data for RHSC ED attenders can be displayed graphically to illustrate the variation in workload that occurs according to time of day, day of the week and month of the year.

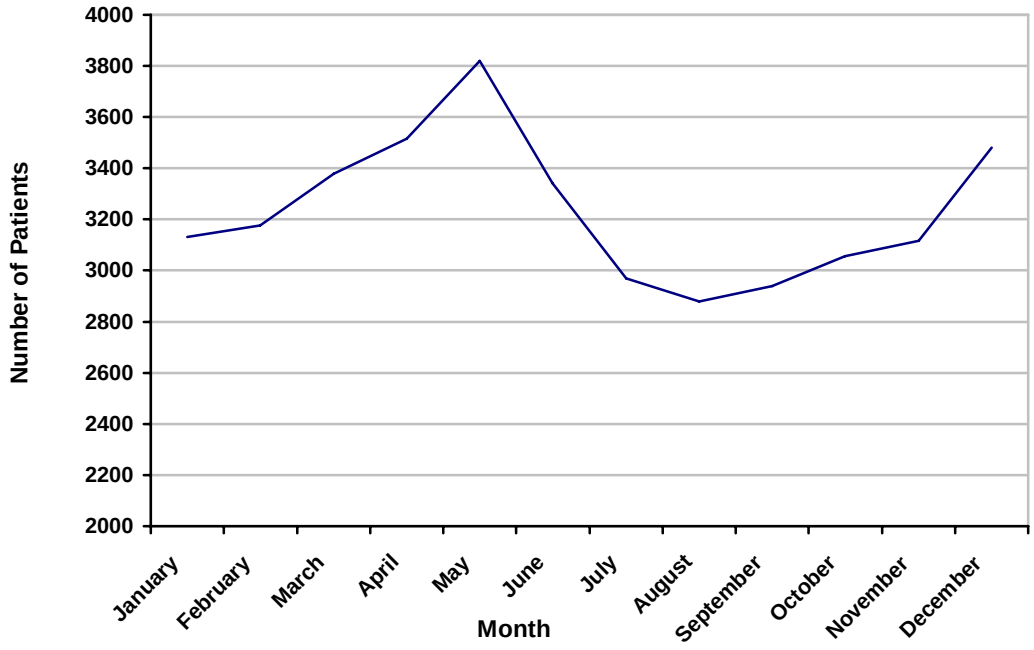
This produces what is a typical illustration of the peaks of ED activity that occur daily in the late afternoon/early evening, on Mondays and Sundays, and in late autumn and spring.


RHSC ED Average Attenders by Time of Day & Day of the Week 2006/07
"Monday"
Tuesday
Wednesday
Thursday
Friday
Saturday
Sunday
Number
Time
0
1
2
3
4
5
6
7
8
9
10
0000-0059
0100-0159
0200-0259
0300-0359
0400-0459
0500-0559
0600-0659
0700-0759
0800-0859
0900-0959
1000-1059
1100-1159
1200-1259
1300-1359
1400-1459
1500-1559
1600-1659
1700-1759
1800-1859
1900-1959
2000-2059
2100-2159
2200-2259
2300-2359

Average RHSC ED Patients by Day of the Week 2006/07



RHSC ED Patients by Month 2006/07



6. WORKLOAD INDICATION

See also Section 3 – Activity.

Paediatric EDs have a marked seasonal difference in their workload. In the winter months, they see a much larger proportion of patients with infectious/respiratory illness, increasing the majors workload. In the summer months, there is a higher proportion of patients with injury, increasing the minors workload.

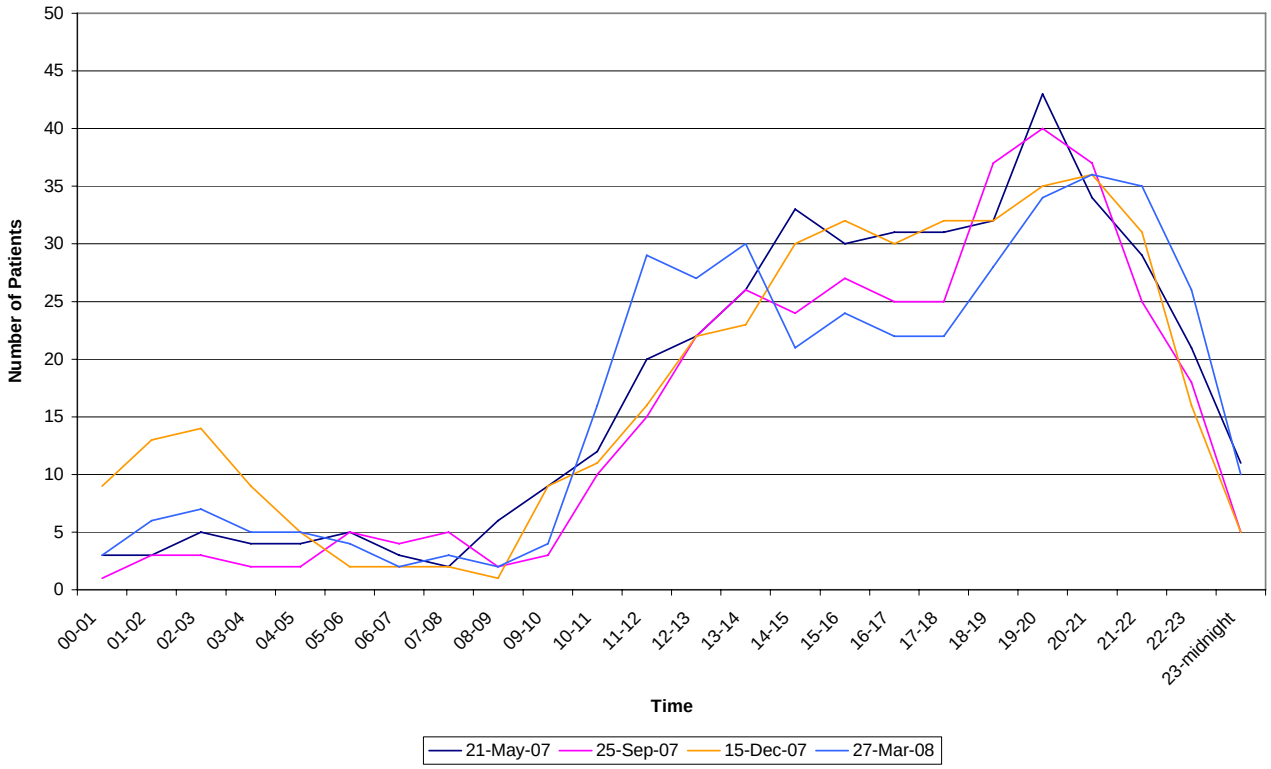
Also, and as illustrated in Section 5, the arrival times of most of the children presenting to the ED are compressed into the hours between 0800hr and 2100hr. Therefore, compared with adult emergency practice, there are much greater fluctuations in activity, placing significant demands on capacity during peak times of attendance.

Consequently, it will be essential that clinical rooms within the different areas of the NCH ED have a uniformity of design and layout, which will give the flexibility required to deal with this variance in both type and volume of workload.

RHSC ED Attenders by Triage Category 2006/07

	Triage Category			
	1	**2**	**3**	**4**
Apr-06	67	224	1004	2221
May-06	78	307	1021	2415
Jun-06	68	214	869	2190
Jul-06	85	199	720	1964
Aug-06	78	220	730	1851
Sep-06	70	263	813	1794
Oct-06	73	210	874	1900
Nov-06	61	178	871	2007
Dec-06	95	146	979	2260
Jan-07	49	140	837	2104
Feb-07	53	125	743	2254
Mar-07	54	131	1129	2064
Total	**831**	**2357**	**10590**	**25024**

Number of Patients in RHSC ED by hour on the busiest day/quartile 2007/08



7. KEY OPERATIONAL PROCESSES/ISSUES

The key function of a Paediatric ED is the safe and timely management of often large numbers of unselected patients presenting through the 'front door'. This primary focus has been crystallised with the recently introduced 4 hour UCC target. This process can be divided into a number of discrete stages including patient registration, the sieving and sorting of patients according to presenting complaint, clinical assessment, necessary investigations/treatment as indicated and appropriate patient disposition.

Children may arrive at the ED via a number of different routes. They may self present without any prior discussion with anyone, they may be advised to attend the ED after discussion with a GP, NHS 24 or some other third party, they may be directly referred after clinical assessment by a GP, they may be directly referred after clinical assessment in another ED or they may be transferred from another hospital.

Their mode of transport to the ED is influenced by the perceived/actual seriousness of their condition, but will either be with their parent/carer – on foot, private car, public transport, taxi – or by ambulance.

As stated earlier, given the 'portability' of infants and smaller children, a significant proportion of the very sick younger patients who present to a paediatric ED arrive by non-ambulance transport and are 'carried in' through the front door. Therefore, the main patient entrance, the ambulance entrance, triage and the resuscitation room have an essential adjacency in a Paediatric ED.

Patient Registration/Triage/Nursing Assessment

Whatever their route/means of arrival at the ED all children will have to undergo a patient registration/triage/nursing assessment process.

Patient registration describes the necessary and important process of recording the attendance and demographic details for individual patients. This should be onto a new ED IT system.

In addition to collecting this information at a fixed desk in a reception area, ED administrative staff should have the capability take this function to the patient and collect the information remotely via portable laptop/wireless technology.

Patient triage is the process of prioritising patients on, or even prior to, their arrival at the ED on the basis of clinical need.

On arrival in the NCH ED, children should have immediate access to a 'front of house' triage nurse who would be able to rapidly move children on to the appropriate area within the ED.

This describes a 'rapid entry' system where the aim is that no patient ever waits in the waiting room if there is a cubicle available within the ED.

The change that this requires in practice is recognition of the difference between triage – the rapid determination of a patient's need for care and the resources required, and nursing assessment – a directed history, recording of physiological observations and limited examination.

The essence of a rapid entry system is that patients will undergo this nursing assessment in a cubicle within the ED and not as part of their triage process. In the event there are no cubicles available for the patient to move into, the nursing assessment would take place as part of the triage process at the front end of the ED.

Thus, the 'front of house' triage nurse might move a patient straight through to the resuscitation area, directly through to a majors or minors cubicle for their nursing assessment, or into a separate fast track area as part of a 'see and treat' process. During peak activity times, when all of the ED cubicles are full, nursing assessment will occur in one of several assessment rooms adjacent to the reception/triage area.

Patient Flow Groups

The RHSC ED is developing a service model that would see patients allocated to separate treatment areas based on clinical acuity rather than specialty.

The NCH ED will have a number of separate clinical areas into which patients will move from triage on the basis that they will be seen in the right place by the right person at the right time.

The proposed areas, and hence patient flow groups, will be:

- Resuscitation
- Majors
- Minors/See and Treat

Some patients will then have an extended period of observation in the ED Observation Ward.

The final service model should see a truly uniform ED pathway of care with a common triage process and patients allocated to different treatment areas on clinical acuity rather than by specialty. After allocation to one of the treatment areas above, the initial examination, investigation and treatment of all patients, irrespective of prior referral or presenting complaint, will be carried out by ED medical/nursing staff.

Progress through the Emergency Department – Resuscitation

Patients seen in the resuscitation area are the most seriously ill or injured of all those patients attending.

A proportion of patients will remain critically ill or injured and require admission to PICU or a high dependency area. As part of their management they may require rapid transfer to a CT scanner/radiology or directly to an operating theatre.

A proportion of patients will respond and improve with treatment but require hospital admission, and move directly to the Acute Receiving Ward, or a specialty ward bed, directly from the resuscitation area.

A proportion of patients will respond and improve with treatment instituted to the extent they can 'step down' to another area of the ED – majors or the ED Observation Ward.

A number of other staff in addition to the ED team are likely to be involved with the management of these patients in the ED, often in the form of a direct clinical review in the resuscitation area.

These patients are not exempt from the UCC 4 hour objective, although this high acuity group are the reason for a 98% rather than 100% target.

Processes should be in place to facilitate the safe and as rapid as necessary transfer of these sick patients out of the resuscitation area and onto CT scanning, operating theatres, PICU, a high dependency bed, the Institute of Neurological Sciences or the Acute Receiving Ward/specialty ward bed/ED Observation Ward as appropriate.

Progress through the Emergency Department – Majors

Patients triaged through to the majors area will be those who are more significantly ill or injured in triage categories 2 or 3.

A proportion of patients will respond and improve with treatment instituted to the extent they will be well enough for discharge home.

A proportion of patients will respond and improve with treatment but require hospital admission, and move directly to the ED Observation Ward/Acute Receiving Ward/ specialty ward bed.

A proportion of patients will not respond or improve with treatment and require hospital admission to a high dependency bed.

A proportion of patients will deteriorate despite treatment and require transfer to the ED resuscitation area and subsequent hospital admission, perhaps to PICU.

All of these patients will require a management plan decided at an early enough stage to ensure they are looked after within the UCC 4 hour target.

If review by medical staff from another specialty is required to help determine patient disposition, it is clearly important that this occurs in a timely fashion.

Once again, processes should be in place to facilitate the safe and efficient transfer of patients out of majors and onto CT scanning/radiology, operating theatres, the ED Observation Ward/Acute Receiving Ward/specialty ward bed, a high dependency bed, or home as appropriate.

The role of the ED Observation Ward and an efficient NCH bed management system will also be crucial factors in keeping patients moving through majors. ED overcrowding is a major threat to clinical care and the NCH should have enough inpatient bed capacity to ensure that patients are not kept waiting in ED for admission. It is recognised that access block – the inability to move patients from the ED to a hospital bed – is a prime cause of ED overcrowding and represents poor patient care and failure of a hospital's emergency care system.

Progress through the Emergency Department – Minors

Patients triaged through to the minors area will be those who appear less significantly ill or injured in triage categories 4 or 5.

The majority of NCH ED attenders will fall into this patient group and will be discharged home after assessment and whatever investigation/treatment is necessary. Efficiency of this process will require immediate adjacency to radiology and to a lesser extent physiotherapy and pharmacy.

A much smaller proportion of these patients will require hospital admission either directly to the ED Observation Ward or the Acute Receiving Ward.

Given the large proportion of patients triaged to this area, patient throughput needs to remain consistent. Use of a 'see and treat' process will help. This is where patients are quickly designated to a separate fast track area where clinical assessment, ordering of investigations, diagnosis, treatment and discharge can all occur in the one place.

At various points in the process for this flow group there will be necessary waiting events e.g. time for a topical local anaesthetic to take effect, time after returning from radiology awaiting X-ray interpretation etc. Therefore, a separate sub-waiting area in minors will be essential to facilitate efficient patient throughput in this busy part of the department.

ED Observation Ward

The ED Observation Ward will form an integral part of the NCH ED and should be designed as such. It will combine a Clinical Decision Unit function as well as providing traditional 'short stay' beds and will be a vital part of the NCH ED for a number of reasons.

1. Capacity

The best estimate of projected NCH ED activity has been calculated to lie somewhere between 60,000-65,000 new patients/year. Scottish Health Planning Note 22 – Accident and emergency facilities for adults and children gives advice on schedules of accommodation for different ranges of attendance. The document suggests a total of 20 patient assessment spaces, plus a 5 bay resuscitation area, as a guide for an ED seeing in the region of 70,000 patients/year.

A tentative breakdown of these 20 assessment spaces in the NCH ED will be 14 spaces in majors and 6 spaces in minors. In comparison, the present set up in the RHSC ED consists of 9 rooms in the ED corridor, the 13 beds in the Medical Assessment Unit, which also have to fulfill a Short Stay Ward role, and a 4 bay resuscitation area.

Leaving the resuscitation areas aside, the current RHSC ED has 22 patient assessment spaces and is currently seeing 40,000 patients/year. The NCH ED will have 20 patient assessment spaces and is projected to see well over 60,000 patients/year. Given this significant increase in the number of annual attenders, the extra space will be essential to maintain patient throughput, again giving the flexibility, for example, to create space in the majors area at short notice in response to peaks of activity or a surge of new attenders.

However, whilst obviously a very important consideration, accommodating the increased number of patients is not the only reason to build an ED Observation Ward.

2. Continuity of Care

First and foremost, an ED Observation Ward is a necessary physical requirement for the model of care the ED Consultants wish to deliver to children attending the NCH ED.

The ED Consultant team do not envisage their clinical input to patient management coming to an abrupt and artificial halt after the passage of an arbitrary 4 hour time period.

3. Prevention of Unnecessary Admissions

An ED Observation Ward will provide the capability for ED medical staff to continue to manage children according to clinical need and ensure that the decision to admit or discharge does not have to be made prematurely because of time pressures. As a consequence, this should improve the quality of care for patients, help reduce potentially unsafe discharges and avoid unnecessary transfers/admissions to the Acute Receiving Ward.

4. Unscheduled Care Target

The UCC 4 hour target will apply to all patients throughout the majors and minors areas in the NCH ED, unlike the current set up in the RHSC ED, where patients in the Medical Assessment Unit are exempt. This means that to maintain the UCC target, the NCH ED has a definite requirement for a separate ward area with a defined observation function, providing the necessary flexibility to continue to manage patients beyond the 4 hour time window.

5. New Service Models

The introduction of the Short Stay Ward facility on the ground floor of RHSC adjacent to the old Accident and Emergency Unit proved a great success, reducing the number of medical patients who progressed to full inpatient admission by almost two thirds. In addition to continuing this original success story with medical patients, the NCH ED Observation Ward aims to expand this model of care to include other patient groups.

For example, head injured patients have been traditionally managed by the general surgical team as inpatients on surgical wards. New observation beds would allow the ED to manage these patients, preventing additional patients progressing to full inpatient admission.

New Children's Hospital ED Observation Ward – Who gets in?

Different ED based Observation Ward/Short Stay facilities will have different criteria on the types of patient they admit/look after.

The RHSC Short Stay Ward dealt solely with paediatric medical patients and, as the Medical Assessment Unit, continues to see the same specific patient group.

The intended final NCH ED operational service model should see a truly uniform ED pathway of care where patients undergo a common triage process and are allocated to different treatment areas on clinical acuity rather than by specialty. They will be seen initially by ED medical staff irrespective of whether or not they have been referred by a GP.

If the NCH ED Observation Ward is going to take on the Short Stay Ward work, and the NCH ED is aiming for a uniform pathway of care for all ED patients, restricting admission solely to paediatric medical patients would be contradictory to the proposed operational service model.

In general therefore, the type of patients suitable for admission would not be restricted by specialty and would be those requiring a period of observation/treatment for a defined period of time, prior to an expected discharge home.

It would be impractical to produce an exhaustive list of specific conditions to act as inclusion criteria for patient admission to the ED Observation Ward. However, the following list provides illustrative examples of the types of patient who would be suitable for consideration for admission:

- Non-intentional poisoning/ingestion
- Children recovering from analgesia/sedation in the ED
- Children with gastroenteritis requiring supportive fluid management
- Children with asthma/wheeze, requiring a further period of bronchodilator treatment
- Pyrexia or simple febrile convulsion requiring further investigation
- Simple head injury requiring further neurological observation
- Unspecified abdominal pain

There would be exclusion criteria which would include:

- Children < 3 months of age
- Children with a low CEWS score
- Children with a decreased GCS
- Children with complex medical/surgical conditions

Patients being considered for admission to the ED Observation Ward would need to be discussed with a senior member of the ED medical staff plus nursing staff on the Observation Ward. There would be an admission pro-forma to complete for each patient, outlining any further investigations planned and a specific management plan.

As patients will be low acuity and require minimal medical intervention, with the necessary structured supportive documentation in place, many of the patients might be suitable for a nurse led review/discharge process. This would be facilitated by the appropriate ‘packaging’ of patients by the admitting ED medical staff ensuring:

- Completion of the admission pro-forma and drug kardex
- Any necessary communication/discussion with other specialties/agencies has been done
- A specific management plan is set out in the admission pro-forma document which clearly details required observations/frequency, outstanding investigation results, treatment interventions/frequency, planned reviews nursing/medical/ward round and discharge plan/criteria/prescription

New Children’s Hospital ED Observation Ward – How long for?

Just as different ED based Observation Ward/Short Stay facilities will have different criteria on the types of patient they will look after, they will also differ in the length of time they will admit them for.

From the ED point of view there need to be a number of key markers, such as the exclusion criteria listed above, that clearly delineate between the function of the NCH ED Observation Ward and that of the Acute Receiving Ward. Another key marker is the maximum length of time of admission to the ED Observation Ward.

A 24 hour upper limit for the duration of admission to the ED Observation Ward would satisfy this key marker criterion, provide sufficient time so that the ward would still reduce the number of inpatient admissions to the Acute Receiving Ward, whilst not seeming out of context with its ED location.

New Children's Hospital ED Observation Ward – What size?

The aforementioned Scottish Health Planning Note 22 – Accident and Emergency Facilities for Adults and Children does not provide any guidance on the size of Observation Ward/Clinical Decision Unit facilities for different ranges of attendance.

A figure of 20 beds has been proposed for the NCH ED Observation Ward.

As has already been mentioned, with the projected 50% uplift in annual attenders and the UCC 4 hour target requirement, a big concern will be the pressure for constant patient throughput for the 20 assessment spaces in majors/minors.

The current 40,000 attenders/year seen at the RHSC ED translates to an average figure of 110 attenders/day. However, this number can obviously fluctuate considerably on a day-to-day basis. The peak number for daily attendance so far in 2008 has been 163, which represents an almost 50% uplift in daily activity. The RHSC ED has to cope with these variations in activity using the 22 bed spaces available across the ED/Medical Assessment Unit.

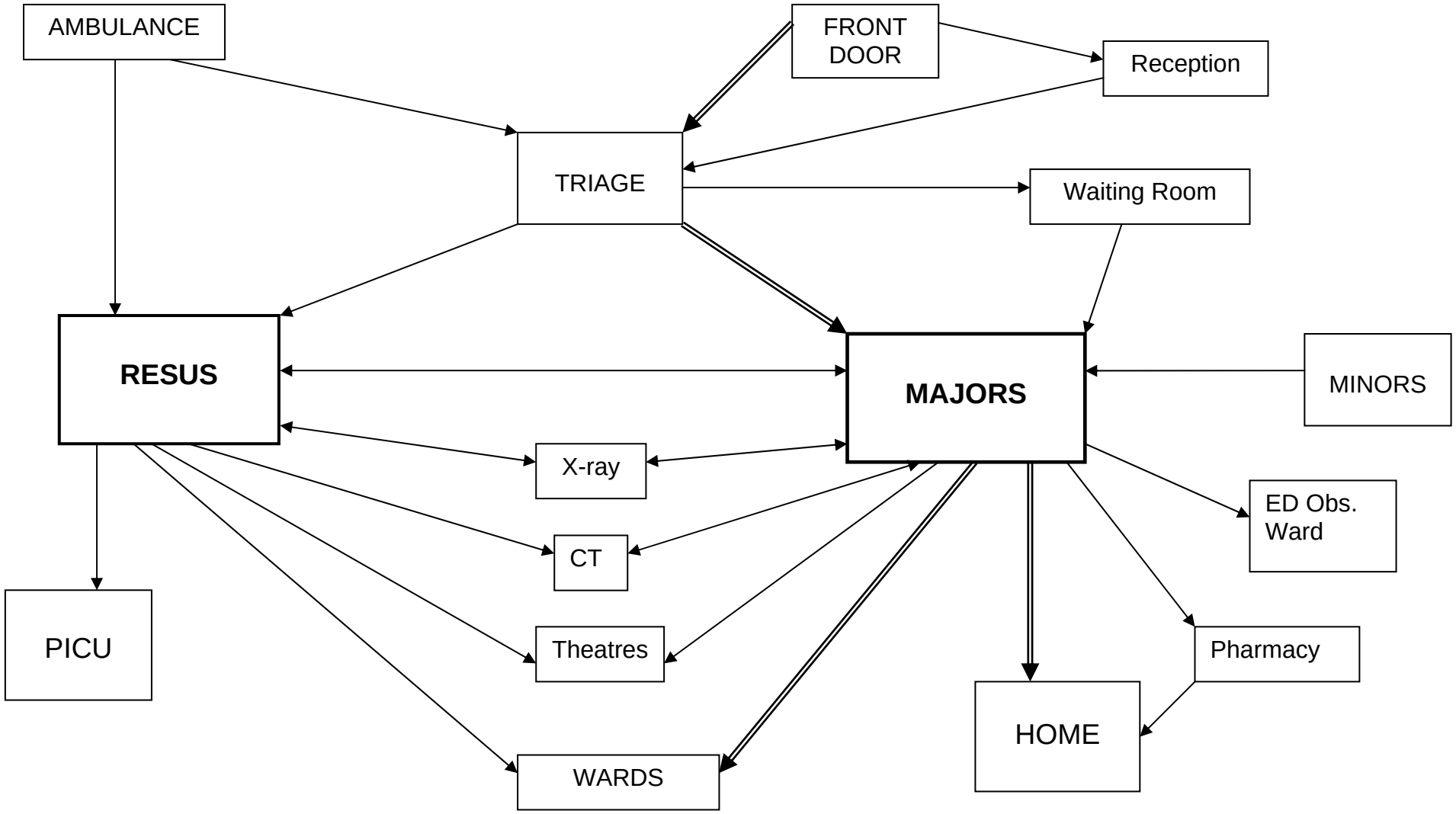
The projected 60,000-65,000 attenders/year at the NCH ED translates to an average figure of almost 180 attenders/day taking the higher figure. If we anticipate the same possible maximum fluctuation in daily activity of almost 50%, this gives a peak number for daily attendance of 270. The NCH ED will have to manage this potential variation in activity with the 20 bed spaces available across the majors/minors areas, plus the ED Observation Ward.

It is therefore crucial to appreciate the vital role the NCH ED Observation Ward will play in the 'normal' running of the NCH ED, even before it takes on any extended patient management role.

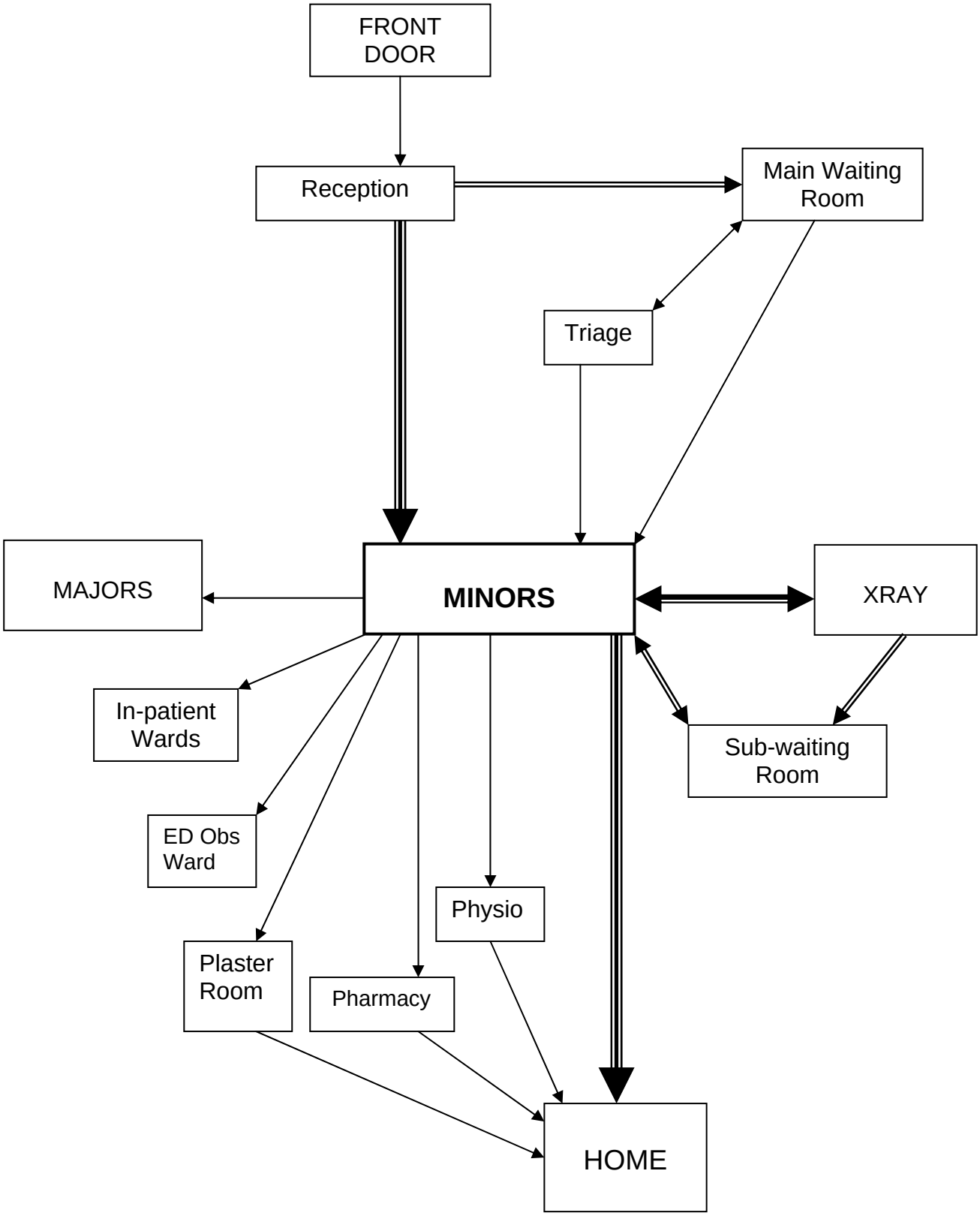
A relevant recent vignette from RHSC ED, which perfectly illustrates this point, involved the late evening closure of the Medical Assessment Unit due to nursing staff pressures elsewhere in the hospital. This reduced the available bed complement to 9 spaces, which quickly filled up with medical patients requiring various further investigation and treatments, and with nowhere for these patients to move on to, throughput of ED patients ground to a halt. Without the prompt reopening of the Medical Assessment Unit, the lack of spaces to move new patients into would have led to increased waiting times, patients breaching the 4 hour UCC target and a much less satisfactory standard of care.

Furthermore, it is a feature of Paediatric EDs that the majority of patients will be dealt with before midnight and therefore bed occupancy in the NCH ED Observation Ward between midnight and 0800hr is likely to be much lower in comparison to other times of the day. It would therefore be useful to subdivide the 20 observation beds into two distinct areas or 'pods', so that only one pod of beds need be open, and more importantly staffed, during periods of reduced activity.

MAJORS FLOW
Emergency Department

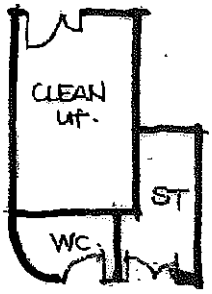


Emergency Department - Minors Flow



8. EQUIPMENT

- X-ray gantry to allow immediate good quality imaging in the resuscitation room
- Moveable lead screens between the bays in the resuscitation area



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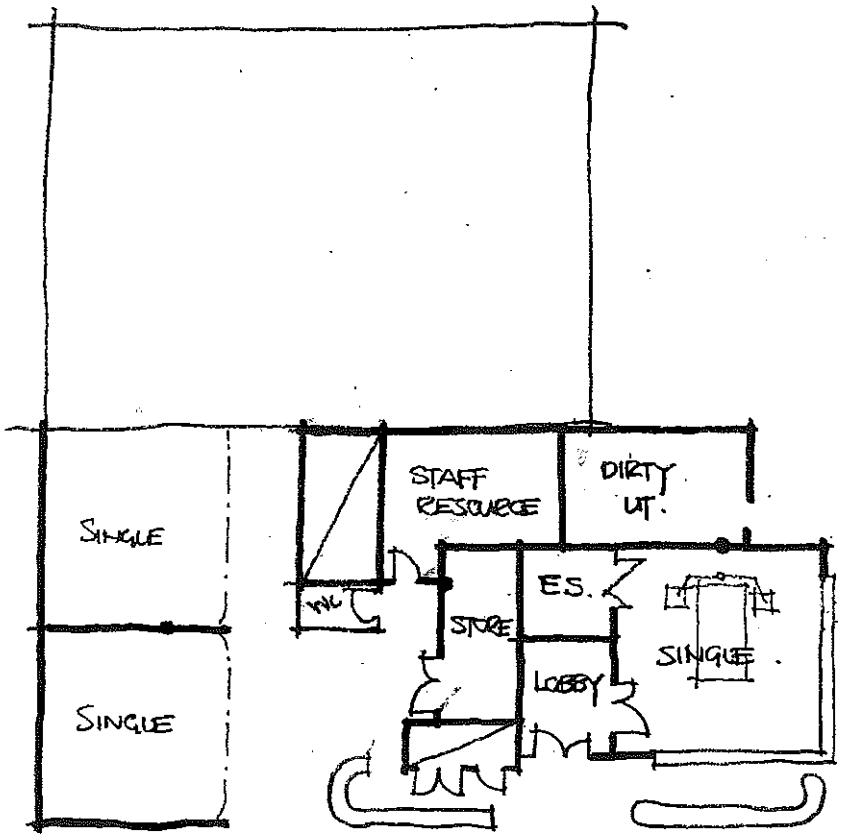
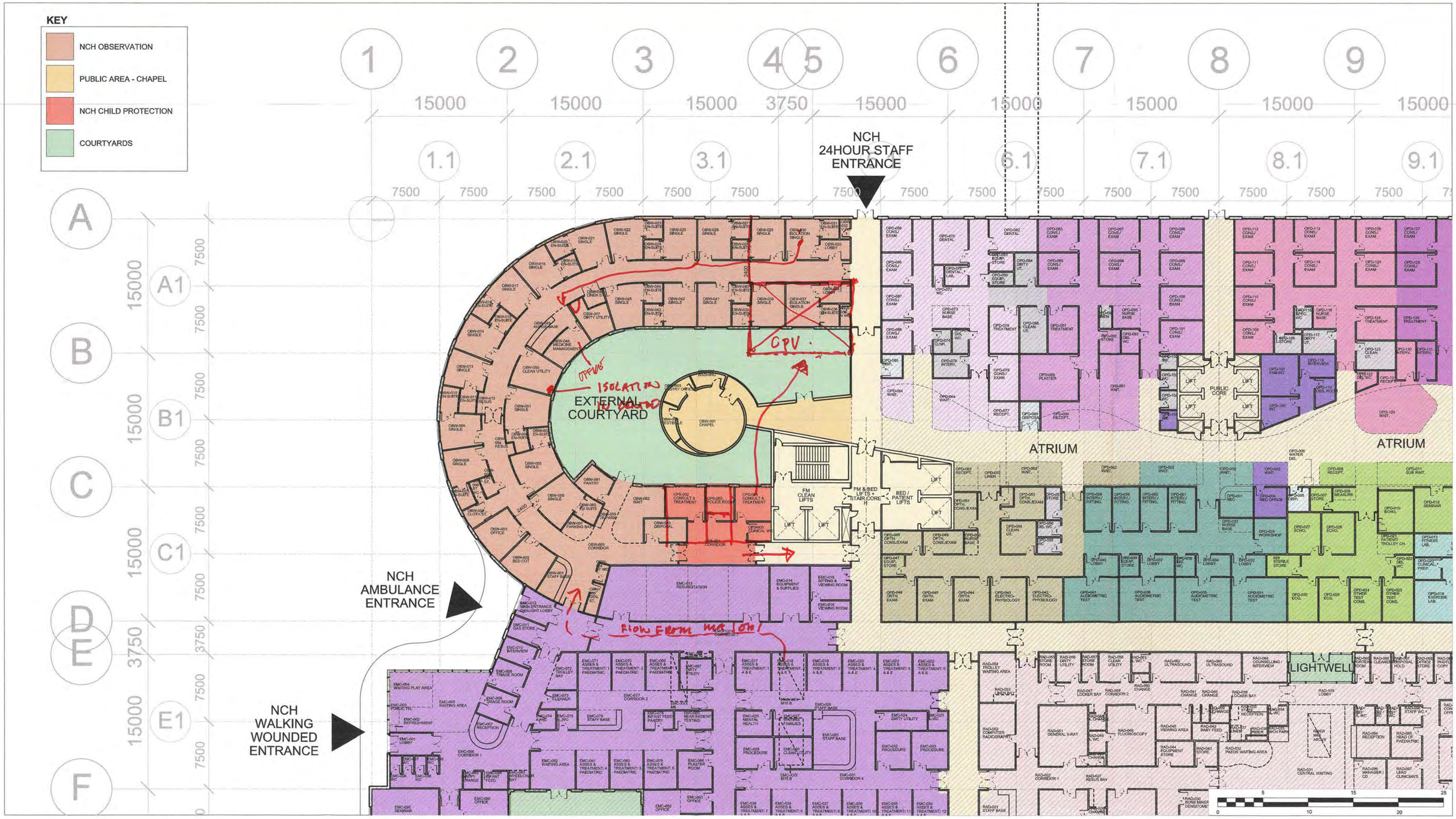


SKETCH ADDRESSING BULLET POINT 09
ON NOTES FROM 20.04.10 CRITICAL CARE MEETING

NHS Greater Glasgow and Clyde

Brookfield



ITPD Reference:
VOLUME 2.0
Section 2.3

GROUND FLOOR PLAN - NCH OBSERVATION WARD AND CHILD PROTECTION

New South Glasgow Hospitals (NSGH) Project ITPD

OBSERVATION WARD
USM1 2010-02-12

Date:	Scale @A1:
02.09.09	1:200
Drawing Number:	Revision:
NA-XX-00-PL-252-403	A01

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DESIGN ACCEPTANCE PROCEDURE FORM

Critical Care User Meeting – 19th March 2010

ACTION POINTS

1. Retain 1 large Staff Lounge.
2. Maximise use of natural light for Staff Lounge.
3. Equipment Service Room to be 1 large room.
4. Review locations of Store Rooms within whole department.
5. Review location of Relatives Rooms in line with general revision of Staff Support layout and spread through department.
6. Increase size of 1 Clean Utility in ICU by reallocating m^2 from 1 Assisted Shower.
7. Group small offices into Management Suite.
8. Reconfigure Clean Utility and Staff WC's.
9. Swap Staff Resource and Dirty Utility.
10. Move Blood Bank and Pharmacy more to off-centre of department.
11. Incorporate revised "St Vincent" model for CCU.

User Attendees:	*Sandy Binning*	*Eleanor Deacon*
	Gregor Imrie	*Marion MacDonald*
	Heather McVey	*Iain Thomson*
	Lynne Scott	

User Apologies:	*Michelle Boyd*	*Liz Thomson*
	Scott Muir	*Jacquie Campbell*
	Alan Davidson	*Andrew Kernohan*
	Karen McKay	*David Raeside*
	Barry Sillers	*George Welch*
	David Sutton	

NHS National Services Scotland

Scottish Health Planning Note 57

Facilities for critical care

Draft for Consultation

Health Facilities Scotland
Property and Capital Planning

December 2008

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About this series

The Scottish Health Planning Note (SHPN) series is intended to give advice on the briefing and design of healthcare premises in Scotland.

These Notes are prepared in consultation with representatives of NHSScotland and appropriate professional bodies. SHPNs are aimed at multidisciplinary teams engaged in:

- designing new buildings;
- adapting or extending existing buildings.

Throughout the series, particular attention is paid to the relationship between the design of a given department and its subsequent management. Since this equation will have important implications for capital and running costs, alternative solutions are sometimes proposed. The intention is to give the reader informed guidance on which to base design decisions.

This guidance is based on SHPN 27 and updated core guidance produced by NHS Estates and adapted for use in Scotland by Health facilities Scotland (HFS).

Scope of SHPN 57

'Comprehensive Critical Care' (Department of Health (DoH) 2000) recommended a review of the built environment in Critical Care Areas (CCAs). 'Better Critical Care' (Scottish Executive Health Department 2000), the report of a working group on issues relating to intensive care units and high dependency units, accepts many of the conclusions of 'Comprehensive Critical Care' in particular the principle of critical care areas and the 'critical care without walls' philosophy. It recognises however, that this approach may not always be practical in Scotland and therefore emphasises the importance of achieving maximum flexibility of critical care beds, facilitated by the co-location of ICU and HDU beds. 'Better Critical Care' notes that the spectrum of critical care should be recognised as extending from ill patients in general wards to patients in HDUs and ICUs. The 'critical care without walls' approach to the identification and management of the critically ill is reflected in this guidance.

This guidance supersedes SHPN 27: 'Intensive care unit' (2000). There are substantial differences between SHPN 27 and SHPN 57. These differences are listed in Appendix 1.

The guidance outlines the emerging principles in planning facilities for critically ill people: user requirements, location and departmental factors and the views of users. The main issues related to improving patient areas are discussed, including increasing the area of bed-spaces, increasing the number of single

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bedrooms, reducing Hospital Acquired Infection, the patient's right to privacy and dignity, strategies for noise reduction, and maximising natural light.

The patient/staff ratio in critical care is very high. More space is required in staff facilities including rest rooms, catering facilities, changing rooms, en-suite overnight accommodation for on-call staff, and education and training facilities. Improvements in support facilities for family and friends are also discussed.

Structure

The guidance covers general design considerations and provides detailed information on the specific functional and design requirements and engineering requirements for CCAs. Section 9 includes information about schedules of accommodation available on KIP website.

Included in the Appendices are recommended room layouts, along with a comprehensive list of useful references.

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Dr J. C. Howie Victoria Infirmary, Glasgow

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1. Introduction

Patient-focused critical care facilities

1.1 Critically ill patients are highly vulnerable and most are completely dependent on the care provided by expert staff. The experience of being admitted to a critical care area (CCA), whether planned or as an emergency, is likely to be a highly physically and psychologically stressful experience for patients, their families and friends and sometimes staff. No one is exempt from the possibility that one day they will need critical care.

1.2 Key to ensuring excellence is providing state-of-the-art technology and facilities that are fit for the purpose. This should include the clinical areas in which patients are cared for and the support facilities that underpin these.

1.3 Within an adult general CCA, there will be patients of both sexes and of a range of ages. The degree to which individual patients are aware of their surroundings will vary owing to the effects of illness and sedative medication. Some may be unconscious while others are lightly sedated or alert. The built environment of a CCA should aid the provision of physiological and psychosocial support to patients as individuals and to their family and friends.

1.4 The Essence of Care (Department of Health 2001, page 182) identifies a number of benchmarks of good practice focusing on the issue of respect for the individual so that:

- patients feel that they matter all of the time;
- patients experience care in an environment that actively encompasses individual values, beliefs and personal relationships;
- patients' personal space is recognised by all staff;
- communication between patients takes place in a manner that respects their individuality;
- patient information is shared to enable care with their consent;
- the care of patients actively promotes their privacy and dignity and protects their modesty; and
- patients can access an area that safely provides privacy.

1.5 Achieving these benchmarks when caring for critically ill patients poses a particular challenge for health professionals. The majority of patients are totally dependent. They are unable to communicate or have difficulty in communicating their views, are unable to express consent, unable to protect their own dignity and modesty and ultimately have to trust that their family and clinicians can act as their advocates. Concern about patients' lack of privacy and dignity is perhaps the most frequent criticism levelled by staff working in critical care.

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1.6 The majority of patients requiring critical care survive and are discharged after a few days to a ward with other less dependent patients and finally back into the community. Others experience a longer stay, with some requiring critical care for many weeks. A minority of critically ill patients cannot, and do not, survive in spite of the best efforts of the clinical staff. This group of patients may die within a short period after admission while others require intensive care over a longer period.

1.7 Innovative and imaginative architecture and design is essential for the development of an environment that enables the safe and effective management of critical illness while providing a welcoming, secure, comfortable, non-intimidating atmosphere.

1.8 Patients not only have the right to expect that their clinical care reflects best practice and is evidence-based, but also that their individuality, privacy and dignity are preserved and that they, along with their family and friends, can have absolute confidence in the quality of the overall experience, regardless of the eventual clinical outcome.

Intended readership

1.9 This guidance will be of interest to:

- project and design teams;
- executive directors and senior managers of NHSScotland Health Boards, including estates directors and their staff;
- clinicians from every profession working in, or in partnership with, CCAs;
- infection control teams;
- all support staff employed within CCAs;
- representatives of patients and their families;
- manufacturers of IT, clinical and support equipment and furnishings; and
- the medical engineering industry.

Inclusion criteria

1.10 This guidance includes all general CCAs that admit adult, or adolescent, patients whose dependency levels are classified as Level 2 or level 3. The guidance will require review with reference to the provision of intensive or high dependency care for patients under the age of 16 years admitted to a general CCA either for definitive treatment or for stabilization prior to transfer to another location. Recommendations for hospital services for children are set out in 'Our National Health.

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Exclusion criteria

1.11 This guidance excludes the following:

- bespoke critical care facilities for infants and children;
- facilities required for the 'high-security isolation' of any patient;
- transplant and dialysis units;
- regional centres for burns patients;
- coronary care units (see SHPN 28: 'Facilities for Cardiac Services');
- bespoke cardiac units (see SHPN 28: 'Facilities for Cardiac Services');
- neurosurgical units including neuro-ICUs;
- liver units;
- areas within the hospital where Level 2 or Level 3 patients are managed on a time-limited basis, for example a 24-hour post-operative recovery area.

Scale of provision

1.12 In 2007 the total number of critical care beds available in Scotland was recorded as approximately 324. The trend is generally a rise in the number of admissions year on year. **(**Scottish Intensive Care Society Audit Group http://www.sicsag.scot.nhs.uk/Publications)

1.13 The 'Our National Health' indicates that there is an urgent need to increase facilities for critical care in every acute hospital. One of the ways to achieve this is by increasing the number of beds in a bespoke CCA but a more flexible approach to the configuration of beds on general wards must be adopted at the same time.

1.14 The total number of level 2 and level 3 patients admitted to a CCA each year depends on local workload patterns. The number of bed-spaces required should therefore be calculated from:

- data on number of admissions, number of refused admissions, number of premature discharges, bed occupancy and length of stay;
- local admissions policy;
- future developments influencing critical care service demand;
- availability of other specialist units;
- the number and type of acute beds, the number of operating theatres and surgical specialties served;
- the annual workload of the A&E department;
- location factors which may increase demand, such as proximity to motorways or airports.

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1.15 The Central Southern Critical Care Network is developing a model for planning critical care capacity. It should be possible to configure it to match any given unit and programme it for the unit's own operating rules and case mix using detailed information about arrival patterns and length of stay. For more information see Costa et al, in press, 'Mathematical modelling and simulation for planning critical care capacity', in *Anaesthesia*.

1.16 Local requirements will inform the total number of beds required for all Level 2 and Level 3 patients in each CCA. The schedules of accommodation in this guidance are based on an eight-bed template and then increased accordingly with every four additional beds.

1.17 'Comprehensive Critical Care' describes 'networks' as one of the characteristics of a modernised critical care service. These integrated networks involve several hospitals working to common standards and protocols, providing a comprehensive range of critical care services, and taking responsibility for all the critically ill in all the specialties within a geographical area.

1.18 In new build facilities Coronary Care Units (CCU's) are commonly associated with Critical Care Areas (CCA's). Where this is the case CCU's and CCA's may share core support services and facilities.

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2. Emerging principles in planning facilities for critically ill people

2.1 A number of core themes apply to the planning and design of any healthcare facility. These are:

- fitness for purpose;
- infection control;
- security;
- health and safety;
- risk management;
- access to appropriate support and resources
- best practice; and
- a quality patient environment.

2.2 In addition, there are a number of general principles that the project team should consider from the outset with reference to CCAs. These include:

- user requirements;
- location and departmental relationships; and
- the views of users.

User requirements

2.3 All level 2 and level 3 patients need:

- a bed-space that is large enough to permit all clinical interventions and accommodate multi-parameter monitoring and life-support systems;
- access to medical gases and electrical outlets;
- access to a comprehensive range of therapies for organ system failure, including dialysis equipment;
- visual and auditory privacy;
- natural daylight, with outside views wherever possible;
- full-spectrum lighting;
- adequate ventilation, which can be fully controlled all year round; and
- homely waiting and rest facilities for their relatives and other visitors.

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2.4 Staff working in CCAs need:

- a working environment which reflects best practice;
- sufficient space around all sides of each bed to provide easy access to the patient, equipment and clinical hand-washing;
- sufficient natural light, with supplementary lighting, in which to work;
- adequate ventilation, which can be controlled all year round;
- a way in which to summon help from other members of staff;
- sufficient storage for essential supplies and equipment in each bed-space;
- technical support services for urgent pathology tests and imaging;
- space and privacy for exchanging information with other staff;
- appropriately equipped facilities for changing, resting, eating and drinking;
- provision for teaching activities within the CCA.

2.5 Family and friends of critically ill patients need:

- a welcoming reception and waiting area;
- a comfortable sitting room in which they can rest and recuperate, equipped with beverage-making facilities;
- a designated interview room in which they can have private conversations with the clinical staff;
- designated WCs including a wheelchair-accessible WC;
- overnight accommodation within the CCA, the hospital boundaries or in a local hotel.

Location and departmental relationships

2.6 CCAs should be centrally located within an acute hospital development. Their proximity and ease of access to A&E departments, operating theatres and imaging facilities is viewed as crucial by clinicians. The location of the central laboratories has become less important since the widespread introduction of near-patient testing facilities sited within the CCAs and the use of pneumatic tube systems within some hospitals to convey specimens to laboratories.

2.7 In the UK it is unusual to locate CCAs on the ground floor next to an A&E department, however this is common practice in a number of other countries. The concept seems to work well for the following reasons:

- many emergency admissions to critical care are transferred from resuscitation rooms in A&E;
- planned admissions tend to be patients who have undergone major surgery and thus their transfer takes place once they are stabilised post-operatively.

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It is likely in future that in some recovery units the bed-spaces will be furnished and equipped as in critical care. The practicalities of safe transfer should be considered. Operating theatres can be located on the floor above the CCA and a dedicated lift can be installed for rapid transfer;

- in the event of fire, critically ill patients can be moved more quickly to safety;
- CT scanners and other imaging equipment tend to be located on the ground floor close to A&E and the out patients department. Although there have been rapid advances in technology and mobile CT scanners are being developed, it is likely that there will be a continued need to transfer patients to the imaging department for CT scanning for a number of years;
- in addition to the near-patient testing laboratory within the CCA there must also be a full laboratory service available, staffed on a 24-hour basis;
- there should be an infection control team based on-site.

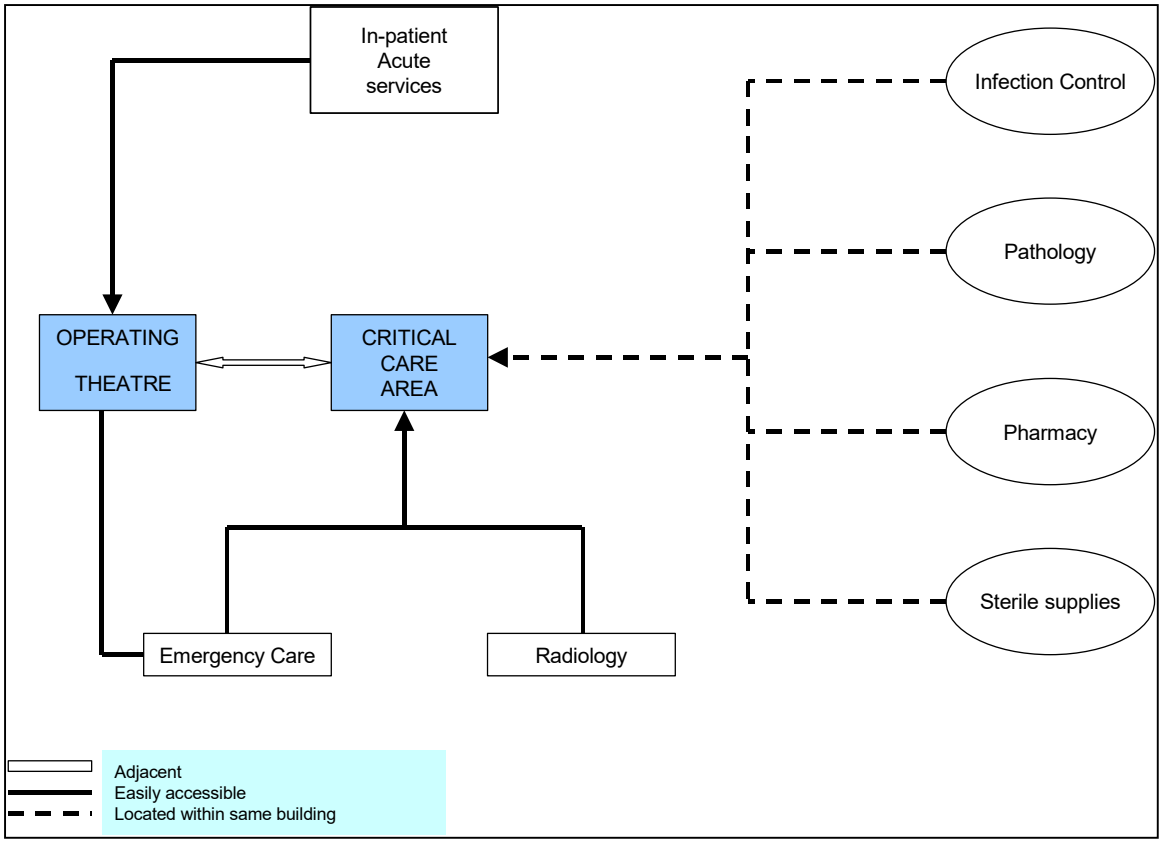

Figure 1: Departmental relationships

Seeking the views of users

2.8 The views of those who use critical care facilities are fundamental to improving the built environment. These include patients, their friends and family and the medical, nursing and support staff.

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The views of patients

2.9 Patients' perceptions of the environment of the CCA are frequently distorted because of the effects of illness, medication, unfamiliar patterns of light, sound and shape and lack of sleep. All may contribute to physical and mental distress. A good quality environment can alleviate or minimise distress.

2.10 There is a lack of well-collated information concerning the experiences of patients in CCAs, however this deficit should be addressed in the future. Some information is available from units that run intensive care follow-up clinics.

The views of relatives

2.11 Information about the views of patients' families was obtained from an ongoing study in the UK (Holden - in progress). Unstructured interviews with the families of critically ill patients about the environment revealed that current provision of space at the bedside is inadequate to allow families to attend the bedside for long periods without feeling that they are interfering with patient care.

2.12 Many relatives' sitting rooms are too small, remote from the clinical area, inadequately furnished, uncomfortable and impersonal. A communal sitting room for relatives is unlikely to be used unless it is large enough, comfortable and welcoming.

2.13 The positioning of beds in relation to each other is also viewed as important. Patients' privacy and dignity, or lack of it, is obviously of concern to relatives as well as the staff.

2.14 Poor positioning or acoustics in the communications base can mean that confidential conversations are overheard.

The views of staff

2.15 The views of nursing and medical staff, physiotherapists, housekeeping staff, administrators and receptionists from a number of CCAs have been obtained. The ICS's Linkman Network was used to distribute a questionnaire giving members the opportunity to identify, in their opinion, good and poor aspects of their working environment. Of the 220–230 questionnaires sent out, 58 were returned, the responses gave a valuable insight into existing critical care facilities in the UK.

2.16 In addition, visits were made to a small number of CCAs. Informal interviews were conducted with staff members from a range of professions to identify good and poor aspects of the built environment. The main deficiencies identified were:

- inadequate bed-spaces;
- a lack of single bedrooms;
- high ambient noise levels; and

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- a lack of visual and auditory privacy.

2.17 There was no evidence that these issues had been addressed in either new facilities or refurbishments. In England new-builds were particularly criticised for lack of space, lack of adherence to NHS guidance recommendations, and incorrect fitting of new equipment. A few respondents gave examples where building regulations or health and safety requirements had not been met.

Particular features

Support facilities

2.18 Very few respondents believed that support facilities are acceptable. A number indicated that there are no designated waiting areas or interview rooms for relatives. Respondents reported discussions with relatives about the condition of the patient and the breaking of bad news taking place in corridors, at the patient's bedside, in the communications base, or even in the doctor's overnight accommodation room, where relatives are invited to sit on the bed while the doctor and nurse remain standing. Many places do not have designated WC and hand-wash facilities for relatives or a place where they could make a hot drink. Clearly this does not represent best practice and is unacceptable in a patient-centred health service.

Staff facilities

2.19 Facilities for staff were generally considered unsatisfactory. Throughout the UK a number of CCAs have just one unisex WC, while others share these facilities with other busy departments, for example, operating theatres. Many units had no staff showers and only a few had integral staff changing rooms. On the whole staff rest areas are very poor, being much too small and inadequately furnished.

Other facilities

2.20 Other facilities that are lacking include storage space, office accommodation and the total absence of education facilities and overnight accommodation for doctor's on-call. These were frequent causes of complaint. This was particularly the case in some new buildings, where the respondents complained that the support facilities had been severely compromised.

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3. Key issues in patient areas

Entrance and general waiting areas

3.1 Generally there should be a single entrance point to the CCA and this must be locked and protected by CCTV. All patients, staff, and visitors would enter by this access point but should be immediately streamed into the visitor waiting area/reception and staff/patient areas so that the staff and patients do not have to pass through the visitor waiting area. This allows complete privacy for patients and staff who wish to enter or leave the area without meeting visitors. All patients, regardless of their original source, are admitted through this entrance and transferred immediately to their bed-space. This entrance should also allow for the sensitive removal of deceased patients to the mortuary without being viewed by visitors.

3.2 An alternative solution is to have a combined patient/staff entrance that should be locked at all times and accessed via a close proximity card, and a separate dedicated entrance for visitors with CCTV and an entry system. Admission will only be granted by the receptionist from her office located next to the general waiting area. At night admission will be granted by clinical staff located at the communications base.

3.3 On gaining entry, visitors should be received in the general waiting area, where they should remain for a short period only. Families and friends of the patients should be invited to enter the clinical area if appropriate or to wait in the designated sitting room or interview room.

3.4 The waiting area should be warm, welcoming and well lit. Further information regarding the enhancement of this area is described in paragraphs 7.10–7.11 (see also 'Welcoming entrances and receptions'). On occasion, children may visit a patient in critical care. Strategies for making the waiting area more child-friendly are described in detail in 'Friendly healthcare environments for children and young people'.

Increased space requirements

3.5 Lack of space in CCAs is the most frequent complaint made by the staff working in them. The allocation of space in clinical areas, particularly for each bed-space, and in the staff and support facilities, is viewed as inadequate. Clinical representation (doctors, nurses, allied health professions [AHPs] and members of the infection control team) is essential on every project team to ensure that the requirements for space are incorporated into the design.

3.6 There are concerns that failure to meet standards set out in SHPNs and other NHSS guidance, might be infringement of the Human Rights Act 1998. Users of this SHPN guidance are reminded of the importance of complying with legal requirements. These have been established to protect staff, patients and the

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public, as well as to ensure the appropriate management of facilities. Organisations failing to comply are liable to prosecution. Where advice in this document reflects legislation, this is clearly indicated.

3.7 Throughout the UK the lack of space in all areas is the single most important issue in the design and building of CCAs. Inadequate space in which to deliver quality care has a negative impact on the clinical governance framework and is consequently hard to defend.

Bed-space requirements

3.8 The size of each patient bed area should be not less than 26sq.m in order to accommodate the following essential requirements:

- space to allow staff access to the patient from all sides of the bed;
- space to enable staff to manoeuvre the patient, themselves and equipment safely;
- space to accommodate all clinical equipment permanently located around the bed;
- sufficient additional space to accommodate any mobile equipment that may be required;
- sufficient space to enable a minimum of five members of staff to attend to the patient in an emergency situation;
- sufficient space between each bed to protect the patient's visual and auditory privacy and dignity;
- sufficient space to accommodate a patient's chair; and
- sufficient space to enable at least two visitors to sit at the patient's bedside.

3.9 Patients are quite frequently moved to other departments for investigation or treatment. However, the variety and number of clinical interventions that take place within a CCA is increasing. Minor surgical interventions may be undertaken at the bedside and more patients are requiring renal support. There is an increase in diagnostic imaging at the bedside. Some of the mobile equipment is large and unwieldy and requires adequate space. The floors should be strong enough to support the weight of this heavy equipment, and the walls should be protected to prevent damage from impact.

3.10 New options in the provision of imaging services within critical care are available. These include the replacement of conventional film-based mobile X-ray imaging with the recent computed radiography (CR) option. This involves the use of CR plates in cassettes, which are a direct replacement for conventional film-based imaging. The cassettes are used in conjunction with conventional X-ray systems but use laser CR units in place of conventional film processors. The images are generated in electronic form and may be used locally with a suitable imaging workstation and/or transmitted over a wide bandwidth network. This latter option is often employed as a means of obtaining

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the opinion of a radiologist in a rapid and convenient fashion. The technology and its use in hospitals together with the influence on design of facilities, is extensively described in SHPN 06: Facilities for diagnostic Imaging - Part 2: PACS and specialist imaging.

3.11 Clinical interventions can continue without the need to ask visitors to leave the patient and hence sufficient space is required to accommodate them comfortably.

Ceiling heights

3.12 Adequate ceiling heights in clinical areas are crucial. The underside of a finished ceiling should be no lower than 3m high. There may be a difficulty in complying with ceiling heights throughout the hospital in the case of refurbishment. Within a new-build facility this difficulty can be easily overcome, as operating theatres and some other departments will also require 3m ceiling heights. Low ceilings have a negative effect upon the acoustics and luminosity within a CCA, and a number of the staff described the effect as claustrophobic.

3.13 Problems have been encountered when calculating the correct position and weight-bearing factor for hoists and other weight-lifting equipment and patient data management systems. When mounted at the foot of the bed, these cannot be raised high enough to avoid accidental head contact. There is a significant risk that staff or visitors may sustain injury if equipment is fitted too low.

Increasing the number of single bedrooms

3.14 Ideally every patient would be cared for in an individual bedroom as this can help reduce the incidence of cross-infection, and ensures that each patient can maintain his or her privacy and dignity. Interim guidance for Scotland can be found at http://www.pcpd.scot.nhs.uk/developing.htm

3.15 In most hospitals this is not a realistic option, as they will not have sufficient clinical staff to supervise each patient safely using only single bedrooms. There is however general agreement that the number of single bedrooms should be increased. There is a particular problem in adult CCAs that admit babies and young children. Individual project teams should decide the minimum number of single bedrooms required, basing their decision on case mix and acting on the advice of the infection control team. Where possible, allowance should be made for future conversion of open bed spaces to isolation spaces.

3.16 Using the eight-bed template, it is recommended that four beds are in single bedrooms, each with a lobby for isolation purposes, the rationale being that this increases the flexibility of use. The size of each bedroom should be identical to an open bed-space to fulfil the requirements listed in paragraph 3.8. See paragraphs 7.22–7.26 for the design requirements of a single bedroom.

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Reducing Healthcare Associated Infection (HAI)

3.17 Infection is a major problem to which critically ill patients are particularly susceptible. Adherence to best practice in the built environment is crucial.

3.18 The design of every new building or refurbishment, and all furnishings and fittings, should be selected with the specific purpose of reducing the risk of HAI. The infection control team must be represented on every project team from the outset. The project team should comply with the recommendations of the 'Scottish Infection Manual' (The Scottish Office Department of Health Public Policy Unit 1998) and 'SHFN 30 Infection Control in the Built Environment: Design and Planning'.

3.19 This guidance is not prescriptive in relation to furnishings and fittings and their cleaning and maintenance, account must be taken of the rapidity of new innovations and materials arriving on the market. However thorough cleansing of all furnishings and fittings in CCAs is vital if the risk of transmission of HAIs is to be minimised. Guidance on methods of cleaning must be sought from the infection control team.

3.20 The following general principles apply:

- daily, weekly and monthly cleaning duties should be set out in a written protocol, monitored and reviewed regularly and amended when necessary. The cleaning schedules should also include rapid cleaning between patients as sometimes one patient is awaiting the discharge of another. 'National Standards of Cleanliness for the NHS' covers building elements, fixtures, patient equipment and the patient environment and is an excellent guide to cleaning frequencies required in high risk areas such as CCAs. The housekeeping staff have an essential role to play in maintaining high levels of cleanliness;
- the furnishings and fittings within CCAs must be easy-to-clean without forfeiting quality, comfort and ambience and also comply with NHSS Firecode SHTM 87: Textiles and furniture;
- mechanical/comfort cooling must be controlled on a zonal basis throughout a CCA. Inability to control the temperature within clinical areas is a cause of great complaint by the clinical staff (see SHTM 2025: Ventilation in healthcare premises);
- horizontal surfaces should be kept to a minimum because they harbour dust and become contaminated with resistant micro-organisms, for example Acinetobacter. Open shelving packed with disposable equipment, such as syringes and needles, harbours dust and makes it impossible for the housekeeping staff to clean. All equipment should be kept either in glass-fronted cupboards or in cupboards that are clearly labelled externally;
- for best practice every patient should have his or her own room (see paragraphs 3.14 to 3.16);
- curtain rails and curtains harbour dust. Many curtain fabrics lose their water resistance once washed. Alternative ways of screening patients should be

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sought. Electrically controlled opaque glass and double-glazed windows with inset blinds are two possible options. In multi-bed areas a lead-lined curtain system should be installed (see paragraph 7.28);

- all equipment must be easy to move to enable thorough cleaning. Electrical cables should be enclosed in protective containment and should not be allowed to drape across the floor. Housekeeping staff report that current arrangements mean that cables are impossible to keep clean as any spills on the floor make them sticky, dirty, attract dust and increase the risk of infection. The use of pendant systems for services minimises the number of cables on the floor. Responsibility for the cleaning of mobile equipment and associated cables should be agreed and designated;
- each bed-space should be completely damp-dusted daily. Sufficient space is required to enable free access to all sides of the bed. The housekeeping staff should be able to clean high and low surfaces without putting patients or themselves at risk;
- each bed-space should have a designated clinical wash-hand basin. It is fundamental that staff wash their hands before they approach patients or touch equipment. The basin should therefore be located at the front of the bed-space. It should be designed to avoid splashing and be fitted with non-touch taps. To minimise the risk of Legionellae, taps should be run on a daily basis. This is a particular issue when a basin is used infrequently;
- in view of the increasing number of surgical interventions that now take place at the bed-space, one surgical scrub sink should be installed for every eight bed-spaces. The surgical scrub sink should be large enough to accommodate at least two people scrubbing up simultaneously;
- the safe storage and disposal of clinical waste is essential. Storage arrangements are discussed in detail in Section 7;
- keyboards used for entering patient data should be protected with a clear plastic cover, cleaned daily and then disposed of along with other disposable clinical equipment following a patient's discharge. Any mouse mats used should be cleanable and not manufactured from fabric-type material, which can harbour bacteria.

Decontamination of equipment

3.21 The effective decontamination of medical devices is essential in reducing the risks to patients from HAI (see HSC2000/032 'The Decontamination of Medical Devices'; DoH 2000).

3.22 The process assessment tools in the 'Decontamination Programme Technical Manual' act as a useful checklist for planning areas in the built environment that are involved in purchasing, processing, maintaining, storing and using medical devices). Further information can be found in 'SHFN 30 Infection Control in the Built Environment: Design and Planning'.

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General cleanliness and housekeeping

3.23 Good housekeeping and general cleanliness are of prime importance when caring for critically ill patients. The fittings and furnishings should reflect the need for easy and thorough cleaning on at least a daily basis. Localised cleaning around a patient's bed-space may be necessary at any time. The walls and floor surfaces chosen should therefore be suitable. Permanent domestic staff trained in the principles of infection control must be included in the critical care team. See 'Housekeeping'.

Separate treatment/procedure room

3.24 SHPN 27 included, as optional accommodation, a requirement for a separate procedure room. In certain cases procedure rooms are never used or are used inappropriately as an extra bed-space, or more usually as an extra storeroom. In the English survey only two respondents indicated that there was a procedure room in their CCA, one of which was intended for cardiac pacing but had never been commissioned because of a lack of funding and staff. The second respondent indicated that their procedure room was used as an overspill storage space. The NHS Modernisation Agency's National Patient Access Team (NPAT) generally agrees that there is no requirement for this room.

3.25 Moving critically ill patients is hazardous. This is one reason why an increasing number of surgical interventions are taking place at the patient's bedside rather than in a separate procedure room.

3.26 In a new-building for acute services, where all critical care facilities should be co-located or located in close proximity to the operating theatres, A&E, laboratories and imaging suites, it is unlikely that there will be a need for an integral procedure room as procedures that cannot be undertaken at the patient's bedside will take place in the appropriate departments.

3.27 In an existing building due for refurbishment where there is no possibility of locating all critical care facilities adjacent to the operating theatres, it may be reasonable to include an integral procedure room as an optional extra. This should remain a local decision and if included must not be at the expense of single bedrooms or other spaces.

3.28 The majority of clinicians indicated that they would opt for more space around each bed in preference to a procedure room because of the increase in diagnostic imaging at the patient's bedside and the additional space this requires.

Lifting and turning patients

3.29 Many critically ill patients, some of whom are nursed prone, require to be moved with the aid of lifts and hoists. New manual handling and safety laws and regulations are quite specific with regard to lifting and turning patients and

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moving heavy equipment. These new directives must be incorporated into future plans.

3.30 There are, therefore, a number of issues that should be considered with regard to the selection and installation of equipment for lifting and turning patients. Consideration has been given to the use of hoists and crane systems. Ceiling tracks cannot be used with fixed partitions, unless this is included as a separate en-suite track in each bed-space.

3.31 A hoist at every bed-space is the ideal solution, and these are expected to be built into every new CCA and major refurbishment where possible. This decision is based on recommendations from the therapy professions that the intensive rehabilitation required by many critically ill patients necessitates the use of hoists. In situations where ceiling mounted hoists are not possible, for example in existing buildings where ceiling height is limited, individual mobile hoists for each bed-space will impact on available space. An alternative might be to provide a limited number of hoists with individual slings for each patient, plus spare slings to allow cleaning.

3.32 Infection control experts indicate that installing a hoist over each bed-space is best practice as far as minimising the risk of cross-infection is concerned. One sling per patient is required, plus spares to enable slings to be laundered between patients.

Information handling

3.33 Each bed-space should be fully equipped for multi-parameter monitoring so that level 2 and level 3 patients can be supervised. All monitors should be linked to the central communications base. A minimum of 28 power points is required in each bed-space. Data lines are required at every bed-space for networking, digital imaging and patient records, plus a telephone point for the communication purposes of staff and relatives.

Engineering considerations

3.34 Since patients in a CCA are extremely vulnerable, an uninterrupted power supply (UPS) to all essential services for every patient must be provided, as back up in the event of mains failure. The extent of this provision will be governed by the capacity of the IT electrical distribution system described in the IET Regulations Guidance Note 7 on 'Special locations' (IET 1998) Some internal battery systems on equipment are an option. This option should be a feature of the Pre-Purchase Questionnaire and a decision should be made at the procurement stage. Manufacturers advise the need for rapid power restoration in the event of supply failure on the majority of equipment. Interruptions of 600ms are seen by many systems as ‘power off’.

3.35 Patient safety is paramount in a CCA and, following a number of reported incidents, strategies need to be adopted to distinguish between domestic and clinical devices in power supply/earth terms. Dedicated plug arrangements are

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preferable to colour coding, which can lead to error and may be ignored at times of pressure. However colour coding has been commonly adopted in installations where isolation transformer, residual current detection and standard power–earth strategies are in use.

3.36 Waterproof plugs are required to overcome the problems associated with water and other fluid spillage for monitoring and life-support systems.

3.37 Many patients are transferred from different hospitals, and interchangeable equipment is not always available.

3.38 The use of ceiling-mounted medical supply units (as indicated on the room layouts in Appendix 3) to support equipment is strongly recommended because of the considerable safety factors involved. They minimise the number of trailing power cables that are difficult to clean and harbour micro-organisms. The need for 360° access to patients makes this system the preferred option.

3.39 All services, drainage and hot and cold water supply should be enclosed in an accessible duct wherever possible to prevent the collection of dust and dirt and aid the control of infection in these sensitive areas.

The patient's right to privacy and dignity

3.40 Preserving the privacy, dignity and confidentiality of patients, and their families, at all times is essential. The design of CCAs should incorporate strategies that allow control of sound, vision and smell. There has been a great deal of debate surrounding the idea of a single bedroom for each patient, with many clinicians supporting such a development as constituting best practice. However, clinicians believe that numbers of staff available currently make this suggestion impracticable because of issues surrounding patient safety and the provision of an overview of every patient from the communications base. A single room for each patient should be the long-term strategy.

3.41 For guidance on selecting a curtain system that takes these issues into account, see paragraph 7.28.

The communications base

3.42 Opinions differ among clinical staff regarding the need for a central communications base. There are a variety of views about its size, location and function.

3.43 A number of options have been reviewed. Some units have a large, raised central station, enclosed by double-glazed partition walls, from which all beds are visible. The advantages of this arrangement are that people can conduct a wide variety of formal and informal discussions on the telephone or face-to face, while remaining close to the clinical area. All incoming information for the CCA, including via computer links, arrives at a central point where medical and nursing staff congregate. The sound insulation must sufficient to ensure that the

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clinical areas are minimally affected by the noise of persistent conversation. Disadvantages include the use of the communications base as a repository for junk and as a social gathering place.

3.44 There is a tendency for people to stick notices over the glass partition walls and to stack equipment on the surfaces outside the windows, greatly hampering the safe observation of the clinical area.

3.45 On balance, it is recommended that a small, modified communications base should remain as a focal point and observation post within the clinical area but that this should be enclosed in a glazed partition to reduce noise level.

3.46 Each bed-space should have a clinical workstation and computer terminal so that the staff can retrieve results and other information and input patient data without leaving the bedside.

3.47 In order to preserve privacy and dignity, reduce the noise level and reduce the risk of cross-infection, staff who are not directly involved with patient care should be accommodated outside of the clinical area of the CCA. This includes receptionists, administrators and secretarial staff.

Strategies for noise reduction in CCAs

3.48 Historically, CCAs are very noisy. Sources of noise include external noise from road traffic or industry, the general noise of a large number of people - patients, staff and visitors - within a relatively confined space on a continuous basis over a 24-hour period, and machinery and alarms. Noise prevents sleep and rest, deprivation of which contributes to the confusion and distress of patients. The reduction of noise level in CCAs is essential.

3.49 The following points should be taken into consideration in order to reduce noise level:

- double-glazed windows as a minimum are essential in reducing the level of external noise penetrating the area;
- silent methods of communication should be identified as an alternative to audible telephones and doorbells. Cordless telephones with a vibrate system have been installed in at least one hospital to good effect. A telephone located at each bed-space with a light signal rather than an audible ring tone and linked to the central console enables the nurse to communicate with the rest of the team without leaving the patient's bedside;
- fabric curtains between bed-spaces provide no insulation from noise. In particular, conversations that should be private and confidential can be overheard. Lead-lined curtains provide some reduction of noise levels but should not be assumed to be equal to a solid partition wall in this respect;
- floor coverings should be selected carefully in order to minimise sound transmission. Carpets are unacceptable in clinical areas because they are difficult to clean and maintain and increase the risk of cross-infection.

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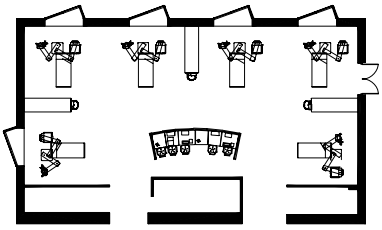
Wearing soft-soled shoes is best practice for all members of staff and for visitors;

- the communications base tends be very noisy and thus patients in a multi-bed area should be insulated by surrounding the base with clear glass screens;
- glass partitions in single bedrooms allow observation but provide effective sound insulation and protect the patient from noise and disturbance;
- restriction of staff working within the clinical area to those involved in patient care is also viewed as an effective noise reduction strategy.

Natural lighting

3.50 Scientific evidence indicates that daylight has beneficial effects on patients, visitors and staff. It reduces psychological problems, improves outcomes in patients, increases morale and reduces sickness levels among staff. An external view is also beneficial, even if limited. It is essential to provide glazing that allows staff and patients to see out but prevents anyone else from seeing in, irrespective of which floor the CCA is on. All staff benefit from working in an environment where there is plenty of natural light. Windows with no view are preferable to no natural light at all. The use of natural lighting should be maximised, but adequate artificial lighting throughout the CCA is also essential. See paragraphs 6.25–6.27 for general design considerations regarding windows.



Window detail in use to avoid glare in a CCA

Artificial lighting

3.51 The positioning of artificial lighting must be considered carefully. ‘Clinically useful’ artificial lighting, individual to each bed-space, is essential and can be part of the medical supply unit. It must be dimmable, flexible and discrete. Each light should be adjustable from the patient’s bedside and also from the

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communications base. Staff must be able to read prescriptions and observation charts at night. Further consideration must be given to the type of lighting that can be used by more alert patients, so that they can control their own environment.

3.52 It is not acceptable to install ceiling-mounted fluorescent lighting directly over a bed-space, as an awake or lightly sedated patient cannot avoid the glare. If ceiling-mounted fittings are used they must be two-directional so that they can be adjusted to prevent unwanted glare. The lighting must be dimmable without flicker.

3.53 Lighting is also important for effective cleaning and uplighters alone may not be sufficient to view corners and edges where dust can harbour.

3.54 Floor or low-level lighting is an essential resource in order that the clinical staff can monitor drains and urinary drainage. The light can also be used around the bed-space at night or when the patient is resting.

Assisted bathroom/WC

3.55 It is recommended that assisted bathroom/WCs remain an inclusion in view of the increasing number of CCAs that accommodate level 2 patients. It is envisaged that use of assisted bathroom/WCs will increase. The number of assisted bathrooms should reflect the anticipated case mix, i.e. the proportion of level 2 and level 3 patients, rather than simply the number of beds.

3.56 A number of general CCAs admit trauma or burns patients, some of whom require treatment baths.

Storage areas

3.57 Inadequate space for storage is one of the most frequent complaints made by all the clinicians who have informed this guidance. Equipment is often ‘stored’ in patient areas, support facilities such as offices and frequently in corridors, which restricts access and imposes a significant fire hazard.

3.58 There must be sufficient designated and easily accessible storage space for large items such as specialist beds, orthopaedic traction equipment and hoists. Mobile imaging equipment should be stored securely in an easily accessible space.

3.59 In addition, separate workshop facilities are required for equipment that needs regular maintenance and recharging. Technical support services should be available 24-hours a day for urgent servicing and decontamination of equipment.

3.60 Storage is a whole hospital issue. An increasing number of UK hospitals have installed the ‘just-in-time’ storage system, which involves a large centralised store on each site where all non-specialised clinical equipment is kept for

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regular distribution on a 'top-up' basis to the different departments when it is required. Agreement should be reached about the minimum level of equipment that should be retained in each department at all times. All just-in-time equipment should be bar-coded. Before a piece of equipment is used, a computer must read the bar code, this will then inform central stores that the equipment requires to be replaced. Clinicians who are using this system in acute hospitals have been impressed with the results.

3.61 In CCAs in Scandinavian hospitals, top-up deliveries from the central stores are made at least daily. In the UK top-up currently occurs much less frequently. In departments such as a CCA, where there is a rapid turnover of equipment, top-up should take place at least once a day.

3.62 Software programmes exist that connect the clinical areas to the central stores in order that hardware and large items can be ordered and delivered to CCAs immediately. Linen supplies can also be ordered in a similar manner.

Dirty utility

3.63 Storage of clean (unused) disposable urinals and bedpans in the dirty utility room is not acceptable practice, as the equipment can become contaminated and may be then taken into the clinical area for subsequent use. Disposable urinals and bedpans should be kept in clean storage areas and can be replenished twice daily using the just-in-time system (see paragraphs 7.35-7.38)

Disposal hold

3.64 A large amount of clinical waste is generated in CCAs, much of which is bulky in size, for example ventilator tubing and humidifiers. Safe storage of clinical waste, along with regular collection and disposal, is paramount. In CCAs, clinical waste should be collected at least once a day. Clinical waste storage should meet health and safety and security regulations. Soiled linen is also stored in the disposal hold. For best practice, it is recommended that there should be a clinical waste disposal room for every eight bed-spaces. The size will depend on the local arrangements for collection and onward transmission. See paragraph 7.39 for the full design requirements.

Imaging facilities

3.65 Critically ill people, considered too unstable to move, frequently require mobile imaging techniques. A designated area for storing this bulky imaging equipment within the department should be identified. See paragraph 7.42 for the full design requirements.

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Satellite pharmacy

3.66 Every CCA should be serviced by a fully equipped main hospital pharmacy located on the same site. All CCAs, however, require a lockable drug cupboard located in the clean utility or an equivalent suitably secure area.

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4. Facilities for staff

4.1 Excellent staff rest and support facilities are viewed as essential factors in recruiting and retaining staff, and in enabling them to carry out their roles to the best of their ability. NHSScotland makes it clear that increasing staff morale by improving the environment in which they work is a priority.

4.2 The patient/staff ratio in critical care is very high. This means that the greater the number of bed-spaces the larger the number of staff employed. This in turn will require more space for staff facilities; these will include rest rooms, catering facilities, changing rooms, en-suite overnight accommodation for on-call staff and also facilities for education and training.

4.3 All staff need the opportunity for regular 'time out' from the clinical area, but should be able to return immediately if required. It is essential that rest and recreation facilities reflect their need for peace and quiet and that they are able to cater for their nutritional needs on a 24-hour basis. It is also essential that they are able to shower and change on their arrival, during their shift and prior to departure. The size and number of rooms required should be calculated, and be adequate for each project. The workforce must be consulted and their views reflected in the business case.

4.4 Innovative ways of creating flexible spaces that will enhance staff comfort need to be identified. Excellent design, quality fittings and furnishings, the use of colour, and the inclusion of natural light are viewed as essential.

Staff changing facilities

4.5 Appropriately equipped and secure changing facilities are required. Separate changing rooms are needed for male and female staff. The privacy and dignity of staff should be preserved. This can be achieved by ensuring that WCs and showers are enclosed in full-height self-contained rooms. Cubicle partitions are not acceptable practice. See paragraphs 7.51–7.54 for the full design requirements.

Staff rest facilities

4.6 Most staff rest facilities in CCAs are much too small to enable the staff to sit at a table to eat and drink. A staff rest room should be provided away from the bed areas and general circulation areas, where staff can relax but at the same time be called to the clinical area in case of an emergency. The need to balance peace and quiet with the noise of televisions, videos and microwaves should be borne in mind. A refrigerator, microwave, toaster and dishwasher are essential. A fresh drinking water source should be included. Natural light should be maximised. See paragraphs 7.55–7.56 for the full design requirements.

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Office accommodation

4.7 It is important to provide a quiet environment where staff can deal with administrative tasks and acquire and collate information about patient care in the interests of clinical governance. Every office should have a window and should be equipped with a computer terminal and internal and external telephones. See paragraphs 7.63–7.68 for the full design requirements. The need for personal space is not in question and where space is at a premium it is suggested that a number of offices are located adjacent to, rather than within, the CCA.

4.8 Increased use of IT provides an opportunity for reducing the size and number of single occupancy offices. An increase in hot-desking is also anticipated within the next few years. A much more flexible and innovative approach to office accommodation is therefore required, with greater use of multi-function rooms for meetings, interviews or staff appraisals.

4.9 Offices are required for:

- the clinical director;
- the manager;
- the clinical staff (doctors, nurses, allied health professions);
- administrative and support staff (data clerks etc.);
- the outreach team; and
- teaching and research staff

4.10 The project team should base their decision on the number of offices required within the CCA on local knowledge about alternative and proximal locations within the building.

Meeting/interview room

4.11 There is an argument for the provision of space to conduct confidential meetings, for example interviews or professional reviews with other staff. Offices are not the appropriate place for such activities to take place. A small comfortably furnished meeting room seating approximately six people would fit the purpose. See paragraph 7.69 for the full design requirements.

Education and training facilities

4.12 Excellent education and training facilities for staff are viewed as essential. Education and CPD has always been a high priority in critical care and the appropriate facilities should be provided. Trainee medical staff, medical students and students of nursing and professions allied to medicine make up a substantial proportion of the personnel found in a CCA. While some teaching

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takes place in the clinical area on a one-to-one basis or in small groups, the teaching of large groups is an imposition on the function of the area.

4.13 Within the hospital complex there should be an education centre with a skills laboratory. A skills laboratory contains equipment for training in resuscitation, such as manikins, defibrillators, and simulated body parts for venepuncture or suture practice, and is an essential resource for all clinical staff. The local project team should decide whether there is a need for an additional skills laboratory in critical care.

4.14 The number and size of rooms required for education and training should be increased on a pro rata basis depending on the number of staff working in the CCA and hence the additional numbers of trainees and students who are there. As a minimum standard there should be one seminar room large enough to accommodate 20 people in a CCA that has eight bed-spaces. See paragraph 7.70 for the full design requirements.

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5. Support facilities for family and friends

Sitting room

5.1 The sitting room should be large enough to accommodate several groups of visitors at one time. Its size should increase on a pro rata basis with the number of beds within the unit. The décor should be selected carefully. People may need to wait here for long periods of time so comfortable seating is essential, with sofas being ideal. Beverage-making facilities must be available at all times. A television should be provided.

Interview room

5.2 The general waiting room used by family and friends must not double up as a 'breaking bad news room'. A small room should be designated for this purpose. This room should be provided with a discreet exit, as it is vital that family and friends are able to leave the area if they so choose, after receiving bad news, without having to meet up with other anxious families or having to walk back through the clinical area itself. In common with the general waiting room, this room should portray an air of calm and comfort. A telephone should be provided. An en-suite wheelchair-accessible WC should be included.

Overnight accommodation

5.3 Each individual project team should decide what overnight accommodation is required within the CCA for patients' family and friends. Views differ as to whether it is necessary or appropriate to provide overnight accommodation for family and friends within the CCA. A number of clinicians advise that both the patient and family get more rest if they sleep elsewhere. There are practical difficulties in providing overnight accommodation for a large number of families and at the same time ensuring equity of access. Simple criteria should be established and included in the 'family and friends' brochure. It may be reasonable to provide limited facilities in combination with more extensive provision for the hospital as a whole.

5.4 A number of hospitals offer on-site centralised accommodation for families - parents of sick children frequently use this sort of accommodation. Others have permanent arrangements with local hoteliers who can accommodate relatives at short notice.

5.5 Relatives need to be certain that they can return to a patient's bedside immediately if required. Accommodation that is outside the hospital premises should be close by and easily accessible, and the journey between the two locations should be safe and present no security risk.

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Smoking policy

5.6 Scotland has now introduced legislation which prohibits smoking in accordance with the requirements of 'The Smoking, Health and Social Care (Scotland) Act' 2005 and The Prohibition of Smoking in Certain Premises (Scotland) Regulations 2006. NHS, Local Authorities and Care Service Providers have adopted guidance contained in 'Smoke Free Scotland' as Best Practice. NHS Scotland has also designated all healthcare sites, all buildings and all open areas with the boundaries, as no smoking areas. Some boards may have to review the ban on smoking in designated outdoor areas where parents of seriously ill children are concerned (see NHSS Firecode SHTM 86 Part 2: Fire Risk Assessment in Healthcare Premises).

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6. General design considerations

Introduction

6.1 This Chapter contains guidance, which supplements the general guidance given in SHPN 03: General design guidance. The latter should be implemented as appropriate for the project under consideration.

Security/control of access

6.2 Security measures are needed to control unauthorised access to the CCA and to reduce the likelihood of thefts from changing areas, supply areas and pantries. It is recommended that access through the main entrance to the CCA be controlled by use of an entry-phone or intercom system with CCTV, linked to the reception/clerical office and communications base. Programmable close proximity card or similar systems must be fitted to changing room doors and used broadly across the CCA. Ideally the programmable system should grant different patterns of access to suit the needs and privileges of authorised staff and visitors. The security measures chosen should not inhibit emergency escape from the CCA or access by the staff at any time.

6.3 An added benefit of the entry-phone system is the control of access by visitors to prevent them entering the bed areas at inappropriate times, for example, during reporting/handover or while procedures are being carried out.

Fire safety

6.4 To ensure progressive evacuation to areas capable of accepting patients reliant on life-support equipment, great care needs to be taken in the choice of location for the CCA in relation to other departments. The post-anaesthesia recovery area of the operating department is the most desirable area for receiving patients evacuated from the CCA and vice-versa. In Scotland aspects of fire protection and escape are included within the Building Regulations and Associates SBSA Guidance. Additional Requirements relating to fire safety are contained within NHS Scotland's Firecode documentation.

Internal environmental considerations

6.5 A restful atmosphere for patients and appealing working environment for staff can be created by the appropriate use of lighting and colour and attractive furnishings and finishes. It is, however, essential that the choice of lighting and colour does not adversely affect the clinical assessment of patients. Pastel colours are preferable to bright or heavily patterned finishes and the introduction of pictures and coloured panels can create a calming atmosphere.

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Noise and sound attenuation

6.6 The CCA should be located away from noise-generating departments. Careful consideration should also be given to deciding where, within the area, monitoring equipment alarms will sound. Provision must be made to ensure confidentiality for staff reporting/handover activities (see SHTM 2045: Acoustics).

Ventilation

6.7 Three categories of ventilated facility within CCAs should be considered. These are summarised as follows:

- provision of mechanical ventilation, with possible incorporation of cooling for bed areas and where local conditions so require for other areas;
- for CCAs where there is a reasonable likelihood of intervention requiring minor surgery, the use of suitably filtered air supply should be considered with input and output grille locations as required;
- for patients who have special vulnerability to infection or who constitute an infection risk, the use of a mechanical ventilation system with appropriate filtration providing positive pressure within the room should be considered. See Section 8. 'Engineering services' and SHTM 2025 Ventilation in healthcare premises).

6.8 While all bed areas should be mechanically ventilated and cooled, other areas should be naturally ventilated, where possible.

6.9 All single bedrooms should include a system which can provide 'source and protective isolation' of the patient. This can be achieved by the use of plenum chamber air heating. Filtration is also required to reduce the risk of infection; the use of high efficacy filtration may be necessary for pressure-controlled bedrooms. Overall strategy as well as particle size restrictions should be discussed with the infection control team. Extreme care is required in the positioning of grilles to prevent 'draughts' passing over patients and to obtain viable flow characteristics. The grilles and the siting of ventilation input and output flows should be carefully considered. These rooms require entrance control lobbies to prevent unauthorised entry and to protect the airflow regime.

6.10 At commissioning, tests on the utility and performance of the ventilation system in limiting infection are required and should be planned in consultation with the infection control and nursing teams. The control system features a locally mounted panel with clear indication of correct or deviant flow together with simple selection and indication of over- or under-pressure relative to the surrounding rooms.

6.11 At the design stage, the use of computational fluid dynamics (CFD) technology should be considered to justify the design parameters of the project.

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Finishes

Floors

6.12 All finishes required to be functional and compatible with the need for comfort and safety. Cleaning requirements must be considered when selecting materials and the advice of the Infection Control Team must be sought at all stages throughout the project.

6.13 Refer to SHPN 03: General Design Guidance for Information on Aspects of Finishes Requirements.

6.14 Floors, including any screeds being considered and floor finishes, in a CCA must be able to withstand harsh treatment, including:

- The rolling load of heavy mobile equipment and beds;
- Frequent spillages with the required subsequent 'mopping up'; and
- Regular hard cleaning of all areas.

6.15 Flooring should be smooth, easily cleanable and wear-resistant. The floor material should be coved to form the skirting to avoid angles and corners where microbial colonisation can occur. This detail will allow easy cleaning of the floor finish. In areas where frequent wet cleaning methods are employed, the flooring material should be unaffected by germicidal cleaning solutions.

6.16 Floor finishes must provide the required H&S standards, particularly with regard to slips and trips. Generally this will require slip-resistant vinyl sheeting with welded joints. Such flooring is tolerant of small movements in the structural floor. If floor screeds are being considered they must be perfectly smooth, crack-free and stable. Adhesives must be powerful enough to resist the formation of 'waves' in the floor finish that can result when heavy beds and equipment are moved. Sufficient time should be allowed for the adhesive to set prior to use. Thresholds at doorways between adjacent rooms require particular attention because they are points of stress in the floor finish. See SHTM 61: 'Flooring' (draft).

Walls

6.17 Wall finishes in a CCA must be durable and able to withstand wet cleaning and the accidental impact of trolleys and heavy mobile equipment. Particularly vulnerable points and edges will require additional protection. Smooth paint surfaces are the easiest for cleaning – eggshell or vinyl silk emulsion (also see SHTM 56: Partitions).

6.18 Vinyl wall-coverings may be used in rest, interview and relatives' rooms. Vinyl sheeting should be used as splash backs and wall protection in kitchen, shower and toilet areas, welded joints must be used in showers and any other area where joints are required. If wall tiles are being considered the use of these must be approved by the Infection Control advisors.

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6.19 Single bedrooms should have glass partitions for observation purposes, complete with integral venetian blinds for privacy.

Ceilings

6.20 An acoustically absorbent ceiling helps to reduce noise. While some acoustic surfaces now available do not present an infection hazard it is essential that the architect, building services engineer, infection control officer and facilities manager together ensure that the choice of ceiling and the maintenance routines are satisfactory. The ceiling in single bedrooms should be sealed.

6.21 The choice of ceiling construction and finish should reflect the necessary compromise between sound control and the control of infection. A modest risk analysis may be the appropriate way of addressing this aspect of the design.

Doors and frames

6.22 Doors and frames are particularly liable to damage from mobile equipment, therefore materials that will withstand this should be used. All double-swung-doors should incorporate clear-glass vision panels at the level of children and adults, but privacy, safety or other considerations may require that the panels be capable of being obscured. Where necessary, doors should be capable of being held in the open position but magnetic door retainers should not restrict the movement of traffic (See SHTM 58: Internal Doorsets).

6.23 Doors, and all associated Ironmongery, should be designed to be resistant to damage from trolleys etc. and should ideally be automatic in operation. Door handles should be suitable for use by people with disabilities (see SHTM 59: Ironmongery).

6.24 Doors to single bedrooms should be fire rated as required, tight fitting, with proprietary neoprene seals to minimise air transfer when they are closed.

Windows

6.25 Care should be taken in the orientation of the CCA with regard to the positioning of windows. External windows must be designed to avoid glare within a CCA and allow patients to see out while preventing anyone else seeing in.

6.26 Blinds must be installed between the glass that can provide ‘black-out’ which is, essential for ultrasound examinations and other imaging procedures.

6.27 Windows in the single bedroom and multi-bed areas should be non-openable. This is essential to maintain mechanical cooling and positive/negative airflow. .

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7. Specific functional and design requirements

7.1 This Section provides guidance on the functional requirements and design implications for each of the activity spaces in a CCA.

Functional relationships

7.2 A CCA contains three zones:

- patient bed areas;
- associated support facilities, utilities and
- staff facilities.

7.3 Both within, and between, these zones there are key functional relationships that should be taken into account when designing accommodation. Factors to be considered include the physical relationship between the communications base, single rooms and multi-bed areas, the design of the enclosed communications base, the positioning of glazed panels around single rooms, and the positioning of mobile equipment within bed areas. Every bed-space should have direct communication with the communications base. Details of the relationships are given below. The required fire compartmentation, sub-compartmentation and entry points for CCA (ITU and ICU) must also be carefully considered at design stage.

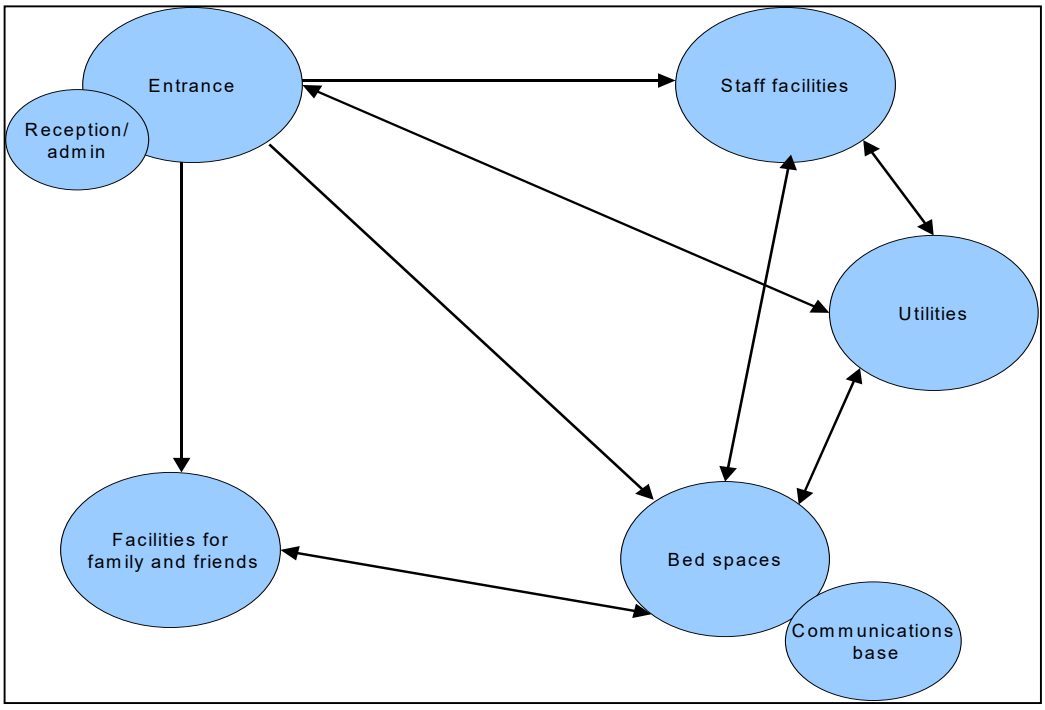

Figure 2: Functional relationships

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Communications base/patient bed areas

7.4 Although nursing staff will be based in the patient bed areas, visual observation of patients from the communications base is still important. A balance should be struck between providing adequate observation for staff and privacy for patients.

Patient bed areas/utilities and equipment storage

7.5 Utility areas and medical equipment storage should be located so as to provide easy access to patient bed areas, also the security of supplies and equipment must be considered. The multi-bed areas should not be used as a thoroughfare to these support spaces.

Patient bed areas/staff areas

7.6 Staff rest rooms and offices should be located sufficiently far from bed areas to allow staff to use them without disturbing patients, but close enough for them to return quickly to the bed areas when required.

Bed-space/bed-space

7.7 The layout of the multi-bed area and it's relationship to the single bedrooms must enable nurses to easily summon assistance from one bed-space to another.

Design requirements

Entrance

7.8 All patients, visitors, staff and supplies should generally access the area through a single entrance. The entrance should be the delivery point for supplies and the collection point for specimens. The access should be wide enough to accommodate the delivery of large items of equipment being delivered to storage areas.

7.9 Appropriate staff should be provided with a close proximity card or number, to allow them to open the doors for deliveries and collections. A bell or entry-phone system, coupled with CCTV connected both to the main Reception area for daytime and the Communications Base at night, should control access to the CCA by relatives or visitors (see paragraphs 3.1–3.3).

Waiting area

7.10 The waiting area should provide seating for a minimum of 10 people including wheelchair users. Payphones for use by visitors should be located near to the visitors' accommodation and the waiting area. One payphone should be

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wheelchair accessible and fitted with an inductive coupler to assist people using a hearing aid. A wheelchair-accessible WC should be provided close by.

7.11 The waiting area should be welcoming with a relaxed and calming atmosphere and an uncluttered and spacious environment. Interesting and stimulating features can be incorporated including lighting features, water features, sculptures, murals, aquaria and plants. See 'Welcoming entrances and reception areas (DOH Estates and Facilities Division, 2004)

Reception/clerical office

7.12 A reception/clerical office is required adjacent to the waiting area for meeting and greeting relatives and visitors to the area. The entry-phone system for the area should be located in this room. There should be a hatch between the office and the waiting area. This room should be large enough to accommodate four personnel along with computer and telecommunications equipment.

Figure 3:

A water feature in the waiting/reception area can help to provide a tranquil environment

Figure 4:

Comfortable and relaxed waiting area

Communications Base

7.13 The communications base should be located so that it commands a clear, unobstructed view of the whole of the patient area. This base serves as the central communications area for all the clinical management of patients (See paragraphs 3.42–3.47).

7.14 Activities taking place at the communications base include observation of patients, reporting, report writing, use of telephones, viewing images, examining data on a central monitor and the use of computers. The increasing use of electronic communications means that the base should be able to

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accommodate telecommunications facilities and a number of networked computers with Internet access. A computed radiography reader may also be required, depending on local policy.

7.15 Considerable noise is generated in this area and sound insulation will be required to minimise sound transfer to clinical areas. It is recommended that the communications base be enclosed in a double glazed partition to provide soundproofing. A suitable number, and location, of notice and whiteboards will be required to prevent the sticking of notices to the glazed screen, which would limit visibility of the bed areas.

7.16 Area valve service units should be located at the department entrance on the Hospital street side of the main access doors. Task lighting is required at night to prevent disturbance of patients. All alarms and control of the entry system will be sited at the CCU Reception, these will require to be transferred to the Communications Base at night.

Bed areas

7.17 Because of the need for good staff access around the patient, an island bed-layout is generally required rather than a peninsular arrangement.

7.18 In new facilities each bed-space requires a ceiling-mounted pendant system to provide sufficient socket outlets to cope with the wide range of equipment in use at the same time. A ceiling mounted system, fixed beam or double arm double pivot point service delivery, is the preferred option. Care should be taken in the selection of medical supply units and their mounting to ensure ergonomically satisfactory positioning for convenient access by staff. Equipment can include as many as 12 syringe drivers, 4 or 5 volumetric pumps, an electric bed, a ventilator, monitors, an air mattress, a dialysis machine, a humidifier, a suction machine and a television. To meet increasing demand, the current recommendation is for a minimum of 28 twin socket outlets at each bed. The medical supply unit supplies medical gases and electrical socket outlets, thereby allowing relatively unimpeded access to the patient by medical, nursing and therapy staff. A strategy based on services supplied from the ceiling provides unobstructed access and uncluttered floor space around the patient's bed. Waterproof floor sockets could also be provided for use when necessary, but approval from the Infection Control Team must be sought before providing these.

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Figure 5: Well-designed bed-spaces using pendants to accommodate medical equipment, providing unobstructed access for clinical staff

Equipment at each bed space (including single bedrooms)

7.19 For maximum flexibility, each bed space requires the following equipment located within a medical supply unit adjacent to the bed-head The listed equipment is appropriate for the management of Level 3 (ICU) patients. Less will be required for Level 2 patients. Consequently the list may require some modification according to the anticipated case mix:

- 28 single power-points and connection to the UPS system, where risk considerations in terms of patient safety dictate;
- multi-parameter monitoring;

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- ventilation and humidification equipment;
- six infusion pumps;
- eight syringe pumps;
- two low-pressure vacuum points;
- two high-pressure vacuum points;
- an examination lamp;
- four oxygen outlets;
- two 4-bar air outlets;
- one 7 bar air outlet for surgical equipment connection – the point should be clearly labelled with the appropriate warning;
- one nitrous oxide point, where local anaesthesia policy and risk considerations permit (required only in very exceptional circumstances);
- a scavenging system (optional as above);
- a feeding pump;
- a blood warmer; and
- drugs storage space.

7.20 Other equipment at each bed space includes:

- an electric bed, capable of attaining the cardiac chair position and Trendelenberg position, and a pressure-relieving mattress;
- a storage unit combined with a clinical hand-wash basin;
- a PC for paperless recording/audit;
- a telephone for internal and external calls;
- a television socket (Patient Power or similar); and
- a nurse call system.

7.21 Equipment used intermittently at the bed space includes:

- an EEG machine;
- mobile imaging;
- ultrasound/echocardiography;
- endoscopy (fibre optic light source);
- defibrillators;
- haemodialysis; and
- haemofiltration.

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Single bedrooms and lobbies

7.22 Single bedrooms are required to provide isolation of patients. They will also be used:

- if a patient requires additional privacy, peace and quiet;
- for confused or aggressive patients; or
- for children.

7.23 Single bedrooms require to be rectangular, as indicated in the single bed layout in Appendix 3, with an entrance wide enough to allow bulky equipment to pass easily – at least a door and a half wide. These rooms must not be L-shaped. Care should be taken to ensure that the door opening is sufficient to allow the passage of the bed and equipment.

7.24 All single bedrooms should have a lobby to provide protective and source isolation. The lobby entrance requires a clinical hand-wash basin, plastic apron dispenser and disposal facility. Ceilings and windows should be sealed. Doors should be tight fitting with seals to minimise air transfer.

7.25 Single bedrooms must have a minimum clear rectangular net floor area of 26sq.m to allow for manoeuvring bulky equipment, for example a mobile imaging machine, and space for staff to undertake procedures from all sides of the bed. A clinical wash hand basin with automatic taps, or possibly knee control, should be provided in each room. The infection control advisor should always be consulted on the size, location and details of clinical WHBs to ensure the correct specification. The room also requires an overhead hoist for lifting patients. The recommended minimum ceiling height is therefore 3m, but designers must check with suppliers/manufacturers of equipment, including service pendants; see Appendix 3 for drawings (see paragraphs 3.12–3.13). Ceiling heights should be set a height that will allow room for all manufactures equipment to allow future choice if replacement is required.

7.26 Windows and natural light are essential in the single bedrooms and multi-bed areas as an aid to patient orientation. Outside views are desirable, and the windows should be as large as possible to allow patients to see out (see paragraph 3.50).

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Figure 6: The use of natural daylight is considered essential in clinical areas

Figure 7: Typical bedroom

Multi-bed area

7.27 The size and shape of a multi-bed area should allow space for the use of mobile equipment and for staff to undertake procedures from all sides of the bed. Multi-bed-spaces may, on occasion, be used for haemodialysis (see paragraphs 8.26 to 8.28). A clinical hand-wash basin, with automatic taps, coupled to a storage unit must be provided at the front of all bed-space. All bed-spaces must have a minimum net floor area of 26sq.m with a 2.5m unobstructed corridor space beyond the working area. It is imperative to maintain the required bed separation for infection control reasons. Over and above the provision of one clinical hand-wash basin per bed-space, one surgical scrub sink per eight beds is required close to the entrance of the ward area. Each bed-space should have an overhead hoist to support lifting, so a minimum ceiling of height of 3m is required.

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Figure 8: Wash-hand basin at the foot of the bed-space

7.28 Adjustable bed-space divisions are desirable to cater for the varying service and equipment requirements generated by different types of patients. The use of a curtain system is a suitable solution. Project teams should select a curtain system that meets the following criteria:

- the radiation protection requirements should be met. A lead-lined system is therefore suitable;
- when the curtains are pulled around the bed-space, there should be 100% visual privacy;
- it should be possible to pull the curtains back completely against the wall, thus allowing an uninterrupted view of the patient from the central communications base;
- the density of the curtains should reduce the level of general noise transmitted and also improve the level of auditory privacy in the bed space. Again a lead-lined system would help to achieve this; and
- the curtains should be easily moveable and easy to clean. UPVC-coated curtains are suitable as they can be wiped or washed clean in-situ. Fabric curtains are not suitable as they increase the risk of HAI.

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Figure 9: Radiation protective curtain

Figure 10: Protective curtain in use in resuscitation

Bed-space storage

7.29 There are several ways of providing bed-space storage. It is necessary to avoid over-ordering as this leads to costly waste as well as introducing infection control problems from stocking too many items at the bed-space. Storage provision is only required for small quantities of medical and surgical supplies for the treatment of each patient. The combination of the storage unit coupled to the clinical hand-wash basin at the front of the bed-space is an ideal solution. Project teams should also refer to the local decontamination policy for the area, to ensure that medical devices are stored and reprocessed/disposed of in a safe manner.

7.30 Storage of patients' clothes and personal effects should be dealt with in accordance with whole hospital policy. This may vary from area to area and may depend on the type of patient and length of stay. They should not normally be kept at the bedside; however, some personal items such as family photographs can help the patient's orientation and provide emotional support.

Assisted bathroom/WC

7.31 Admission policy and length of stay vary from unit to unit and project teams should therefore consider whether provision of an assisted bathroom is necessary. They are generally required only where level 2 (HDU) patients are accommodated (see paragraphs 3.55 and 3.56). Facilities required include a height-adjustable bath, stretcher hoist, WC and hand-wash basin (see HBN 40 Volume 2). The room should also be fitted with oxygen, air, vacuum and waterproof electrical socket outlets.

Patients' pantry

7.32 The patients' pantry is used for the preparation of beverages and snacks and for receipt of meals from the central kitchen. If a cook–chill system is in operation, space is required for holding and manoeuvring chilled meal service

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equipment. A sink/drainer, refrigerator and separate stainless steel hand-wash basin are required. The provision of an ice-making machine is recommended.

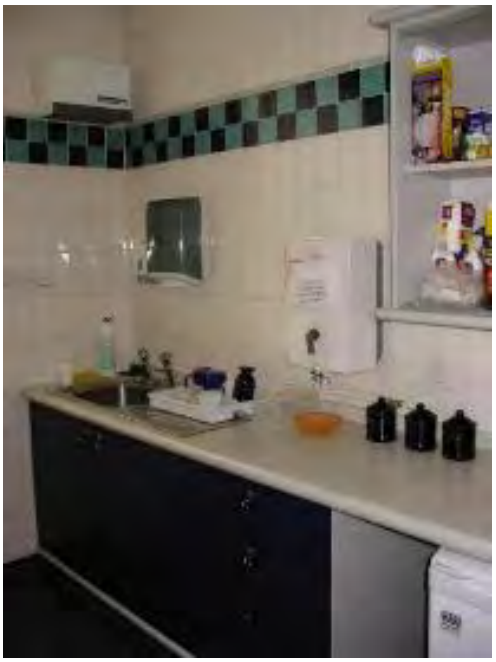

Figure 11: Brightly decorated pantry

Clean Utility with blood bank

7.33 The clean utility should provide space for preparing trolleys for sterile procedures, preparing and checking drugs and for storage of sterile supplies and procedure packs. A secure and alarmed cupboard will be required for controlled drugs and suitable lockable storage for medical and surgical supplies. This space should be easily accessible from the communications base and bed areas. Small quantities of supplies may also be held near the bed-space for immediate use. Empty pharmacy boxes may be temporarily stored in the Clean Utility for collection by the pharmacy porter. A clinical wash hand basin with automatic taps or foot control is required in the clean utility (see SHTM 64: Sanitary assemblies). Clean disposable bedpans and urinals can be stored in this area.

7.34 A blood refrigerator may be required in the CCA, unless there is a blood store in the immediate locality, or a means of immediate delivery, e.g. a pneumatic air tube transport system. Use of such a refrigerator is governed by national and local blood transfusion service regulations. The clean utility is an ideal place to locate the refrigerator and may require networking to a central monitoring system.

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Figure 12: Blood bank

Dirty utility

7.35 In larger units, it may be appropriate to provide more than one dirty utility. Dirty utility rooms provide facilities for disposal of the contents of bedpans, urine bottles, vomit bowls, washbowls, etc. The dirty utility must be situated close to the patient areas. Project teams will require to decide between using disposable bedpans and a bedpan macerator, or alternatively bedpan washer/disinfector and bedpans. A disposal unit consisting of sink and hopper with concealed cistern must be provided (see SHTM 64: Sanitary assemblies). Mechanical extract ventilation and clinical hand-washing facilities require to be provided.

7.36 To reduce the risk of HAI, clean disposable or non-disposable items such as bedpans, urine bottles and vomit bowls should not be stored here. These should be stored in the clean utility or bulk stores.

7.37 Space for holding materials for disposal or reprocessing should be limited because sacks and bags, once full, should be closed and taken to the Disposal Hold to await collection. The whole hospital policy for disposal will determine the frequency of collection. 'Sharps' containers can be stored in and collected from the dirty utility or the disposal hold, depending on hospital policy. Sufficient space should be allowed to accommodate soiled linen skips. Project teams should also refer to the decontamination policy to ensure that medical devices are stored for processing, or disposed of, in a safe manner.

7.38 The dirty utility may also be used for urine-testing and holding specimens. These should be zoned separately within the room. It can also be used as a holding bay for contaminated clinical equipment where it is cleaned prior to being taken to the equipment service room for maintenance. See Appendix 3 for the recommended layout.

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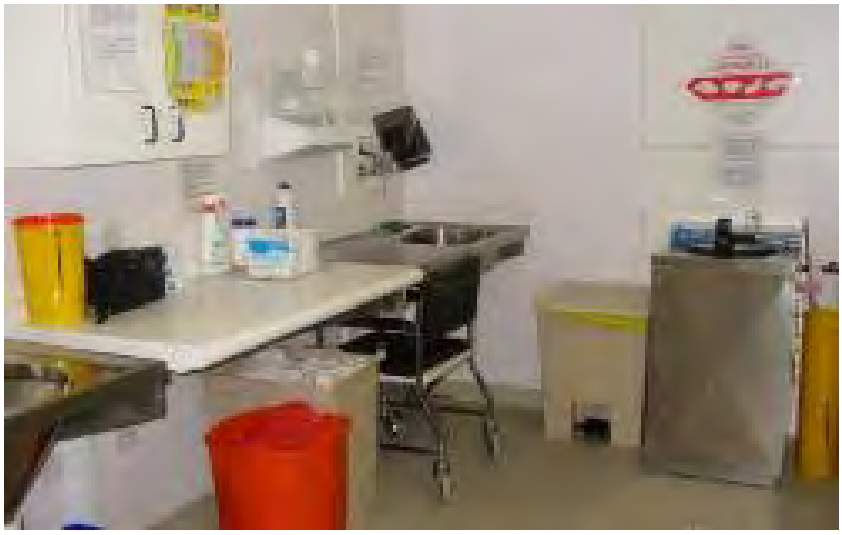

Figure 13: Functional dirty utility

Disposal hold

7.39 This locked room should be accessible from the hospital street. It is preferred that collections are made without porters needing to enter the main circulation space of the CCU. Bagged refuse and soiled linen are held here safely and securely while awaiting collection. Colour coding, in line with NHSScotland and whole hospital policy, identifies them. The size of the disposal hold will be determined by the frequency of collection. It is preferred that the walls are protected by sheet vinyl wall cladding which will provide protection from damage by bins and will withstand the constant harsh cleaning required.

Bulk supplies storage

7.40 This space is intended as a bulk supplies holding store for medical and surgical supplies and intravenous fluids. Clean Utility and other areas will then be stocked from this storage area. The amount of storage required is determined by local supplies policy and use of the 'just-in-time' system. Clean disposable bedpans and urinals can be stored in this area.

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Figure 14: Bulk stores utilising modular storage system

Linen storage

7.41 Clean linen supplies will be stored either in a Linen Store or on a linen exchange trolley stored in a recessed bay, or suitable location that does not cause an obstruction. The amount of linen storage required depends on the linen supplies policy and the number of patients.

Imaging equipment bay

7.42 An open bay should be provided close to the clinical equipment store for the storage of imaging equipment and protective lead aprons. A socket outlet should be provided for charging the imaging equipment. Lead aprons should be stored vertically to maintain their protective capability. Suitable wall brackets attached to a load-bearing wall or mobile stands will be required for this purpose. The bay should be a minimum of 5sq.m to accommodate one mobile imaging machine and a single ultrasound unit. A larger storage bay of approximately 8sq.m will be required if mobile image intensifiers are used. It is a statutory requirement that the regulations pertaining to the use of ionising radiation, such as IR (ME) R2000 and IRR 99 are complied with.

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Figure 15: Imaging equipment bay located off the corridor to patient areas

Cardiac arrest/emergency trolley

7.43 A second cardiac arrest trolley/defibrillator should be sited outside the clinical area of the CCA, and areas with more than eight beds should have a third cardiac arrest trolley. At least one defibrillator must be equipped for external cardiac pacing.

Medical gas cylinder ready to use store

7.44 The project team should ensure that the provision of standby gases and equipment reflect the emergency procedures and contingency planning processes developed for the area. The store should be in a room that is easily accessible, enclosed in fire-resisting construction and should preferably be located on an external wall and provided with natural ventilation.

Furniture store

7.45 This store holds beds, bed cradles, cots and other bulky items of furniture when they are not in use. Special beds and mattresses are sometimes required for patients. Beds and mattresses removed from the bed space require a suitable place for storage.

Clinical equipment store

7.46 Floor space within this store is needed for a variety of equipment including drip stands, monitoring equipment, ultrasound machines and haemodialysis

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equipment. Shelf space is needed for smaller items of equipment such as infusion pumps, ventilator accessories, monitoring equipment and suction apparatus. Electrical socket-outlets are required for charging equipment. Under-provision of storage for equipment may lead to unused equipment being kept in bed areas. This store should be located within easy access of the bed areas and adjacent to the equipment service room.

Equipment service room

7.47 Facilities are required within this room for equipment servicing as defined in the user manuals supplied by equipment manufacturers, supplemented by any formally agreed local instructions. Such local instructions may require the provision of additional facilities. Visiting electronics and medical engineering (EME) technicians carrying out minor scheduled or unscheduled servicing may also use this room. The space provision should be sufficient to park and manoeuvre equipment and accommodate a workbench with integral lockable cupboards, preferably in a self-contained room or space. Residual current devices should protect a sufficient number of socket-outlets. A hand-wash basin should also be provided. It is recommended that manufacturers' user manuals be kept in this room.

7.48 Medical gas outlets supplying oxygen, medical compressed air and vacuum should be provided. The provision of nitrous oxide together with gas scavenging facilities is a local decision. Some items of equipment may require decontamination prior to scheduled servicing being done. Local policy will identify where this is undertaken, for example in the SSD and/or EME department.

7.49 Equipment should be held in the dirty utility where it is cleaned prior to immediate transfer to the equipment service room.

Figure 16: Equipment charging on shelves

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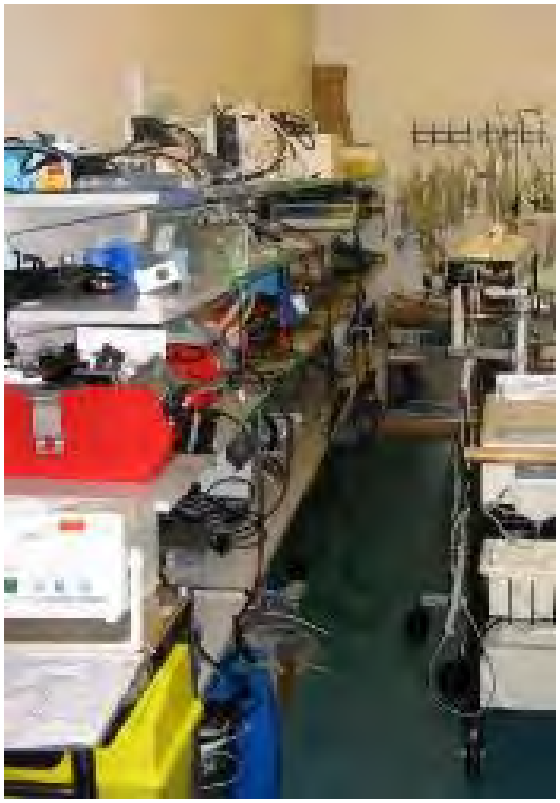

Figure 17: Equipment storage

Laboratory

7.50 A near-patient testing laboratory is required for blood gas, electrolyte and glucose analysis and other tests carried out within the CCA. The main requirements are for a sink, laboratory benching and adequate bench space onto which equipment is placed, electrical socket outlet provision, gas cylinder storage for blood gas machine, a specimen fridge and sufficient space for staff to perform tests and use computer equipment. Separate clinical hand-washing facilities are also required.

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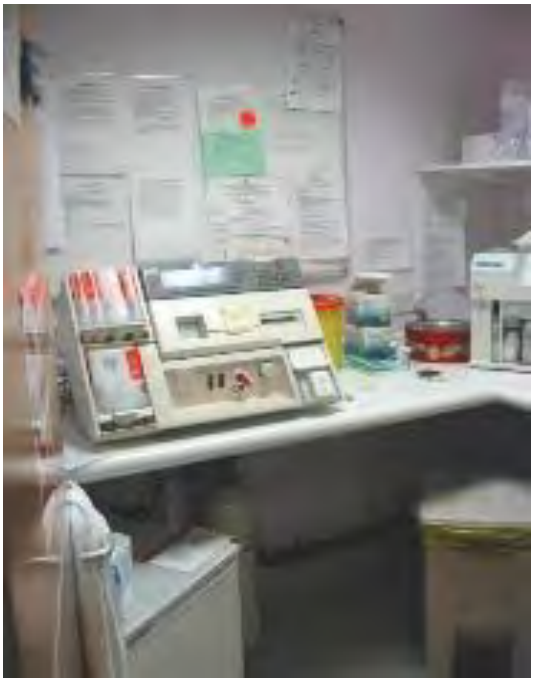

Figure 18: Near-patient testing laboratory with blood gas analyser

Staff changing

7.51 Changing facilities are required for a minimum of 30 females and 20 males in an eight-bed CCA. The precise requirement will depend on both bed numbers and case mix, level three patients requiring approximately twice as many nurses as level 2 patients. The number of WCs and showers should be calculated on the basis of the number of staff using the facility but a minimum of two WCs/showers is recommended for each changing room. For further guidance see SBSA Technical Handbooks.

7.52 Space is required for changing, clothes storage, showers and sanitary facilities. Estimates of changing space and locker provision should take into account the numbers of full-time and part-time staff, including trainees and students. Separate changing rooms for males and females must be provided; each with its own shower room(s), hand-wash basins, shaving point, power-points for hair dryers and a large well-illuminated mirror with a shelf. The sanitary and shower facilities should be provided in self-contained spaces with full-height partitions to provide maximum privacy. Cubicle partitions are no longer acceptable.

7.53 Steps should be taken to ensure the security of personal belongings left in the staff changing area. Code-entry lockers are needed for permanent staff. A number of coin-operated, returnable lockers should be available for transient visitors. Access to the area should be controlled by a close proximity card system.

7.54 Additional space is required for the storage and disposal of scrub suits and footwear. Mechanical ventilation is required to provide sufficient air changes.

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Staff rest room/beverage bay

7.55 The staff rest room may be used for meal, tea and coffee breaks. Account should be taken of the total number of staff working in the area and also the effect of shift overlaps. The rest room should be large enough to incorporate a galley kitchen, with an integral dining area and additional space for sitting comfortably in easy chairs. It should have natural daylight and an outside view. Access should be controlled via a close proximity card system to ensure personal safety. A call system is essential to recall staff to the clinical area in case of an emergency.

7.56 Facilities are required for making beverages and snacks and for washing-up. The room should include a sink/drainer, refrigerator, dishwasher, microwave oven, toaster, drinks machine and storage space for crockery and dry goods. A separate wash hand basin is required. The beverage bay may be provided as a separate space off, or adjacent to, the staff rest room, but it is normally designed as an integral part of the rest room.

Figure 19: Comfortable and spacious staff rest rooms are essential

On-call facilities

7.57 Doctor's on-call facilities are required within the unit and may be provided separately or in combination with one of the doctor's offices. Facilities should include a bed, en suite shower/WC, clothes storage, a wash hand basin, a desk and chair and a computer with Internet access. This space should be linked into the staff communication system. The room should be protected from noise by location and the use of double doors and sound-reducing materials. Natural light is essential for all staff areas.

Facilities for relatives – waiting area, overnight stay, pantry

7.58 Both day and overnight stay facilities for relatives are required. The latter may be provided elsewhere in the hospital or off-site as previously discussed (see

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paragraphs 5.3–5.5). The accommodation should comprise single bedrooms with en-suite shower, WC and wash facilities.

7.59 A designated interview room is required where counselling with relatives can take place. This room should have its own en-suite WC. The room should have a direct exit to the hospital street without passing through the CCA.

7.60 A second room is required for use as a sitting room for relatives to wait and should have comfortable seating and a television.

7.61 Adjacent to the sitting room should be a separate pantry for preparing snacks and drinks.

7.62 All these rooms should be located close to the waiting area so that they share the sanitary and telephone facilities.

Office accommodation

7.63 Activities requiring office accommodation include administration, interviewing of staff, telephoning, teaching and research work. All offices should have windows and natural ventilation. The following offices are required.

Clinical director's office

7.64 This office should include a desk with a networked computer terminal with Internet access and points for telephone and fax transmission. Discussions take place here with other members of staff, therefore space for additional chairs is needed, numbers based on local requirements.

Manager's office

7.65 The manager's office is similar to the clinical director's office.

Clinical staff office/IT resource room

7.66 Facilities are required to allow 'hot-desking' by clinical staff. At least four networked computer terminals are required with Internet access and points for telephone and fax transmission. This room should also provide facilities for self-education and study.

Outreach office

7.67 An outreach office is required for use by the outreach team. This room should be large enough to accommodate two members of staff along with computer and telecommunications equipment. There should be sufficient space to accommodate one visitor.

Teaching and research office

7.68 This room should be large enough to accommodate two members of staff with computer and telecommunications equipment as well as room for one visitor.

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Meeting/interview room

7.69 A meeting room is required to seat a maximum of six, with comfortable furnishings for staff interviews and meetings. It is unnecessary to include a desk and there should be no telephone; however an emergency call system operated from the communications base within the clinical area, should be provided.

Seminar room

7.70 A seminar room should be provided within, or adjacent to, the CCA. The space should accommodate at least 20 people and contain slide and computer projection facilities, wallboards, imaging viewing facilities, computer terminals with access to the Internet and local colour printers, along with secure storage for audio-visual aids, computer equipment and printers. An intercom system should be installed between the seminar room and the clinical area to recall staff in an emergency. The hospital education centre is used for other more formal and programmed teaching events such as a skills laboratory.

Battery/uninterrupted power supply room

7.71 A room is required to house the UPS to the essential electrical supply to patient ventilators and monitoring equipment. The room should be ventilated and kept locked at all times, with access only permitted for Estates staff. The room may also be used to house the data hub for the CCA. Monitoring of the UPS status is advised; this may be connected to the communications base monitoring equipment where appropriate. The use of centralised rather than distributive UPS arrangements within CCAs should be considered in view of the likely security and maintenance advantages.

7.72 Care should be taken to ensure that lighting circuits as well as specialist power supplies within critical care are provided with adequate UPS to ensure that lighting is maintained at all times.

Cleaner's room

7.73 A ventilated, lockable storeroom is required for the storage of cleaning supplies and domestic equipment. Facilities should be provided in this space for filling and emptying cleaning equipment via a bucket sink with hot and cold running water. A sluice hopper for the disposal of soiled mop water, a sink for washing soiled mop buckets and a drainer should be provided, as well as a separate hand-wash basin. Disposable mop heads should be used. Electrical socket outlets should also be installed. (See 'The Control of Substances Hazardous to Health – Guidance for the Initial Assessment in Hospitals' (1999) relating to safe storage and use of chemicals and cleaning materials.)

Switch cupboard

7.74 The departmental switch cupboard, which houses the main isolators and distribution fuse switchgear, should be:

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- sited within the department;
- accessible directly from a circulation area providing clear and safe access for maintenance staff (access space may be part of the circulation area);
- sited away from water services; and
- lockable.

7.75 Care should be taken with the design to ensure that safety is not compromised during maintenance procedures, either from passing traffic or by the opening of adjacent doors.

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8. Engineering services

Introduction

8.1 This Chapter describes specific engineering services requirements for critical care areas (CCAs). It complements the general engineering services guidance given in SHPN 03: 'General design guidance' and other relevant SHTMs. The combined guidance should not inhibit the design solution, but will acquaint the engineering members of the multi-disciplinary design team with the design criteria and material specification needs to meet the functional requirements. Specific requirements should be formulated in discussion with both end-users and manufacturers of specialist equipment. Some issues, particularly those relating to radiation safety, require specific and detailed discussion with other professional consultants, including the local radiation protection advisor (RDA).

8.2 Given the complexity of the critical equipment and systems, and the dependency of patients on them, it is important that the project team has a clear understanding of the risks that are being managed by the physical, fixed installation. By adopting a comprehensive risk management approach to the design, the project team will be able to demonstrate an appropriate level of investment in the engineering services and infrastructure necessary to support the department.

8.3 This risk management approach extends beyond the normal requirements of the Construction (Design and Management) (Amendment) Regulations 2005 and requires the design to be fully integrated within the control assurance framework for risk management. Clear design philosophies should be developed and agreed with the project team that enable the users to understand how risks are being managed within the built environment, through facilities management support and by the actions of the local team. These philosophies can be developed to refine the operational policies of the department and provide an effective briefing and monitoring mechanism throughout the design, construction, commissioning and operational phases of the area.

Maximum demands

8.4 As a guide and for preliminary planning purposes only, the table below gives the estimated maximum demands for an eight-bed area.

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Service	Typical maximum demand	Notes
Heating/ventilation/DHWS (kW)	90	
Domestic HWS (l/s)	1.8	720 litres storage (2 hours recovery)
Cold water (l/s)	2.6	4,000 litres storage
Supply ventilation (m3/s)	2.26 (or as required for filtered supply)	(24-hour supply)
Extract ventilation (m3/s)	2.34	Clean and dirty
Cooling (kW)	33	
Electrical (kVA)	18	Includes essential 9kVA
Medical gases (l/min)		
Oxygen	160	
Medical compressed air	300	
Vacuum	100	
Nitrous oxide*	60	Project option. Anaesthetic gas scavenging (AGS) required.

**Nitrous oxide is provided only in very exceptional circumstances*

Environmental requirements

8.5 Detailed environmental requirements for specialist equipment should be obtained from manufacturers. The comfort of patients and staff should be considered in respect of temperature stability and the effects of waste heat derived from high-powered diagnostic or treatment systems. Risks to patients, staff and equipment associated with inappropriate environmental conditions need to be clearly identified and the level of investment in physical infrastructure agreed with clinicians.

Safety

8.6 The Ionising Radiation (Medical Exposure) Regulations 2000 and the associated Codes of Practice place onerous requirements upon engineering aspects of design and operational practices. Over and above this, there are additional requirements from the 1993 Radioactive Substances Act in respect of storage, use and disposal of radioactive materials. The local radiation protection adviser and custodian of radioactive substances must be consulted.

Noise and speech privacy

8.7 In addition to designing for control of noise, there may also be a need to ensure speech privacy, so that confidential conversations are unintelligible in adjoining

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rooms or spaces. This is important in office areas and at the communications base. The use of induction loop facilities for those with hearing impairment should be considered, but the provision for privacy should equal that granted to able-bodied persons.

Location of electrical and medical gas outlets

8.8 Electrical power, data cabling and medical gas outlets should be provided at each bed-space from the ceiling or floor via a medical supply unit suspended from the building structure. Medical supply units are articulated arms that can support items of equipment such as infusion pumps. The second arm supports larger items of equipment such as ventilators. The two arms can accommodate a large number of electrical and medical gas outlets. A smaller telescopic arm at the foot of the bed accommodates a communication link for computerised data collection and a television for the patient.

Mechanical services

Heating

8.9 In providing appropriate environmental conditions, the designer must review with the project team the full range of clinical activity proposed within the area.

8.10 Patients are often lightly clad in a CCA, so a thermo-neutral temperature is required. Heating should be designed for continuous operation all year round. Should small children need to be accommodated, parameters including environmental temperature will need to be reviewed.

8.11 Clinical areas should have a choice of temperature from 16ºC to 27ºC. Staff areas should be between 18ºC and 21ºC, apart from the dirty utility (16ºC) and stores (10ºC). The temperature in the area of the drugs cupboards must not exceed 20ºC. Unless specified, most crystalloid fluids for intravenous use can be stored at temperatures up to 25ºC. Each area has independent zone control to achieve the required temperatures.

Ventilation

General

8.12 Mechanical ventilation should ensure that both supply and extract systems are in balance, and take account of infiltration as appropriate.

8.13 The ventilation supply plant should include air filters with a minimum arrestance of 85% when tested in accordance with BS EN 779. The extent of filtration should reflect clinical requirements and operational estate needs. In urban or other areas of high atmospheric pollution, a higher standard of filtration may be economically justified to reduce the level of staining to internal finishes. Filters

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must be readily accessible for replacement and should be provided with a pressure differential indicator.

Multi-bed areas

8.14 Bed-spaces and surrounding areas require to have mechanical ventilation with cooling to ensure maximum temperatures are not exceeded. The extent of air change within this area should be agreed with clinical representatives to enable safe and effective clinical and nursing practices to be implemented.

Single bedrooms

8.15 The mechanical ventilation with cooling to ensure maximum temperatures are not exceeded for single bedrooms should be designed to provide a 'simultaneous source and protective isolation'. A simple non-changeover system that provides balanced supply and extract ventilation to each single bedroom and gowning lobby is proposed. A 'constant mode' system has a number of advantages and avoids the complications and reliability problems associated with changeover systems.

8.16 A single bedroom may require humidity within the range of 40-60% Rh, depending on the speciality.

8.17 The lobby, which functions as an airlock, requires a relatively high and balanced supply and extract air change rate to be effective against airborne organisms moving between circulation areas and single bedrooms. For this reason, the lobby should be relatively small.

8.18 The ventilation system dilutes the air entrained from the corridor when staff wash their hands in the lobby. Further entrainment and dilution occur as staff move from the lobby to the single bedroom. The amount of air and number of organisms transferred from the corridor to the single bedroom through this process should be exceptionally low and is inversely proportional to the time spent 'gowning up'. The reverse applies as staff leave the single bedroom.

8.19 The layout of ventilation grilles should be co-ordinated with adjacent engineering services and designed to minimise the risk of patient discomfort.

Ventilation controls

8.20 The mechanical ventilation heating and cooling system usually controls the space temperature within the multi-bed areas and single bedrooms. The temperature in the multi-bed areas should be centrally controlled, whereas single bedrooms should have local temperature controls that are accessible to nursing staff. Facilities for temperature adjustment should be provided to parameters agreed with clinical representatives on the project team.

8.21 Supply and extract ventilation systems should include controls and indicator lamps in the plant room to confirm the operational status of each system. Where a system is used in a regular daily pattern, time switch control with manual override for a limited period should be considered. The indicators for a system

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serving a particular space should be in or immediately adjacent to that space. It may be appropriate to locate all indicators at the communications base. Where manual controls are available for staff use, they should be provided with labels that clearly define their function. Alarms should be repeated in the works department. Their selection should take account of the extent to which they can be linked to, or provided by, a BMS serving the whole hospital. The strategy for local control and monitoring of environmental conditions needs to be agreed with the project team to ensure that users have sufficient information and control to provide appropriate patient care.

Hot, cold and drinking water services

8.22 Prior to undertaking the design of the hot and cold water services supplying critical care facilities, the project team should undertake a risk assessment of the susceptibility of patients, given the range of treatments provided.

8.23 This risk assessment should identify any special measures required in the physical infrastructure and operational policies necessary to minimise the risk of legionellae. Whole site policies need to be established with regard to the prevention of legionellae, including the pasteurisation or chlorination of pipework systems and the use of water treatment processes (for example, chlorine dioxide and silver ion injection). Their potential impact upon patient care should be assessed with the project team and appropriate risk minimisation actions taken.

8.24 The design of the pipework systems should enable the maintenance of the water systems in accordance with SHTM requirements with a minimal adverse effect upon patient care, as agreed with the project team. This will affect the routing of pipework, location of valves and zoning of the systems. Where water services supplying critical care facilities are connected to an existing hospital system, facilities should be provided for the safe connection and isolation of pipework systems in CCAs.

8.25 Architects and engineers should collaborate to ensure any landscape design/water features are included in the design and form part of the risk assessment process for water services.

Dialysis

8.26 Haemodialysis rarely used today in CCAs. Haemofiltration is used more extensively because of simplicity of use and reduced service requirements. However if local policy dictates that haemodialysis is undertaken in a CCA, water and drainage should be piped to each bed-space. The specification for the performance of the water quality service should be agreed with the project team. For initial planning purposes, designers may wish to use the following information:

- the quality of the water for haemodialysis should comply with ISO TC 15O/SC 2/WG5 – ‘Renal Replacement, Detoxification and Apheresis’ (under development);

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- water treatment normally consists of water-softening, particle filters and reverse osmosis.

8.27 As there are a small number of dialysis machines in a CCA, it is more economical to supply potable water to small water treatment units at the bedspace. By providing centralised cold water storage tanks with sealed lids and screened vents all water is categorised as 'potable' thus ensuring flexibility should additional outlets be required in future.

8.28 As part of the risk assessment process, the impact of water leakages within the bed-space should be identified and their potential impact upon other critical engineering services minimised.

Piped medical gases

8.29 Piped medical gases must be located at every bed-space and include oxygen, medical compressed air and vacuum. Optionally, nitrous oxide and anaesthetic gas scavenging (AGS) may also be provided. Services to the bed-space should be duplicated in the equipment service room. Guidance on piped medical gases systems and gas storage is contained in SHTM 2022: 'Medical gas pipeline systems'. Dual circuitry and area valve service units should be provided in accordance with SHTM 2022.

8.30 The extent of medical gases provision should reflect the clinical and nursing requirements identified by the project team, including the provision of standby arrangements. The design of the medical gas pipeline systems (MGPS), including data on the planned use of medical gases (both initial and projected), the provision of isolation of valves and local/central pressure monitoring arrangements and alarms, should be agreed with the authorised person (MGPS) for the site.

8.31 For medical oxygen systems consideration may be given to the use of a local backup automatic manifold, installed downstream of the department AVSU in accordance with SHTM 2022. This should constitute part of the emergency and contingency planning process.

Pneumatic tube transport

8.32 Pneumatic tube transport may provide a viable alternative to porters for moving specimens to the pathology department. Pneumatic tube transport may also be provided to the pharmacy department. Factors to be assessed include:

- distance, time and cost of travel between the two locations;
- time to process specimens in the laboratory;
- proportion of specimens that require urgent results;
- whether general post, etc. will be transported in the system;
- security of data.

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8.33 Further guidance on pneumatic conveyor systems is contained in SHTM 2009: 'Pneumatic air tube transport systems'.

8.34 Care should be taken in the design of these systems to zone or group client and supplier in a way that promotes an efficient service.

Electrical services

Lighting

8.35 The selection of luminaries with appropriate colour-rendering lamps is crucial to the appropriate diagnosis of patients. If a particular colour temperature has been standardised in critical departments, including theatres, consideration should be given to continuing this strategy within CCAs. This avoids perceptions of changing patient status under differing colour temperature lamps. If the existing colour temperature does not ensure accurate patient monitoring, the most appropriate temperature lamps should be selected.

8.36 Given the extensive use of electronic equipment within CCAs, low-glare lighting solutions are important, including the use of uplighters and luminaires with glare control features.

8.37 Wherever possible, luminaires should incorporate a fused terminal block that permits safe isolation of the luminaires for lamp-changing and maintenance activities, without the need for prolonged loss of light owing to the isolation of a complete lighting circuit.

8.38 Each bed-space should be illuminated by luminaires located above and behind the bedhead to achieve the appropriate levels of illumination for task activities, patient comfort and safe use of circulation spaces. Dimmer switches capable of providing appropriate illumination at all times should control the luminaires. The extent of dimming required by users, combined with the need to control the effects of electromagnetic interference, will affect the choice of control gear arrangements. Additional luminaires should be provided within the general circulation space of the multi-bed area and dimmer switches should also control these. Local luminaires, controlled by dimmer switches, should be provided at the communications base.

8.39 In the design of lighting circuits, designers should consider the impact that isolation of individual lighting circuits will have upon an operational area. These proposals should be agreed with the project team and estates manager to ensure that the design properly reflects local maintenance and operational policies.

8.40 Mobile examination luminaires, where provided, should operate at extra low voltage, normally fed from an in-built step-down transformer, be totally enclosed and be equipped with a heat filter. The temperature of external surfaces should be such as to avoid injury to patients and staff. Given the extent of services for equipment provided in these key clinical areas, designers need to ensure that

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the introduction of these luminaires will not adversely affect the ability of users to provide appropriate patient care.

8.41 The planning and design team should ensure that the provision of emergency lighting and alternative equipment, torches etc, reflects the emergency procedures and contingency planning processes developed for the CCA, to enable the provision of a safe level of care at all times.

Controlled drugs cupboard

8.42 Wherever possible, the warning and indication system for the controlled drugs cupboard should operate at extra low voltage and form part of the nurse call communication system operating within the area.

8.43 There should be a mute facility provided at the communications base to accept the audible indication. This facility should automatically reset once the cupboard door is closed.

Socket-outlets and power connections

8.44 Socket-outlets in each bed-space should be unswitched and attached to the medical supply unit. The use of UPS systems should be considered, mainly to safeguard the data facilities on medical equipment. These systems are usually available as part of the EME design specification on the equipment. Primarily, the electrical distribution in Group 2 locations will be supported by a class 15 medium break automatic supply, available within 15 seconds (IEC 60364-555). Where UPS socket-outlet supplies are used, they should be clearly marked at the source and outlets to differentiate them from those used for non-medical purposes. Waterproof floor sockets may be used underneath the bed space where necessary following appropriate risk assessment.

8.45 Designers should ensure that they have access to a complete schedule of the equipment that requires electrical supplies and a clear understanding of the operational policies regarding the use of this equipment. In particular, information regarding the provision of monitoring, life-support equipment and that needed for near-patient testing equipment should be available.

8.46 Designers should agree with the project team on the location, type (flush or surface-mounted), form of indication, internal power rating, construction, type of cable outlet, facilities for locking of isolator in off position and labelling of such isolators.

8.47 The selection of faceplate material, metal or plastic, and manufacturer should be discussed with the estates manager to reflect the whole hospital policy on electrical outlet provision.

8.48 Heating appliances and automatic equipment should have indicator lights to show when they are energised. Indicators should be incorporated in the control panel of the apparatus, in the control switch or in the socket-outlet from which the apparatus derives its supply.

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8.49 The electrical supply connections to electro-medical equipment should comply with BS5724 and the relevant SHTMs. Depending on local circumstances, consideration may need to be given to the quality of the electrical supply to computer and other equipment. Much equipment has over-voltage and surge protection built in, but susceptibility to harmonics and other supply distortion should be discussed with the manufacturer to establish the parameters required. Additional power-factor correction should be built-in as required.

8.50 Socket-outlets in areas for consultation, examination or treatment and areas where imaging films are processed, reported on or stored, should be connected so that within each area a supply from at least two separately fused circuits of the same phase is available.

8.51 Isolation switches should be provided adjacent to all engineering plant and equipment for use by maintenance staff. The location, type and facilities provided for the isolation of switches should be agreed with the senior authorised person (low voltage) to ensure that the fixed installation enables whole-hospital policies on low-voltage operations (SHTM 2020: 'Electrical safety code for low voltage systems') to be maintained in the CCA.

Socket-outlets for minor scheduled servicing of medical equipment

8.52 Socket-outlets for user servicing of medical equipment (see MDA DB 9801) within a designated area of the equipment service room may also be used by a visiting EME technician to carry out minor scheduled servicing. The layout within the designated area should therefore ensure that no adventitiously earthed metallic structure, such as radiators or pipes, is within easy reach of the operator sitting at the bench. The floor within this area should be covered with a rubber mat.

8.53 Shuttered socket-outlets should be connected via an emergency trip. This circuit should be protected by a core balance earth leakage protective device with a nominal tripping current not exceeding 15mA and complying with the requirements of BS EN 61008. In addition, a master emergency trip should be provided outside the entrance to the room. A shrouded earth terminal should also be provided at one end of the bench. The socket-outlets should be mounted in plastic trunking and all metallic fixings should be isolated from earth.

8.54 A plastic chain and stanchion or equivalent should be available to enclose the designated area when the visiting technician is carrying out 'live working procedures'. Socket-outlets outside this area should have a notice warning that earth leakage protection is not provided.

Electrical supplies to diagnostic equipment

8.55 The electrical supply connections to all medical electrical equipment should comply with BS EN 60601-1-2. Advice on the power supply and requirements for fixed and mobile radiodiagnostic equipment is contained in SHTM 2007: 'Electrical services: supply and distribution'. Individual project requirements

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should be discussed at an early stage with manufacturers and suppliers of equipment.

8.56 The earth connection at the power termination should be suitable for the functional earth requirements specified by the radiology equipment manufacturer, and be arranged to receive a direct connection from the earth reference terminal, which should be provided or designated in every radiodiagnostic room. Further guidance on the purpose, characteristics and performance criteria of an earth reference terminal are given in SHTM 2007.

Emergency electrical supplies

8.57 Guidance on emergency electricity supplies is contained in SHTM 2011: 'Emergency electrical services'. Requirements for connection of individual circuits and items of equipment to UPS and/or standby generation systems should be discussed with users and with equipment suppliers. Designers should undertake a risk assessment with the project team to identify the operational impact. The risk assessment should identify how risk will be mitigated using the fixed installation, business continuity and contingency planning elements of the agreed operational policies.

8.58 Socket-outlets connected to 'essential circuits' include those on the medical supply units and at the communications base. The supply to the controlled drugs cupboard should also be from an essential circuit. All critical infrastructure including security, communication, clock and alarm systems should be supplied from essential circuits.

Specialist security, alarm and communication systems

8.59 Given the nature of the care provided in CCAs, these areas contain a number of specialist security, alarm and communication systems. In developing the scope for each system, designers should work closely with the project team to identify the operational philosophy of each system and how it will interact or impact upon other systems. Designers should agree with the project team how these systems will operate in special circumstances, including mains failure and fire alarm conditions.

8.60 This information should be collated into a comprehensive document outlining the communication strategy for the CCA, to ensure that the fixed installation and operational policies and procedures for staff support the delivery of effective patient care. The following information is provided on individual systems that may form part of this overall communication strategy.

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Entrance door security system

8.61 A door security intercommunication system is required between the communications base and entrance to the ward to prevent unauthorised entry, while permitting the free movement of staff. The system should enable verbal communication with the reception/clerical office. An electromagnetically operated door lock should also be controlled from this area.

8.62 An override, located inside the entrance, is required to provide staff with a convenient exit route for normal work or in the event of fire. As a back-up, an emergency break glass override should also be provided adjacent to the final exit door or any other electronically locked door. Consideration should be given to the integration of this facility with the whole-site security systems, including security passes with proximity card facilities. A separate locking device is required.

Personal alarm transmitters

8.63 Local security policies should determine at the planning stage whether or not staff are to be issued with personal alarm transmitters. If personal alarm transmitters are not 'self-contained', conduits and accommodation for transmitting and receiving equipment and propagating devices, such as induction loops and/or aerials, are required to suit the selected system. The design of the system should be agreed with the project team to ensure that the risk of inappropriate operation, missed or false calls, and adverse interaction with other equipment systems in the CCA is minimised.

8.64 The location of warning indication should be agreed with the project team and reflect whole site security policy. Facilities for the off-line testing of transmitters should be provided to enable staff to check while in the department that their transmitter is fully operational.

8.65 Where operational policies require the transmitters to remain within the department, facilities should be provided for their safe storage under constant monitoring and for the provision of sufficient spare devices to enable maintenance of units to be undertaken without prejudice to staff security.

Security alarms

8.66 It may be necessary to install a security alarm-actuating switch or button unobtrusively at the reception desk and communications base. It should be connected to a continuously staffed area such as the hospital telephone switchboard or the porter's room. Guidance should be sought from the project team and end-users on the location, operation and function of this facility.

Staff/staff call systems

8.67 Selection of equipment should reflect whole site policy on call systems and it should be possible to integrate the service with bedside patient entertainment/information systems.

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Staff location and emergency systems

8.68 A separate pull-push switch should be located at each medical supply unit to initiate the special emergency (CRASH) group call arrangements to predetermined receivers. These pull-push switches should form part of the staff/staff call system and should override existing calls on the system. The emergency group call system should interface with the paging system to ensure automatic paging of predetermined receivers without involving the telephone operator. The interface module (emergency call to the paging system) should be located in the CCA's switch cupboard and should be hand-wired to the paging system decoder(s) located in the telephone operator's room.

Telephone wiring

8.69 Central telephone facilities for internal and external calls are normally available and should be extended to serve the CCA. Telephones are normally of the desk pattern, except for those located on pendants. They should be fitted with muting switches and visual indicators.

8.70 At least one ex-directory line should connect directly with the local ambulance services control centre, depending on local policy. It must be located in the communications base and have a visual indicator.

8.71 Outlets and acoustic hoods should be provided for fixed payphones for the use of staff and visitors, located to meet the requirements of the Disability Discrimination Act 1995 and 2005. The handset of payphones should be fitted with an inductive coupler to assist people using a hearing aid.

Data and equipment links

8.72 Conduits may be required to link CCTV between the control areas and treatment areas/offices.

CCTV

8.73 Security CCTV may be required to interface to the whole hospital system. The interference to which such equipment may be subject should be taken into account when it is specified, to ensure acceptable electromagnetic compatibility. Care should be taken in the positioning of monitors in order to preserve patient privacy.

Physiological monitoring equipment

8.74 Conduits for automated physiological monitoring should be provided at each bed-space and communications base. A separate conduit/trunking network is required to avoid electrical interference.

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Clocks

8.75 Clocks may be of impulse, synchronous or battery/quartz type, except in any bed-space areas where they should display ‘real time’, ‘elapsed time’ and have a sweep second hand.

Transfer of equipment to installation site

8.76 The method used to bring diagnostic equipment into a department may need to be carefully considered. Although the majority of diagnostic imaging equipment is broken down into modules for transportation and then re-assembled on site, these modules can be large and in some cases have masses that exceed 1-2 tonnes. The equipment is usually transferred in wooden crates, which has the effect of increasing the overall dimensions. The designers of this facility and estates managers must therefore consider at an early stage how the equipment will be delivered and transported to the proposed CCU facilities location. Care needs to be taken over the width and height of doors, loading specifications for floors and the turning circles of equipment.

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9. Schedules of accommodation

9.1 The up-to-date schedules of accommodation for equivalent HBN's are listed on the Knowledge and Information Portal website. They are illustrative of the acceptable accommodation for the functional units detailed.

9.2 The Schedules include Essential Complementary Accommodation (ECA) and Optional Accommodation and Services (OAS). For a definition of these terms and for an explanation of the use of dimensions and areas and the provision of circulation space, communications space and engineering space, please refer to SHPN 03: General design guidance.

9.3 The schedules have adopted a modular approach to the planning of appropriate units to enable project teams to 'pick and mix' those facilities that are required. Using this modular approach, examples have been built up for 8, 12 and 16 bed CCAs. The areas given are for guide purposes only and will alter depending on the design solution.

9.4 Percentage allowances covering planning, engineering and circulation are also included in the totals. These percentage increases to the nominal areas are included in ECA and optional gross area allowances.

Departmental examples

9.5 The KIP schedules indicate notional whole department accommodation to highlight the scope for sharing accommodation. The examples are not to be taken as ideal provision for any particular project.

Dimensions and areas

9.6 In determining spatial requirements, the essential factor is not the total area provided but the critical dimensions; in other words the dimensions that are critical to the efficient functioning of the activities to be carried out. To assist project teams in preparing detailed design solutions for rooms and spaces, studies have been carried out to establish dimensional requirements in the form of critical dimensions. The results of these studies appear as ergonomic diagrams in Appendix 3.

9.7 For development planning and at the earliest stage of a design, it may be convenient for designers to have data available which will enable them to make an approximate assessment of the sizes involved. For this reason, the areas prepared for the purpose of establishing the costs allowances are listed in the KIP schedules of accommodation.

9.8 Efficient planning of the building may also necessitate variation of areas. For instance, in the refurbishment or conversion of older property:

- rooms tend to be larger than the recommended area;

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- some rooms may be too small or in the wrong location for efficient use;
- circulation space tends to form a larger than normal proportion of the total area.

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Appendix 1: Significant differences between SHPN 27 and SHPN 57

There are substantial differences between this guidance and its predecessor SHPN 27. They are listed below.

The generic terms 'critical care areas' and 'critical care facilities' may be used to describe 'intensive care units', 'intensive therapy units', or 'high-dependency units'. The descriptive terms 'high-dependency' and 'intensive care' used to describe severity of illness have been superseded by a system describing comparable levels of patient dependency – level 2 and level 3 (level 1 equates to ward care). See Appendix 2 for the classification of critical care patients. This guidance has adopted the same nomenclature:

- in a new building, all bespoke critical care facilities should be co-located with the support facilities such as operating theatres, A&E departments, laboratories and imaging suites. In the refurbishment of an existing building, the same principles of co-location should be followed wherever possible;
- the guidance focuses on developing a template for an eight-bed module, but a flexible approach has been taken in order to enable decisions about the total number of bed-spaces to be left to local providers. The guidance differs from SHPN 27 in that the support facilities required to accommodate staff and equipment have increased on a pro-rata basis;
- SHPN 27 produced guidance based on the assumption that the average unit occupancy was 70% and the average length of stay for each patient was 4.3 days. Both these assumptions have proved subsequently to be underestimations;
- this new guidance does not differentiate between the facilities required for HDUs and ICUs. Every CCA should be built and equipped to accommodate both level 2 and level 3 patients because a patient's level of dependency may vary during an episode of critical illness. In 'Comprehensive Critical Care', level 3 patients are described as those "requiring advanced respiratory support alone, or basic respiratory support together with support of at least two organ systems". Level 2 patients are less dependent than those classified as level 3 but "require more detailed observation or intervention, including support for a single failing organ system or post-operative care" (see Appendix 2). Although these definitions of level 2 and level 3 patients have not yet finally been agreed between the experts, this does not pose any difficulty as the facilities required for both groups are exactly the same.

The differentiation between CCAs in a teaching hospital and a district general hospital has been abolished in this guidance. The rationale for this decision is based on the finding that the case mix, severity of illness and the staff establishment (including the transient student population) are similar in both types of hospital.

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Appendix 2: Classification of critical care patients

Reproduced from 'Comprehensive Critical Care' (DoH 2000) and broadly accepted by NHSScotland in 'Better Critical Care'.

Critical care is provided within the continuum of primary, secondary and tertiary care, with the majority of services delivered in the secondary care setting. It is recommended that the existing division into high dependency and intensive care based on beds be replaced by a classification that focuses on the level of care that individual patients need, regardless of location. This is an important addition to existing methods that classify patients by the level of organ support received or simply the type of bed they occupy. This approach should enhance our understanding of the provision of critical care in NHSScotland.

Level 0	Patients whose needs can be met through normal ward care in an acute hospital.
Level 1	Patients at risk of their condition deteriorating, or those recently relocated from higher levels of care, whose needs can be met on an acute ward with additional advice and support from the critical care team.
Level 2	Patients requiring more detailed observation or intervention including support for a single failing organ system or post operative care and those 'stepping down' from higher levels of care.
Level 3	Patients requiring advanced respiratory support alone, or basic respiratory support together with support of at least two organ systems. This level includes all complex patients requiring support for multi-organ failure.

A supplementary classification is proposed in order to identify those patients requiring specialist investigation and treatment such as is usually provided at tertiary referral hospitals. Where patients are cared for by specialist services, one additional letter (reflecting the most significant disorder) should be applied to a patient's level of acuity as follows:

N patients requiring neurosurgical care;

C patients requiring cardiac surgical care;

T patients requiring thoracic surgical care;

B patients requiring burns or plastic surgery care;

S patients requiring spinal unit care;

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R patients requiring renal care;

L patients requiring liver care; and

A patients requiring other specialist care.

The extent to which any individual hospital provides increasing levels of care, or supplementary specialist care, depends on the skills, expertise, specialties and facilities available within the hospital. Services provided should be based on the principle of moving upwards from level 0, to the level which is appropriate to the complexity of patient care needs. For some patients it is necessary to be transferred to another hospital where more complex clinical needs can be met.

All acute hospitals carrying out elective surgery must be able to provide level 2 care. They should either have level 3 care available on site or they should have protocols in place to arrange transfer to a suitable unit. Hospitals admitting emergencies should normally have all levels of care available, although in a limited number of cases, protocols may be agreed for the safe transfer to an adjacent hospital for level 3 care.

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Appendix 3: Room layouts

Plan 1	Bed-space
Plan 2	Bed-space
Plan 3	Single bedroom
Plan 4	Single bedroom
Plan 5	Communications base
Plan 6	Clean utility
Plan 7	Near-patient testing laboratory
Plan 8	Dirty utility/clinical equipment service room and store
Plan 9	Bulk store

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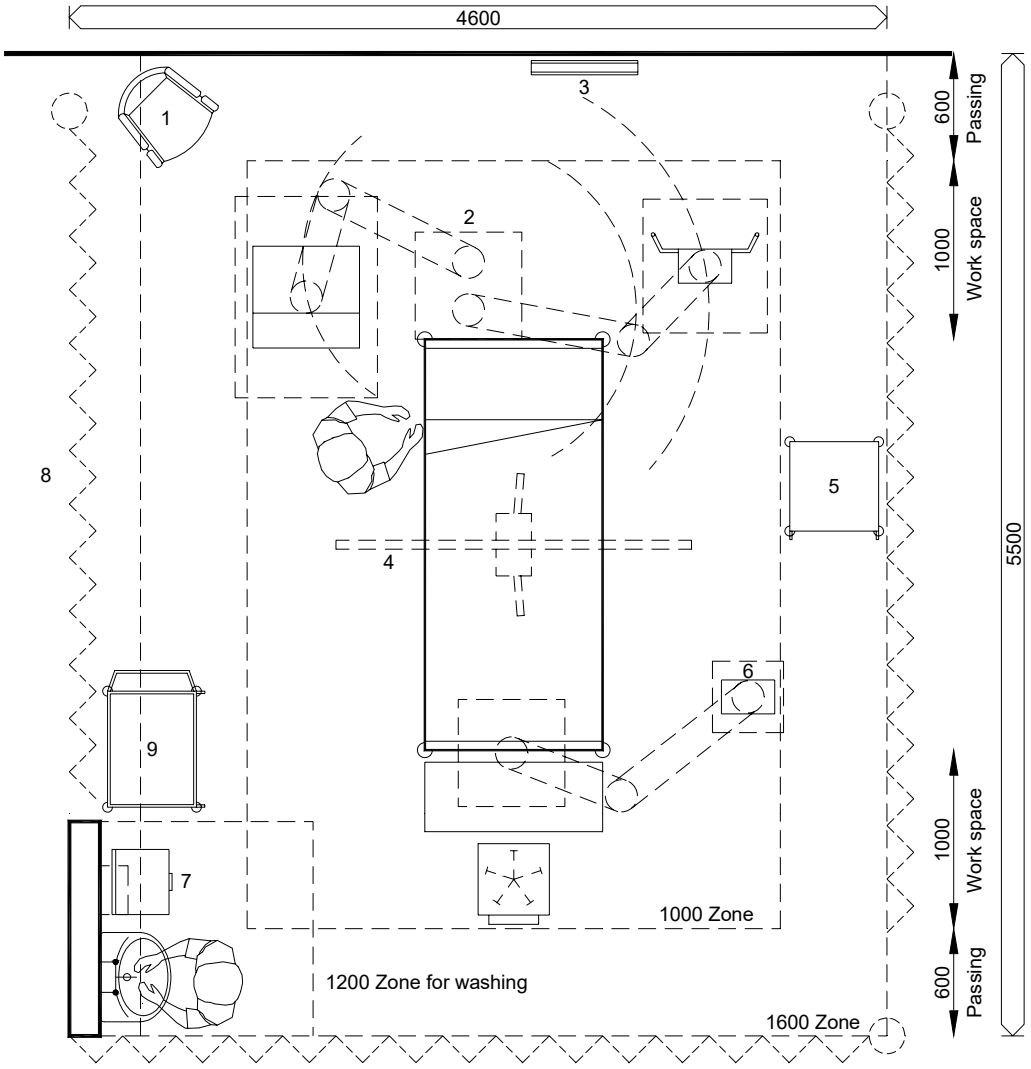

Floor space for manoeuvring, parking and working around large items of equipment associated with diagnostic imaging and haemofiltration etc.

LEGEND

1. Relatives' comfortable stacking chairs that can be easily cleaned. These should be stored at the bedside but outside the 1600 zone.
2. Pendant.
3. Whiteboard.
4. Overhead hoist
5. Dressing trolley.
6. Data pendant
7. Clinical wash-hand basin facilities with hands free taps.
8. Lead/uPVC protective curtain..
9. HTM 71 supplies trolley.

Notes:

1350
Indicative Key Dimensions

0 1 2 3 4m
Scale

Accommodation for a patient requiring medical and nursing care using multi-parameter monitoring and life-support systems. Sufficient space is required around the bed for six members of staff to circulate to carry out procedures and for equipment, such as mobile X-ray and haemofiltration equipment, to be manoeuvred and parked and worked around.

See PLAN 10 for further specification details.

NORMAN RAITT ARCHITECT

FLOOR AREA 25.30 sq.m.

All sizes in mm

PLAN 1	BED SPACE Alternative 1 layout

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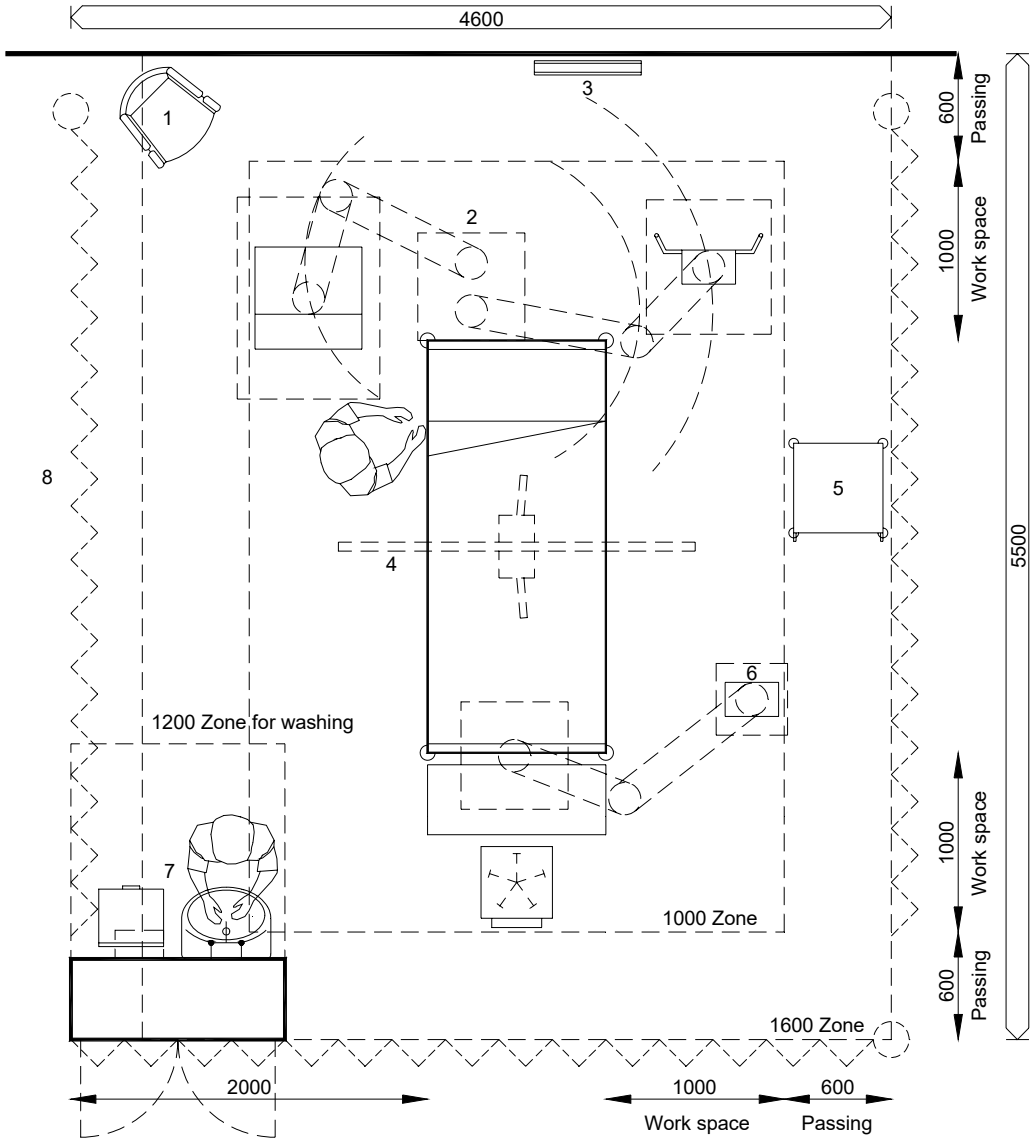

Floor space for manoeuvring, parking and working around large items of equipment associated with diagnostic imaging and haemofiltration etc.

LEGEND

1. Relatives' comfortable stacking chairs that can be easily cleaned. These should be stored at the bedside but outside the 1600 zone.
2. Pendant.
3. Whiteboard.
4. Overhead hoist
5. Dressing trolley.
6. Data pendant
7. Clinical wash-hand basin facilities with hands free taps and storage unit.
8. Lead/uPVC protective curtain..

Notes:

1350

Indicative Key Dimensions

0 1 2 3 4m

Scale

Accommodation for a patient requiring medical and nursing care using multi-parameter monitoring and life-support systems. Sufficient space is required around the bed for six members of staff to circulate to carry out procedures and for equipment, such as mobile X-ray and haemofiltration equipment, to be manoeuvred and parked and worked around.

See PLAN 10 for further specification details.

NORMAN RAITT ARCHITECT

FLOOR AREA 25.30 sq.m.

All sizes in mm

PLAN 2	BED SPACE Alternative 2 layout

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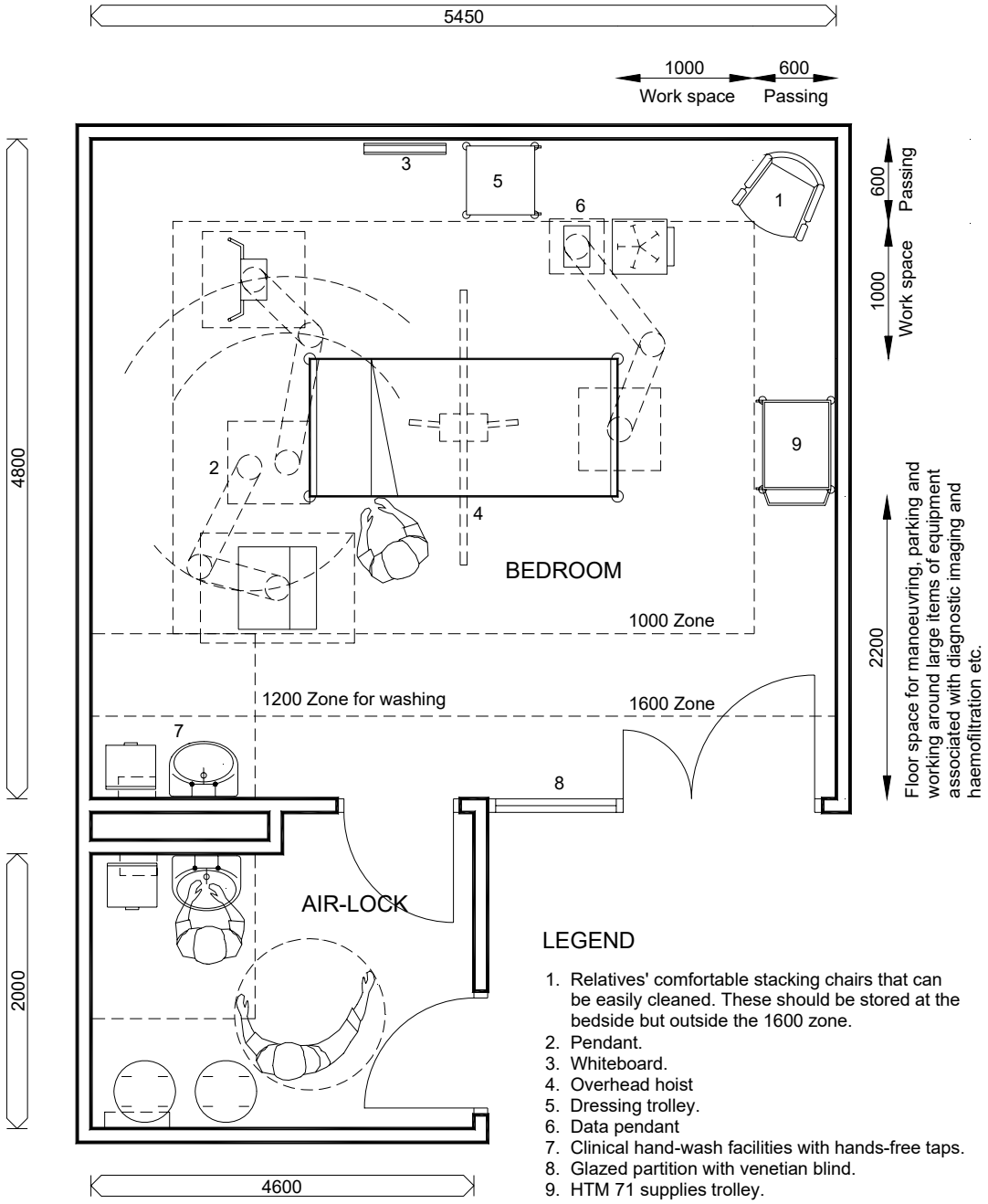

LEGEND

1. Relatives' comfortable stacking chairs that can be easily cleaned. These should be stored at the bedside but outside the 1600 zone.
2. Pendant.
3. Whiteboard.
4. Overhead hoist
5. Dressing trolley.
6. Data pendant
7. Clinical hand-wash facilities with hands-free taps.
8. Glazed partition with venetian blind.
9. HTM 71 supplies trolley.

Notes:

1350
Indicative Key Dimensions

0 1 2 3 4m
Scale

Accommodation for a patient requiring medical and nursing care using multi-parameter monitoring and life-support systems. Sufficient space is required around the bed for six members of staff to circulate to carry out procedures and for equipment, such as mobile X-ray and haemofiltration equipment, to be manoeuvred and parked and worked around.

See PLAN 10 for further specification details.

NORMAN RAITT ARCHITECT

FLOOR AREA (bedroom) 26.16 sq.m.
FLOOR AREA (air-lock) 6.00 sq.m.

All sizes in mm

PLAN 3	SINGLE BEDROOM Alternative 1 layout

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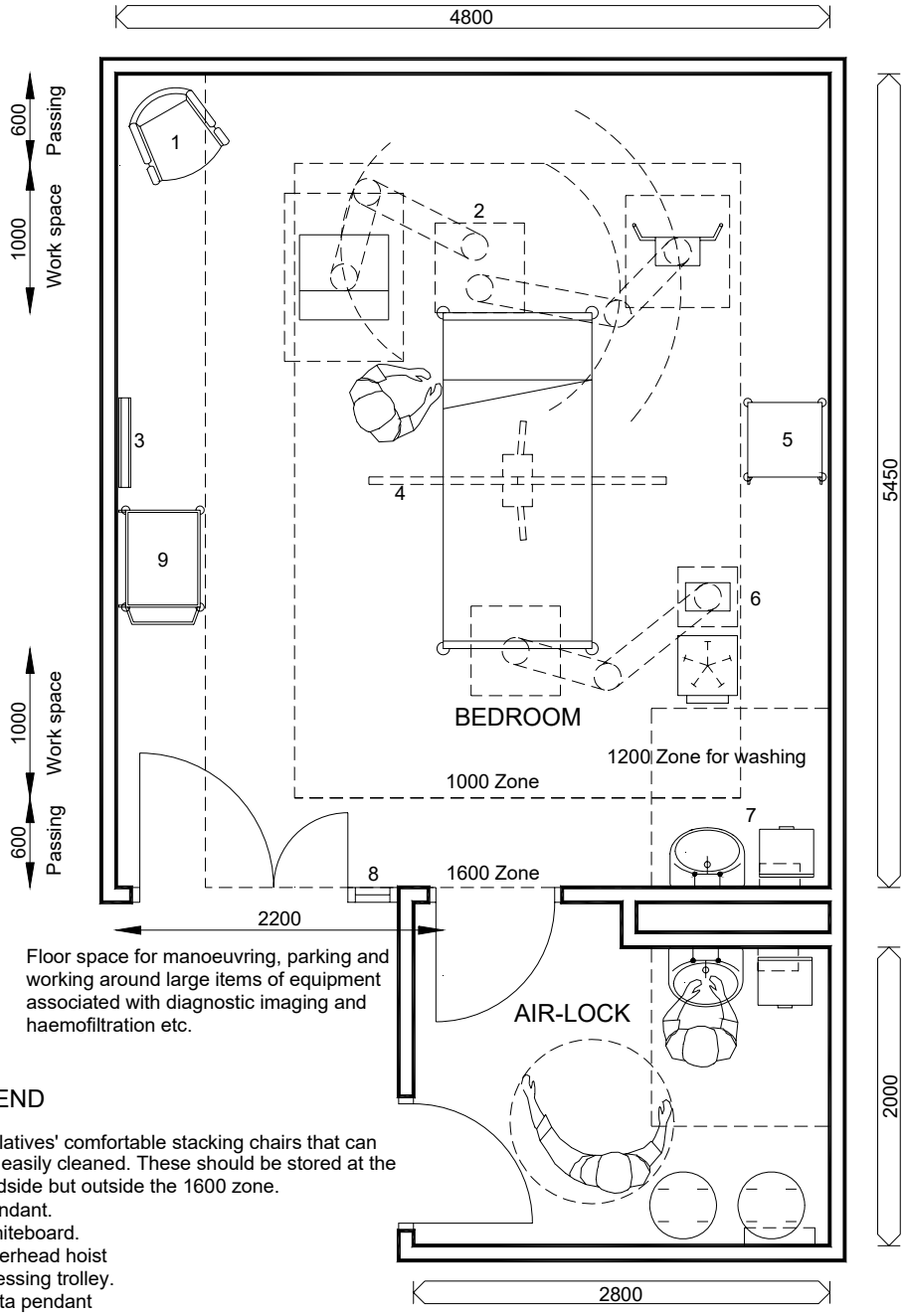

LEGEND

1. Relatives' comfortable stacking chairs that can be easily cleaned. These should be stored at the bedside but outside the 1600 zone.
2. Pendant.
3. Whiteboard.
4. Overhead hoist
5. Dressing trolley.
6. Data pendant
7. Clinical hand-wash facilities with hands-free taps.
8. Glazed partition with venetian blind.
9. HTM 71 supplies trolley.

Notes:

1350

Indicative Key Dimensions

0 1 2 3 4m

Scale

Accommodation for a patient requiring medical and nursing care using multi-parameter monitoring and life-support systems. Sufficient space is required around the bed for six members of staff to circulate to carry out procedures and for equipment, such as mobile X-ray and haemofiltration equipment, to be manoeuvred and parked and worked around.

See PLAN 10 for further specification details.

NORMAN RAITT ARCHITECT

FLOOR AREA (bedroom) 26.16 sq.m.
FLOOR AREA (air-lock) 6.00 sq.m.

All sizes in mm

PLAN 4	SINGLE BEDROOM Alternative 2 layout

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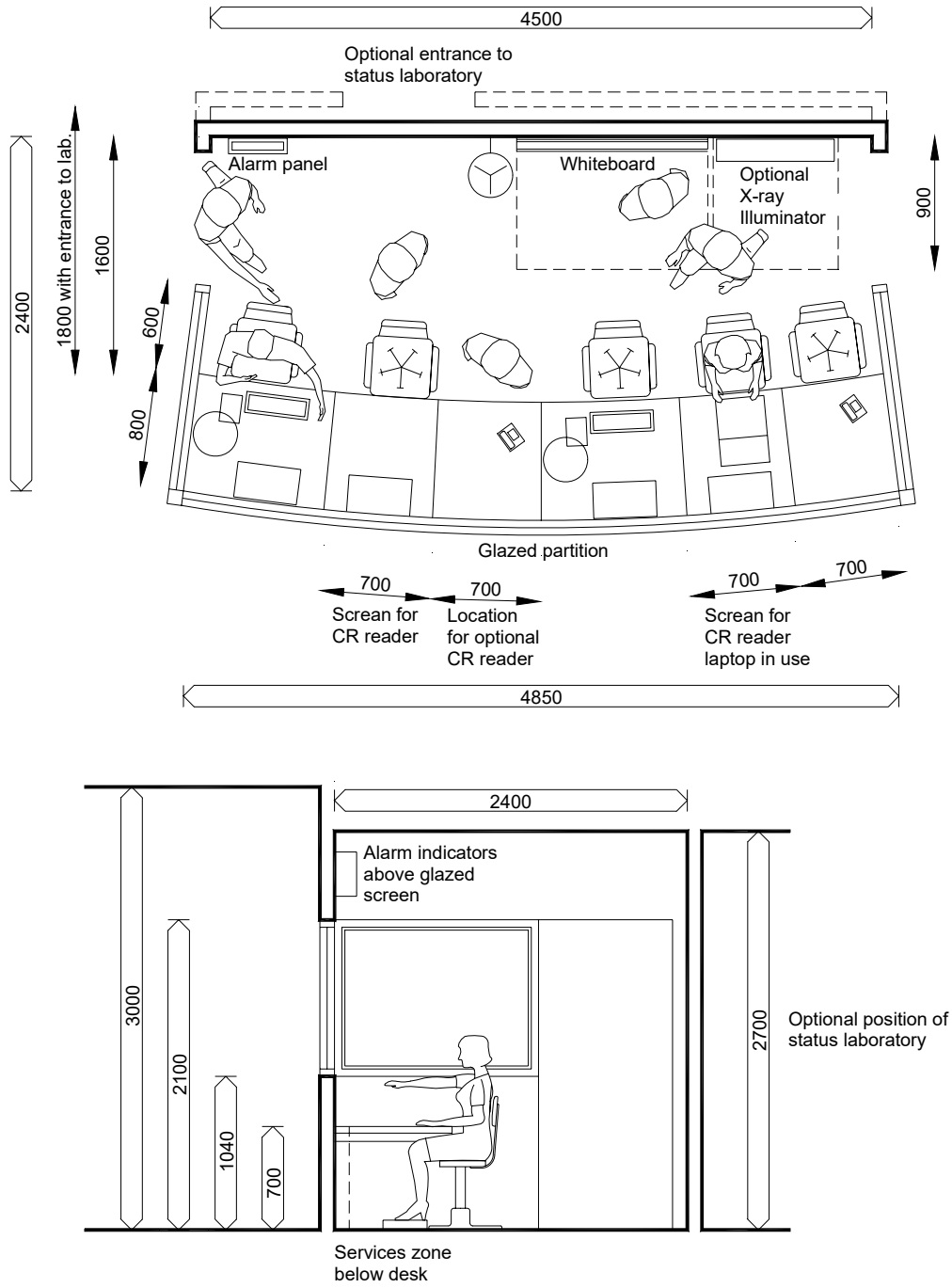

Notes:

1350

Indicative Key Dimensions

0 1 2 3 4m

Scale

Communications centre for up to eight beds, used intermittently by up to two staff simultaneously. Seating for five staff for occasional larger discussions.
Activities include: confidential discussions, report writing using fixed and laptop computers, use of telephones, viewing X-rays.
All bed spaces to be clearly visible while seated to carry out tasks.

NORMAN RAITT ARCHITECT

FLOOR AREA 11.50 sq.m.

All sizes in mm

PLAN 5	COMMUNICATIONS BASE Layout

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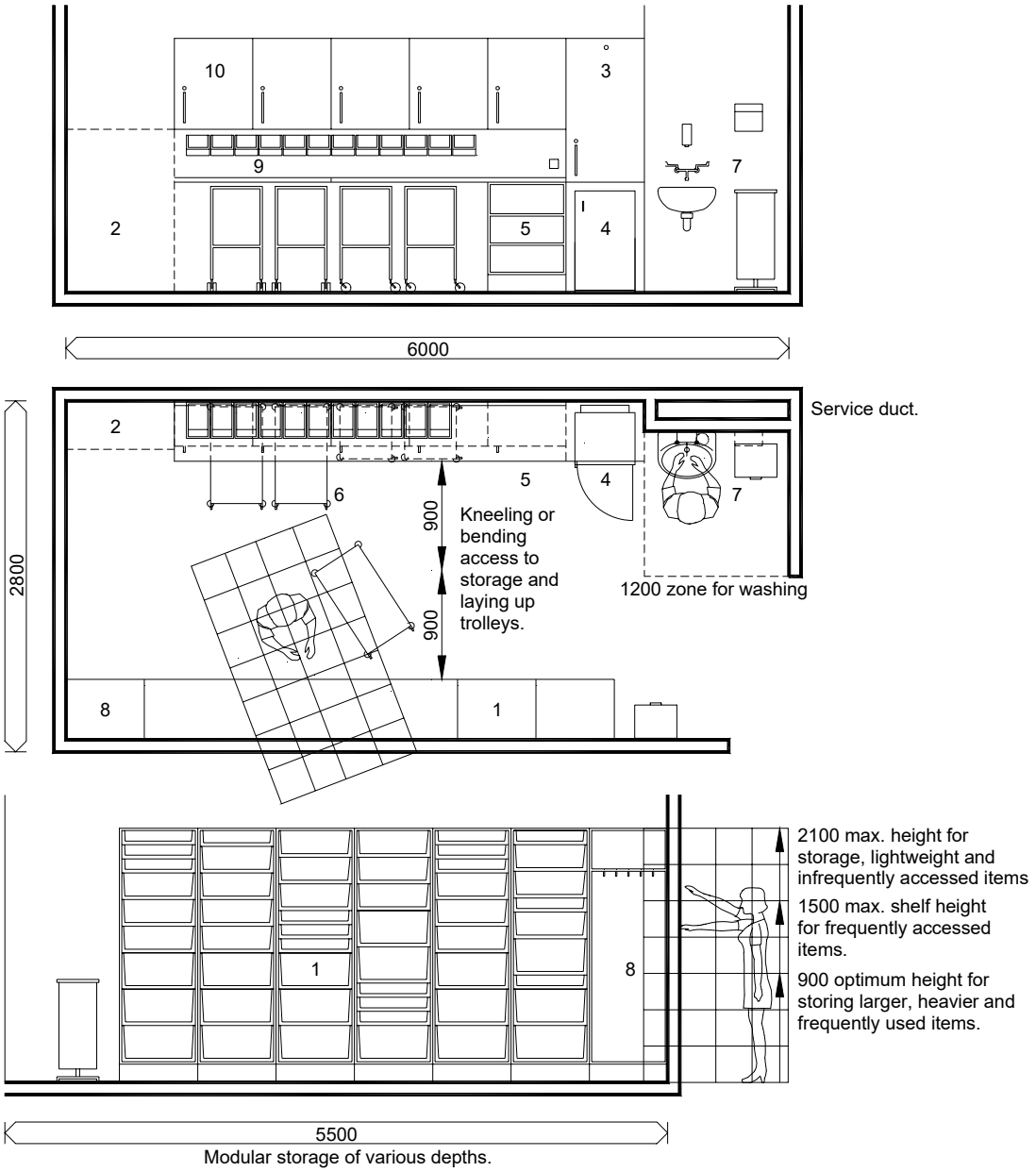

Modular storage of various depths.

LEGEND

1. Modular storage system (HTM 71).
2. Optional blood bank - ventilation required.
3. Controlled drugs cupboard.
4. Lockable refrigerator - 84 litres.
5. Under-worktop storage unit (HTM 71).
6. 4 No. dressing trolleys parked under preparation worktop.
7. Clinical wash-hand facilities with hands free tap.
8. Catheter cupboard (HTM 71). Can be supplied with door if required.
9. Tote boxes.
10. Storage cupboards.

Notes:

1350

Indicative Key Dimensions

0 1 2 3 4 5m

Scale

Facilities for holding and preparing clean and sterile materials used in the treatment of patients, safekeeping of drugs, medicines, lotions etc.
Optional storage of blood bank if required (local policy).

See PLAN 10 for further specification details.

NORMAN RAITT ARCHITECT

FLOOR AREA 16.80 sq.m.

All sizes in mm

PLAN 6	CLEAN UTILITY Layout

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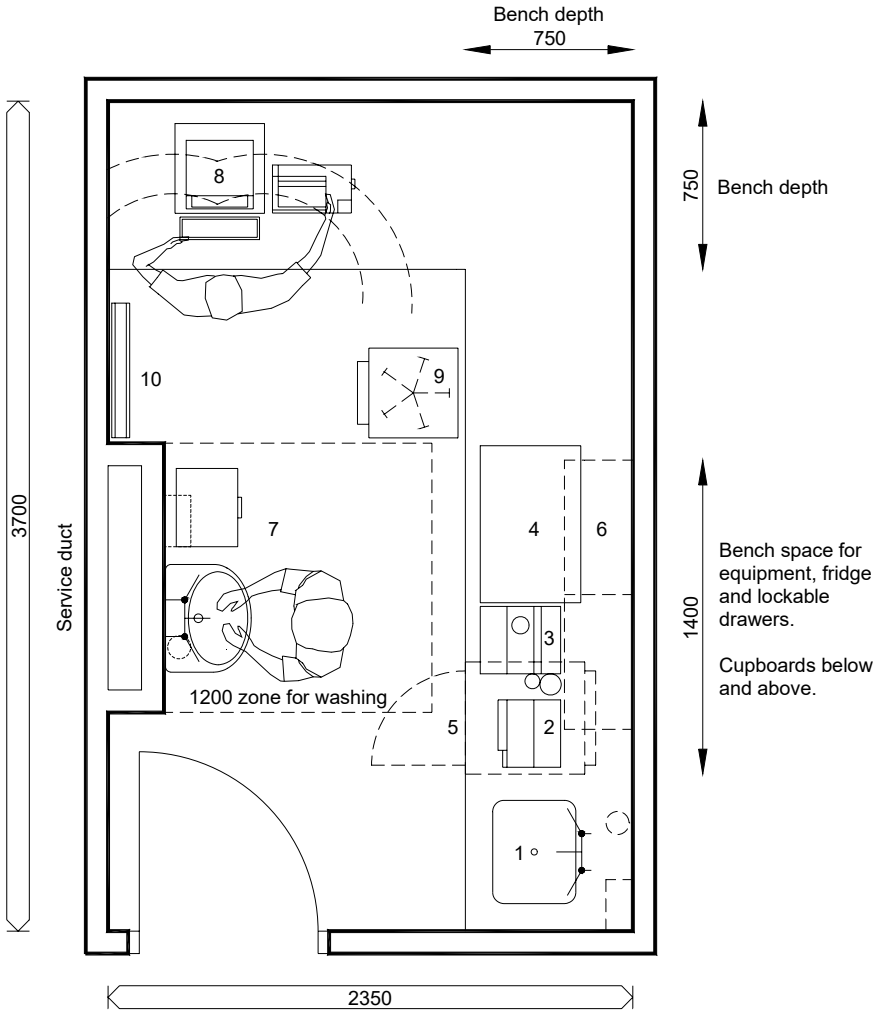

LEGEND

1. Laboratory sink.
2. Electrolyte analyser.
3. Glucose analyser.
4. Blood gas analyser.
5. Lockable medical refrigerator, 142 litres.
6. Storage cupboards.
7. Clinical wash-hand facilities with hands-free taps.
8. Computer terminal with printer.
9. Draughtsman's chairs.
10. Noticeboard.

NOTES:

1. The height of the bench for carrying out tasks at equipment when standing should be 900mm.
2. A bench height of 900mm is satisfactory when using a computer for short periods and an adjustable draughtsman's type chair is provided.
3. The laboratory should be adjacent to the communications base and if required can have direct access to the base.

Notes:

1350

Indicative Key Dimensions

0 1 2 3m

Scale

Facilities for performing analysis of blood samples using technical equipment by up to two staff.
Occasional use of computer.
Facilities for hand-washing.
Facilities for storage of reagents and containers.

FLOOR AREA 8.70 sq.m.

All sizes in mm

NORMAN RAITT ARCHITECT

PLAN 7	LABORATORY Layout

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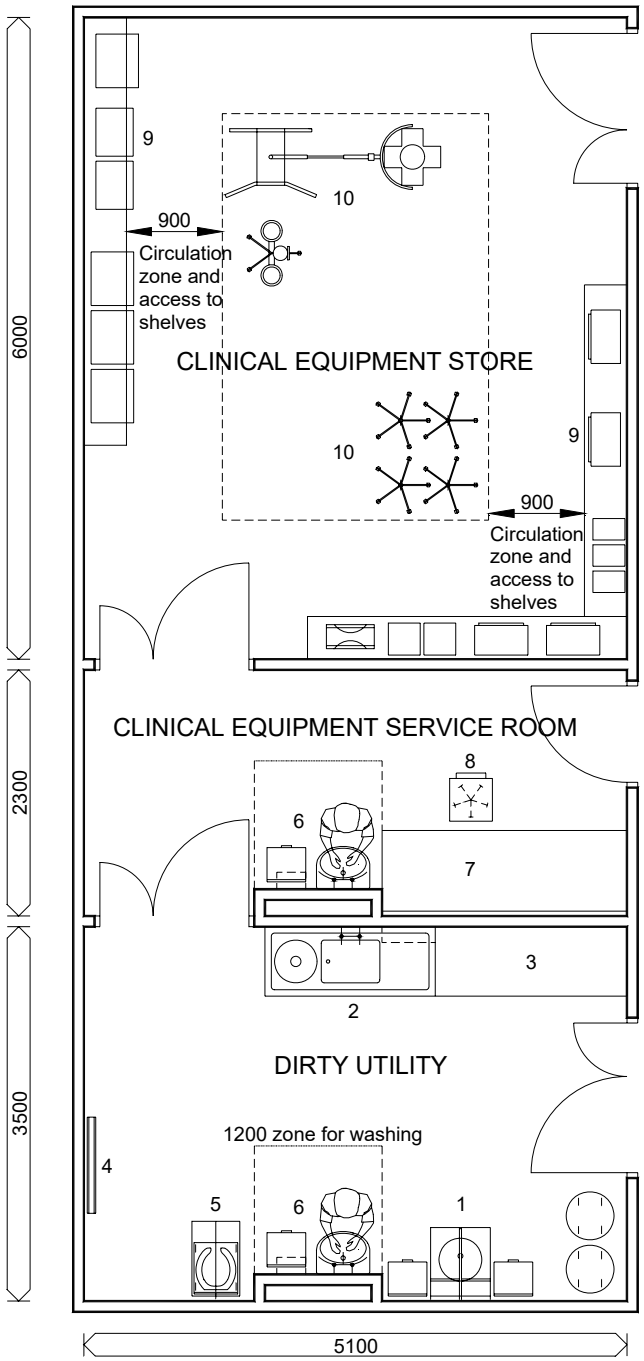

LEGEND

1. Macerator disposal unit.
2. Sink and hopper disposal .unit
3. Storage and shelving.
4. Whiteboard.
5. Sani chair.
6. Clinical wash-hand facilities.
7. Workbench with suitable electrical and medical gas outlets.
8. Stool.
9. Adjustable shelving for storage and charging equipment.
10. Storage for floor standing-equipment.

NOTES:

1. It is important that broken equipment is kept separate from equipment that is clean and in working order. The design should ensure that clean and serviceable equipment is physically separated from broken and contaminated equipment. Equipment awaiting maintenance should be held in dirty utility until taken through to the service room.

2. Adjustable shelving should be provided between 300, 600, 1000 and 1300mm max. to ensure that items can be placed and retrieved easily and safely. Heavier objects should be placed at waist level.

3. Items that require charging should be grouped together. Sockets should be provided at 900mm for floor-standing equipment and at 450, 800 and 1200mm for shelf stored items.

4. Clean, calibrated and tested ventilators and associated consumables should be stored together for convenience and efficiency.

Notes:

1350

Indicative Key Dimensions

0 1 2 3 4 5m

Scale

Facilities for disposal of liquid waste and cleaning of equipment, workshop facilities for maintaining, calibrating and testing equipment and facilities for storing floor and shelf-mounted equipment and for charging electrical equipment.

FLOOR AREA (store) 30.60 sq.m.
FLOOR AREA (service room) 11.75 sq.m.
FLOOR AREA (dirty utility) 17.85 sq.m.

All sizes in mm

NORMAN RAITT ARCHITECT

PLAN 8	DIRTY UTILITY/CLINICAL EQUIPMENT SERVICE ROOM AND STORE Alternative 1 layout

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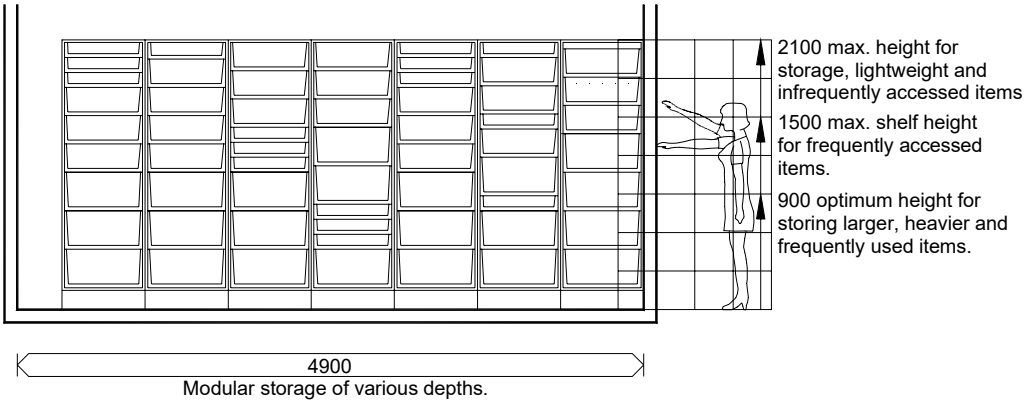
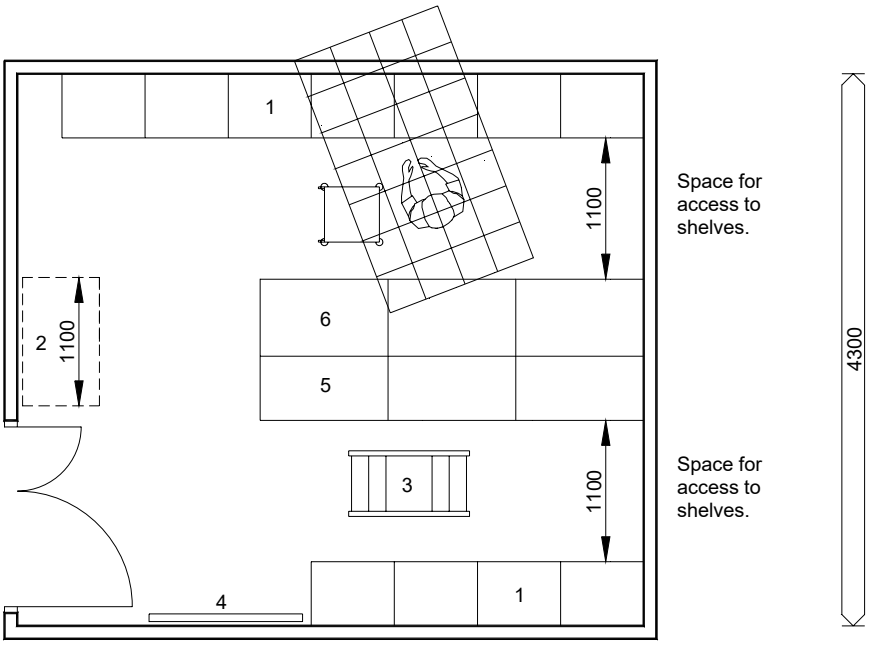


Modular storage of various depths.



LEGEND

1. Modular storage system (HTM 71).
2. Shelf-free area for storage of large and heavy floor stored boxes.
3. 3-tread step ladder.
4. Noticeboard.
5. Shelving racks 1000 x 465mm (HTM 71).
6. Shelving racks 1000 x 665mm (HTM 71).

NOTES

1. Small light items may be stored below 900mm since some bending is necessary.
2. Larger, bulkier and heavier items should be stored at approximately 900mm to enable items to be retrieved and stored safely and easily.
3. Only light, single items should be stored above 1500mm to enable them to be reached safely and easily.
4. Storage heights are given for guidance; however, by utilizing the modular storage system, adjustable storage can be provided.
5. 1100mm is required between storage units to allow safe storage and retrieval and the manoeuvring of trolleys.

Notes:

1350

Indicative Key Dimensions

0 1 2 3 4 5m

Scale

Facilities to store items that are too large to store in the clean utility and those that are greater than a 5-day supply.
It is envisaged that the just-in-time storage will be employed and therefore supplies of items not obtained from central stores should be held in bulk here.

FLOOR AREA 21.00 sq.m.

All sizes in mm

NORMAN RAITT ARCHITECT

PLAN 9

BULK STORE
Layout

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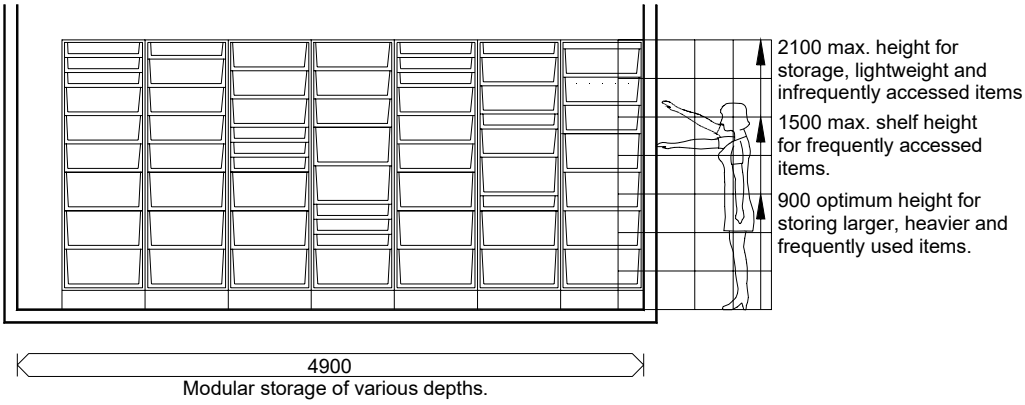
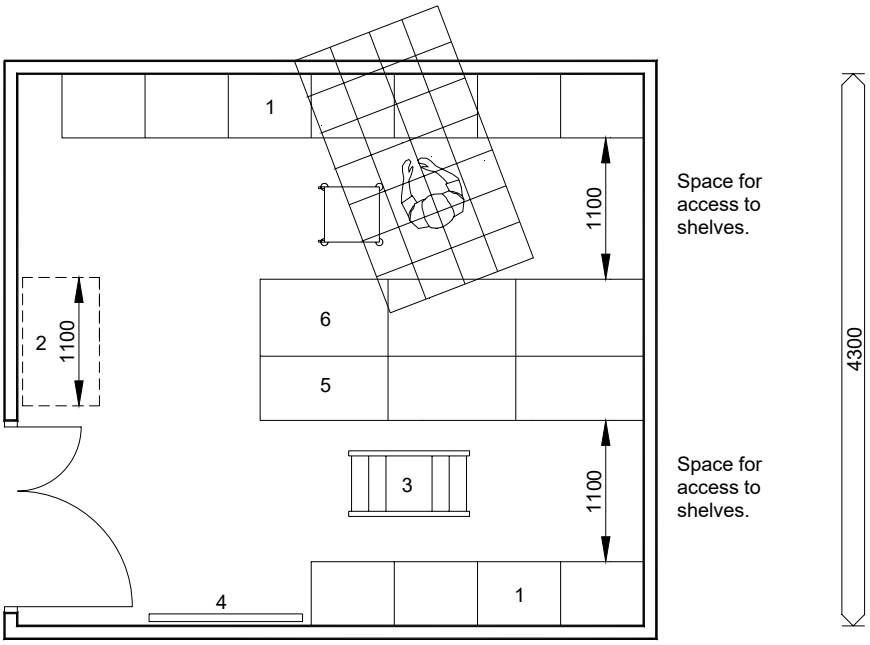


Modular storage of various depths.



LEGEND

1. Modular storage system (HTM 71).
2. Shelf-free area for storage of large and heavy floor stored boxes.
3. 3-tread step ladder.
4. Noticeboard.
5. Shelving racks 1000 x 465mm (HTM 71).
6. Shelving racks 1000 x 665mm (HTM 71).

NOTES

1. Small light items may be stored below 900mm since some bending is necessary.
2. Larger, bulkier and heavier items should be stored at approximately 900mm to enable items to be retrieved and stored safely and easily.
3. Only light, single items should be stored above 1500mm to enable them to be reached safely and easily.
4. Storage heights are given for guidance; however, by utilizing the modular storage system, adjustable storage can be provided.
5. 1100mm is required between storage units to allow safe storage and retrieval and the manoeuvring of trolleys.

Notes:

1350

Indicative Key Dimensions

0 1 2 3 4 5m

Scale

Facilities to store items that are too large to store in the clean utility and those that are greater than a 5-day supply.
It is envisaged that the just-in-time storage will be employed and therefore supplies of items not obtained from central stores should be held in bulk here.

FLOOR AREA 21.00 sq.m.

All sizes in mm

NORMAN RAITT ARCHITECT

PLAN 9	BULK STORE Layout

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DESIGN ACCEPTANCE PROCEDURE FORM

Critical Care User Meeting – 1st February 2010

ACTION POINTS

1. Support Services co-located to individual clusters
2. Reposition ICU
3. Pharmacy Support accessible to all clinical areas
4. Physics areas located in repositioned Support Services
5. Clear lines of sight to patients
6. Move Staff Change more central to whole department including CCU
7. Relatives Rooms spread across unit
8. Staff Rest Room moved next to Offices and Shower Facilities
9. Stores not to have curved walls
10. Clinical Offices to be located within clinical areas
11. Staff Lounge if possible to have natural light
12. Sizes of windows to be checked

New South Glasgow Hospitals (NSGH) Project

Adult Hospital

Clinical User Group Meeting: No. 3 (1:200 Stage 3)
Department: Critical Care User Group
Date of Meeting: Thursday, 22 April 2010
Time: 2.00pm - 4.30pm

Attendance Sheet

Name	Organisation / Role	Signature
Jim Crombie	NHS Greater Glasgow & Clyde	
Grant Archibald	NHS Greater Glasgow & Clyde	
Jacquie Campbell	NHS Greater Glasgow & Clyde	[redacted]
Sandy Binning	NHS Greater Glasgow & Clyde	
Michelle Boyd	NHS Greater Glasgow & Clyde	
Alan Davidson	NHS Greater Glasgow & Clyde	
Eleanor Deacon	NHS Greater Glasgow & Clyde	[redacted]
Stephen Gallacher	NHS Greater Glasgow & Clyde	
Gregor Imrie	ITV 1 SGH	[redacted]
Andrew Kernohan		
Mario MacDonald		
Karen McKay		
Heather McVey		[redacted]
Scott Muir		
David Raeside		
Barry Sillers		[redacted]
Iain Thomson	"	
George Welch	"	
Liz Thomson		
David Sutton		
HEATHER GRIFFIN	PROJECT MANAGER	
[illegible]	MD	
[illegible]	Project Team.	
[illegible] MCGARRITY	NHS Greater Glasgow	
~~Eleanor Deacon~~		
RUTH FORBES	[illegible]	
BILL MCGAUGHIE	Doug Smith Cost Consultants	[redacted]
PAUL BRITTON	TRIBAL	
MARK DRANS.	NIGHTINGALES.	
GRAHAM HARRIS.	NIGHTINGALES	
FIONA MCCLUSKEY	NHSGGC	
JACKIE STEWART	NHSGGC	

NEW SOUTH GLASGOW HOSPITALS & LABORATORY PROJECT
DESIGN ACCEPTANCE PROCEDURE

Building: NSGH	**Issued by**:
Subject: Critical Care User Group	**Date issued**:
Aspect for Review:	**Date returned**:

DESIGN REVIEW HISTORY

	Level of Approval	Approval Date	Remarks
Design Review 1			
Design Review 2			
Design Review 3		22/4/2010	

BOARD RESPONSE

Level of Approval [ ]

Information referred to: 1200 SIGN OFF
SUBJECT TO MARK UP PLANS

Detailed comment:

Approval Levels: A = No comment. B = Proceed to comments. C = Resubmit with amendments. D = Rejected.

BOARD ACCEPTANCE SIGN OFF

Medicine User Group Lead: [redacted] Date: 22/4/10

Surgical User Group Lead: [redacted] Date: 22.4.10

User Group Lead: Date:

Design Manager: [redacted] Date: 22.4.10

Project Manager: [redacted] Date: 22/4/2010

INFECTION CONTROL LEAD [redacted] 22/4/10

fm [redacted]

DESIGN ACCEPTANCE FORM

ACTION POINTS

~~1. Reconfigure furniture store 144 & disposal 143 to better separate staff and relatives pathways~~

1. Reconfigure disposal hold 134, pharmacy 127 and blood bank 133. Disposal hold to open into central area pod. Equipment store slightly reduced to enlarge pharmacy support

2. Delete staff entrance door adjacent to relatives rooms 145, 146 into staff lounge and reposition to give 2 door access on same corridor

3. CCW 201 is a cleaners store

4 Minor relabeling of wc's to show showers in staff rooms and change public shower rooms to wc's

5 change door position on wc to give en-suite wc at room 225 teach / Research office

6 Reposition doors at staff wc's to off-set male / female entrances

7. Isolation room arrangement to be as sketch proposal to improve visibility

[redacted]

22/4/2010

Heather Oldey 22/4/10

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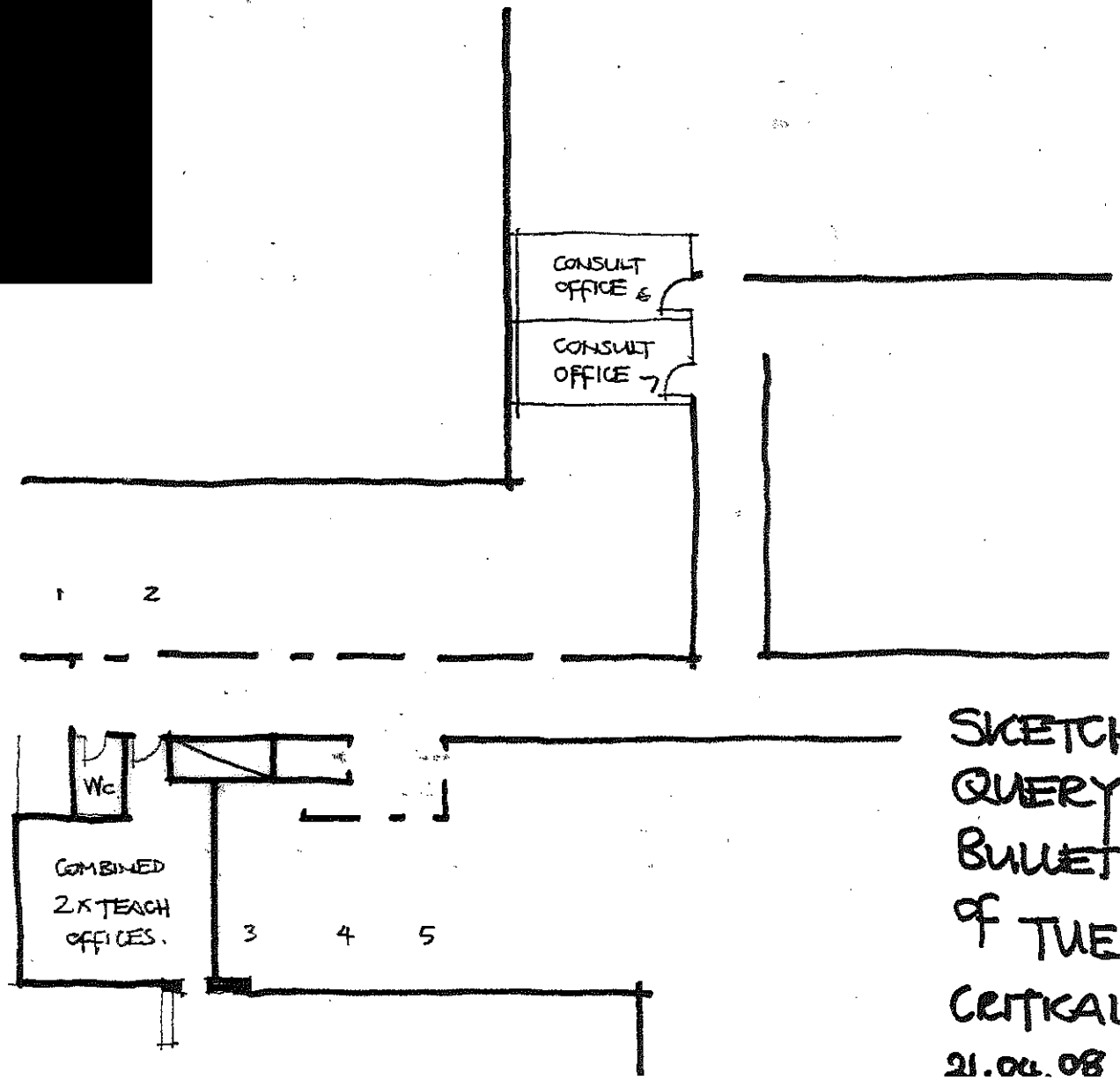
8. Swap all linen store OS3 & gas store OS4 locations

9. Consultant offices 192/193 combine to 1 office
leak/research office as per sketch

[redacted]

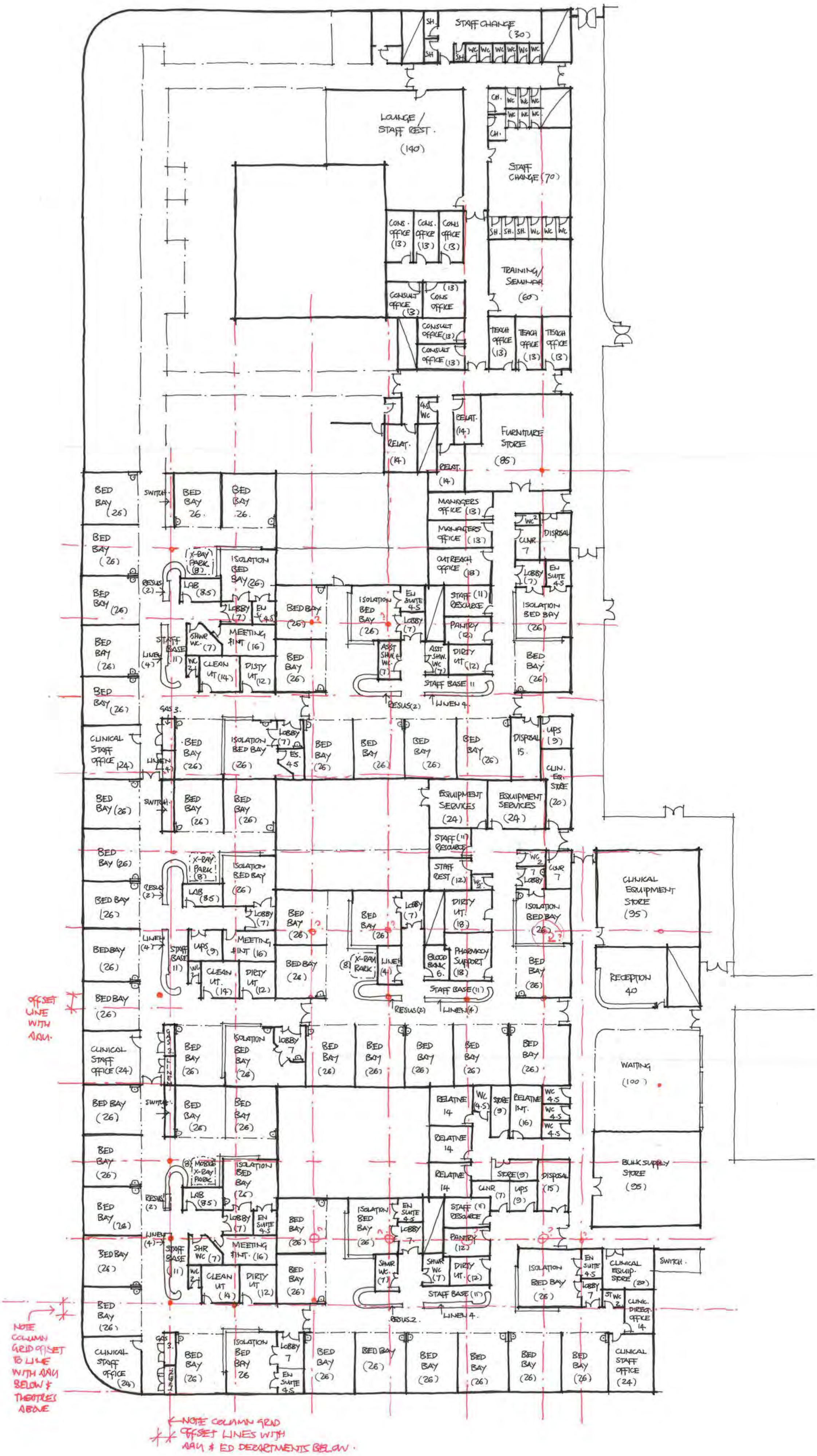
[redacted]



SKETCH ANSWERING QUERY FROM BULLET POINT 17 & 18 OF TUESDAY 20/04/10 CRITICAL CARE FEEDBACK

21.04.08

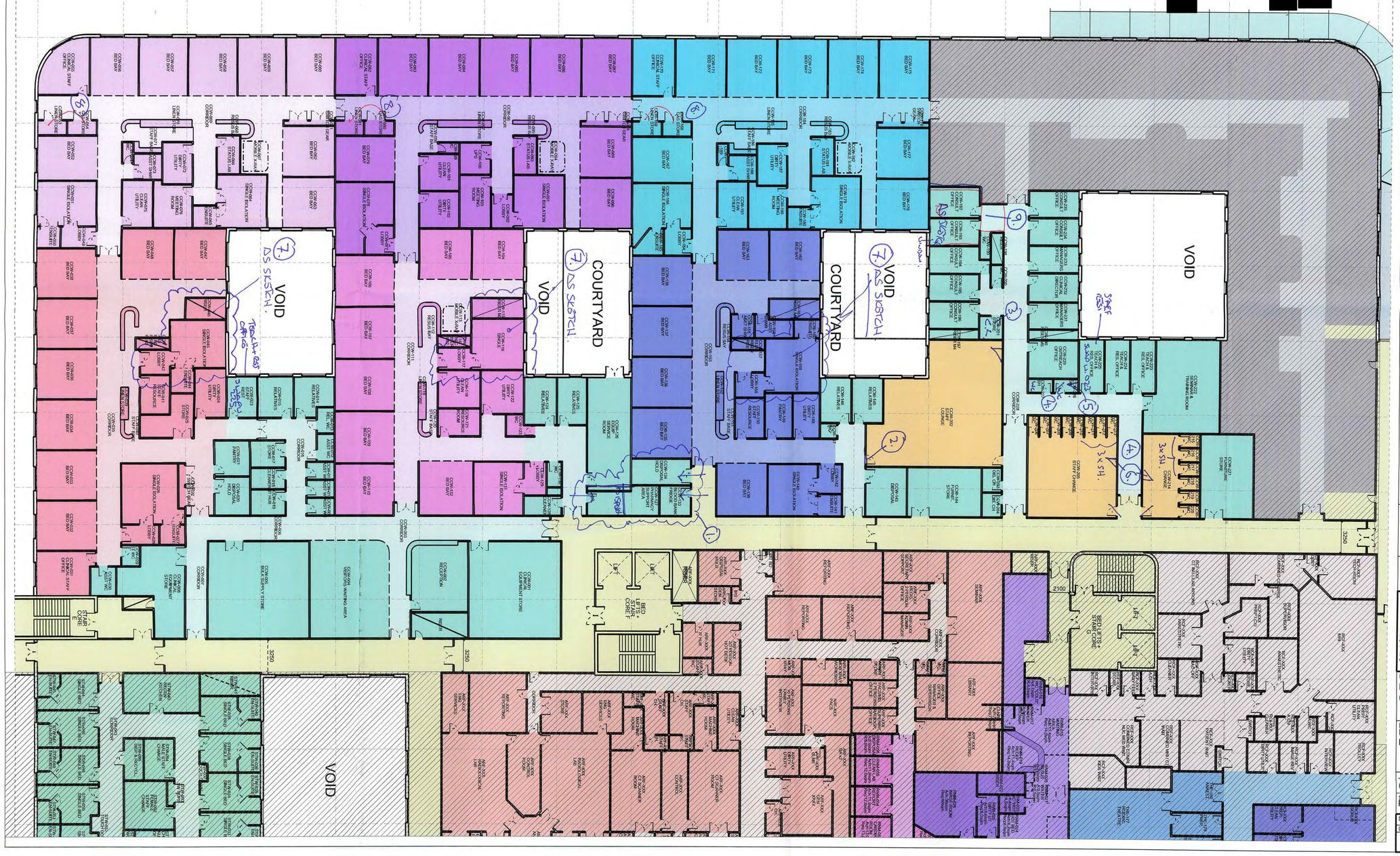
A5278/523


STAFF CHANGE (30)
LOUNGE / STAFF REST. (140)
STAFF CHANGE (70)
CONS. OFFICE (13)
TRAINING / SEMINAR (60)
CONSULT OFFICE (13)
TEACH OFFICE (13)
FURNITURE STORE (85)
RELAT. (14)
BED BAY (26)
MANAGERS OFFICE (13)
OUTREACH OFFICE (18)
ISOLATION BED BAY (26)
LAB (8.5)
X-RAY PARK (8)
MEETING / INT (16)
STAFF BASE (11)
CLEAN UT (14)
DISTY UT (12)
DIRTY UT (12)
STAFF RESOURCE (11)
PANTRY (12)
ASST SHW. WC (7)
CLINICAL STAFF OFFICE (24)
EQUIPMENT SERVICES (24)
CLINICAL EQUIPMENT STORE (95)
RECEPTION 40
WAITING (100)
BULK SUPPLY STORE (95)
BLOOD BANK 6.
PHARMACY SUPPORT (18)
STAFF REST (12)
CLUR 7
DISPOSAL
UPS (9)
CLIN. EQ. STORE (20)
CLINIC. DIRECT. OFFICE 14
OFFSET LINE WITH AAU.
NOTE COLUMN GRID OFFSET TO LINE WITH AAU BELOW & THEATRES ABOVE
NOTE COLUMN GRID OFFSET LINES WITH AAU & ED DEPARTMENTS BELOW.

KEY

- NSGH CRITICAL CARE CLUSTER 1 - HDU 10 BEDS
- NSGH CRITICAL CARE CLUSTER 2 - HDU 10 BEDS
- NSGH CRITICAL CARE CLUSTER 3 - ITU 10 BEDS
- NSGH CRITICAL CARE CLUSTER 4 - ITU 10 BEDS
- NSGH CRITICAL CARE CLUSTER 5 - HDU 10 BEDS
- NSGH CRITICAL CARE CLUSTER 6 - HDU 9 BEDS
- NSGH CRITICAL CARE SUPPORT
- SHARED C.C.U. & CRITICAL CARE SUPPORT

1:200 SCAN OF
GROUP LEAD - SURGICAL
GROUP LEAD - MEDICINE -
FM LEAD -
IN PATIENT CENTRE LEAD -
ARCHITECT -
PROJECT MANAGER -
[redacted]
22/4/2010



Notes:
- This drawing is copyright.
- Do not scale dimensions from this drawing.
- All discrepancies on this drawing are to be reported to the architect.
- Do not modify any element of this drawing.
- Use drawing only for purpose(s) issued.

Designer Identification of Hazard/Risk

X TYPE YOUR NOTES HERE

Rev	Date	Drw	Revision Notes	Chk	App
04	14/04/10	GO	Revised for User Group Meeting 3	GH	X
03	11/03/10	AB	Revised for User Group Meeting 2	GH	X
02	11/03/10	GO	Revised for User Group Meeting 2	GH	X
01	25/01/10	GO	Issued for User Group Meeting 1	GH	X

Client: NHS Greater Glasgow and Clyde

Contractor: **Brookfield**

NIGHTINGALE associates architects
87-91 Newman Street
London
W1T 3EY
Tel: 0207 079 9900
Fax: 0207 079 9901
www.nightingaleassociates.com

Project: NEW SOUTH GLASGOW HOSPITALS (NSGH) PROJECT

Drawing Title: FIRST FLOOR PLAN NSGH CRITICAL CARE

Job No	Drawn	Checked	Approved
09080	OB	GH	GH
Status: Preliminary		Date: 02/09/09	Scale@A1: 1:200

Drawing No						Rev
Origin	Zone	Level	Type	Content	Sequential	04
NA	XX	01	PL	252	414	

LIGHTWELL
VOID
COURTYARD
COURTYARD
VOID
VOID
VOID
VOID
ATRIUM VOID
ATRIUM VOID
BED LIFTS + STAIR CORE G
BED LIFTS + STAIR CORE F
BED / PATIENT LIFTS
FM CLEAN + BED / PATIENT LIFT CORE C
FM CLEAN LIFTS
CLEAN HOLD
STAIR CORE E
TRAINING ROOM
STAFF REST (140)
E1
F1
G1
H1
I1
J1
K1
K2
L1
M1
7500
3750
6400
8600
1100
3250
2100

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From:	Craig, Carol
To:	Binning, Sandy; Boyd, Michelle; Campbell, Jacquie; David Hall; Davidson, Alan; Deacon, Eleanor; Gallacher, Stephen; Imrie, Gregor; Kernohan, Andrew; MacDonald, Marion; McKay, Karen; McVey, Heather; Muir, Scott; Raeside, David; Sillers, Barry; Sutton, Dave; Thomson, Iain; Thomson, Liz; Welch, George
Cc:	Ballantyne, Irene; Mulholland, Wilma; Murphy, Louise; O"Neil, Sharon; Rose, Carol; Connelly, Karen; Griffin, Heather; Joannidis, Pamela; McCluskey, Fiona; McNamee, Sandra; Quigley, Graham; Wrath, Frances; David Bower; Emma White
Subject:	New South Glasgow Hospital : Critical Care Users Group Meeting, Monday 1st February 2010
Date:	25 January 2010 16:56:24
Attachments:	Jubilee Ct travel directions1.pdf Directions to NHS Contact Centre Office.doc Meeting Agenda - Critical Care.doc User Group Remit - Critical Care.doc Schedule for Critical Care Ref ER rev 1.xls NA-xx-01-PL-252-010.pdf NA-xx-01-PL-252-405_revA01.pdf NA-xx-01-PL-252-404_revA01.pdf

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Sent on behalf of Heather Griffin

Dear All

New South Glasgow Hospital: Critical Care User Group Meeting
Date & Time: Monday 1st February 2010, 1.00pm – 5.00pm
Venue: NHS Contact Centre, 1 Jubilee Court, Hillington Industrial Estate, G52 4LB

Further to my previous email re above, please find attached:

- Directions to venue
- Agenda for meeting
- Group Remit/Terms of Reference – your Group Leads are Jacquie Campbell (Surgical) and Michelle Boyd (Medical)
- Schedule of Accommodation for the Critical Care Facility
- The block plan of the first floor of the new hospital showing the location of the Critical Care Facility (in pink) on the left hand side of the building. Critical Care is co-located with Imaging and is next to the corridor which links to Neurosciences and Maternity. There is rapid access from the Emergency Department and AAU which are directly below Critical Care. There is also rapid access to the Theatres department which is directly above the Critical Care Facility
- The first draft drawings for the Critical Care Facility. These take the form of two detailed drawings of (a) Critical Care (ICU and medical and surgical HDU plus support services, and (b) CCU (in yellow) with the remaining support services (in green).

This meeting is specifically to address the layout of the ICU, Medical and Surgical HDU areas but the CCU drawing is included so you can see the support services which are spread throughout the Critical Care Facility.

These detailed drawings are a starter for ten and the purpose of the meeting is to discuss any amendments to the layout.

Note: large colour copies of the plans will be available from your Group Leads.

The format for the meeting will be to start with a short presentation showing the

hospital campus, Brookfield's block plans for the hospital, and flows through the hospital, before going on to discuss the 1:200 layout for the Critical Care Facility.

If you have any problems or need further information please do not hesitate to contact me.

Please can you confirm your attendance at the meeting, thank you.

Regards
[redacted]

Heather Griffin
Project Manager
New South Glasgow Hospital Project
Tel : [redacted]
Fax : [redacted]

From: Craig, Carol
Sent: Wednesday, December 23, 2009 2:58 PM
To: Binning, Sandy; Boyd, Michelle; Campbell, Jacquie; Davidson, Alan; Gallacher, Stephen; Imrie, Gregor; Kernohan, Andrew; MacDonald, Marion; McKay, Karen; McVey, Heather; Muir, Scott; Raeside, David; Sillers, Barry; Thomson, Iain; Welch, George
Cc: Ballantyne, Irene; Mulholland, Wilma; Murphy, Louise; O'Neil, Sharon; Rose, Carol; Connelly, Karen; Griffin, Heather; McCluskey, Fiona; McNamee, Sandra; Wrath, Frances
Subject: New South Glasgow Hospital : Critical Care Users Group - Confirmation of meeting with Contractor to discuss detailed design

Sent on behalf of Heather Griffin

Dear All

I am emailing to confirm that the meeting with the Contractor to discuss the detailed design of Critical Care Department will take place on **Monday, 1st February 2010, 1.00pm – 5.00pm, in NHS Contact Centre, 1 Jubilee Court, Hillington Industrial Estate (directions attached).**

Just to explain the process, there will be 2 to 3 meetings with yourselves, the Project Team and the Contractor's Team (architect and healthcare planner) to discuss the detailed 1:200 floor plans for the Critical Care Department. The architect will provide a first draft of the floor plans a week before the meeting. The drawings will be based on the Schedule of Accommodation developed by the user group in the first stage of this project. I must highlight that the footprint of this schedule is fixed.

I will send out further information nearer the date.

Any problems, or if you require any further information please do not hesitate to contact me.

Regards
[redacted]
Tel : [redacted]

****

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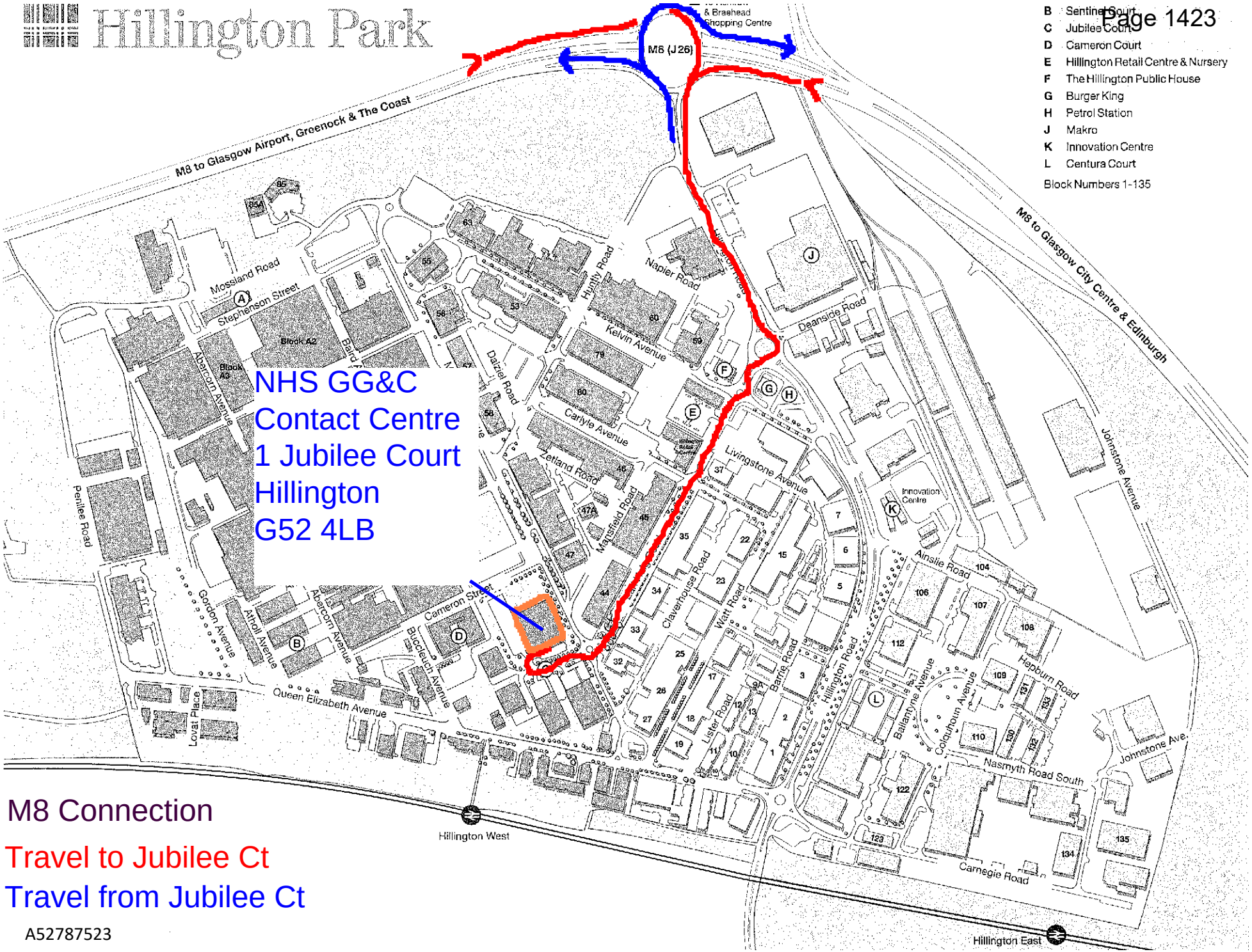
****

Hillington Park



M8 Connection

Travel to Jubilee Ct

Travel from Jubilee Ct

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NHS Contact Centre
1 Jubilee Court
Hillington
Glasgow
G52 4LB

Directions to Contact Centre, Hillington Industrial Estate from M8

1. Take the Hillington exit from the M8 (junction 26 - A736).

2. Pass Reid Furniture on your right hand side.

3. At roundabout take 3rd exit, (you will see The Hillington Harvester Pub on your right).

4. Continue straight on at mini roundabout passing a row of shops on right (Co-Op, Farmfoods etc.).

5. Continue straight up this road (Earl Haig Road).

6. At roundabout carry straight on (across Montrose Avenue), then turn first right and sharp right again to park in front of the building.

New South Glasgow Hospitals (NSGH) Project

Adult Hospital

Clinical User Group Meeting: No. 1 (1:200 Stage)
Department: Critical Care

Meeting Agenda

1.0 Introductions
Open Meeting
Confirm Meeting Attendees / Distribute Attendance List
Terms of Reference for the Group
Group Lead Remit
Summary of current project status & 1:200 design process

2.0 Brief Presentation of the Scheme
Short powerpoint presentation of the current design
Site Master Plan
1:500 Plans / Key Department Adjacencies / 3D Visuals

3.0 1:200 Department Plan Review
Locate the Department in the building / Main Clinical Adjacencies
Main Entrances to the Department
Summary of the Department's main elements
Detailed group discussion of the draft 1:200 layout

4.0 Main Circulation Flows Review
Key Patient Journeys to and from the Department
Circulation Flows around the Department
Detailed Review

5.0 Agree Action Plan and Responsibilities
Summarise Comments
Agree amendments required to Department
Sign-off Design Acceptance Procedure

6.0 AOB/ Confirm date of next meeting

GREATER GLASGOW AND CLYDE NHS BOARD

NEW SOUTH GLASGOW HOSPITAL PROJECT

USERS GROUP
TERMS OF REFERENCE

1. NAME OF GROUP

The name of the Group shall be the **New South Glasgow Hospital Critical Care User Group**.

2. AIM

To provide a forum for agreement/sign off of the 1:200 and 1:50 architectural drawings for the Critical Care Facility. Please note that the architectural drawings will be based on the previously signed off Schedules of Accommodation which are now fixed. Sign-off of the drawings will follow a formal procedure and will be recorded on the "Design Acceptance Procedure" Form. This form will record the outcome of each meeting and be signed by the User Group Lead on behalf of the Directorates at the end of each meeting.

3. MEMBERSHIP

- The membership of the group has been approved by the Acute Services Director(s)
- The Group will have an identified Lead
- Members will be responsible for (i) discussing the design with colleagues and in the user meetings (ii) for communicating the priorities and associated work plans agreed by the Group to their colleagues following each meeting

4. GROUP LEAD

- The Leads for the Critical Care User Group are Jacquie Campbell (Surgical) and Michelle Boyd (Medical)
- The Group Leads will be responsible for the ensuring that Directorate priorities are reflected in the design
- The Group Leads will be responsible for keeping their Directors appraised of the status of the design process
- Where differing options regarding the design arise the Project Team will take their instruction from the Group Leads

5. MEETINGS OF THE GROUP

Two to three User Group meetings will be held to agree the 1:200 Departmental layouts and, following this a further 2 to 3 meetings will take place to agree the requirements for each room. The User Group meeting will be facilitated by the Project Team and attended by the Project Team (including FM and Infection Control) and the Contractor Team.

Seven days before each meeting hard copy drawing(s) will be issued by the Project Team to each Group Lead. It will be issued to other members of the User Group electronically.

At the User Group meeting the Design Team (Architect supported by the Health Planner and Project Team members) will provide a detailed update on the User Group Department(s) design progress and take the group through the detailed designs.

6. RECORD OF THE MEETING

Action points will be recorded by the architect on the Design Acceptance Form at the meeting and a copy will be distributed to the Group following the meeting.

CRITICAL CARE FACILITY

ICU	20 beds	(2 "pods" of 10)
HDU (Med & Surgical)	39 beds	(4"pods" 3 of 10, 1 of 9)
CCU	20 beds	(2 "pods" of 10)

NB - Dialysis plumbing to 5 beds - distributed between ICU and HDU

GLOBALLY SHARED FACILITIES

Description	Qty	Unit Area m²	Total Area m²	ADB Code	Notes
Combined Entrance/Reception/Administration Facilities					
Combined entrance	1				included in circulation area
Visitors Foyer	1				included in circulation area
Visitors waiting area:	1	100.0	100.0		
Visitors wc: Disabled/ wheelchair user	3	4.5	13.5		
Reception desk/office: 8 places	1	40.0	40.0		
Sub-Total			**153.5**		
Family Support and Communication Area					
Relatives room	6	14.0	84.0		(May be split into groups)
Relatives wc: Disabled/ wheelchair user	2	4.5	9.0		To be adjacent to relative areas
Sub-Total			**93.0**		
Office Area					
Clinical directors office: / Manager 1 place	1	14.0	14.0		
Managers office: 2 place	2	13.0	26.0		
Consultant Offices - 2 person rooms	7	13.0	91.0		
Clinical staff office/IT resource room: 4 places	4	24.0	96.0		
Outreach office: 4 places	1	18.0	18.0		
Seminar/training room: 40 - 45 places	1	60.0	60.0		
Teaching & research office 2 places, teaching and research staff	3	13.0	39.0		
Meeting Room/Interview/Relatives room (8 person)	1	16.0	16.0		
Sub-Total			**360.0**		
Staff facilities					
Staff Lounge (Including pantry area)	1	140.0	140.0		
Staff changing facilities 60 places	1	30.0	30.0		
Staff changing facilities 160 places	1	70.0	70.0		
Staff shower	6	2.5	15.0		
Staff wc & wash: Ambulant user	15	2.0	30.0		
WC / Shower / Change - Disabled	2	4.5	9.0		
Sub-Total			**294.0**		

Total Net			**900.5**
Planning	5%		45.0
Sub-Total			945.5
Engineering	3%		28.4
Circulation	31%		293.1
Total			**1267.0**

CRITICAL CARE: ICU/HDU (Medical & Surgical) AREAS

Clinical areas					
Critical care bed area: single room; Isolation (access via gowning lobby)	10	26.0	260.0		2 beds in each of 5 "pods" (Including both ICU "pods")
Gowning lobby: single bedroom	10	7.0	70.0	G0507	2 beds in each of 5 "pods" (Including both ICU "pods")
Single Room/Equivalent bed space	49	26.0	1274.0	B1602	

Patients en-suite wc & wash double assist	8	4.5	36.0		(as per HBN 00-02) En-suite to the 6 single rooms with isolation lobbys in HDU "pods" and 2 further rooms in the remaining HDU pod with no associated gowning lobby
Shower / WC - Assisted	6	7.0	42.0		Aligned to 4 HDU "pods"
Staff Resource Room	3	11.0	33.0		1 per 2 "pods"
Staff Office / Rest	1	12.0	12.0		Associated with the 2 ICU "pods"
Staff WC	6	2.0	12.0		1 per "pod"
Staff Meeting / Interview	3	16.0	48.0		1 per 2 "pods"
Communications / Staff Base	6	11.0	66.0		1 per "pod"
Sub-Total			**1853.0**		

Utility/clinical area support facilities					
Clean utility	3	14.0	42.0		1 each between 2 "pods"
Status laboratory	3	8.5	25.5		1 each between 2 "pods"
Dirty utility with urine testing	5	12.0	60.0		1 each per "pod"
Dirty Utility with urine testing/equipment cleaning	1	18.0	18.0		Aligned to remaining "pod" which should be in ICU
Pharmacy Support Area	1	18.0	18.0		Specific Client Request Supported By Pharmacy
Blood Bank Fridge Area	1	6.0	6.0		Located centrally for all Critical care Facilities (Sized for 2 x fridges as required)
Disposal hold	3	15.0	45.0		1 each between 2 "pods"
Housekeepers (cleaners) room	3	7.0	21.0		1 each between 2 "pods"
Patients pantry & Regeneration Area	2	12.0	24.0		Aligned to 4 HDU "pods"
Store Room	1	16.0	16.0		
Sub-Total			**275.5**		

Storage/holding facilities					
Bulk supplies store	1	95.0	95.0		Based on "Just In Time" supplies delivery Note: It may be necessary to split storage areas to reduce travel distances.
Clinical equipment store	1	130.0	130.0		Based on equipment being wall/ceiling mounted as far as possible. It may be necessary to split storage areas to reduce travel distances.
Equipment Service Room	2	24.0	48.0		
Linen bay/store	6	4.0	24.0		1 each per "pod"
Furniture store	1	85.0	85.0		
Ready use medical gas cylinders store	3	4.0	12.0		1 per 2 "pods"
Mobile imaging equipment bay (x-ray & Ultrasound) with image intensifiers	4	8.0	32.0		1 each per ICU "pod" , 1 between 2 HDU "pods"
Cardiac arrest/emergency trolley bay	6	1.0	6.0		1 each per "pod"
Sub-Total			**432.0**		

Engineering facilities					
Switchgear cupboard	3	2.0	6.0		
Battery/UPS room	3	9.0	27.0		
Sub-Total			**33.0**		

Total net			**2593.5**
Planning	5%		129.7
Sub-Total			2723.2
Engineering	3%		81.7
Circulation	40%		1089.3
Total			**3894.1**

CRITICAL CARE: CCU AREAS

Clinical areas					
Coronary care bed area: single room	20	20.0	400.0	B0303A	All with suitable radiological protection to support emergency pacing

Patients en-suite wc & wash double assist	20	4.5	90	V1610	(as per HBN 00-02)
Staff Resource Room	1	11.0	11.0		
Staff Meeting / Interview	1	16.0	16.0		
Staff WC	2	2.0	4.0		One of these toilets should be close to the staff meeting/interview room
Communications / Staff Base	2	8.0	16.0		
Sub-Total			**537.0**		

Utility/clinical area support facilities					
Clean utility / Prep	1	17.0	17.0		
Clean utility / Store	1	14.0	14.0		
Status laboratory	1	8.5	8.5		
Dirty Utility with Urine Testing	1	12.0	12.0		
Disposal Hold	1	10.0	10.0		
Housekeepers (cleaners) room	1	7.0	7.0		
Clinical directors office: / Manager 1 place	1	14.0	14.0		
Managers office: 2 place	1	13.0	13.0		
Patients pantry & Regeneration Area	1	12.0	12.0		
Sub-Total			**107.5**		

Storage/holding facilities					
Bulk supplies store	1	18.0	18.0		
Clinical equipment store	1	20.0	20.0		
Linen bay/store	2	4.0	8.0		
Ready use medical gas cylinders store	1	4.0	4.0		
Mobile imaging equipment bay (x-ray & Ultrasound) with image intensifiers	1	8.0	8.0		
Cardiac arrest/emergency trolley bay	2	1.0	2.0		
Sub-Total			**60.0**		

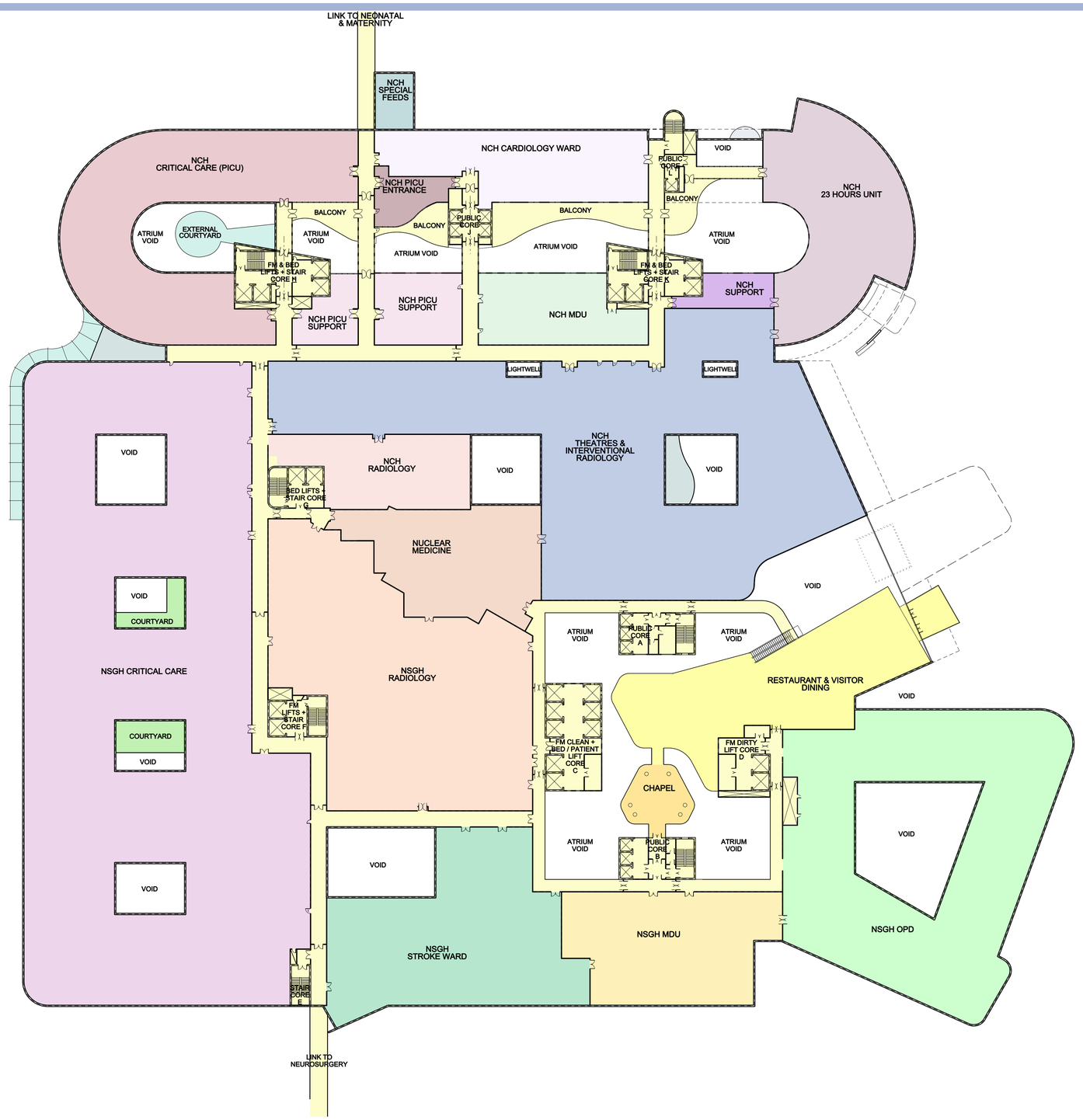
Engineering facilities					
Switchgear cupboard	1	2.0	2.0		
Battery/UPS room	1	9.0	9.0		
Sub-Total			**11.0**		

Total net			**715.5**
Planning	5%		35.8
Sub-Total			751.3
Engineering	3%		22.5
Circulation	31%		232.9
Total			**1006.7**

TOTAL OVERALL CRITICAL CARE FACILITY	**6167.9**

NHS Greater Glasgow and Clyde

Brookfield



ITPD Reference:
VOLUME 2.0
Section 2.2

FIRST FLOOR PLAN - DEPARTMENTAL ADJACENCIES

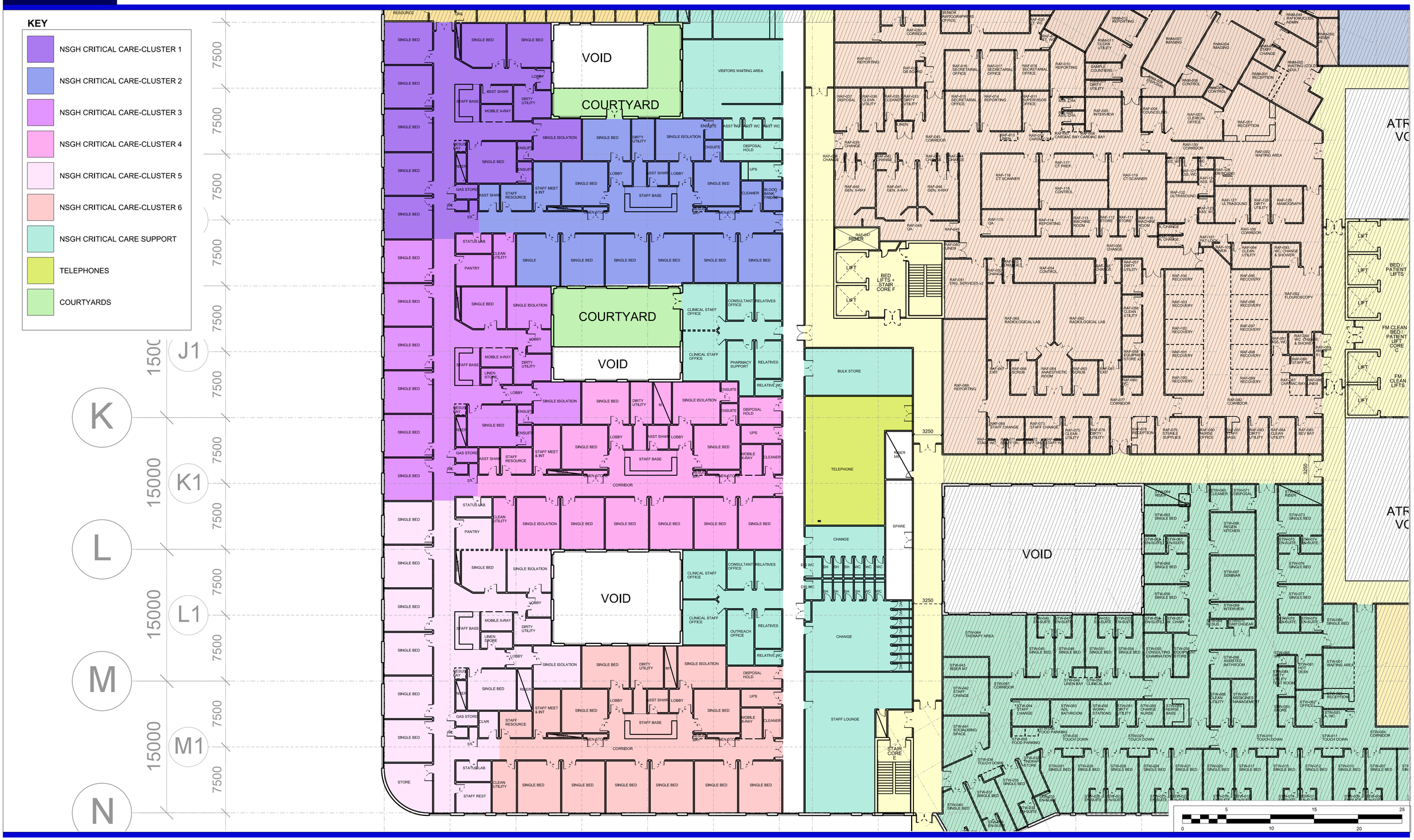
New South Glasgow Hospitals (NSGH) Project ITPD

Date: 06.07.09
Scale @A1: 1:500
Drawing Number: NA-xx-01-PL-252-010
Revision: Tender

A52787523

NHS Greater Glasgow and Clyde

Brookfield



ITPD Reference:
VOLUME 2.0
Section 2.3

FIRST FLOOR PLAN - NSGH CRITICAL CARE (2 of 2)

New South Glasgow Hospitals (NSGH) Project ITPD

Date: 02.09.09

Scale @A1: 1:200

Drawing Number: NA-XX-01-PL-252-405

Revision: A01

A52787523

NHS Greater Glasgow and Clyde

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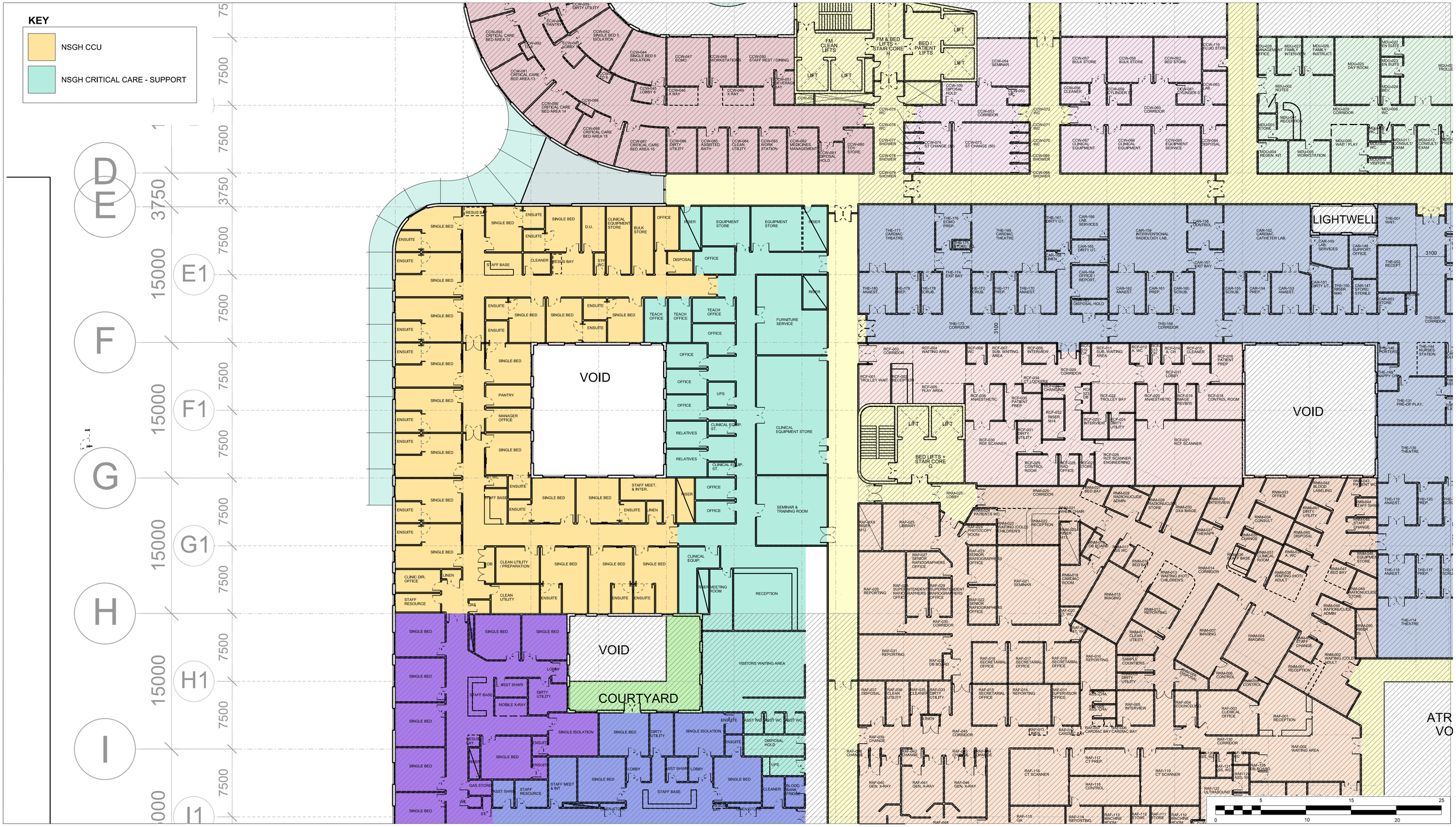


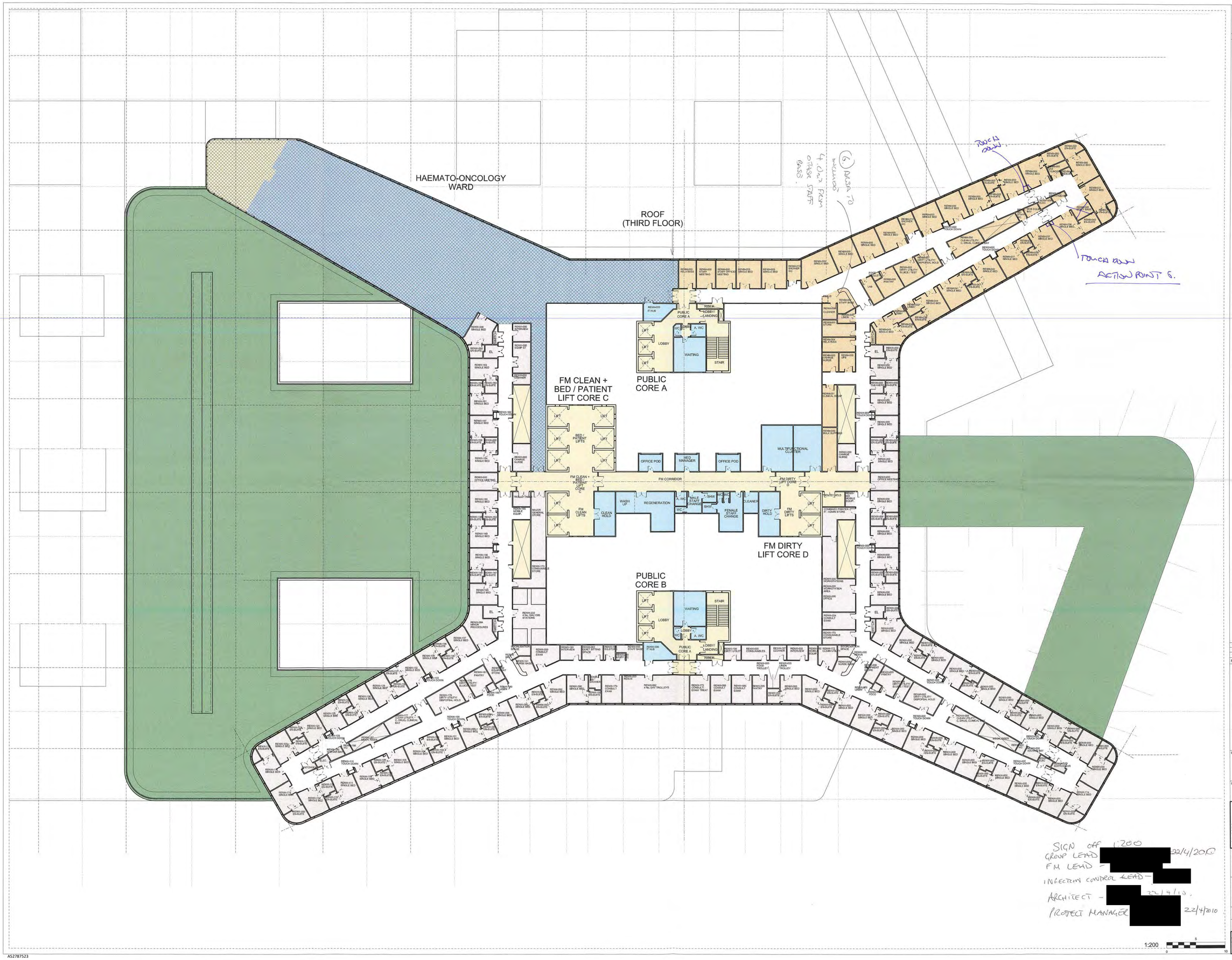
ITPD Reference:
VOLUME 2.0
Section 2.3

FIRST FLOOR PLAN - NSGH CRITICAL CARE (1 of 2)

New South Glasgow Hospitals (NSGH) Project ITPD

Date: 02.09.09
Scale @A1: 1:200
Drawing Number: NA-XX-01-PL-252-404
Revision: A01

A52787523



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Designer Identification of Hazard/Risk

KEY

- NSGH HIGHER ACUITY RENAL WARD
- NSGH RENAL WARD
- FM SUPPORT
- NSGH LIFTS & CORRIDORS

Rev	Date	Drw	Revision Notes	Chk	App
03	13/04/10	GO	Revised for User Group Meeting 3	MD	X
02	02/03/10	GO	Revised for User Group Meeting 2	MD	X
01	20/01/10	GO	Issued for User Group Meeting 1	MD	X

Client: NHS Greater Glasgow and Clyde

Contractor: **Brookfield**

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Project: NEW SOUTH GLASGOW HOSPITALS (NSGH) PROJECT

Drawing Title: FOURTH FLOOR PLAN NSGH HIGHER ACUITY RENAL WARD / RENAL WARD

Job No	Drawn	Checked	Approved
09080	MD	MD	MD
Status: Preliminary		Date: 02/09/09	Scale@A1: 1:200

Drawing No							Rev
Origin	Zone	Level	Type	Content	Sequential		
NA	XX	04	PL	252	411		03

A52787523

DESIGN ACCEPTANCE PROCEDURE FORM

ACTION POINTS

17th May 2010

Haemato-Oncology

Ward

Staff WC to be swapped with General Store.

DESIGN ACCEPTANCE PROCEDURE FORM

ACTION POINTS

18th February 2010

Haemato-Oncology

Day Case

1. Pull down nappy change required in the disabled WC
2. WC to be designated as staff WC
3. BMT to have en-suite relocated from Day Case Ward
4. BMT to be switched with waiting area
5. Play area to be identified within waiting area
6. Interview room to move
7. Manager office to be relocated. Data management to be relocated closer to the ward
8. Workstation and reception to have glazed screen between them
9. Clean utility to be relocated centrally between consultant rooms
10. Nedamin room to have external extract duct
11. BMT waiting areas to be enclosed and consolidated

TCT

1. TCT ward layout to be reviewed to ensure that this is a clearly identifiable stand alone department. Architect to redesign

Inpatient

1. Radiation bedroom lobby isn't required. Area to be added to relatives bedroom
2. Direct corridor access is required to the relatives room (Radiation room)
3. 3mm lead glass window required to patients room
4. Radiation protection of room, drainage etc and adjacent rooms needs to be considered in line with users written comments
5. Architects to consider users comments with regard to Radiation bedroom and redesign area
6. Users to pass comments on UCLH to architects to inform department design
7. Radiation rooms to be located within the current general ward location to ensure no radiation leakage into adjacent bedrooms
8. 2 person office, currently located in support accommodation, to be relocated to the ward next to the isolation room
9. Parking bay to be renamed "parking bay – equipment"
10. WCs to be redistributed across the ward floor plan

TCT

1. Clean and dirty utility rooms to be relocated centrally (play room location)

Support

1. Chemo room to be relocated centrally (play room location)
2. Relocate school room next to TCT
3. Reduce school room by 6m² and reduce 2 interview rooms by 2m² and use balance area (10m²) to create office
4. Architect to look at making BMT as 'stand alone' unit within department to prevent walk through

Schiehallion Unit, New Children's Hospital

Comments from Nan D McIntosh 16/02/2010

In patient Areas

Single door entrance with chemo rooms etc at entrance. – security
Is there door entry systems/cameras?
Will chemo room and clean utility be used for pharmacy dispensing and prep room.
Treatment room at entrance in corner – opposite end from clinical office, end of small corridor and a distance from resus trolley – should there be 2 trolleys
Radiation bedroom – is it lead lined as backs onto other areas e.g. interview rooms
Double door rooms-concern re observation of patients – why cleaners/store areas in front of/next to these rooms
What is the level of filtration – can any double door room be used for BMT
Why only 4 TCT bedrooms on a public/ward corridor with ??social space/contingency area on opposite side of corridor. Public pathway should not go through TCT.
Toilets – seems to be one outside sch office (is this nurses/sisters/medic office). Also one at opposite end of corridor but can't work out how to access as it seems to be behind lift.
Clinical office next to TCT – is this for all medics (junior to senior for ward, BMT and TCT). Very small and not a good idea to be next to TCT – they need their privacy and this is not evident from drawings.
Why is school room and playroom not together?
No seminar room identified for teaching, meetings etc. Needed on a regular basis throughout the day for all disciplines

Daycare Areas

Haemato/Oncol/haemophilia/INR
Is there a nappy changing/disabled toilet
Why 2 toilets in DCU bed bay?
Waiting area should be closed off and why not next to bedbay
Interview room not well sited – next to open waiting area
Where is play area (?combined with waiting areas) – small
What is man office – is this Data managers
Why Haemophilia office and consult room?
If patients can't go to Lab, then space is needed within DCU for storage of factor.
Don't think clean utility room big enough for DCU equip/drugs and haemophilia factor storage
Dedicated phone for INR results/service when Specialist nurses not in there office (wherever!!) Phone would need to be put on call forward to
Where – resus trolley

Is work station for all DCU Doctors/Nurses/specialist nurses/ANP/POONS/DCU sister. Doesn't seem to be any identified hot desks? Angela needs an office/hot desk within dept for herself
Why is entrance to general store between 2 sets of doors – difficult/can't be supervised. Why 2 sets of doors when only one at other side
Where does other door go – beside clean lifts.
Why can't clean/dirty utility rooms not be centralised to allow serices to all DCU areas equally and supervision of these areas (away from exits) as drug storage etc.
Doesn't seem to be any windows/natural light in any examination/consult rooms where needed. Better natural light in waiting areas!!

BMT DCU
No toilet/nappy changing in this area – could one be taken from bed bay?
Not good to have BMT waiting area open – needs to be closed in with toilet facilities.
Should not be situated between DCU waiting area and bed bay
Where do children have thumb stabs – will this be centrally in hospital?

TCT DCU
Are TCT outpatients/day stays being dealt with in DCU – doesn't seem to be any space allocated in TCT unit. Seems to be at least 5 doorways along corridor from DCU to TCT (waste of staff time up and down corridor which seems to be public)

General comments

Pharmacy dispensing
Will this be in chemo room in ward – if so will it also cover DCU/TCT

Offices
High dependency area and all disciplines need to have some type of office space next to/within area. Staff need to be onsite for quick response to patients

Toilets
Only 1/2 in ward area for staff/visitors. I know that it has been said that staff toilets will be outside ward in corridors – but nursing staff cannot walk off ward area at anytime.

Seminar room
Why do we not have?

Whole area needs to be fitted with call/speaker system as staff do not have identified areas and may need to be contacted quickly

I feel that we compromised on some areas when we moved from 7A to Schiehallion unit. We are now compromising further when going into a new hospital with no apparent room for expansion

SCHIEHALLION WARD, RADIOTHERAPY TREATMENT SUITE

RPA comments on the proposed 1:200 layouts (for discussion 18/02/10) are as follows:

1. **Location**: Is this radiotherapy treatment suite located at the entrance to the ward? The radiation treatment room 038 is adjacent to single bed 035 via the external window and the relative's bedroom adjoins this treatment bed rather than the lobby. Likewise, there appears to be potential for irradiation out on to the green roof at the entrance.

2. **Bed Location**: This is not indicated but it would appear that there is a potential for irradiation out the double doors into the corridor. This may be overcome possibly by a re-design with a baffle shield.

3. **Doors**: The UCH exemplar had sliding doors, which present access challenges. We should be able to get away with 6 mm lead penny farthing swing doors, as we have in the Beatson.

5. **Lobby and Ante-Room**: On the current layout this seems an inefficient use of space. Would it be possible to have a joint Lobby & Ante-room, so this is a large area for the relative parent to relax while caring for the child.

5. **Relative's Bedroom**: I would like to see the relative's bedroom abutting the radiation treatment room but not accessed from the radiation treatment room, but with a 3 mm lead glass window so the relative can easily observe the patient without having to go into the room.

6. **Above and Below**: What is there above and below?

7. **A Drain Run**: I'm concerned about the drain run. This needs to go directly to a main sewer, through areas of low occupancy and may need to be shielded. With a robust design, we may get away without shielding as we did in the Beatson.

8. **Generic Shielding Spec**: On the basis of design of previous radio-iodine rooms, a generic spec would be that the radiation bedroom 038 and associated en-suite 037 should be a solid concrete box 300-500 mm thick concrete (density 2400 kg/m^3) with a solid external wall. This thickness and density and concrete should be full floor to ceiling height and include the floors and ceilings. We may get away with a thinner thickness on the external wall dependent upon occupancy outside and distances. All penetrations must be minimised & agreed with the RPA. Ideally, all services should be routed above the entrance doors.

   Some shielding will also be required in the Ante/Lobby Area but to a lesser specification.

9. **Doors**: With a small baffle shield in the room, the inner double doors & frames should be 6mm of lead equivalence throughout and the outer double doors & frames should be a minimum of 3mm lead equivalence, with appropriate door closing furniture.

10. **CCTV Viewing**: This will be required from the nurses' station and the relative's room.

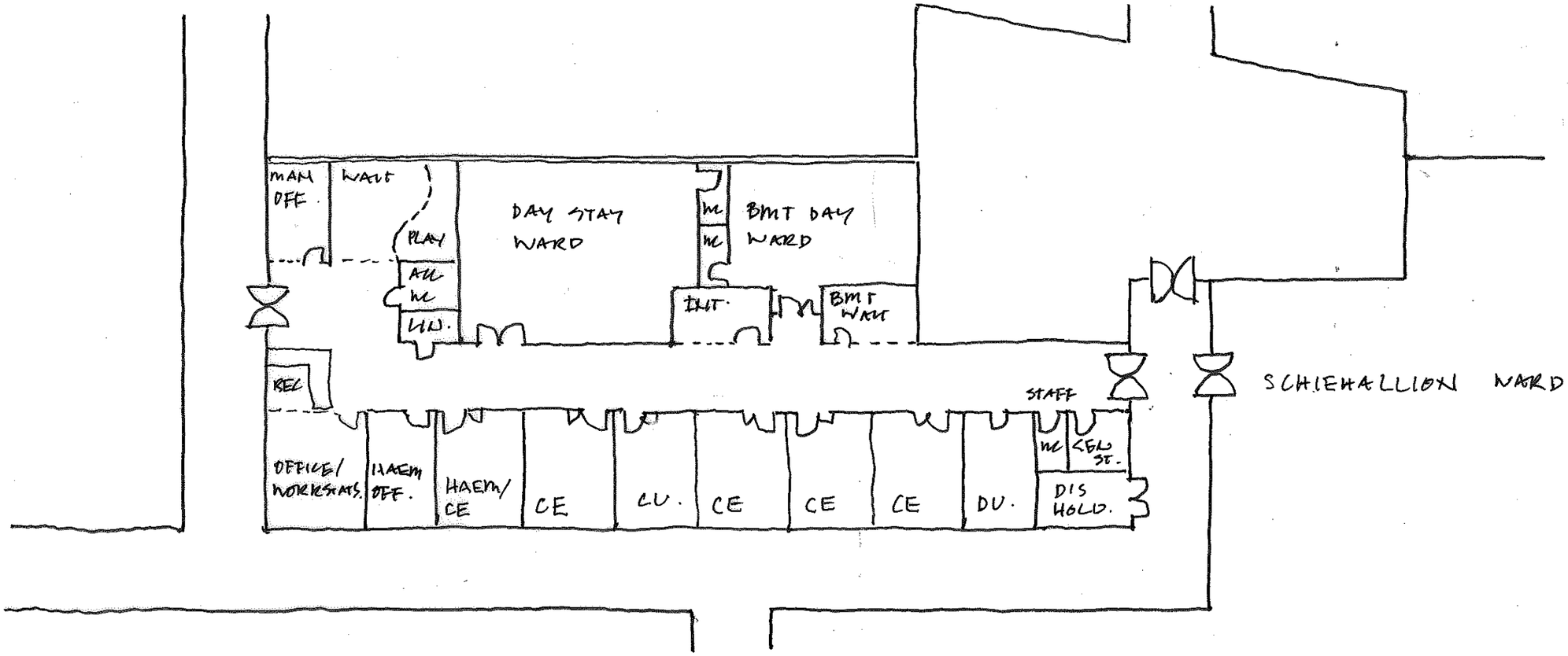
11. **External Warning Lights and Signs**: These will be required.

12. **Delay tanks**: Given the anticipated workload, consideration should be given for the drains from this radiation treatment room going to adjacent delay tanks for the store decay of the waste for a specified period before discharging to the sewer.

I am concerned about the lack of an adjacent store for radiation contaminated linen, etc and the absence of the mention of a Decay Store.

A G Brennan
Radiation Protection Adviser

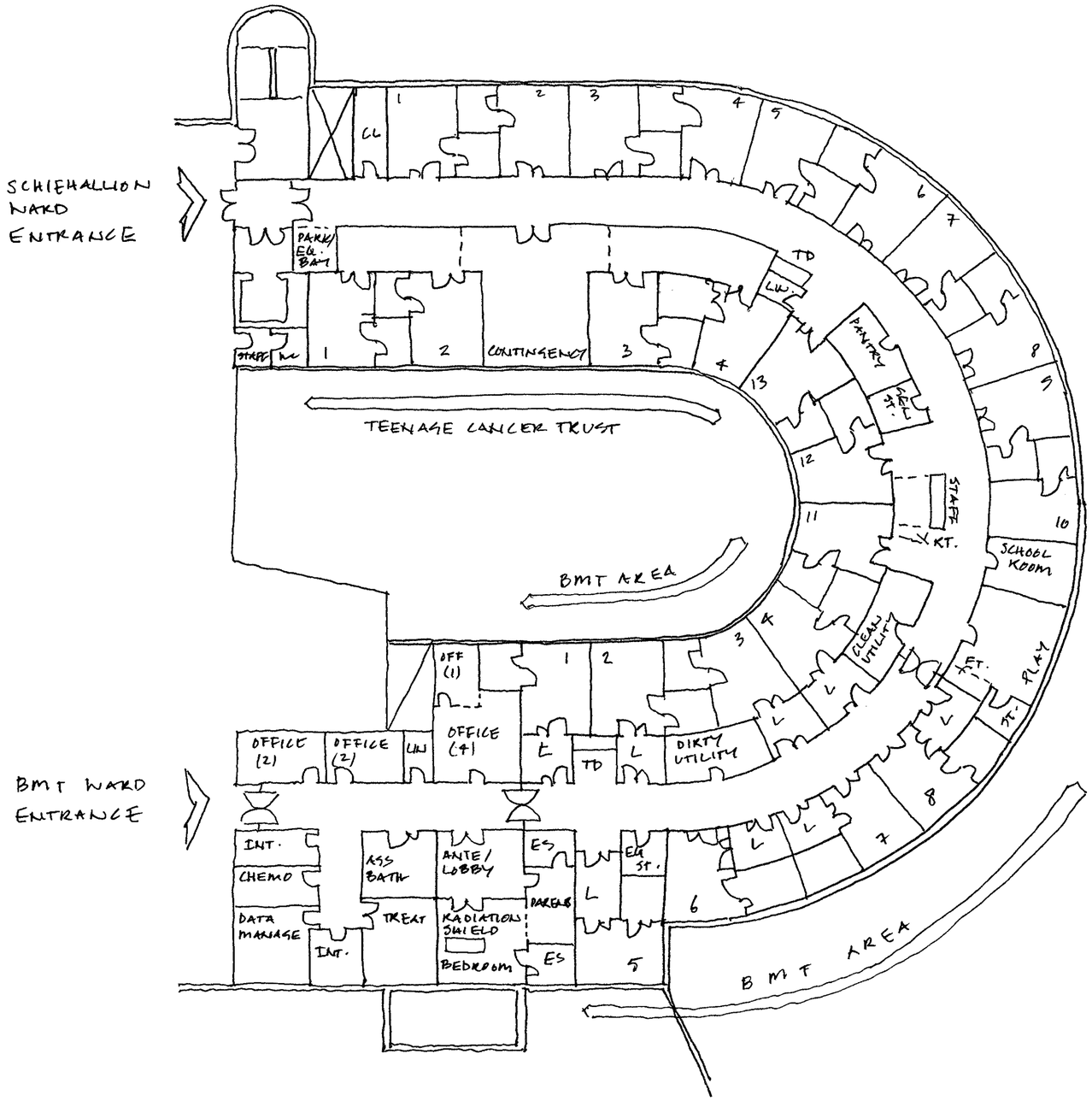
17th February 2010



2010-03-18 1:200 @ A3

HAEMATO-ONCOLOGY DAY CASE UNIT
(SCHIEHALLION) 2ND ITERATION.
02 LEVEL.

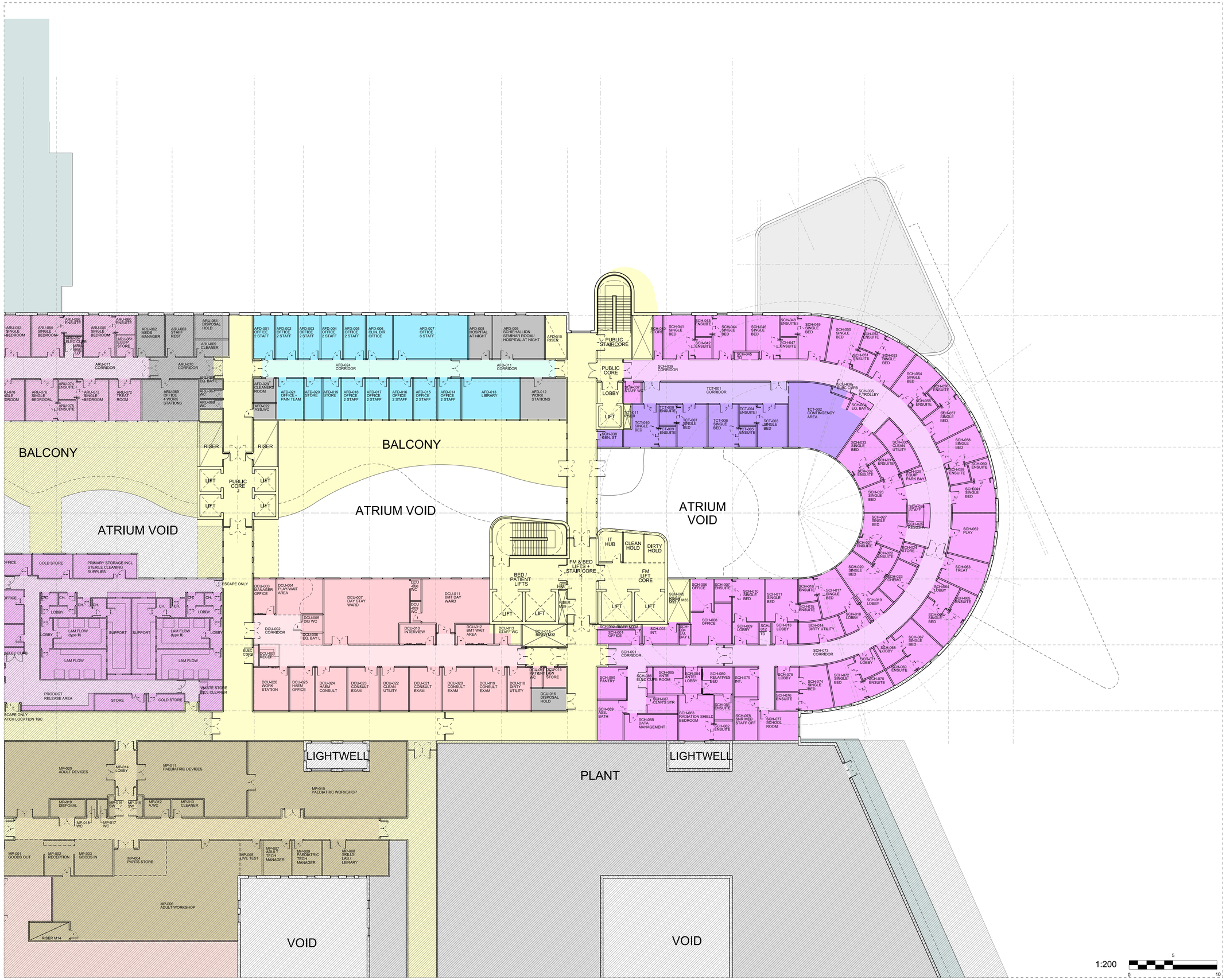
A52787523



2010 - 03 - 17 1:200 @ A2

NCH SCHIEHALLION WARD 02

2ND ITERATION



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Designer Identification of Hazard/Risk

KEY

- NCH SCHIEHALLION WARD
- NCH TEENAGER CANCER TRUST
- NCH THEATRES - ANAESTHETIC DEPARTMENT FACILITIES
- NCH DAY CASE UNIT
- NCH SHARED FM SUPPORT

Rev	Date	Drw	Revision Notes	Chk	App
07	22/06/10	GO	Revised post UGM 3 for record Sign-Off drawing	JH	X
06	10/05/10	GO	Day Case revised for User Group Meeting 3	JH	X
05	06/05/10	GO	Schiehallion Ward revised for User Group Meeting 3	JH	X
04	29/03/10	GO	Schiehallion Ward amended from comments of User Group Meeting 2	JH	X
03	23/03/10	GO	Schiehallion Ward and Day Case revised for User Group Meeting 2	JH	X
02	21/03/10	GO	Revised for User Group Meeting 2	JH	X
01	10/02/10	GO	Issued for User Group Meeting 1	JH	X

NORTH

Client

NHS Greater Glasgow and Clyde

Contractor

Brookfield

NIGHTINGALE associates architects
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Tel: 0207 079 9900
Fax: 0207 079 9901
www.nightingaleassociates.com

Project
NEW SOUTH GLASGOW HOSPITALS (NSGH) PROJECT

Drawing Title
SECOND FLOOR PLAN
NCH SCHIEHALLION WARD / DAY CASE UNIT / THEATRES AND ANAESTHETICS SERVICE OFFICES

Job No	Drawn	Checked	Approved
09080	GO	JH	JH

Status	Date	Scale@A1
Preliminary	02/09/09	1:200

Drawing No						Rev
Origin	Zone	Level	Type	Content	Sequential	
NA	XX	02	PL	252	402	07

From:	Craig, Carol
To:	Brown, Isabel; Campbell, Stewart; Deighan, Chris; Fisken, Bill; Johns, Marjorie; Little, Julia; McLucas, Margaret
Cc:	Balfour, Sandra; Fulton, Christina; Keenan, Elaine; Reilly, Gillian; Connelly, Karen; Gallacher, Stephen; Griffin, Heather; McCluskey, Fiona; McNamee, Sandra; Wrath, Frances; David Bower; Emma White
Subject:	New South Glasgow Hospital: Renal User Group Meeting, 21st Jan 2010
Date:	15 January 2010 10:11:12
Attachments:	GRI_TransDirections.pdf User Group - Group Remit - Renal User Group.doc Meeting Agenda_Renal.doc Schedule for renal wards and dialysis unit ref ER rev 1.xls NA-XX-04-PL-252-410_A01.pdf NA-xx-02-PL-252-409_revA01.pdf

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Sent on behalf of Heather Griffin

Dear All

New South Glasgow Hospital: Renal User Group Meeting, Thursday, 21st January 2010, 12.30pm – 5.00pm, in Seminar Rooms 1A and 1B, Level 1 of University Block, Glasgow Royal Infirmary (for non NHS folks, hospital plan attached)

Further to my previous email with regard to the above meeting, please find the following attached:

> Agenda for Meeting
> Group Remit/Terms of Reference – your Group Lead is Julia Little
> Schedules of Accommodation for Renal Wards and Dialysis Unit (note, 2 sheets in this file)
> The first draft drawings attached - these are a starter for 10, and the purpose of the meeting is to discuss amendments to the layout. One plan shows the inpatient wards and 4 day recliner chair area - to help you relate it back to the schedule of accommodation we've kept the original labels as in the schedule i.e. 22 bed ward and 16 bed ward etc, but as you can see the layout is a continuous flow so operationally you can split the beds however required. The day area is in the green area near the ward entrance for easy access.

The second floor plan shows the renal dialysis area – it's the area marked in pale purple. The dialysis stations are shown as cubicles but at the meeting with the architect we can discuss amending the layout to reflect your requirement for a configuration similar to the Stobhill ACH unit i.e. three rooms of 8 patients and 6 single rooms.

The format for the meeting will be to start with a short presentation showing the hospital campus, the block plans for the hospital, and flows through the hospital, before going on to discuss the 1:200 layout for the Renal Wards and Dialysis Unit.

Stewart, Bill – we've reserved two meeting rooms; the plan is you start with the main user group and then peel off into a subgroup to discuss the water and technical issues.

You may find the 1:200 detailed plans difficult to read unless you have access to a large printer, therefore large A1 hard copies of the plans will be available from

your Group Lead, Julia, by this afternoon.

If you have any problems or need further information please do not hesitate to contact me by email or phone.

Can you please confirm your attendance at the meeting, thanks.

Regards
[redacted]

From: Craig, Carol
Sent: Wednesday, December 16, 2009 10:56 AM
To: Brown, Isabel; Campbell, Stewart; Deighan, Chris; Fisken, Bill; Johns, Marjorie; Little, Julia; McLucas, Margaret
Cc: Balfour, Sandra; Fulton, Christina; Reilly, Gillian; Connelly, Karen; Gallacher, Stephen; Griffin, Heather; McCluskey, Fiona; Wrath, Frances
Subject: New South Glasgow Hospital : Renal User Group - Confirmation of meeting with Contractor to discuss detailed design

Sent on behalf of Heather Griffin

Dear All

I am emailing to confirm that the meeting with the Contractor, to discuss the detailed design of the renal wards and renal dialysis unit, will take place on **Thursday, 21st January 2010, 12.30pm – 5pm, venue to be confirmed.**

Just to explain the process, there will be 2 to 3 meetings with yourselves, the Project Team and the Contractor's team (architect and healthcare planner) to discuss the 1:200 detailed floor plans of the renal ward and renal dialysis unit. The architect will provide a first draft of the floor plans a week before the meeting so that you can discuss them internally before the meeting with ourselves and Contractor. The drawings will be based on the Schedule of Accommodation developed by the user group in the first stage of this project. I must highlight that the footprint of this schedule is fixed.

Following the meeting the architect will tweak the floor plans in accordance with comments made at the meeting and the revised floor plans will be issued a week before our second meeting – date to be confirmed.

I will be sending out further information nearer the date.

If you require any further information please do not hesitate to contact me.

Regards
[redacted]

****

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Lecture Theatres
Emergency
Plastics & Burns
University Building
Princess Royal Maternity
Walkway
Clinics
THC
Queen Elizabeth building
St Mungo Building
Lister Building
Link Corridor
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Stirling Road
Buses & taxis Only
Surgical Block
Casualty
University Building
Wishart Street
Medical Block
Cathedral
Cathedral Square
St. Mungos Museum
Necropolis
Cathedral Street
Buchanan St.
Bus Station &
Underground
Rottenrow East
John Knox Street
Duke Street
High St
station
N

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GREATER GLASGOW AND CLYDE NHS BOARD

NEW SOUTH GLASGOW HOSPITAL PROJECT

USERS GROUP
TERMS OF REFERENCE

1. **NAME OF GROUP**

The name of the Group shall be the **New South Glasgow Hospital Renal User Group**.

2. **AIM**

To provide a forum for agreement/sign off of the 1:200 and 1:50 architectural drawings for the Renal Wards and Outpatient Dialysis Department. Please note that the architectural drawings will be based on the previously signed off Schedules of Accommodation which are now fixed. Sign-off of the drawings will follow a formal procedure and will be recorded on the "Design Acceptance Procedure" Form. This form will record the outcome of each meeting and be signed by the User Group Lead on behalf of the Directorates at the end of each meeting.

3. **MEMBERSHIP**

- The membership of the group has been approved by the Acute Services Director(s)
- The Group will have an identified Lead
- Members will be responsible for (i) discussing the design with colleagues and in the user meetings (ii) for communicating the priorities and associated work plans agreed by the Group to their colleagues following each meeting

4. **GROUP LEAD**

- The Lead for the Ward User Group is Julia Little
- The Group Lead will be responsible for the ensuring that Directorate priorities are reflected in the design
- The Group Lead will be responsible for keeping their Director appraised of the status of the design process
- Where differing options regarding the design arise the Project Team will take their instruction from the Group Lead

5. **MEETINGS OF THE GROUP**

- Two to three User Group meetings will be held to agree the 1:200 Departmental layouts and, following this a further 2 to 3 meetings will take place to agree the requirements for each room. The User Group meeting will be facilitated by the Project Team and attended by the Project Team (including FM and infection control) and the Contractor Team

Seven days before each meeting hard copy drawing(s) will be issued by the Project Team to each Group Lead. It will be issued to other members of the User Group electronically.

At the User Group meeting the Design Team (Architect supported by the Health Planner and Project Team members) will provide a detailed update on the User Group Department(s) design progress and take the group through the detailed designs.

6. **RECORD OF THE MEETING**

Action points will be recorded by the architect on the Design Acceptance Form at the meeting and a copy will be distributed to the Group following the meeting.

New South Glasgow Hospitals (NSGH) Project

Adult Hospital

Clinical User Group Meeting: No. 1 (1:200 Stage)
Department: Renal
Date & Time of Meeting: Thursday, 21st January 2010, 12.30pm – 5pm

Meeting Agenda

1.0 Introductions
Open Meeting
Confirm Meeting Attendees / Distribute Attendance List
User Group Remit

2.0 Brief Presentation of the Scheme
Short power point presentation of the current design including Master Plan
Key Department Adjacencies / 3D Visualisations / Fly-through

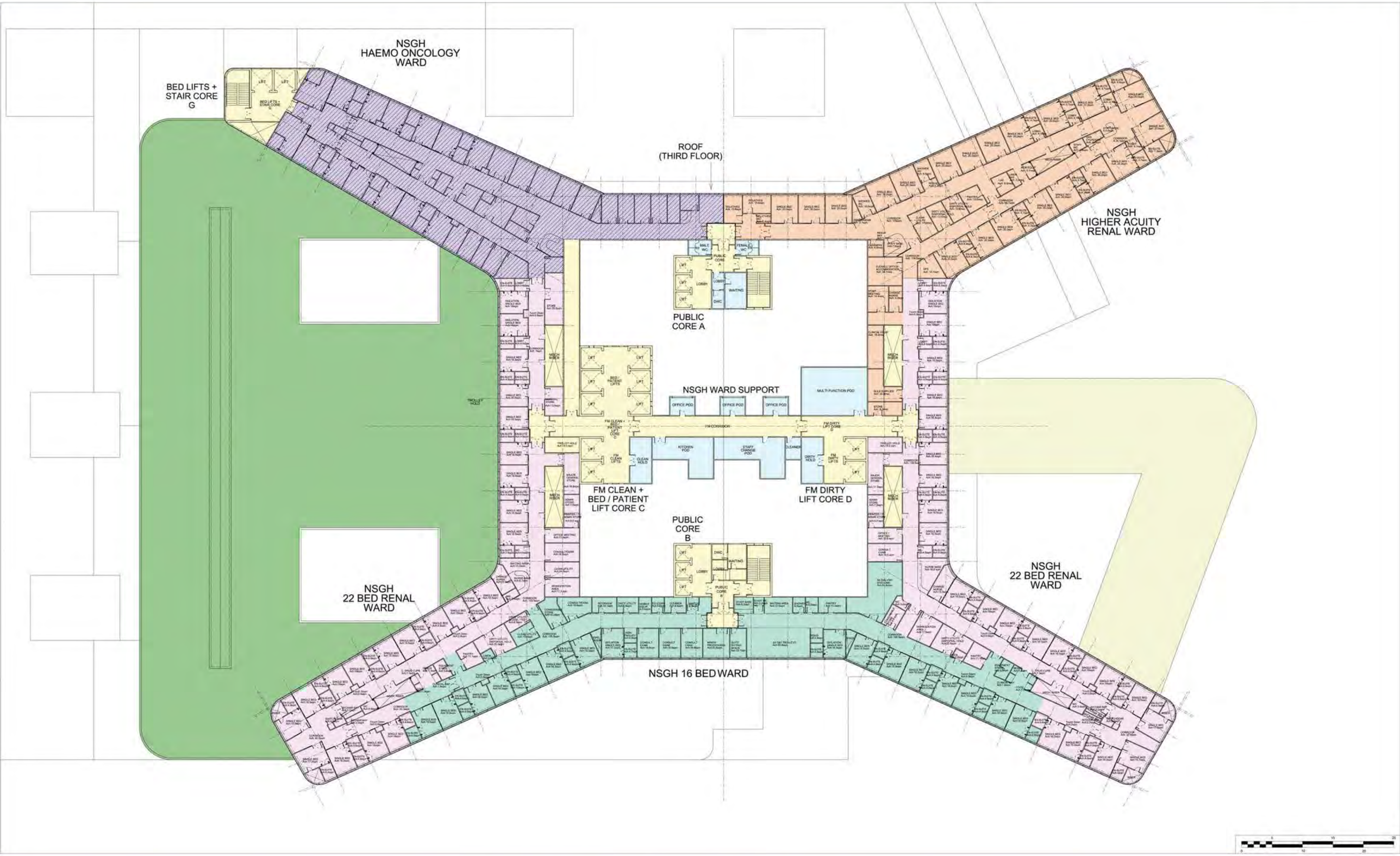
3.0 1:200 Design Review Process
Summary of 1:200 Meeting Process
Department Sign-Off

4.0 1:200 Department Plan Review
Circulation Flows

5.0 Agree Action Plan and Responsibilities
Summarise
Agree amendments required to Department
Sign-Off Design Acceptance Procedure Form

6.0 AOB/ Confirm date of next meeting

(Stewart, Bill, as described you'll be moving off into a subgroup to talk about the water/technical issues)



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FOURTH FLOOR PLAN - RENAL IN-PATIENTS AND DAY BEDS

New South Glasgow Hospitals (NSGH) Project

Date:	Scale @A1:
14.01.10	1:200
Drawing Number:	Revision:
NA-XX-04-PL-252-410	-

RENAL WARDS & MAIN DEPARTMENT

Total Bed Numbers = 80

NB: All beds are to be plumbed for haemodialysis

Number of Beds		**22**			2 No 22 Bed Wards to be Provided
Percentage Single Rooms		**100%**			
Description	**Qty**	**Unit Area m²**	**Total Area m²**	**ADB Code**	**Comment**
Bed area facilities					
Acute single bedroom (incl family & clinical support space)	22	16.5	363.0	B0303	(100% Single rooms)
Patients en-suite wc & wash double assist	22	4.5	99.0		(as per HBN 00-02)
Sub-Total			**462.0**		
Patient support facilities					
Consulting/examination (or treatment) room	1	16.5	16.5		
Quiet sitting space / Additional Social Space	1	9.0	9.0		
Interview/sitting room: 5 places	1	9.0	9.0		
Resuscitation trolley parking bay: 1 trolley	1	2.0	2.0		
Pantry/Beverage making area	1	12.0	12.0		
Ward Food trolley parking bay	1	1.5	1.5		
Wheelchair bay	1	4.0	4.0		
Nurses Station	1	8.0	8.0		
Touch Down Spaces	4	2.0	8.0		
Sub-Total			**70.0**		
Backup storage					
Linen trolley parking bay	1	1.5	1.5		
Consumables Store	1	14.0	14.0		
Clean Utility Room	1	12.0	12.0		
Equipment store	1	5.0	5.0		Plumbed Storage for Dialysis Machines
Mobile equipment bay	1	4.0	4.0		
Sub-Total			**36.5**		
Utilities					
Dirty Utility/sluice/Test Room - small	1	6.5	6.5		
Dirty utility/Disposal hold	1	8.0	8.0	Y0315	Interim Disposal Hold on Ward
Cleaners room	1	7.0	7.0		
Staff wc & wash: Ambulant user	1	2.0	2.0		
Switchgear cupboard	1	1.0	1.0		
Sub-Total			**24.5**		
Office and administration services					
Reception / Clerk:- 1 position open to corrid	1	6.0	6.0		
Office - 1 position + meeting area	1	12.0	12.0		
Charge Nurse/Sister's Office	1	9.0	9.0		
Printer/IT/Admin Store Room	1	6.0	6.0		
Waiting area: 3 places	1	4.0	4.0		Opposite Reception office
Sub-Total			**37.0**		

Total net			**630.0**
Planning	5%		31.5
Sub-Total			661.5
Engineering	3%		19.8
Circulation	31%		205.1
Total			**886.4**

Additional Space To support both 22 bed wards:					
Major General Storage for Department	1	31.0	31.0		
Workstations (6 x clinical)	1	24.0	24.0		
Sub-Total			**55.0**		

Total net			**55.0**
Planning	5%		2.8
Sub-Total			57.8
Engineering	3%		1.7
Circulation	31%		17.9
Total			**77.4**

16 Bed Ward & Day Unit

Number of Beds		**16**			
Percentage Single Rooms		**100%**			
Description	**Qty**	**Unit Area m²**	**Total Area m²**		**Comment**
Bed area facilities					
Acute single bedroom (incl family & clinical support space)	16	16.5	264.0	B0303	(100% Single rooms)
Patients en-suite wc & wash double assist	16	4.5	72.0	V1610	(as per HBN 00-02)
Quite sitting space / Additional Social Space	1	9.0	9.0		
Sub-Total			**345.0**		
Day Assessment & Treatment Area					
Minor Procedures & Treatment Room (incl prep)	1	21.0	21.0	X0240	NB: Air handling & Gases required
Consult Exam Room	3	16.5	49.5		
Waiting Area	1	12.0	12.0		
4 Day Trolley Spaces	4	13.5	54.0		2 sided glass cubicles, open front
Patients en-suite assisted shower, wc & wash	1	4.5	4.5		
Staff Base	1	8.0	8.0		
WC - W'chair	1	4.5	4.5		
Sub-Total			**153.5**		
Inpatient Dialysis Centre					***Supervised area for inpatients***
Dialysis Stations	4	13.5	54.0	X0253	2 sided glass cubicles, open front
Sub-Total			**54**		
Patient support facilities					
Consulting/examination (or treatment) room	1	16.5	16.5		
Interview/sitting room: 5 places	1	9.0	9.0		
Resuscitation trolley parking bay: 1 trolley	1	2.0	2.0		
Pantry/Beverage making area	1	12.0	12.0		
Ward Food trolley parking bay	1	1.5	1.5		
Touch Down Spaces	3	2.0	6.0		(as per HBN 04-01)
Sub-Total			**47.0**		
Backup storage					
Linen trolley parking bay	1	2.5	2.5		
Clean Utility Room	1	12.0	12.0		
Consumables Store	1	12.0	12.0		
Equipment store	1	5.0	5.0		Plumbed Storage for Dialysis Machines
Mobile equipment bay	1	4.0	4.0		
Sub-Total			**35.5**		
Utilities					***co-locate with day unit***
Dirty utility/disposal hold	1	8.0	8.0	Y0315	Interim Disposal Hold on Ward
Cleaners room	1	7.0	7.0		
Staff wc & wash: Ambulant user	1	2.0	2.0		
Switchgear cupboard	1	1.0	1.0		
Sub-Total			**18.0**		
Office and administration services					
Reception / Clerk:- 1 position open to corridor	1	6.0	6.0		
Office incl.meeting area	1	12.0	12.0		
Printer/IT/Admin Store Room	1	6.0	6.0		
Waiting area: 3 places	1	4.0	4.0		Opposite Reception office
Workstation Area + Case Notes: 3 Person	1	15.0	15.0		
Sub-Total			**43.0**		
Other & Shared Accommodation					
Staff / Nurse Bases	2	5.0	10.0		
Sub-Total			**10.0**		
Other Support Acommodation					

Equipment Store	1	16.0	16.0		
Sub-Total			**16.0**		

Total net			**722.0**
Planning	5%		36.1
Sub-Total			758.1
Engineering	3%		22.7
Circulation	31%		235.0
Total			**1015.9**

20 Bed Higher Acuity (Level 2 Ward)

Number of Beds		**20**			
Percentage Single Rooms		**100%**			
Description	**Qty**	**Unit Area m²**	**Total Area m²**		**Comment**
Bed area facilities					
Single Room bed area:	20	20.0	400.0		
Gowning lobby: single bedroom	2	5.0	10.0		
Patients en-suite wc & wash double assist	12	4.5	54.0		(as per HBN 00-02) These are to be associated with single rooms with gowning lobbies and 8No rooms
Shower / WC - Assisted	2	7.0	14.0		To support rooms without en-suites
Staff Meeting / Interview	1	16.0	16.0		
Communications / Staff Base	2	8.0	16.0		
Sub-Total			**510.0**		
Entrance/Reception/Administration facilities					
Reception desk/office: 2 places	1	12.0	12.0		Adjacent to entrance
Visitors sitting & waiting room (with beverages)	1	15.0	15.0		
Visitors wc: Disabled/ wheelchair user	1	4.5	4.5		
Telephone area: single booth; low height	1	2.0	2.0		
Sub-Total			**33.5**		
Utility/clinical area support facilities					
Clean utility	1	14.0	14.0		
Status laboratory	1	8.5	8.5		
Dirty utility with urine testing	2	12.0	24.0		
Staff wc & wash: Ambulant user	1	2.0	2.0		
Housekeepers (cleaners) room	1	7.0	7.0		
Patients pantry	1	12.0	12.0		
Sub-Total			**67.5**		
Office and administration services					
Relatives Rooms	2	14.0	28.0		
Charge Nurse/Sister's Office	1	9.0	9.0		
Flexible office accomodation (6 spaces)	1	24.0	24.0		
Administration store room	1	2.0	2.0		
Sub-Total			**63.0**		
Storage/holding facilities					
Bulk supplies store	1	15.0	15.0		
Clinical equipment store	1	18.0	18.0		
Linen bay/store	2	2.5	5.0		
Ready use medical gas cylinders store	1	4.0	4.0		
Mobile equipment bay	1	4.0	4.0		
Cardiac arrest/emergency trolley bay	2	1.0	2.0		
Sub-Total			**48.0**		
Engineering facilities					
Switchgear cupboard	1	2.0	2.0		
Battery/UPS room	1	9.0	9.0		
Sub-Total			**11.0**		

Total net			**733.0**
Planning	5%		36.7
Sub-Total			769.7
Engineering	3%		23.1
Circulation	31%		238.6
Total			**1031.3**

Dialysis Unit (30 Stations)

Room Type	Quantity	Size	Total	ADB Code	Comments
		M2	M2		
Entrance, reception & waiting facilities					
Vehicle drop-off point	1		0.0		External allowance. Designated
Car parking spaces	12		0.0		External allowance. Dedicated space
Car parking spaces for people with disabilitie	4		0.0		External allowance. Dedictaed space
Main entrance draught lobby	1	11.0	11.0		Includes entrance canopy area
Public telephone: single booth	1	1.5	1.5		
Public telephone: single booth, accessible	1	2.0	2.0		
Reception & office: 6 staff	1	36.0	36.0		Includes record storage
Waiting area: 30 persons including 2 wheelc	1	44.0	44.0		
Parking bay: 5 wheelchair spaces	1	5.0	5.0		
Refreshment: vending machine	1	3.0	3.0		
Sub Total			**102.5**		
Counselling, interview, consulting/examination & treatment facilities					
Physical measurement area: Renal	3	8.0	24.0		
Consulting & examination room: single side c	2	13.5	27.0		
Treatment cubicle: dialysis, 1 patient	24	13.5	324.0		Multi-areas - 3no.x 8 recliners
Isolation treatment room: dialysis, 1 patient	6	13.5	81.0		
Treatment room: Continuous ambulatory per	2	16.5	33.0		
Training room & office: Peritoneal Dialysis (P	1	16.5	16.5		
Sub Total			**505.5**		
Support facilities: Clinical					
Staff base: 4 staff	2	12.0	24.0		
Clean utility	2	14.0	28.0		
Dirty utility: bedpan disposal & urine test	2	12.0	24.0		
Sub Total			**76.0**		
Visitors & patients support facilities					
Patient changing room: 15 places	2	15.0	30.0		
Shower & wash: assisted	3	4.5	13.5		
WC & handwash: semi ambulant	4	2.5	10.0		
WC & handwash: accessible, wheelchair ass	1	4.5	4.5		
Pantry: serving 30 persons	1	12.0	12.0		
Sub Total			**70.0**		
Staff support facilities: Offices					
Interview & counselling room: 5 persons	2	9.0	18.0		
Office: 1 staff	1	10.5	10.5		
Office: 2 staff	1	13.0	13.0		
Sub Total			**41.5**		
Staff support facilities: Sanitary & changing					
Staff changing room: 10 places	1	8.0	8.0		
Staff changing room: 20 - 30 places	1	16.0	16.0		
Shower: ambulant (non patient)	3	2.5	7.5		Separate males & females
WC & wash: ambulant	4	2.0	8.0		Separate males & females
WC & handwash: accessible, wheelchair ass	1	4.5	4.5		
Sub Total			**44.0**		
Staff support facilities: Education & training					
Seminar room: 20 persons	1	30.0	30.0		To be located such that it can provide future expansion space for dialysis stations

Sub Total			**30.0**		

Support facilities: Holding & storage					
Parking bay: resuscitation trolley	1	1.0	1.0		
Store: furniture, equipment & disposables	1	40.0	40.0		
Store: equipment & renal consumables	1	25.0	25.0		
Store: linen	1	9.0	9.0		
Cleaners (Housekeeping) room	1	7.0	7.0		
Hold: disposal	1	10.0	10.0		
Sub Total			**92.0**		

Support facilities: Equipment maintenance					
Equipment Servicing	2	24.0	48.0		Covers whole renal service
Live Test Area	1	6.0	6.0		Covers whole renal service
Ready Use Equipment / Out Lobby	1	9.0	9.0		Covers whole renal service
Component Store	2	16.0	32.0		Covers whole renal service
Sub Total			**95.0**		

Support facilities: Engineering & plant					
Switchgear room	1	4.0	4.0		
Computer communication: IT hub room	1	9.0	9.0		
Plant room: water treatment					See M&E Specification for water treatment plant and space required.
			13.0		

Total Net			**1069.5**
Planning allowance @ 5%	5%		53.5
Sub-total			1123.0
Engineering Allowance @ 3%	3%		33.7
Circulation @ 27%	27%		303.2
TOTAL OF DIALYSIS			**1459.9**

NHS Greater Glasgow and Clyde

Brookfield

ITPD Reference:
VOLUME 2.0
Section 2.3

SECOND FLOOR PLAN - NSGH DERMATOLOGY OPD / RENAL DIALYSIS

New South Glasgow Hospitals (NSGH) Project ITPD

Date:	Scale @A1:
02.09.09	1:200
Drawing Number:	Revision:
NA-XX-02-PL-252-409	A01

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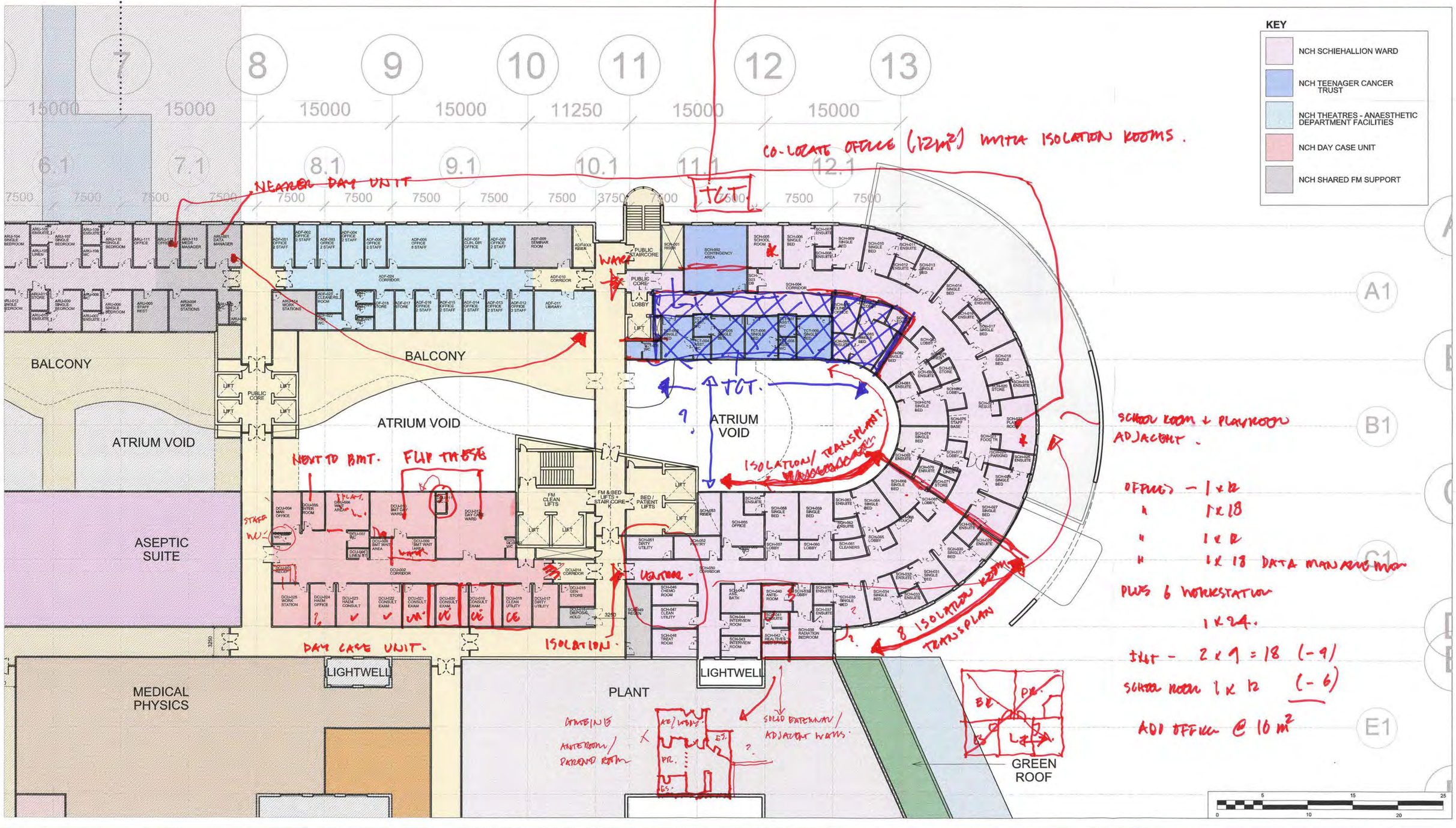
NHS Greater Glasgow and Clyde

Brookfield

TCT - DESIGN CRITERIA



ITPD Reference:
VOLUME 2.0
Section 2.3

SECOND FLOOR PLAN - NCH SCHIEHALLION WARD / DAY CASE UNIT / THEATRES AND ANAESTHETICS SERVICE OFFICES

2010-02-18
SCHIEHALLION

New South Glasgow Hospitals (NSGH) Project ITPD

Date:	Scale @A1:
02.09.09	1:200
Drawing Number:	Revision:
NA-XX-02-PL-252-402	A01

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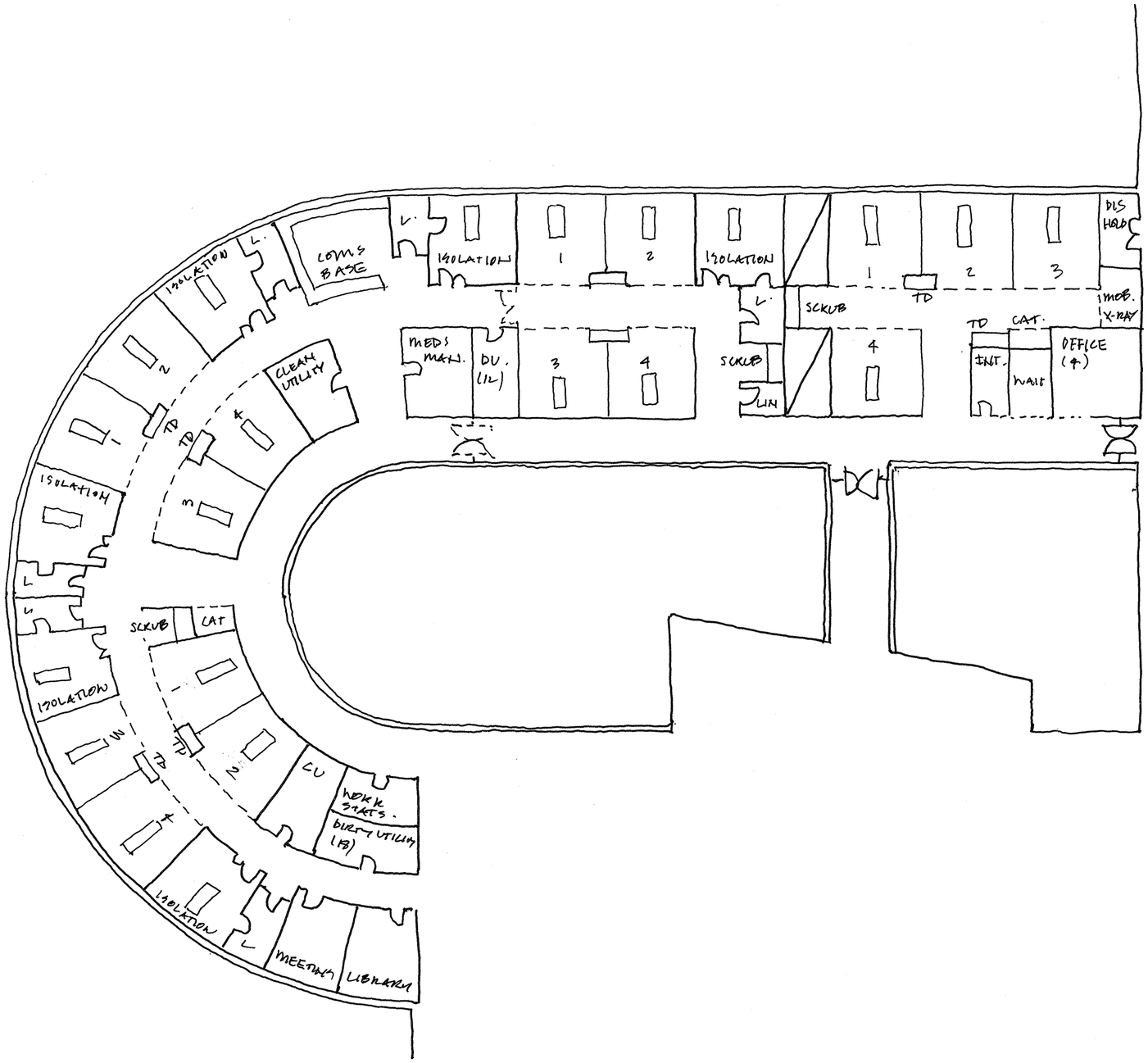


NCH PICU 01 1:200 @ A2

2010-03-12 2ND ITERATION

BED AREAS

A52787523

DESIGN ACCEPTANCE PROCEDURE FORM

ACTION POINTS

24th March 2010

PICU

1. 4 Person Office to be swapped with 2 Person Office and to be relocated within clinical area.

2. Clinical Base Area to be created at riser, (at entrance to clinical area) with small Waiting Area and Staff Base – Interview Room and Waiting to be combined into 1 enclosed room.

3. Critical Care Bed Area at entrance to be redesigned to have 2 rooms opposite the other 2 rooms (remaining small corridor, as per architect's drawing).

4. Architect to redesign groups of 4 bed bays to remove through route between clusters, as per notes on drawing, with a Staff Base serving 2 clusters.

5. Lobbies from 2 Isolation Rooms to be reallocated to the Central Staff Base. This leaves 4 Isolation Rooms with lobbies and 2 Single Bedrooms.

6. 4 Bed Clusters to be drawn as enclosed spaces with no solid/glazed partitions between beds (i.e. 4 bed bay).

7. X-Ray Room to be relocated.

8. Support Accommodation to be split between the 2 clusters.

9. Medicine Management and Status Lab to be located between the 2 clusters.

10. Relative Interview Room, next to Staff Rest, to be relocated between the clusters.

11. Milk Store to be relocated to a more central location.

12. ECMO Room to be co-located with Equipment Service room.

13. Seminar Room to be relocated next to Staff Rest/Dining.

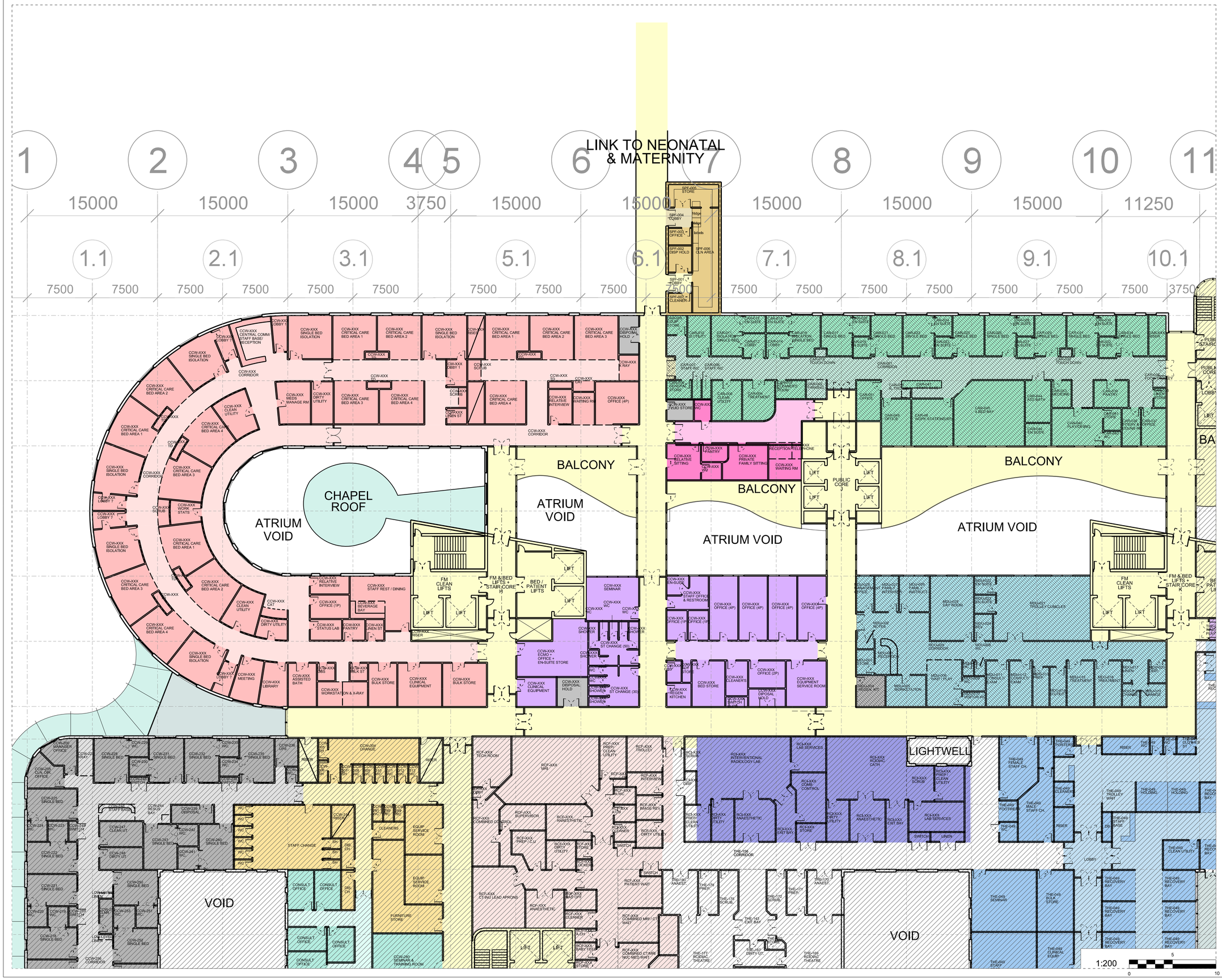
14. Staff Office and Restroom not to be located next to main corridor.

15. Theatre and PICU Equipment Service Rooms to be merged to create one room adjacent to the atrium void and corridor. Area is required to create a drop-off area in Theatres ($8m^2$).

16. ECMO Room to be renamed ECLS/Haemo-filtration.

17. Touchdown Bays to be located at the end of 4 Bed Bays.

18. Two Person Office to be relocated within the clinical area.



Notes:
- This drawing is copyright.
- Do not scale dimensions from this drawing.
- All discrepancies on this drawing are to be reported to the architect.
- Do not modify any element of this drawing.
- Use drawing only for purpose(s) issued.

Designer Identification of Hazard/Risk

KEY

- NCH CARDIOLOGY
- NCH CRITICAL CARE (PICU)
- NCH PICU ENTRANCE
- NCH PICU SUPPORT
- NCH MDU
- SHARED FM SUPPORT
- SPECIAL FEEDS

Rev	Date	Drw	Revision Notes	Chk	App
02	17/03/10	GO	Revised for User Group Meeting 2	JH	X
01	17/02/10	GO	Issued for User Group Meeting 1	JH	X

NORTH

Client

NHS Greater Glasgow and Clyde

Contractor

Brookfield

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Project
NEW SOUTH GLASGOW HOSPITALS
(NSGH) PROJECT

Drawing Title
FIRST FLOOR PLAN
NCH CRITICAL CARE (Picu) /
CARDIOLOGY WARD / SUPPORT /
MDU AND SPECIAL FEEDS

Job No	Drawn	Checked	Approved
09080	GO	JH	JH
Status: Preliminary		Date: 02/09/09	Scale@A1: 1:200

Drawing No						Rev
Origin	Zone	Level	Type	Content	Sequential	
NA	XX	01	PL	252	403	02

A52787523

CRITICAL CARE	Contract Version						Changes post UG round 1				Changes post UG round 2				Changes post UG round 3			
Description	Qty	Unit Area m²	Total Area m²	ADB CODE	Comment		CUG 1 Meeting	Qty	Unit Area m²	Total Area m²	CUG 2 Comments	Qty	Unit Area m²	Total Area m²	CUG 3 Comments	Qty	Unit Area m²	Total Area m²
Entrance/Reception/Administration facilities																		
Combined entrance	1		0.0		In circulation allowance			1		0.0		1		0.0		1		0.0
Visitors Foyer	1		0.0		In circulation allowance			1		0.0		1		0.0		1		0.0
Visitors waiting area:	1	15.0	15.0					1	15.0	15.0		1	15.0	15.0		1	15.0	15.0
Visitors wc: Disabled/ wheelchair user	1	4.5	4.5					1	4.5	4.5		1	4.5	4.5		1	4.5	4.5
Telephone area: single booth; low height	1	2.0	2.0		Missing from Brookfield Schedule			1	2.0	2.0		1	2.0	2.0		1	2.0	2.0
Reception desk/office: 4 places																		
Sub-Total			**21.5**							**21.5**				**21.5**				**21.5**
Family & Friends facilities (adjacent to main entrance)																		
Private (single) Family Sitting	2	10.0	20.0				Combine as one room	1	20.0	20.0		1	20.0	20.0		1	20.0	20.0
Relatives en-suite wc: Disabled/ wheelchair user	1	4.5	4.5		For 1 of the above rooms			1	4.5	4.5		1	4.5	4.5		1	4.5	4.5
Relatives sitting room: 12 places	1	16.0	16.0					1	16.0	16.0		1	16.0	16.0		1	16.0	16.0
Relatives pantry/beverage bay	1	6.0	6.0					1	6.0	6.0		1	6.0	6.0		1	6.0	6.0
Sub-Total			**46.5**							**46.5**				**46.5**				**46.5**
Clinical areas																		
Critical care bed area: single room; Isolation (access via gowning lobby)	6	25.5	153.0		1no provided under area			6	25.5	153.0		6	25.5	153.0		6	25.5	153.0
Gowning lobby: single bedroom	6	7.0	42.0		All rooms provided are under area			6	7.0	42.0	reduce to 4 x lobbies, use the released area of 14m² for the staff bases	4	7.0	28.0		6	7.0	42.0
Relatives interview room	2	9.0	18.0		1no provided under area		Locate 1 x near the entrance.	2	9.0	18.0		2	9.0	18.0		2	9.0	18.0
Critical care bed area:	16	25.5	408.0		15no rooms provided are under area		arrange as 4 x bedded bays. 1 CHWB per bed and Scrub Bay per bay.	16	25.5	408.0	Set-up is traditonal 4 bed bays	16	25.5	408.0		16	25.5	408.0
Workstation & X-ray Viewing Area	2	12.0	24.0				locate 1 x near the entrance. Open spaces	2	12.0	24.0		2	12.0	24.0		2	12.0	24.0
Central Communications / Staff Base + Reception	1	34.0	34.0					1	34.0	34.0	Split into 2 x staff bases at 24m² with additional 14m² from the lobbies	2	24.0	48.0		1	34.0	34.0
Communications "Touch down bases"	11	2.0	22.0		Only 10no provided, 9no of those are under area		1 touch down per pair of single rooms (x3), 1 x per 4 bed bay (x4). And use the surplus area for srub bays - 1 per 4 bed bay.	7	2.0	14.0		7	2.0	14.0		7	2.0	14.0
Scub Bay (1 person)	0	0.0	0.0				Scub Bay (1 person)	4	2.0	8.0		4	2.0	8.0		4	2.0	8.0
Sub-Total			**701.0**							**701.0**				**701.0**				**701.0**
Utility/clinical area support facilities																		
Clean utility (including blood bank area)	2	17.0	34.0		Both rooms are under area		Clinical area	2	17.0	34.0		2	17.0	34.0		2	17.0	34.0
Status laboratory	1	8.5	8.5				Clinical area	1	8.5	8.5		1	8.5	8.5		1	8.5	8.5
Dirty utility with urine testing	1	12.0	12.0					1	12.0	12.0		1	12.0	12.0		1	12.0	12.0
Dirty Utility with urine testing/equipment cleaning	1	18.0	18.0					1	18.0	18.0		1	18.0	18.0		1	18.0	18.0
Disposal hold	2	10.0	20.0		1no provided under area		one at either end of the dept	2	10.0	20.0		2	10.0	20.0		2	10.0	20.0
Housekeepers (cleaners) room	1	10.0	10.0					1	10.0	10.0		1	10.0	10.0		1	10.0	10.0
Patients pantry	1	6.0	6.0					1	6.0	6.0		1	6.0	6.0		1	6.0	6.0
Milk store	1	4.0	4.0					1	4.0	4.0		1	4.0	4.0		1	4.0	4.0
~~Play Leader Base &~~ Toy Store	1	16.0	16.0				Re-label as Toy space.	1	16.0	16.0	reduce to 6m² and allocate the 10m² to the ECMO	1	6.0	6.0		1	16.0	16.0
Medicines Management Room	1	18.0	18.0				clinical area, as central as possible	1	18.0	18.0		1	18.0	18.0		1	18.0	18.0
ECMO Prep Area + Ensuite Store & Office	1	24.0	24.0				Does not need to be in the unit - access is needed from Theatres,NICU and PICU. *Needs a Labs and Prep area, store including area to hold preped ECMO machines*	0	24.0	0.0	Re-label as ECMO/Haem Filteration Service	0	24.0	0.0		0	24.0	0.0
ECMO Lab (Dirty area) inculding workstations x 1	0	0.0	0.0				ECMO Lab and Prep area, inculding workstations x 2. Locate outside the unit to provide good access from NICU and Theatres as well as PICU	1	14.0	14.0		1	14.0	14.0		1	14.0	14.0
ECMO Prep area,(clean area) inculding workstations x 1	0	0.0	0.0				ECMO Prep area,Locate outside the unit to provide good access from NICU and Theatres as well as PICU	1	14.0	14.0		1	14.0	14.0		1	14.0	14.0
ECMO Store	0	0.0	0.0				ECMO Store. Needs access from lab and prep areaLocate outside the unit to provide good access from NICU and Theatres as well as PICU	1	6.0	6.0		1	6.0	6.0		1	6.0	6.0
ECMO Office	0	0.0	0.0				ECMO Office.Locate outside the unit to provide good access from NICU and Theatres as well as PICU	1	10.0	10.0		1	10.0	10.0		1	10.0	10.0
Patients assisted bathroom, wc & wash (Stretcher hoist)	1	16.0	16.0					1	16.0	16.0		1	16.0	16.0		1	16.0	16.0
Sub-Total			**186.5**							**206.5**				**196.5**				**206.5**
Storage/holding facilities			0.0							0.0				0.0				0.0
Bulk supplies store	2	25.0	50.0				Combine 2 x bulk stores with the 2 x Clinical Equipment Stores to provide 1 x large store room of 80m² Reduce each store by 5m² to provide additional space for ECMO service (total 10m²)	1	40.0	40.0	Combine 2 x bulk stores with the 2 x Clinical Equipment Stores to provide 1 x large store room of 90m² Reduce each store by 2.5m² to provide additional space for ECMO service (total 5m²)	2	22.5	45.0		2	20.0	40.0
Clinical equipment store	2	25.0	50.0				Combine 2 x clinical equipment stores with the 2 x Bulk Stores to provide 1 x large store room of 80m² Reduce each store by 5m2 to provide additional space for ECMO service (total 10m2)	1	40.0	40.0	Combine 2 x clinical equipment stores with the 2 x Bulk Stores to provide 1 x large store room of 90m² Reduce each store by 2.5m2 to provide additional space for ECMO service (total 5m2)	2	22.5	45.0		2	20.0	40.0
Equipment service room	1	24.0	24.0				Combine with Theatre area.	1	24.0	24.0	Merged with Theatre Area workshop (+ 13m²)	1	37.0			1	24.0	24.0
Linen bay/store	2	4.0	8.0		1no provided under area			2	4.0	8.0		2	4.0	8.0		2	4.0	8.0
Furniture / Bed Store	1	20.0	20.0					1	20.0	20.0		1	20.0	20.0		1	20.0	20.0
Ready use medical gas cylinders store	2	4.0	8.0					2	4.0	8.0		2	4.0	8.0		2	4.0	8.0
Mobile imaging equipment bay (x-ray & Ultrasound) with image intensifiers	2	8.0	16.0		below brief		Clinical area. Includes digital processing area	2	8.0	16.0		2	8.0	16.0		2	8.0	16.0
Cardiac arrest/emergency trolley bay	2	3.0	6.0				Clinical area	2	3.0	6.0		2	3.0	6.0		2	3.0	6.0
Sub-Total			**182.0**							**162.0**				**148.0**				**162.0**

CRITICAL CARE																			
Staff facilities			0.0							0.0				0.0					0.0
Clinical directors office: 1 place	1	12.0	12.0					1	12.0	12.0			1	12.0	12.0		1	12.0	12.0
Office: 1 place	2	12.0	24.0				Move 1 x into the clinical area	2	12.0	24.0			2	12.0	24.0		2	12.0	24.0
Offices: 2 place	1	13.0	13.0					1	13.0	13.0			1	13.0	13.0		1	13.0	13.0
Clinical staff office: 4 places	5	24.0	120.0				Move 1 x into the clinical area	5	24.0	120.0			5	24.0	120.0		5	24.0	120.0
Hot Desk Room / Library	1	18.0	18.0					1	18.0	18.0			1	18.0	18.0		1	18.0	18.0
Meeting room/interview room (8 person)	1	20.0	20.0				Maybe used as a clinical skills Room. Locate near the bed spaces	1	20.0	20.0			1	20.0	20.0		1	20.0	20.0
Staff rest room with dining area	1	30.0	30.0					1	30.0	30.0			1	30.0	30.0		1	30.0	30.0
Staff snack/beverage preparation bay	1	8.0	8.0					1	8.0	8.0			1	8.0	8.0		1	8.0	8.0
Staff changing facilities 30 places	1	15.0	15.0				Includes 2 x WCs and 2 x Showers	1	15.0	15.0			1	15.0	15.0		1	15.0	15.0
Staff changing facilities 50 places	1	25.0	25.0				Includes 3 x WCs and 3 x Showers	1	25.0	25.0			1	25.0	25.0		1	25.0	25.0
Staff shower	5	2.5	12.5				Included in Changing facilities	5	2.5	12.5			5	2.5	12.5		5	2.5	12.5
Staff wc & wash: Ambulant user	5	2.0	10.0				Included in Changing facilities	5	2.0	10.0			5	2.0	10.0		5	2.0	10.0
MDT Room/Clinical Conference room ~~Seminar/training room~~: 25 places	1	30.0	30.0				MDT Room/Clinical Conference room	1	30.0	30.0			1	30.0	30.0		1	30.0	30.0
Staff office/restroom (On -call Room)	1	13.0	13.0				On -call Room	1	13.0	13.0			1	13.0	13.0		1	13.0	13.0
Staff office/restroom en-suite shower, wc & wash (On -call Room)	1	5.0	5.0				On -call Room	1	5.0	5.0			1	5.0	5.0		1	5.0	5.0
Sub-Total			**355.5**							**355.5**				**355.5**					**355.5**
Engineering facilities			0.0							0.0				0.0					0.0
Switchgear cupboard	2	2.0	4.0					2	2.0	4.0			2	2.0	4.0		2	2.0	4.0
Battery/UPS room	2	9.0	18.0		Not provided			2	9.0	18.0			2	9.0	18.0		2	9.0	18.0
Sub-Total			**22.0**							**22.0**				**22.0**					**22.0**
Total Net			**1515.0**							**1515.0**				**1491.0**					**1515.0**
Planning	**5%**		**75.8**					**5%**		**75.8**			**5%**	**74.6**			**5%**		**75.8**
Sub-Total			**1,590.8**							**1,590.8**				**1,565.6**					**1,590.8**
Engineering	**3%**		**47.7**					**3%**		**47.7**			**3%**	**47.0**			**3%**		**47.7**
Circulation	**40.0%**		**636.3**					**40.0%**		**636.3**			**40.0%**	**626.2**			**40.0%**		**636.3**
Total			**2,274.8**							**2,274.8**				**2,238.7**					**2,274.8**

DESIGN ACCEPTANCE PROCEDURE FORM

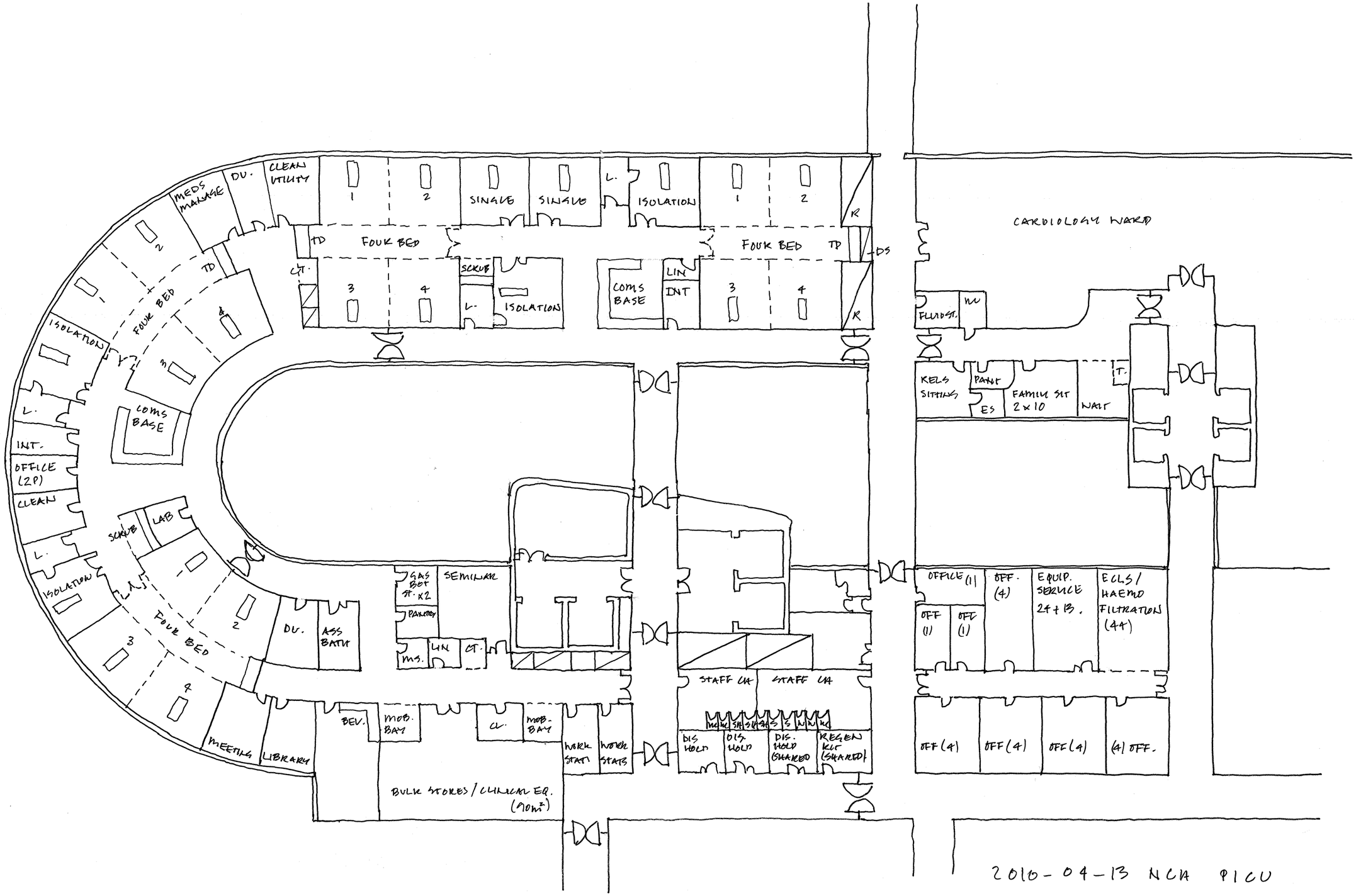
ACTION POINTS

25th February 2010

PICU

1. Workstation (to be open plan), interview room, waiting area and reception desk to be co-located at the department entrance within the light pink area
2. Dark pink area to be used as family waiting area with the 2 smaller family rooms combined
3. Staff area to be moved to the bottom side of the ward with clinical space moving round accordingly
4. Rooms to be split as 6 isolation rooms and 4 x 4 bed rooms. This needs to be reviewed from an infection control point of view
5. Staff base to move the external wall
6. There is a requirements for 1 WHB per bed space (1:50)
7. Trough sinks are required to be provided in lieu of 4 extra touchdowns
8. Touchdown bays to be split as follows : 1 per 2 bedrooms and 1 per 4 bed bay
9. Architect to look at redesigning isolation lobby to put it at the side of the room
10. Clean and dirty utility rooms to be evenly spread across the clinical areas
11. Labs room needs to centrally located within the clinical area
12. Medicine management room to be centrally located within the clinical area
13. Mobile imaging equipment bay to be located in the clinical area
14. Cardiac Arrest/Emergency trolley bays to be located in clinical area in an easily accessible location ie not behind a staff base
15. Milk store, assisted bath, assisted WC, store, linen and seminar room to be located adjacent to the clinical area
16. Consideration to be given to storage space and if this can be combined
17. Equipment storage to be co-located with the equipment service room
18. The co-location and amalgamation of equipment service rooms and storage rooms for PICU and theatre to be considered further and to be discussed with theatres group. To be located next to atrium at the bed lifts
19. Disposal hold, staff change and staff rest to be located at the end of the ward
20. 4 person office and 2 person office to be located within the clinical area
21. Beverage bay and staff rest to be located near the clinical area

22. On call consultant room to be located in a quiet area – within the purple area
23. Users have an aspiration to use the interview/meeting room as a clinical skills teaching room paid for through charity funds. This will need to be considered for the location and infrastructure required to be dealt with through the change control process
24. Library and meeting room to be co-located next to the clinical area
25. ECMO prep room to be increased to approximately 34m² with 10m² being taken from storage to be located next to link corridor. Tribal to review space requirement
26. Play leader base, toy store to be renamed on SoA as toy store
27. toy store to be located in Area 3
28. Area can possibly be removed from the toy store to accommodate the echo room rather than taking from storage
29. Users expressed a concern as to how future growth of ICU will be incorporated into the current design



2010-04-13 NCA PICU

1:200 @ A2

THIRD ITERATION LEVEL 01

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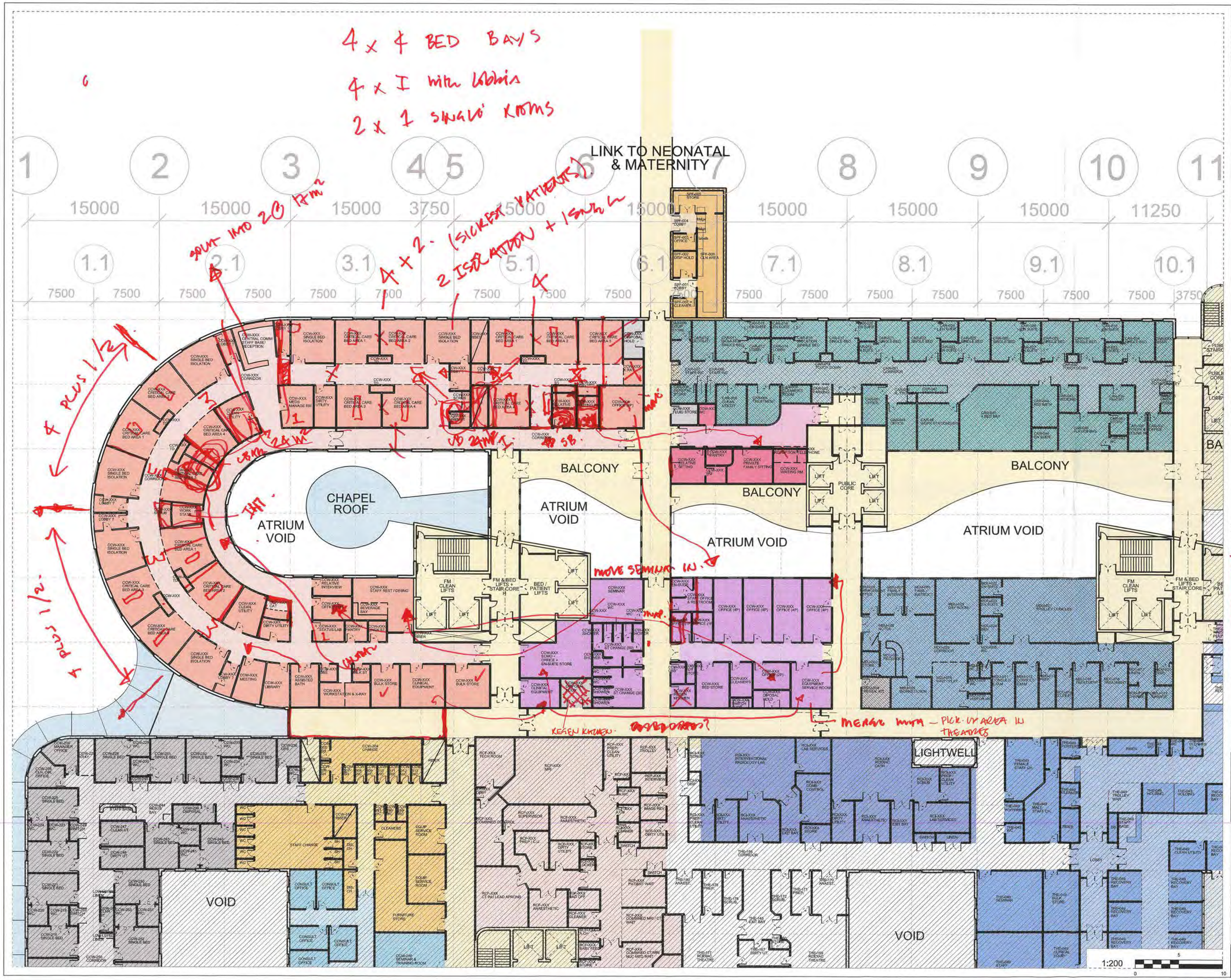

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- Do not modify any element of this drawing.
- Use drawing only for purpose(s) issued.

Designer Identification of Hazard/Risk

KEY

- NCH CARDIOLOGY
- NCH CRITICAL CARE (PICU)
- NCH PICU ENTRANCE
- NCH PICU SUPPORT
- NCH MDU
- SHARED FM SUPPORT
- SPECIAL FEEDS

Rev	Date	Drw	Revision Notes	Chk	App
02	17/03/10	GO	Revised for User Group Meeting 2	JH	X
01	17/02/10	GO	Issued for User Group Meeting 1	JH	X

2010-03-24
PICU UGM 2

NORTH

Client

NHS

Contractor

Brookfield

NIGHTINGALE associates architects
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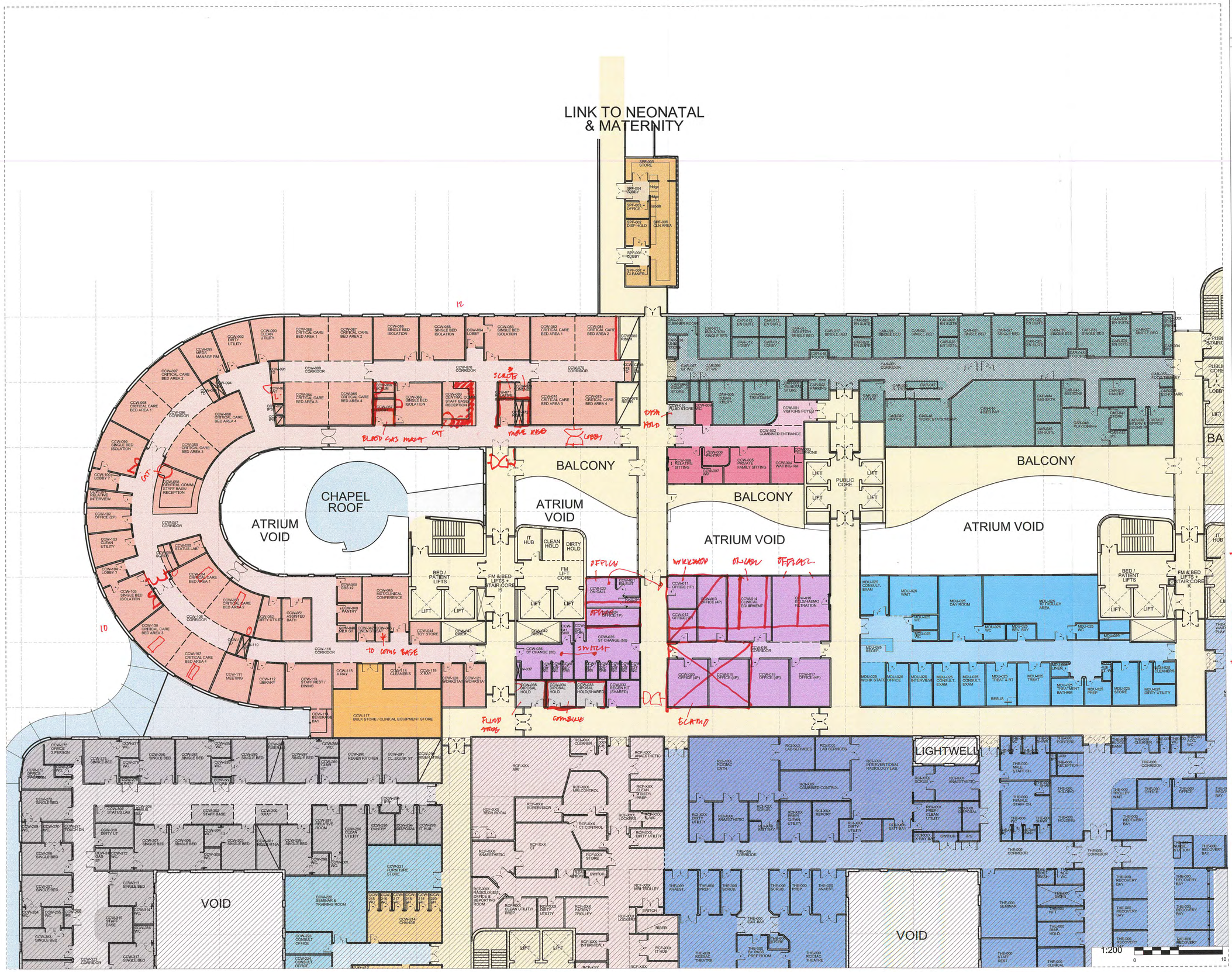
Project
NEW SOUTH GLASGOW HOSPITALS (NSGH) PROJECT

Drawing Title
FIRST FLOOR PLAN
NCH CRITICAL CARE (Picu) / CARDIOLOGY WARD / SUPPORT / MDU AND SPECIAL FEEDS

Job No	Drawn	Checked	Approved
09080	GO	JH	JH
Status: Preliminary		Date: 02/09/09	Scale@A1: 1:200

Drawing No						Rev
Origin	Zone	Level	Type	Content	Sequential	02
NA	XX	01	PL	252	403	



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Designer Identification of Hazard/Risk

KEY

- NCH CARDIOLOGY
- NCH CRITICAL CARE (PICU)
- NCH PICU ENTRANCE
- NCH PICU SUPPORT
- NCH MDU
- SHARED FM SUPPORT
- SPECIAL FEEDS

Rev	Date	Drw	Revision Notes	Chk	App
06	17/05/10	GO	Critical Care (PICU) and MDU revised for User Group Meeting 3	JH	X
05	14/05/10	GO	Special Feeds revised for User Group Meeting 3	JH	X
04	23/03/10	GO	MDU revised for User Group Meeting 2	JH	X
03	23/03/10	GO	Cardiology Department added. Revised for User Group Meeting 2	JH	X
02	17/03/10	GO	Revised for User Group Meeting 2	JH	X
01	17/02/10	GO	Issued for User Group Meeting 1	JH	X

2010-05-26
PICU
USM3

Client: NHS Greater Glasgow and Clyde

Contractor: **Brookfield**

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Project: NEW SOUTH GLASGOW HOSPITALS (NSGH) PROJECT

Drawing Title: FIRST FLOOR PLAN NCH CRITICAL CARE (Picu) / CARDIOLOGY WARD / SUPPORT / MDU AND SPECIAL FEEDS

Job No	Drawn	Checked	Approved
09080	GO	JH	JH
Status: Preliminary		Date: 02/09/09	Scale@A1: 1:200

Drawing No						Rev
Origin	Zone	Level	Type	Content	Sequential	06
NA	XX	01	PL	252	403	

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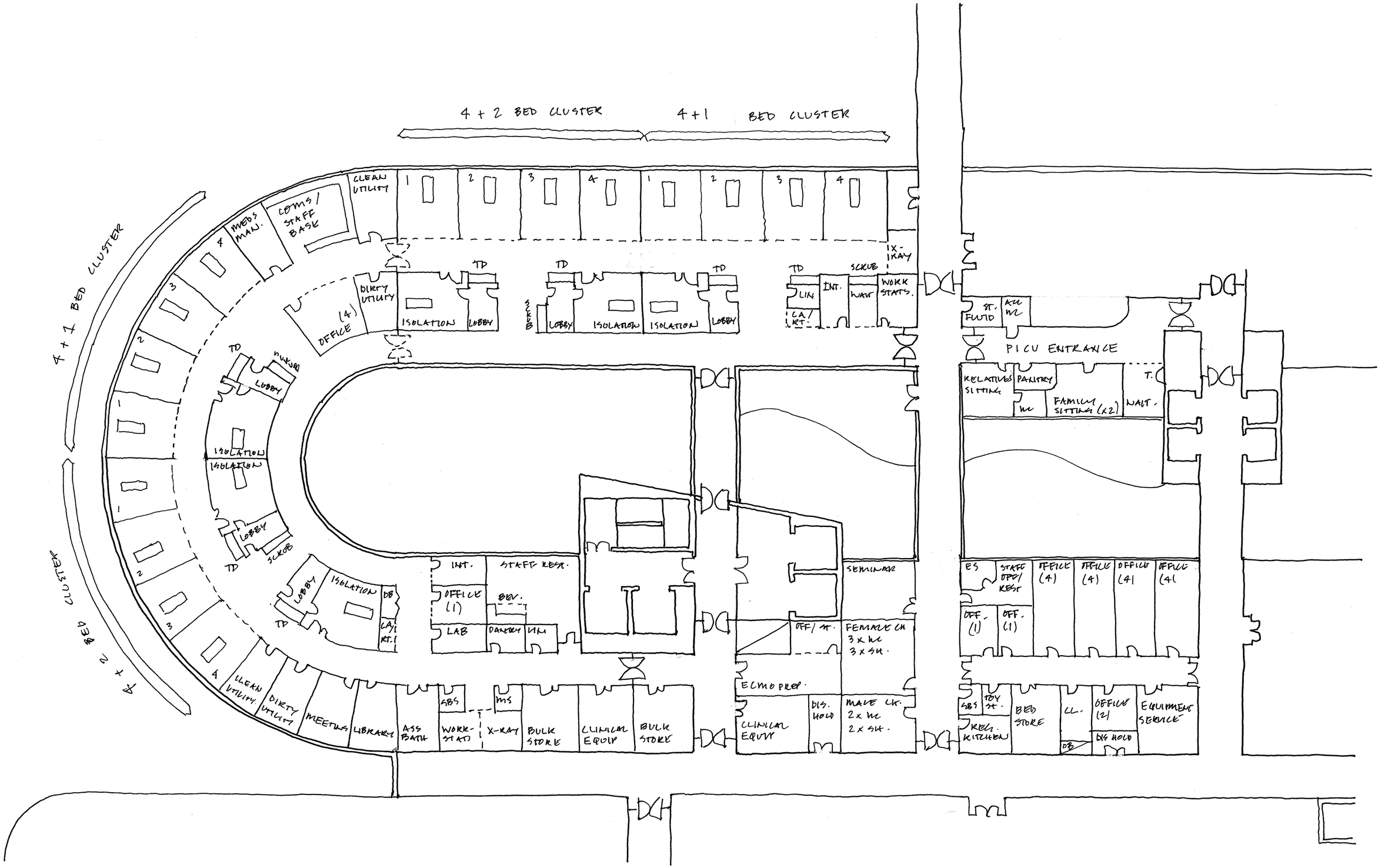

NCH PICU 01 1:200 @ A2.

2010-03-08 2ND ITERATION SKETCH.

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Designer Identification of Hazard/Risk

KEY

- NCH CARDIOLOGY
- NCH CRITICAL CARE (PICU)
- NCH PICU ENTRANCE
- NCH PICU SUPPORT
- NCH MDU
- SHARED FM SUPPORT
- SPECIAL FEEDS

Rev	Date	Drw	Revision Notes	Chk	App
09	23/06/10	GO	Revised post UGM 3 for record Sign-Off drawing	JH	X
08	07/06/10	GO	Critical Care + PICU revised post UGM3 for 1:200 Sign-Off	JH	X
07	18/05/10	GO	Cardiology Ward revised for User Group Meeting 3	JH	X
06	17/05/10	GO	Critical Care (PICU) and MDU revised for User Group Meeting 3	JH	X
05	14/05/10	GO	Special Feeds revised for User Group Meeting 3	JH	X
04	23/03/10	GO	MDU revised for User Group Meeting 2	JH	X
03	23/03/10	GO	Cardiology Department added. Revised for User Group Meeting 2	JH	X
02	17/03/10	GO	Revised for User Group Meeting 2	JH	X
01	17/02/10	GO	Issued for User Group Meeting 1	JH	X

NORTH

'A' status 25/6/10

[redacted]

Client

NHS Greater Glasgow and Clyde

Contractor

Brookfield

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Project
NEW SOUTH GLASGOW HOSPITALS (NSGH) PROJECT

Drawing Title
FIRST FLOOR PLAN
NCH CRITICAL CARE (Picu) / CARDIOLOGY WARD / SUPPORT / MDU AND SPECIAL FEEDS

Job No	Drawn	Checked	Approved
09080	GO	JH	JH
Status		Date	Scale@A1
Preliminary		02/09/09	1:200

Drawing No						Rev
Origin	Zone	Level	Type	Content	Sequential	
NA	XX	01	PL	252	403	09

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GREATER GLASGOW AND CLYDE NHS BOARD

NEW SOUTH GLASGOW HOSPITAL PROJECT

USERS GROUP
TERMS OF REFERENCE

1. **NAME OF GROUP**

The name of the Group shall be the **New South Glasgow Hospital Ward User Group**

2. **AIM**

To provide a forum for agreement/sign off of the 1:200 and 1:50 architectural drawings for the Department. Please note that the architectural drawings will be based on the previously signed off Schedules of Accommodation which are now fixed. Sign-off of the drawings will follow a formal procedure and will be recorded on the "Design Acceptance Procedure" Form. This form will record the outcome of each meeting and be signed by the User Group Lead(s) on behalf of the Directorates at the end of each meeting.

3. **MEMBERSHIP**

- The membership of the group has been approved by the Acute Services Director(s)
- The Group will have an identified Lead
- Members will be responsible for (i) discussing the design with colleagues and in the user meetings (ii) for communicating the priorities and associated work plans agreed by the Group to their colleagues following each meeting

4. **GROUP LEAD**

- The Lead for the Ward User Group is John Stuart
- The Group Lead will be responsible for the ensuring that Directorate priorities are reflected in the design
- The Group Lead will be responsible for keeping their Director appraised of the status of the design process
- Where differing options regarding the design arise the Project Team will take their instruction from the Group Lead

5. **MEETINGS OF THE GROUP**

- Two to three User Group meetings will be held to agree the 1:200 Departmental layouts and, following this a further 2 to 3 meetings will take place to agree the requirements for each room. The User Group meeting will be facilitated by the Project Team and attended by the Project Team (including FM and infection control) and the Contractor Team

Seven days before each meeting hard copy drawing(s) will be issued by the Project Team to each Group Lead. It will be issued to other members of the User Group electronically.

At the User Group meeting the Design Team (Architect supported by the Health Planner and Project Team members) will provide a detailed update on the User Group Department(s) design progress and take the group through the detailed designs.

6. **RECORD OF THE MEETING**

Action points will be recorded by the architect on the Design Acceptance form at the meeting and a copy will be distributed to the Group following the meeting.

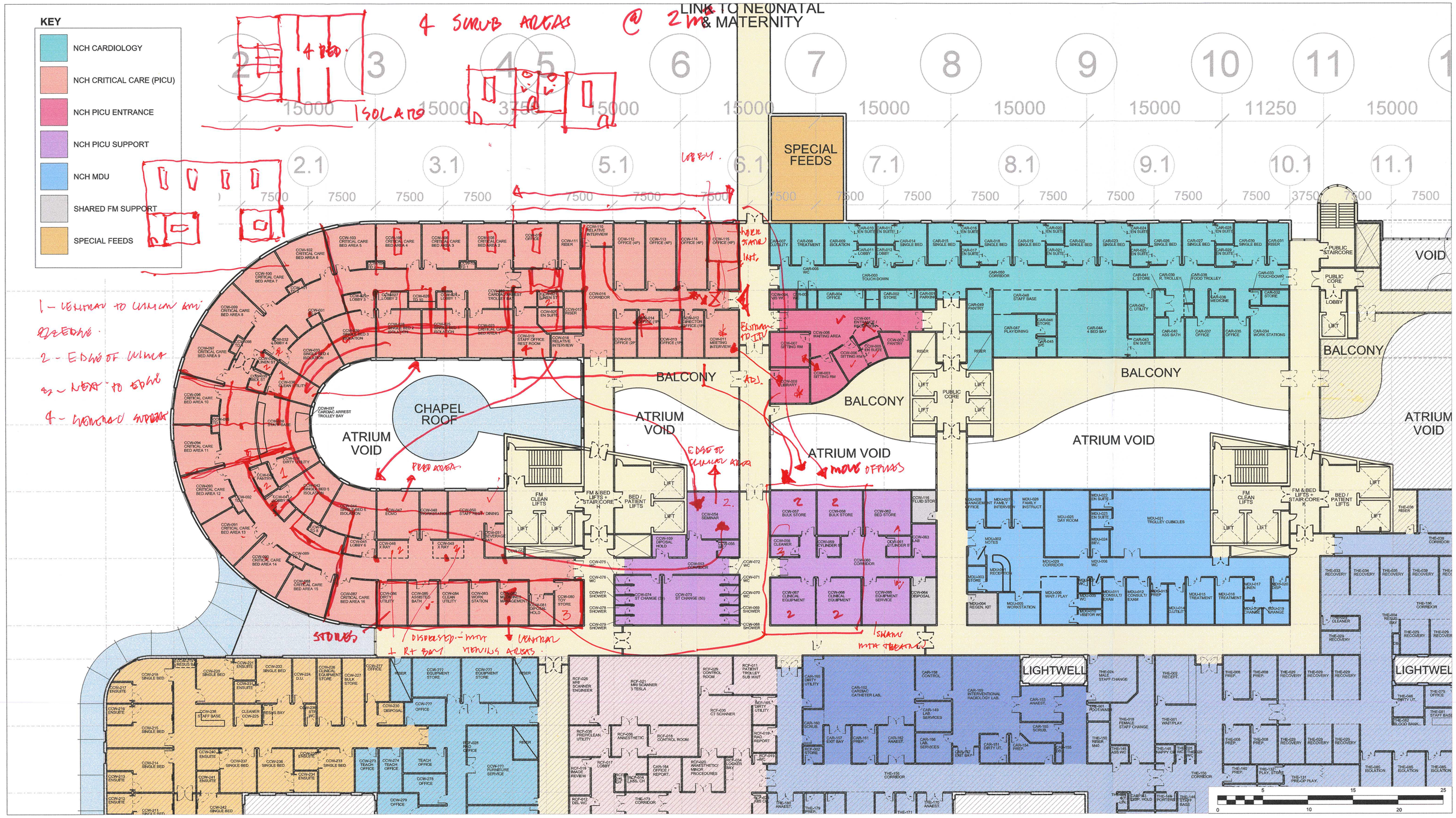
NHS Greater Glasgow and Clyde

Brookfield

4 x BED BAYS PLUS 6 ISOLATION

7 TOUCH DOWN SPACE @ 2M²

4 SHRUB AREAS @ 2M²



ITPD Reference:
VOLUME 2.0
Section 2.3

FIRST FLOOR PLAN - NCH CRITICAL CARE (Picu) / CARDIOLOGY WARD / SUPPORT / MDU

New South Glasgow Hospitals (NSGH) Project ITPD

2010-02-25 VGM1
PICU

Date:	Scale @A1:
02.09.09	1:200
Drawing Number:	Revision:
NA-XX-01-PL-252-403	A01

A52787523

From: Hirst, Allyson
To: Andrew McIntyre LEAD; Clement, William (NHSmail); Danton, Mark; Dick, Elaine; Ellis, David; Kubba, Haytham; Mclean, Andrew (NHSmail); Richens, Trevor (NHSmail); Sabharwal, Atul; Scarth, Jennifer; Sinclair, John; Sutherland, Adam; Taylor, Maureen; Wallace, James; Wilson, Nicola
Cc: Cobain, Linda; Connelly, Karen; darren.smith[redacted]; Emma White; Gillies, Marjorie; Hackett, Janice; Joannidis, Pamela; Jonathan Hendrick; Lawson, Lynda; Macleod, Mairi; McCluskey, Fiona; Peutrell, Jane; Provan, Gillian; Scott McCallum; Wrath, Frances
Subject: 1st Design Review Meeting 25th February @ 1.30
Date: 17 February 2010 10:43:15
Attachments: NA-xx-01-PL-252-403_CROPPEDrevA01.pdf
NA-xx-01-PL-252-403_revA01.pdf
PICU.xls
Agenda 1 to 200s.doc
User Group - Terms of Reference.doc

Dear All

Please find attached

- Drawings
- Schedule of Accommodation
- Agenda
- Remit of Group

Copies of your drawings will be available from your group lead by the end of this week.

(Andrew/Jennifer –the large scale drawings you requested will be brought to you this week)

Kind regards

Allyson Hirst
PA to Hospital Project Team
St Andrew's House
80 Queen Elizabeth Avenue
Hillington
G52 4NQ

Tele : [redacted]
Fax : [redacted]

****

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we strongly recommend that you check for viruses using your own virus scanner as NHS Greater Glasgow & Clyde will not take responsibility for any damage caused as a result of virus infection.

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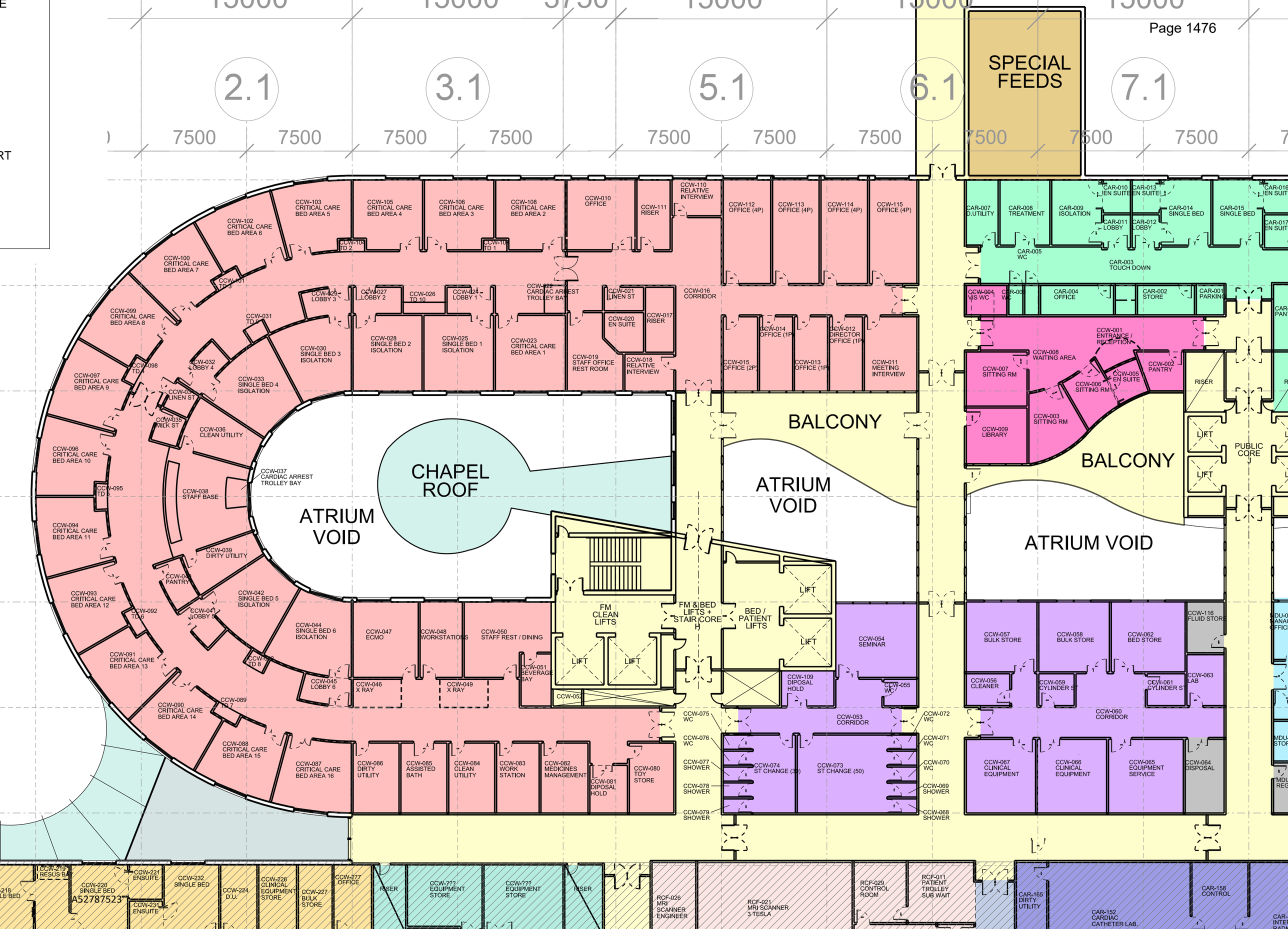
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SPECIAL FEEDS
CCW-102 CRITICAL CARE BED AREA 6
CCW-103 CRITICAL CARE BED AREA 5
CCW-105 CRITICAL CARE BED AREA 4
CCW-106 CRITICAL CARE BED AREA 3
CCW-108 CRITICAL CARE BED AREA 2
CCW-010 OFFICE
CCW-111 RISER
CCW-110 RELATIVE INTERVIEW
CCW-112 OFFICE (4P)
CCW-113 OFFICE (4P)
CCW-114 OFFICE (4P)
CCW-115 OFFICE (4P)
CCW-100 CRITICAL CARE BED AREA 7
CCW-101 TD 3
CCW-099 CRITICAL CARE BED AREA 8
CCW-031 TD 2
CCW-030 SINGLE BED 3 ISOLATION
CCW-028 SINGLE BED 2 ISOLATION
CCW-025 SINGLE BED 1 ISOLATION
CCW-023 CRITICAL CARE BED AREA 1
CCW-019 STAFF OFFICE REST ROOM
CCW-018 RELATIVE INTERVIEW
CCW-020 EN SUITE
CCW-017 RISER
CCW-021 LINEN ST
CCW-016 CORRIDOR
CCW-014 OFFICE (1P)
CCW-012 DIRECTOR OFFICE (1P)
CCW-015 OFFICE (2P)
CCW-013 OFFICE (1P)
CCW-011 MEETING INTERVIEW
CCW-097 CRITICAL CARE BED AREA 9
CCW-098 TD 4
CCW-032 LOBBY 4
CCW-033 SINGLE BED 4 ISOLATION
CCW-034 LINEN ST
CCW-035 MILK ST
CCW-036 CLEAN UTILITY
CCW-096 CRITICAL CARE BED AREA 10
CCW-095 TD 5
CCW-038 STAFF BASE
CCW-037 CARDIAC ARREST TROLLEY BAY
CHAPEL ROOF
ATRIUM VOID
BALCONY
ATRIUM VOID
CCW-094 CRITICAL CARE BED AREA 11
CCW-039 DIRTY UTILITY
CCW-040 PANTRY
CCW-093 CRITICAL CARE BED AREA 12
CCW-092 TD 6
CCW-041 LOBBY 5
CCW-042 SINGLE BED 5 ISOLATION
CCW-044 SINGLE BED 6 ISOLATION
CCW-047 ECMO
CCW-048 WORKSTATIONS
CCW-050 STAFF REST / DINING
FM CLEAN LIFTS
FM & BED LIFTS + STAIR CORE H
BED / PATIENT LIFTS
LIFT
CCW-054 SEMINAR
CCW-091 CRITICAL CARE BED AREA 13
CCW-045 LOBBY 6
CCW-046 X RAY
CCW-049 X RAY
CCW-051 BEVERAGE BAY
CCW-052
CCW-109 DIPOSAL HOLD
CCW-055 WC
CCW-090 CRITICAL CARE BED AREA 14
CCW-089 TD 7
CCW-088 CRITICAL CARE BED AREA 15
CCW-087 CRITICAL CARE BED AREA 16
CCW-086 DIRTY UTILITY
CCW-085 ASSISTED BATH
CCW-084 CLEAN UTILITY
CCW-083 WORK STATION
CCW-082 MEDICINES MANAGEMENT
CCW-081 DIPOSAL HOLD
CCW-080 TOY STORE
CCW-075 WC
CCW-076 WC
CCW-077 SHOWER
CCW-078 SHOWER
CCW-079 SHOWER
CCW-074 ST CHANGE (30)
CCW-073 ST CHANGE (50)
CCW-053 CORRIDOR
CCW-072 WC
CCW-071 WC
CCW-070 WC
CCW-069 SHOWER
CCW-068 SHOWER
CAR-007 D.UTILITY
CAR-008 TREATMENT
CAR-009 ISOLATION
CAR-010 EN SUITE
CAR-013 EN SUITE
CAR-011 LOBBY
CAR-012 LOBBY
CAR-014 SINGLE BED
CAR-015 SINGLE BED
CAR-005 WC
CAR-003 TOUCH DOWN
CCW-004 VIS WC
CAR-004 OFFICE
CAR-002 STORE
CAR-001 PARKING
CCW-001 ENTRANCE / RECEPTION
CCW-008 WAITING AREA
CCW-002 PANTRY
CCW-007 SITTING RM
CCW-006 SITTING RM
CCW-005 EN SUITE
RISER
CCW-009 LIBRARY
CCW-003 SITTING RM
LIFT
PUBLIC CORE
BALCONY
ATRIUM VOID
CCW-057 BULK STORE
CCW-058 BULK STORE
CCW-062 BED STORE
CCW-116 FLUID STORE
CCW-056 CLEANER
CCW-059 CYLINDER ST
CCW-061 CYLINDER ST
CCW-063 LAB
CCW-060 CORRIDOR
CCW-067 CLINICAL EQUIPMENT
CCW-066 CLINICAL EQUIPMENT
CCW-065 EQUIPMENT SERVICE
CCW-064 DISPOSAL
CCW-219 RESUS BAY
CCW-220 SINGLE BED
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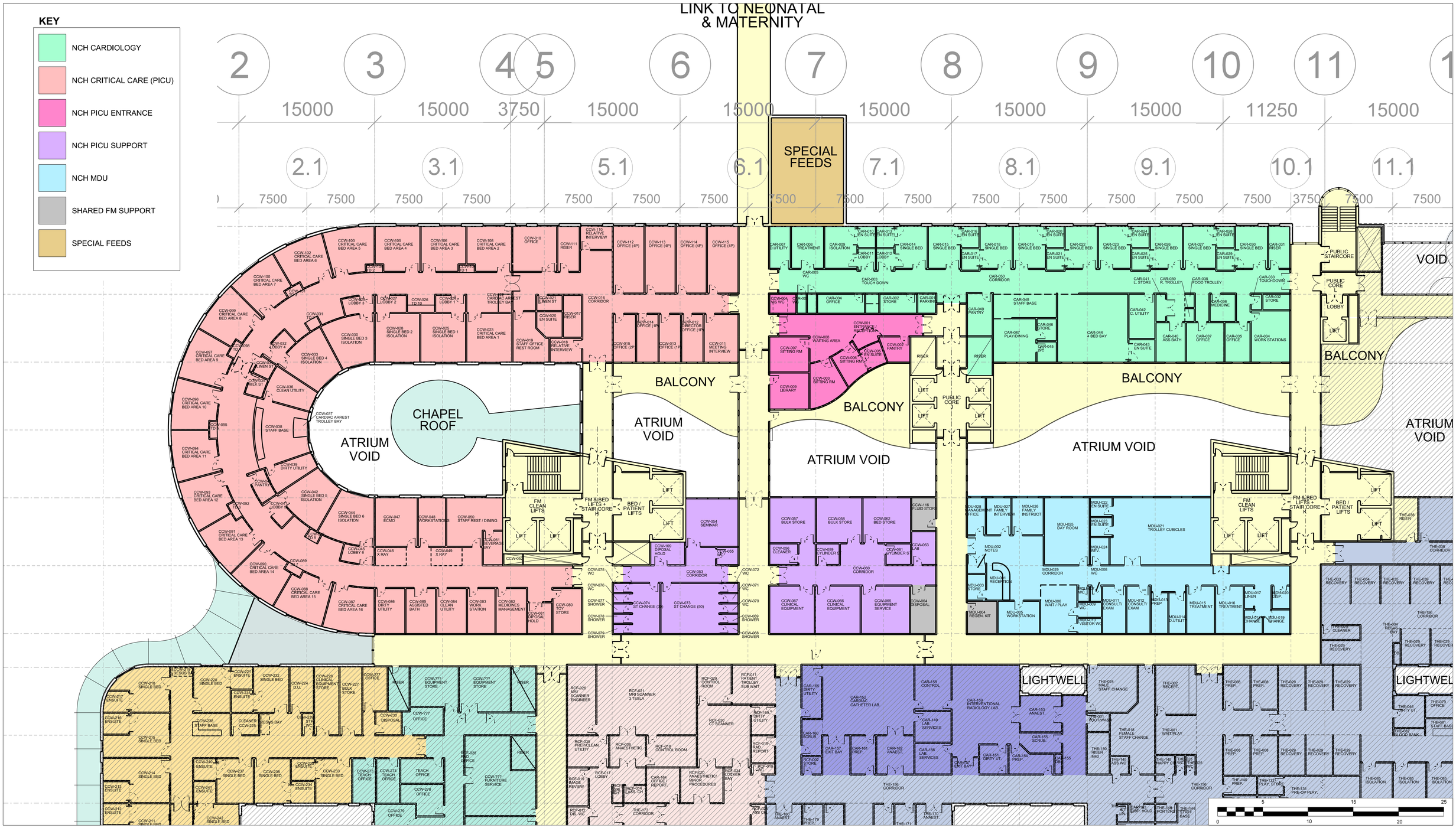
CCW-221 ENSUITE
CCW-231 ENSUITE
CCW-232 SINGLE BED
CCW-224 D.U.
CCW-226 CLINICAL EQUIPMENT STORE
CCW-227 BULK STORE
CCW-277 OFFICE
RISER
CCW-??? EQUIPMENT STORE
CCW-??? EQUIPMENT STORE
RISER
RCF-026 MRI SCANNER ENGINEER
RCF-021 MRI SCANNER 3 TESLA
RCF-029 CONTROL ROOM
RCF-011 PATIENT TROLLEY SUB WAIT
CAR-165 DIRTY UTILITY
CAR-152 CARDIAC CATHETER LAB.
CAR-158 CONTROL

NHS Greater Glasgow and Clyde

Brookfield



ITPD Reference:
VOLUME 2.0
Section 2.3

FIRST FLOOR PLAN - NCH CRITICAL CARE (Picu) / CARDIOLOGY WARD / SUPPORT / MDU

New South Glasgow Hospitals (NSGH) Project ITPD

Date: 02.09.09

Scale @A1: 1:200

Drawing Number: NA-XX-01-PL-252-403

Revision: A01

A52787523

CRITICAL CARE						
Description	**Qty**	**Unit Area m²**	**Total**	**Comment**		
Entrance/Reception/Administration facilities						
Combined entrance	1		0	In circulation allowance		
Visitors Foyer	1		0	In circulation allowance		
Visitors waiting area:	1	15	15			
Visitors wc: Disabled/ wheelchair user	1	4.5	4.5			
Telephone area: single booth; low height	1	2	2			
Reception desk/office: 4 places						
Sub-Total			**21.5**			
Family & Friends facilities (adjacent entrance dept)						
Private (single) Family Sitting	2	10	20			
Relatives en-suite wc:	1	4.5	4.5	For 1 of the above rooms		
Relatives sitting room: 12 places	1	16	16			
Relatives pantry/beverage bay	1	6	6			
Sub-Total			**46.5**			
Clinical areas						
Critical care bed area:single	6	25.5	153			
Gowning lobby: single bedroom	6	7	42			
Relatives interview room	2	9	18	close to 4 bed areas		
Critical care bed area:	16	25.5	408			
Workstation & X-ray Viewing Area	2	12	24			
Central Staff Base/Reception	1	34	34			
Communications "Touch down bases"	11	2	22			
Sub-Total			**701**			
Utility/clinical area support facilities						
Clean utility (including blood bank area)	2	17	34			
Status laboratory	1	8.5	8.5			
Dirty utility with urine testing	1	12	12			
Dirty Utility with urine testing	1	18	18			
Disposal hold	2	10	20			
Housekeepers (cleaners) room	1	10	10			
Patients pantry	1	6	6			
Milk store	1	4	4			
Play Leader Base & Toy Store	1	16	16			
Medicines Management Room	1	18	18			
ECMO Prep Area + Ensuite Store & Office	1	24	24			
Patients assisted bath, wc & wash hoist	1	16	16			
Sub-Total			**186.5**			
Storage/holding facilities						
Bulk supplies store	2	25	50			
Clinical equipment store	2	25	50			
Equipment service room	1	24	24			
Linen bay/store	2	4	8			
Furniture / Bed Store	1	20	20			
Ready use medical gas cylinders store	2	4	8			
Mobile imaging equipment bay	2	8	16			
Cardiac arrest/emergency trolley bay	2	3	6			
Sub-Total			**182**			
CRITICAL CARE						
Staff facilities						
Clinical directors office: 1 place	1	12	12			
Office: 1 place	2	12	24			
Offices: 2 place	1	13	13			
Clinical staff office: 4 places	5	24	120			
Hot Desk Room / Library	1	18	18			
Meeting room/interview room (8 person)	1	20	20			
Staff rest room with dining area	1	30	30			
Staff snack/beverage preparation bay	1	8	8			

Staff changing facilities 30 places	1	15	15			
Staff changing facilities 50 places	1	25	25			
Staff shower	5	2.5	12.5			
Staff wc & wash: Ambulant user	5	2	10			
Seminar/training room: 25 places	1	30	30			
Staff office/restroom	1	13	13			
Staff office/restroom en-suite shower, wc & w	1	5	5			
Sub-Total			**355.5**			
Engineering facilities			**0**			
Switchgear cupboard	**2**	**2**	**4**			
Battery/UPS room	**2**	**9**	**18**			
Sub-Total			**22**			
Total Net			**1515**			
Planning	**5%**		**75.8**			
Sub-Total			**1,590.80**			
Engineering	**3%**		**47.7**			
Circulation	**40.00%**		**636.3**			
Total			**2,274.80**			

New South Glasgow Hospitals Project Agenda

New Children's Hospital

Clinical User meeting 1 (1:200 plans)
Department: 25th February 2010 @ 1.30
Date and time of Meeting: PICU

Meeting Agenda

1. **Introductions**

2. **Terms of Reference & Role of Group Lead**

3. **Current Project Status**

4. **Change Management**

5. **Brief Presentation of the Scheme**

6. **1:200 Plan Review**

7. **Agree Action Points and Responsibilities**

8. **AOCB**

9. **Confirm Date of Next Meeting**

GREATER GLASGOW AND CLYDE NHS BOARD

NEW CHILDREN'S HOSPITAL PROJECT

USERS GROUP
TERMS OF REFERENCE

1. **NAME OF GROUP**

The name of the Group shall be the **New Children's Hospital PICU Group**

2. **AIM**

To provide a forum for agreement/sign off of the 1:200 and 1:50 architectural drawings for the Department. Please note that the architectural drawings will be based on the previously signed off Schedules of Accommodation which are now fixed. Sign-off of the drawings will follow a formal procedure and will be recorded on the "Design Acceptance Procedure" Form. This form will record the outcome of each meeting and be signed by the User Group Lead(s) on behalf of the Directorates at the end of each meeting.

3. **MEMBERSHIP**

- The membership of the group has been approved by the Acute Services Director(s)
- The Group will have an identified Lead
- Members will be responsible for (i) discussing the design with colleagues and in the user meetings (ii) for communicating the priorities and associated work plans agreed by the Group to their colleagues following each meeting

4. **GROUP LEAD**

- The Lead for the User Group is Andrew McIntyre and Jennifer Scarth
- The Group Lead will be responsible for the ensuring that Directorate priorities are reflected in the design
- The Group Lead will be responsible for keeping their Director appraised of the status of the design process
- Where differing options regarding the design arise the Project Team will take their instruction from the Group Lead

5. **MEETINGS OF THE GROUP**

- Two to three User Group meetings will be held to agree the 1:200 Departmental layouts and, following this a further 2 to 3 meetings will take place to agree the requirements for each room. The User Group meeting will be facilitated by the Project Team and attended by the Project Team (including FM and infection control) and the Contractor Team

Seven days before each meeting hard copy drawings for each member will be issued by the Project Team to the Group Lead. It will also be issued to all members of the User Group electronically.

At the User Group meeting the Design Team (Architect supported by the Health Planner and Project Team members) will provide a detailed update on the User Group Department(s) design progress and take the group through the detailed designs.

6. **RECORD OF THE MEETING**

Action points will be recorded by the architect on the Design Acceptance form at the meeting and a copy will be distributed to the Group following the meeting.

New South Glasgow Hospitals (NSGH) Project

Adult Hospital

Clinical User Group Meeting: No. 3 (1:200 Stage 3)
Department: Ward Users Group
Date of Meeting: Tuesday 20th April, 2010
Time: 9.00am - 12.30pm

Attendance Sheet

Name	Organisation/Role	Attendance
John Stuart	NHS Greater Glasgow & Clyde	[redacted]
Morag Busby	NHS Greater Glasgow & Clyde	
Brenda Byrom	NHS Greater Glasgow & Clyde	
Colin Cuthbertson	NHS Greater Glasgow & Clyde	
Gill Donnelly	NHS Greater Glasgow & Clyde	
Catherine Nivison	NHS Greater Glasgow & Clyde	
Linda Robertson	NHS Greater Glasgow & Clyde	[redacted]
Maureen White	NHS Greater Glasgow & Clyde	
Rob Boulton-Jones	NHS Greater Glasgow & Clyde	
Sophia (Theresa) Boyle	NHS Greater Glasgow & Clyde	
Audrey Thompson	NHS Greater Glasgow & Clyde	
Heather Griffin	NHS Greater Glasgow & Clyde	[redacted]
Fiona McCluskey	NHS Greater Glasgow & Clyde	
HEATHER GRIFFIN	PROJECT MANAGER	
FIONA MCCLUSKEY	NHSGG+C	
ROWLAND PHILLIPS	NA.	
[illegible]	[illegible]	
[illegible]	Project Team	
[illegible]	Project Team	
Frances Wrath	Project Team	
DAVID McLEISH	DOIG+SMITH	
PAUL BRITTON	TRIDAL	
TERRY SULLIVAN	MGUTTINGALES	

NEW SOUTH GLASGOW HOSPITALS & LABORATORY PROJECT
DESIGN ACCEPTANCE PROCEDURE

Building: NSGH	**Issued by**:
Subject: Generic Inpatient Ward	**Date issued**:
Aspect for Review:	**Date returned**:

DESIGN REVIEW HISTORY

	Level of Approval	**Approval Date**	**Remarks**
Design Review 1			
Design Review 2			
Design Review 3			

BOARD RESPONSE

Level of Approval [ ] **Outcome**

Information referred to: _____

Detailed comment: _____

Approval Levels: A = No comment. B = Proceed to comments. C = Resubmit with amendments. D = Rejected.

BOARD ACCEPTANCE SIGN OFF

User Group Lead: _____ Date: _____

Infection Control Lead: _____ Date: _____

Facilities Management Lead: _____ Date: _____

Design Manager: _____ Date: _____

Project Manager: _____ Date: _____

WARD USER GROUP

ACTION POINTS 20/4/2010

1/ Disposal Hold down to be relocated to opposite Clean Utility
2/ Dirty Test Room to be renamed Dirty Utility and to be drawn as SOA
3/ Architect / Structural Engineer reviewing layout at the end of the helipad ward bay to try and get an improved line of sight into the end bedroom
4/ Architects to move 3D image of end bedroom (to helipad wing) showing view from the corridor
5/ Entrance to en-suite in Helipad wing, end bedroom to be reviewed at 1:50 stage

---

1:50's

SINGLE BEDROOM

1/ CHA307 to be moved to SPA055 location
2/ CHA 317 move to windows side of room
3/ Mobile Trolley to be added in location of CHA317
4/ The non-standard size bedrooms require to be reviewed at the 1:50 stage – helipad room and 2nr rooms at ward corners
5/ Demonstrate that hoist can get in and out of en-suite
6/ Drawing options for bedheads required

SOCIALISATION SPACE

1/ Architect to clarify if this can be an open plan space
2/ BOA030 to be omitted
3/ TREG12 to be moved

4/ BOA 012 to be reduced to 1m

5/ TV outlet to be added

6/ Nurse call push button to be added

RESUS TROLLEY BAY

1/ 1m double socket to be added

WHEELCHAIR PARKING BAY

1/ Add 2m double sockets

INTERVIEW ROOM

1/ Add mobile computer trolley and redraw room as per Arch sketch

2/ Reduce size of Notice Board to 600 x 900mm

3/ Add Art hook

4/ Add double socket

5/ Omit TAB 053 and add round occasional table

TOUCHDOWN BASE

1/ Omit cupboard storage unit

2/ Confirm that there is a light

3/ Middle touchdown base to each wing requires 12 panel staff call

4/ Worktop to be at sitting height

5/ Add chair - CHA 031

STAFF COMMUNICATION BASE / 2 PERSON OFFICE (Drawings 013+018)

1/ Pneumatic Tube system to be located in Clean Utility

2/ Change Worktop from 'L' shape to long workstation

3, 1500 mm high, short partition required at the end of the workstation to separate area

4, NHS to confirm Printer provision

5, LIG 138 to be omitted from drawing 013 and added to drawing 018

6, Nurse call panel to be added

7, Security panel to be added

8, Medical gas panel to be added

9, Add [illegible] DRA 056

10, Add 2nd Waste bins

11, IT Project Manager to review 1:50 layouts and provide feedback

12, Move hooks into corner and add magnetic whiteboard

CLEAN UTILITY

1, Add Pneumatic tubes (from Staff base)

2, Add 2nd double sockets

3, Room layout to be redesigned as per Architect's sketch

BULK STORAGE

1, NHS to confirm Strategy

1:200 SIGN OFF 20/4/2010
PROVIDED ACTION POINTS ADDRESSED
GROUP LEAD — [redacted]
ARCHITECT — [redacted]
INFECTION CONTROL — [redacted]
FM — [redacted]
PROJECT MANAGER — [redacted]

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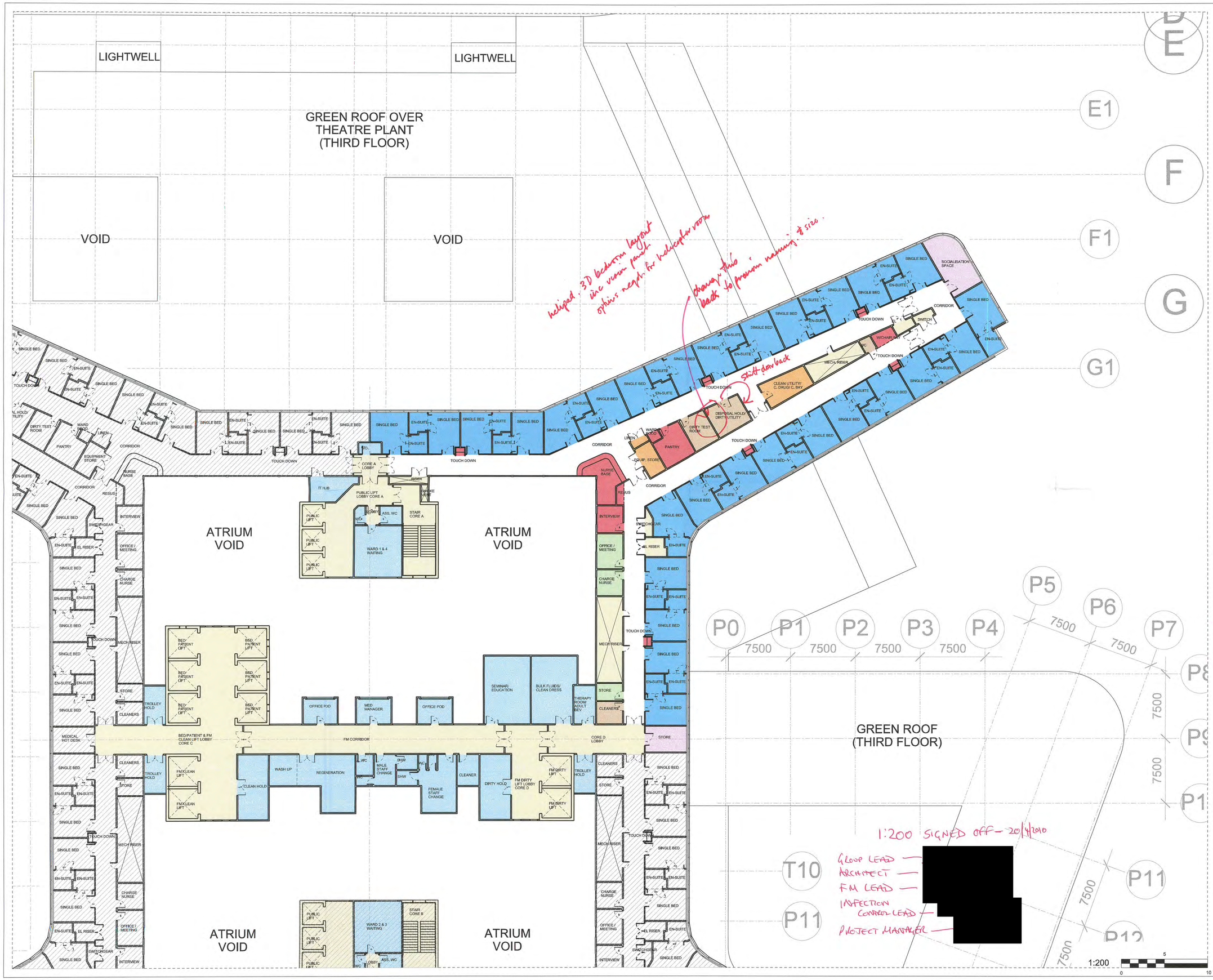

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- All discrepancies on this drawing are to be reported to the architect.
- Do not modify any element of this drawing.
- Use drawing only for purpose(s) Issued.

Designer Identification of Hazard/Risk

- Hospital Street, Lift, Stairs and Risers
- Main Entrance, Reception and Waiting Space
- Staff Support, Offices and Administrative Services
- Bedrooms and En-suites
- Patients Support Facilities
- Backup Storage
- Utilities
- Additional Accomodation and Services
- Shared Ward Support
- Department Circulation

Rev	Date	Drw	Revision Notes	Chk	App
04	09/04/10	AB	Revised for User Group Meeting 3	TS	X
03	29/03/10	CQ	Plan Revised	TS	X
02	26/02/10	AB	Revised for User Group Meeting 2	TS	X
01	05/01/10	GO	Issued for User Group Meeting 1	TS	X

NORTH

GENERIC WARDS UG3
SIGN OFF SUBJECT TO ACTION
POINTS ATTACHED 20/04/10 TS/KP

Client
NHS Greater Glasgow and Clyde

Contractor
Brookfield

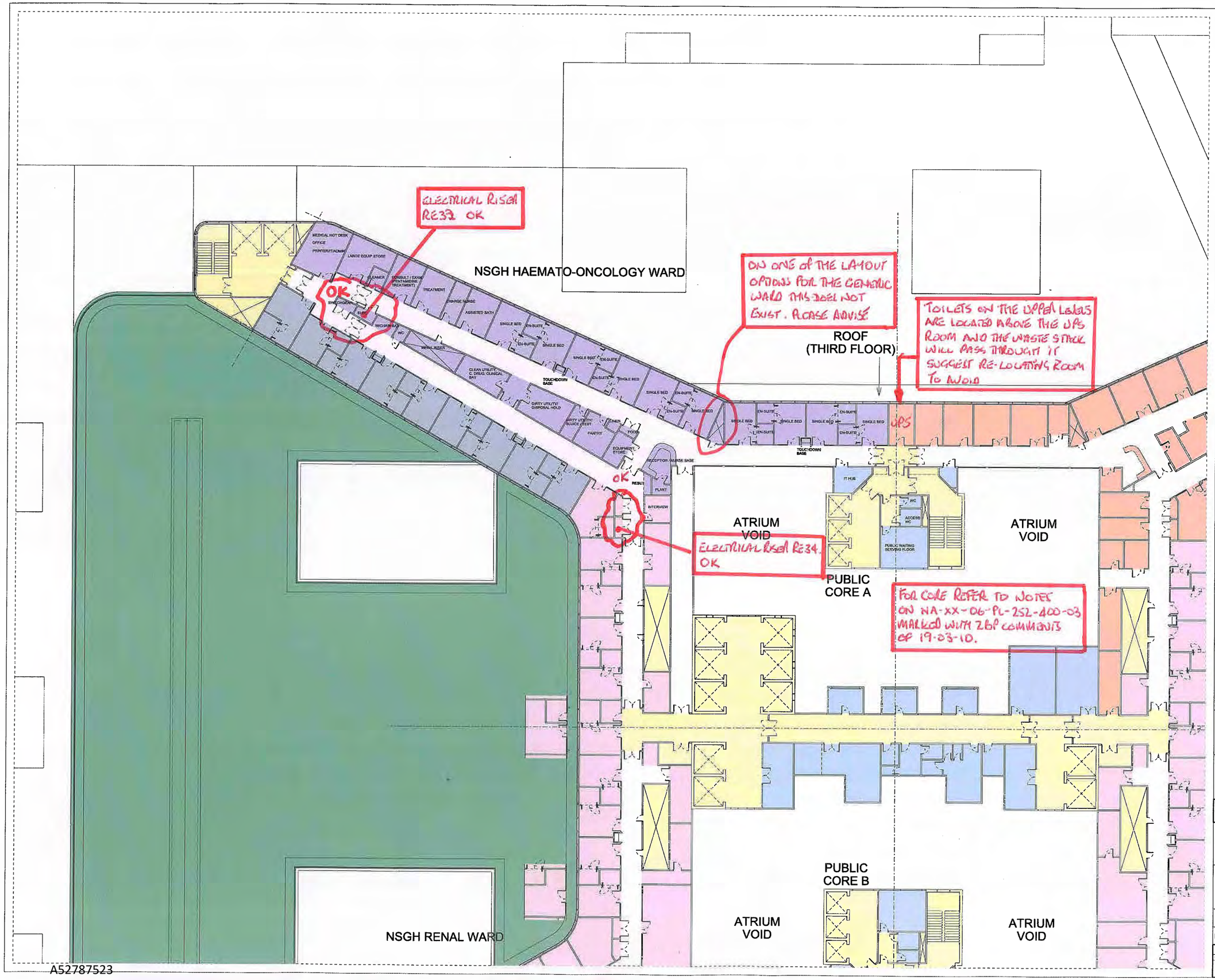
NIGHTINGALE associates architects
87-91 Newman Street
London
W1T 3EY
Tel: 0207 079 9900
Fax: 0207 079 9901
www.nightingaleassociates.com

Project
NEW SOUTH GLASGOW HOSPITALS (NSGH) PROJECT

Drawing Title
SIXTH FLOOR PLAN
GENERIC WARD

Job No	Drawn	Checked	Approved
09080	AB	AB	TS
Status: Preliminary		Date: 02/09/09	Scale@A1: 1:200

Drawing No						Rev
Origin	Zone	Level	Type	Content	Sequential	04
NA	XX	06	PL	252	401	



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No	Design Risk Register

Rev	Date	Revision Notes
03	22/03/10	FURTHER REVISION BASED ON PROJECT OFFICE COMMENTS
02	22/03/10	REVISED FOLLOWING ISSUE OF AMENDED SCHEDULE OF ACCOMMODATION.

ZBP COMMENTS 30-03-10

[redacted]

Client: NHS

Contractor: Brookfield

NIGHTINGALE associates architects www.nightingaleassociates.com

Project: NEW SOUTH GLASGOW HOSPITALS (NSGH) PROJECT

Drawing Title: FOURTH FLOOR HAEMATO-ONCOLOGY WARD 1:200 DESIGN DEVELOPMENT

Job No	Date	Scale@A1
09080	22/03/10	1:200

Status: PRELIMINARY

Drawing No						Rev
Origin	Zone	Level	Type	Content	Sequential	
NA	ZE	04	PL	252	403	03

From:	Scott McCallum
To:	Mark Drane; Neil Evans
Cc:	Paul Britton; Craig Dixon; Emma White
Subject:	Adult Haem Onc Ward
Date:	26 March 2010 09:01:46
Attachments:	NA-ZE-04-PL-252-403 REV03 HAEMATO-ONCOLOGY CUG2 Comments .pdf Adult haemato onc ward SoA markup CUG 2.xls
Importance:	High

Hi Mark;

Further to our meeting yesterday for Adult Haem Onc please see the marked up SoA for issue with the mark up drawings, please my mark up to supplement your mark up.

Happy to discuss

Regards

Scott

Scott McCallum
Expert Technical Consultant, Health

Tribal
Parkway House, Palatine Road, Northenden, Manchester M22 4DB
T [redacted]
M [redacted]
F [redacted]
[redacted]
www.tribalgroup.com

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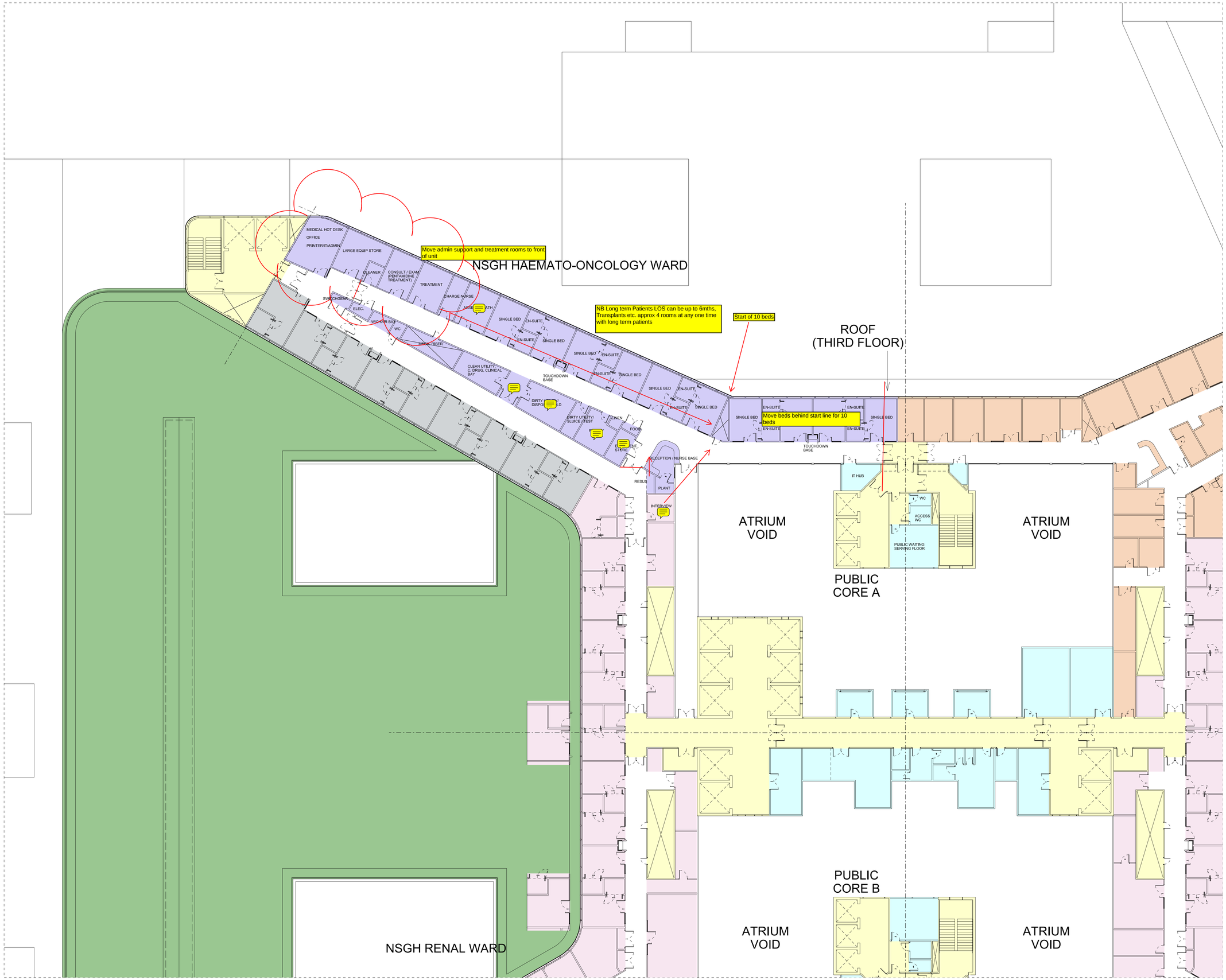

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No	Design Risk Register

Rev	Date	Revision Notes
03	22/03/10	FURTHER REVISION BASED ON PROJECT OFFICE COMMENTS
02	22/03/10	REVISED FOLLOWING ISSUE OF AMENDED SCHEDULE OF ACCOMMODATION.

Client

NHS Greater Glasgow and Clyde

Contractor

Brookfield

NIGHTINGALE associates architects
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Project
NEW SOUTH GLASGOW HOSPITALS
(NSGH) PROJECT

Drawing Title
FOURTH FLOOR
HAEMATO-ONCOLOGY WARD
1:200 DESIGN DEVELOPMENT

Job No	Date	Scale@A1
09080	22/03/10	1:200

Status
PRELIMINARY

Drawing No						Rev
Origin	Zone	Level	Type	Content	Sequential	
NA	ZE	04	PL	252	403	03

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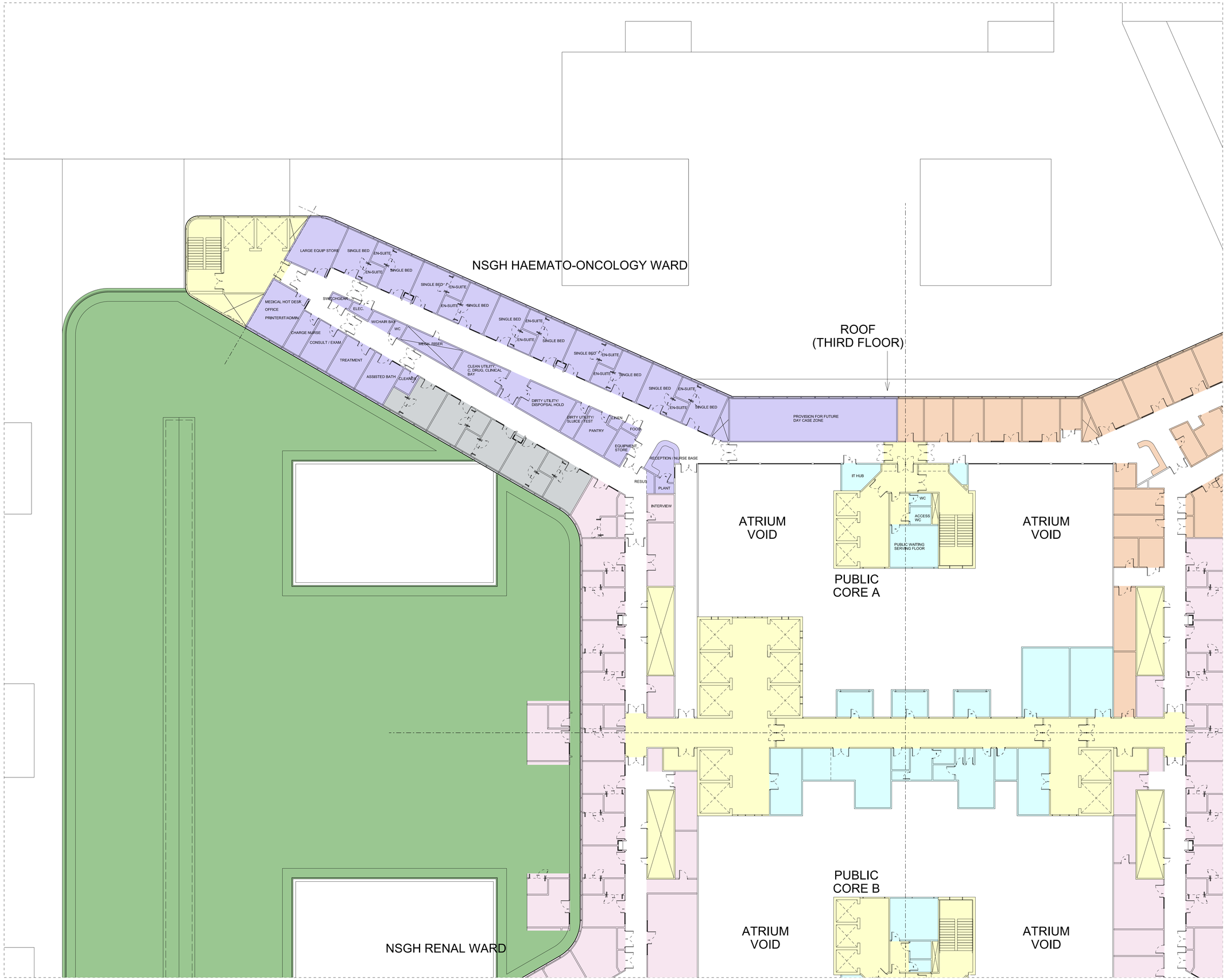
HAEMATO-ONCOLOGY WARD	Contract Version			
NB: 3 Beds are to be plumbed for haemodialysis				
NB: All bedrooms will require positive pressure				
Number of Beds		**14+ 4 day recliners**		
Percentage Single Rooms		**100%**		
Description	**Qty**	**Unit Area m²**	**Total Area m²**	**Comment**
Bed area facilities				
Acute single bedroom (incl family & clinical support space)	14	16.5	231.0	6 of 14 below brief area - Positive Pressure
Patients en-suite wc & wash double assist	14	4.5	63.0	(as per HBN 00-02)
Sub-Total			**294.0**	
Day Case Zone				
Day Case Room - Recliner Space	4	13.5	54.0	4 of 4 below brief area
Staff Base	1	3.0	3.0	
Treatment Room	1	16.5	16.5	
WC - W'chair	1	4.5	4.5	
additional store				
Sub-Total			**78.0**	
Patient support facilities				
Consulting/examination (or treatment) room	1	16.5	16.5	pentamidine treatment
Treatment Room	1	16.5	16.5	Intrathecal chemotherapy
Interview/sitting room	1	9.0	9.0	
Resuscitation trolley parking bay: 1 trolley	1	2.0	2.0	
Pantry/Beverage making area	1	12.0	12.0	
Ward Food trolley parking bay	1	1.5	1.5	
Wheelchair bay	1	4.0	4.0	2 @ 2.3 provided by bidder
Nurses Station	1	8.0	8.0	
Touch Down Spaces	4	2.0	8.0	4 of 4 below brief area(as per HBN 04-01)
additional wheelchair bay				
Sub-Total			**77.5**	

HAEMATO-ONCOLOGY WARD	Contract Version			
NB: 3 Beds are to be plumbed for haemodialysis				
NB: All bedrooms will require positive pressure				
Number of Beds		**14+ 4 day recliners**		
Percentage Single Rooms		**100%**		
Description	**Qty**	**Unit Area m²**	**Total Area m²**	**Comment**
Backup Storage				
Linen trolley parking bay	1	1.5	1.5	
Clinical supplies trolley	1	1.5	1.5	
Clinical Store/Controlled drug Cupboard	1	1.5	1.5	
Clean Utility Room	1	12.0	12.0	
Large Eqpt Store	1	20.0	20.0	
Sub-Total			**36.5**	
Utilities				
Dirty utility/Sluice/Test Room - small	1	6.5	6.5	
Dirty utility/Disposal hold)	1	8.0	8.0	Interim Disposal Hold on Ward
Cleaners room	1	7.0	7.0	
WC/WHB - type 1	1	2.0	2.0	
Switchgear cupboard	1	1.0	1.0	
Sub-Total			**24.5**	
Office and Administrative Services				
Reception - 2 position - open	1	8.0	8.0	not provided by bidder - shared 1 between two wards
Office - 1 position + meeting area	1	12.0	12.0	
Charge Nurse/Sister's Office	1	9.0	9.0	
Printer/IT/Admin Store Room	1	6.0	6.0	

HAEMATO-ONCOLOGY WARD	Contract Version			
NB: 3 Beds are to be plumbed for haemodialysis				
NB: All bedrooms will require positive pressure				
Number of Beds		**14+ 4 day recliners**		
Percentage Single Rooms		**100%**		
Description	**Qty**	**Unit Area m²**	**Total Area m²**	**Comment**
Waiting Area - 5-10 persons	1	16.0	16.0	not provided by bidder - shared 1 between two wards
Sub-Total			**51.0**	
Essential Complementary Accomodation				
Assisted Bathroom	1	16.0	16.0	
Sub-Total			**16.0**	
Additional Accomodation and Services				
Medical Hot Desking (2 Places)	1	10.0	10.0	
additional office				
Sub-Total			**10.0**	
Total net			**587.5**	
Planning	5%		29.4	
Sub-Total			616.9	
Engineering	3%		18.5	
Circulation	31%		191.2	
Total			**826.6**	



Notes:
- This drawing is copyright.
- Do not scale dimensions from this drawing.
- All discrepancies on this drawing are to be reported to the architect.
- Do not modify any element of this drawing.
- Use drawing only for purpose(s) issued.

No	Design Risk Register

Rev	Date	Revision Notes
A	22/03/10	REVISED FOLLOWING ISSUE OF AMENDED SCHEDULE OF ACCOMMODATION.

Client

NHS Greater Glasgow and Clyde

Contractor

Brookfield

NIGHTINGALE associates architects
www.nightingaleassociates.com

Project
NEW SOUTH GLASGOW HOSPITALS
(NSGH) PROJECT

Drawing Title
FOURTH FLOOR
HAEMATO-ONCOLOGY WARD
1:200 DESIGN DEVELOPMENT

Job No	Date	Scale@A1
09080	22/03/10	1:200

Status
PRELIMINARY

Drawing No						Rev
Origin	Zone	Level	Type	Content	Sequential	
NA	ZE	04	PL	252	403	02

A52787523

DESIGN ACCEPTANCE PROCEDURE FORM

ACTION POINTS

2nd Design Review Meeting

16th April 2010

Haemato-Oncology

Day Case

1. Staff WC not be designed as staff WC ie rename WC
2. Board reviewing areas to establish if a staff WC can be provided

Ward

3. Ante room requires to be a separate room (Radiation shield bedroom)
4. Radiation Shield Bedroom to be redrawn as per architect's sketch
5. Parking bay to be relocated centrally
6. WC to be relocated from support accommodation to the ward at the Radiation Bedroom side. To be allocated as a staff toilet
7. Chemo room and Treatment room to be located centrally – swap with school room
8. Food trolley to be relocated from Play area
9. Staff WC to be added to Day Area from workstations at 18m² to 16m²

From:	Craig, Carol
To:	Boulton-Jones, Robert; Boyle, Sophia (NHSmail); Busby, Morag; Byrom, Brenda; Cuthbertson, Colin; Donnelly, Gill; Elliott, Janice; McCluskey, Fiona; Nivison, Catherine; Robertson, Linda; Stuart, John; White, Maureen
Cc:	Hazard, Karen; Connelly, Karen; Gallacher, Stephen; Griffin, Heather; McNamee, Sandra; Wrath, Frances; David Bower; David Hall; Emma White
Subject:	New South Glasgow Hospital: Generic Ward Users Group Meeting, 20th Jan 2010
Date:	13 January 2010 16:03:57
Attachments:	Jubilee Ct travel directions1.pdf Directions to NHS Contact Centre Office.doc NA-xx-05-PL-252-201.pdf NA-XX-XX-SK-AS-400-100_09-12-16.pdf NA-xx-05-PL-252-100.pdf NA-xx-06-PL-252-010.pdf Schedule for generic wards and shared core support ref ER Rev 1.xls Meeting Agenda_Inpatient Wards.doc User Group - Terms of Reference Ward User Group 130110.doc

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SENT ON BEHALF OF HEATHER GRIFFIN

Dear All

New South Glasgow Hospital Ward User Group Meeting, Wednesday, 20th January 2010, 9am – 12.30pm, NHS Contact Centre, 1 Jubilee Court, Hillington Industrial Estate (directions attached)

Further to my previous email with regard to the above meeting, please find the following enclosed:

- Agenda for meeting
- Group Remit/Terms of Reference – your Group Lead is John Stuart
- Schedules of Accommodation for the Generic Ward and Core Shared Support Area (note, 2 sheets on the attachment)
- There are 4 drawings attached, the first shows a typical floor in the ward stack with 4 wards per floor and the core shared support area in the centre of the 4 wards. Two drawings show the 1:200 plan of a Ward in detail and the floor in detail. The final drawing shows the detail of the bedrooms with the ensuites in between the bedrooms.

The format for the meeting will be to start with a short presentation showing the Hospital Campus, Brookfield's block plans for the hospital, and flows through the hospital, before going on to discuss the 1:200 layout for the Generic Ward.

As part of the Ward User Meeting we also want to cover the layout for the Support Cluster. There is a Shared Support Cluster on each floor (shared between 4 wards); on the 1:200 plan you can see the shared cluster in the centre of the Wards.

The Support Cluster contains the following:

- 6 Workstations
- FM Areas – Regen Kitchens and Disposal Hold, FM Trolley Bays, Staff Changing, WC's
- Pharmacy Medicines Management Room
- An 80m^2 space multifunctional cluster the content of which varies per floor. On 3 floors this 80m^2 is an AHP Area, on the remaining tower floors this

80m^2 area contains Seminar Rooms and Bulk Store.

The meeting will be to discuss the layout/location of the above within the support core.

- We will all input re Hot Desks and Seminar Rooms
- Colin and Maureen can you input re location of Medicines Management Room
- Karen (FM) will input re FM Areas & Bulk Store
- Catherine will input re the AHP Areas

You may find the 1:200 detailed plans difficult to read unless you have access to a large printer, therefore large A1 hard copies of the plans are available from your Group Lead.

If you have any problems or need further information please do not hesitate to contact me by email or phone.

Regards
[redacted]

Tel : [redacted]
Fax : [redacted]
Email : [redacted]

****

NHSGG&C Disclaimer

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ADB	Room Data Sheet	B0303

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B0303	Single bedroom: Adult acute With clinical support. Relative overnight stay
Room Number:		**Revision Date:** 07/04/2009

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Patient may arrive on a trolley or in a bed. 3) Transfer patient to/from bed, stretcher trolley, or wheelchair. 4) Admission, with the intimate discussion of personal matters. 5) Patient to undress/dress in vicinity of bed, with/without assistance. 6) Patient to receive therapeutic and clinical attention from health team staff. 7) Patient to read, writes, listens to radio, views TV and use telephone. 8) Patient to take meals in bed or by the bed. 9) Patient to receive visitors. 10) Holding clothing and personal effects. 11) Preparing for clinical procedures. 12) Self dispensing medication or drugs. 13) Holding daily supply of linen and surgical goods/supplies. 14) Using monitoring/diagnostic equipment. 15) Using computer workstation(s). 16) Overnight stays by relatives.			
Personnel:	1 x Patient 4 x Others			
Planning Relationships:	Close to staff base/touch down base Close to ancillary rooms. Ward activity to be visible from room. En-suite sanitary facilities.			
Space Data:	**Area (m²):**	16.50	**Height (mm):**	2,700
Notes:	Ceiling mounted hoist to ensuite required. Storage of patient drug - see hospital policy.			

ADB	Room Environmental Data	B0303

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B0303	Single bedroom: Adult acute With clinical support. Relative overnight stay
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	100	Floor. 200-400 Bed centre. 30-50 Bedhead. Areas for VDT's: See CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001
Service Illumination Night (Lux):	5.0	Floor. 1-5 Bed centre. 0.1 Bedhead. Evening (lux): 50 Bed centre.
Local Illumination (Lux):	150.0	Bedhead
Colour Rendering Required:	Y	Not night & local
Standby Lighting Grade:		B: Lighting of the level and quality one third to one half that provided by normal lighting. Day Bed centre: A: Lighting of the level and quality equal or nearly equal to that provided by normal lighting. For local examination & inspection.
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):		
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	B0303

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B0303	Single bedroom: Adult acute With clinical support. Relative overnight stay
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5 i.e. Imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Two sets of doors: 1x 1500mm, one & a half leaf, half glazed, obscurable; bed access. 1x2300mm, single leaf hinged with leaf and a half sliding/folding door, plain flush; wheelchair & ceiling hoist access, occupancy indicator, lockable, outside release.
Windows:	(HTM 55) Clear, solar control, privacy control
Internal Glazing:	(HTM 57) Clear with privacy control
Hatch:	
Notes:	

ADB	Schedule of Components by Room	B0303

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: B0303 Single bedroom: Adult acute With clinical support. Relative overnight stay
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	BED022	BEDHEAD SERVICES UNIT - TRUNKING MOUNTED incorporating: Electrical panel - 6x Double socket outlet 1x Bedlight control switch; ON/DIM/OFF 1x Bedlight fuse unit Patient/Nurse call panel - 1x Reset switch/Indicator lamp 1x Socket for handset 1x Audio driver 1x Staff emergency switch 1x Handset parking bracket 1x Handset parking clip		1
1		1	BED040	BED HEAD BUFFER/DOCKING device, bed and wall protection, horizontal, wall mounted, (internal clearance 1000-1400)		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	CAL050	HANDSET patient's typical facilities: Nurse call button with reassurance Channel display Channel selection Volume control Bedlight control		1
1		1	HOI006	HOIST PATIENT, electric, 24V, track ceiling mounted. (Length of the track to suit the individual needs.)		1
1		1	LIG003	LUMINAIRE Reading, adjustable arm, 100watt, wall/trunking/rail mounted		1
1		1	MSC187	CABINET base, 400mm facing, with 2 shelves, 1 door hinged right, on plinth, o/a height 900, HTM71		1
1		1	MSW062	WORKTOP, for 400mm facing inserts cabinets, 1200W 700D nominal, HTM71		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
3		3	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT209	SOCKET outlet television aerial, single, trunking mounted		1
1		1	OUT217	SOCKET outlet telephone, trunking mounted		1
1		1	OUT452	OUTLET 4 kPa compressed air medical, wall/trunking mounted		1
1		1	OUT471	OUTLET oxygen medical, wall/trunking mounted		1
1		1	OUT476	OUTLET vacuum medical, wall/trunking mounted		1
1		1	RAI130	RAIL, clinical equipment, wall mounted, 600mm		1
1		1	RAI136	RAIL, clinical equipment, wall mounted, 2100mm		1
1		1	STC003	BEDHEAD SERVICES TRUNKING SYSTEM for medical gases, electrical power, nurse call, 2400mm nominal		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	BRA004	BRACKET, holder, suction unit, trunking mounted		2

ADB	Schedule of Components by Room	B0303

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: B0303 Single bedroom: Adult acute With clinical support. Relative overnight stay
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	CAB065	CABINET, drugs, self dispensing medication, lockable, wall mounted, 315H 210W 155D		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS435	DISPENSER, disposable gloves, set of 3, wall mounted		2
1		1	DIS436	DISPENSER, disposable apron, wall mounted		2
1		1	HOO019	HOOK, single, small, wall mounted		2
1		1	BED013	BED Kings Fund, variable height, two-way tilt, adjustable backrest, bedstripper, on castors		3
1		1	CHA007	CHAIR, easy, with open arms, high back, upholstered		3
1		1	COM032	COMPUTER VDT MONITOR		3
1		1	COM033	COMPUTER KEYBOARD		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	LOC002	LOCKER, bedside, 3 compartment, towel rail at rear, on castors, 902H 485W 485D		3
1		1	MAT004	MATTRESS, Kings Fund bed, standard backrest, 1955L 865W 125D		3
1		1	MST005	TROLLEY, small, half size, with 5 sets of runners, 400mm facing, 850H 445W 350D nominal, HTM71		3
1		1	SET001	SETTEE/BED, convertible, with arms		3
1		1	TAB073	TABLE, overbed, cantilevered		3
1		1	WAR003	WARDROBE, 1800H 600W 600D		3

ADB	Room Data Sheet	B0303A

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B0303A	Single bedroom: Critical Care With clinical support. Relative overnight stay
Room Number:		**Revision Date:** 07/04/2009

Activities:

1) Patient may arrive on foot or in a wheelchair.
2) Patient may arrive on a trolley or in a bed.
3) Transfer patient to/from bed, stretcher trolley, or wheelchair.
4) Admission, with the intimate discussion of personal matters.
5) Patient to undress/dress in vicinity of bed, with/without assistance.
6) Patient to receive therapeutic and clinical attention from health team staff.
7) Patient to read, writes, listens to radio, views TV and use telephone.
8) Patient to take meals in bed or by the bed.
9) Patient to receive visitors.
10) Holding clothing and personal effects.
11) Preparing for clinical procedures.
12) Self dispensing medication or drugs.
13) Holding daily supply of linen and surgical goods/supplies.
14) Using monitoring/diagnostic equipment.
15) Using computer workstation(s).
16) Overnight stays by relatives.

Personnel: 1 x Patient 4 x Others

Planning Relationships: Close to staff base/touch down base Close to ancillary rooms. Ward activity to be visible from room. En-suite sanitary facilities.

Space Data:

Area (m²):	16.50	**Height (mm):**	2,700

Notes: Ceiling mounted hoist to ensuite required. Push button 'crash' call is connected to hospital main switch board. Engineering services are integral to ceiling mounted supply system & include power supply & medical gases. Space required for equipment used intermittently at the bed space includes: EEG machine; mobile imaging; ultrasound/echocardiography; endoscopy (fibre-optic light source); defibrillators; invasive/non-invasive cardiac output monitoring devices haemodialysis; haeomfiltration. Water supply & drainage to haemodialysis machine see HBN Critical care; Joint union connection - (MSP008). Potable water - 15dia. stainless steel self-sealing instantaneous adaptor with finishing plate. Drain - 35 dia. stainless steel self-sealing instantaneous adaptor & pipe fixed to wall. Discharges over stainless steel Tundish - (DSP212). Tundish trap by gulley (maintained by WHB). Gulley - (DSP208) back inlet with sealed top.

ADB	Room Environmental Data	B0303A

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B0303A	Single bedroom: Critical Care With clinical support. Relative overnight stay
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	100	Floor. 200-400 Bed centre. 30-50 Bedhead. Areas for VDT's: See CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001
Service Illumination Night (Lux):	5.0	Floor. 1-5 Bed centre. 0.1 Bedhead. Evening (lux): 50 Bed centre.
Local Illumination (Lux):	150.0	Bedhead
Colour Rendering Required:	Y	Not night & local
Standby Lighting Grade:		B: Lighting of the level and quality one third to one half that provided by normal lighting. Day Bed centre: A: Lighting of the level and quality equal or nearly equal to that provided by normal lighting. For local examination & inspection.
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):		
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	B0303A

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B0303A	Single bedroom: Critical Care With clinical support. Relative overnight stay
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5 i.e. Imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Two sets of doors: 1x 1500mm, one & a half leaf, half glazed, obscurable; bed access. 1x2300mm, single leaf hinged with leaf and a half sliding/folding door, plain flush; wheelchair & ceiling hoist access, occupancy indicator, lockable, outside release.
Windows:	(HTM 55) Clear, solar control, privacy control
Internal Glazing:	(HTM 57) Clear with privacy control
Hatch:	
Notes:	

ADB	Schedule of Components by Room	B0303A

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: B0303A Single bedroom: Critical Care With clinical support. Relative overnight stay
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	BED022	BEDHEAD SERVICES UNIT - TRUNKING MOUNTED incorporating: Electrical panel - 6x Double socket outlet 1x Bedlight control switch; ON/DIM/OFF 1x Bedlight fuse unit Patient/Nurse call panel - 1x Reset switch/Indicator lamp 1x Socket for handset 1x Audio driver 1x Staff emergency switch 1x Handset parking bracket 1x Handset parking clip		1
1		1	BED040	BED HEAD BUFFER/DOCKING device, bed and wall protection, horizontal, wall mounted, (internal clearance 1000-1400)		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	CAL050	HANDSET patient's typical facilities: Nurse call button with reassurance Channel display Channel selection Volume control Bedlight control		1
1		1	HOI006	HOIST PATIENT, electric, 24V, track ceiling mounted. (Length of the track to suit the individual needs.)		1
1		1	LIG003	LUMINAIRE Reading, adjustable arm, 100watt, wall/trunking/rail mounted		1
1		1	MSC187	CABINET base, 400mm facing, with 2 shelves, 1 door hinged right, on plinth, o/a height 900, HTM71		1
1		1	MSW062	WORKTOP, for 400mm facing inserts cabinets, 1200W 700D nominal, HTM71		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
3		3	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT209	SOCKET outlet television aerial, single, trunking mounted		1
1		1	OUT217	SOCKET outlet telephone, trunking mounted		1
1		1	OUT452	OUTLET 4 kPa compressed air medical, wall/trunking mounted		1
1		1	OUT471	OUTLET oxygen medical, wall/trunking mounted		1
1		1	OUT476	OUTLET vacuum medical, wall/trunking mounted		1
1		1	RAI130	RAIL, clinical equipment, wall mounted, 600mm		1
1		1	RAI136	RAIL, clinical equipment, wall mounted, 2100mm		1
1		1	STC003	BEDHEAD SERVICES TRUNKING SYSTEM for medical gases, electrical power, nurse call, 2400mm nominal		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	BRA004	BRACKET, holder, suction unit, trunking mounted		2

ADB	Schedule of Components by Room	B0303A

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: B0303A Single bedroom: Critical Care With clinical support. Relative overnight stay
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	CAB065	CABINET, drugs, self dispensing medication, lockable, wall mounted, 315H 210W 155D		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS435	DISPENSER, disposable gloves, set of 3, wall mounted		2
1		1	DIS436	DISPENSER, disposable apron, wall mounted		2
1		1	HOO019	HOOK, single, small, wall mounted		2
1		1	BED013	BED Kings Fund, variable height, two-way tilt, adjustable backrest, bedstripper, on castors		3
1		1	CHA007	CHAIR, easy, with open arms, high back, upholstered		3
1		1	COM032	COMPUTER VDT MONITOR		3
1		1	COM033	COMPUTER KEYBOARD		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	INF002	INFUSION volumetric pump, 188H 110W 60D		3
1		1	LOC002	LOCKER, bedside, 3 compartment, towel rail at rear, on castors, 902H 485W 485D		3
1		1	MAT004	MATTRESS, Kings Fund bed, standard backrest, 1955L 865W 125D		3
1		1	MST005	TROLLEY, small, half size, with 5 sets of runners, 400mm facing, 850H 445W 350D nominal, HTM71		3
1		1	SET001	SETTEE/BED, convertible, with arms		3
1		1	SYR003	SYRINGE pump, battery operated, 170H 35W 75D		3
1		1	TAB073	TABLE, overbed, cantilevered		3
1		1	WAR003	WARDROBE, 1800H 600W 600D		3

ADB	Room Data Sheet	B0607

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	B0607	Multi-bed room: Day care, 4 beds		
Room Number:			**Revision Date:**	09/04/2009

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Patient to receive therapeutic and clinical attention from health team staff. 3) Patient to read, writes, listens to radio, views TV and use telephone. 4) Patient to receive visitors. 5) Holding clothing and personal effects. 6) Using monitoring/diagnostic equipment. 7) Clinical hand washing.			
Personnel:	4 x Patients 4 x Others			
Planning Relationships:	Close to staff base.			
Space Data:	**Area (m²):**	36.00	**Height (mm):**	2,700

Notes: Bed area should be designed to allow interchangeable use of beds or reclining chairs. Space may required to accommodate use of hoist. 4x fixed partitions or heavy duty screens required.

ADB	Room Environmental Data	B0607

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B0607	Multi-bed room: Day care, 4 beds
Room Number:		**Revision Date:** 09/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	100	Floor. 200-400 Bed centre. 30-50 Bedhead.
Service Illumination Night (Lux):	5.0	Floor. 1-5 Bed centre. 1 Bedhead. Evening (lux): 50 Bed centre.
Local Illumination (Lux):	150.0	Bedhead
Colour Rendering Required:	Y	Not required night & local.
Standby Lighting Grade:		B: Lighting of the level and quality one third to one half that provided by normal lighting. Day Bed centre: A: Lighting of the level and quality equal or nearly equal to that provided by normal lighting. For local examination & inspection.
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	40	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	B0607

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B0607	Multi-bed room: Day care, 4 beds
Room Number:		**Revision Date:** 09/04/2009

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3: Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5 i.e. Imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1900mm, double equal leaves, vision panel, obscurable; bed access
Windows:	(HTM 55) Clear, solar control, privacy control
Internal Glazing:	(HTM 57) Clear with privacy control
Hatch:	
Notes:	

ADB	Schedule of Components by Room	B0607

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: B0607 Multi-bed room: Day care, 4 beds
Room Number: **Revision Date:** 09/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
4		4	BED022	BEDHEAD SERVICES UNIT - TRUNKING MOUNTED incorporating: Electrical panel - 6x Double socket outlet 1x Bedlight control switch; ON/DIM/OFF 1x Bedlight fuse unit Patient/Nurse call panel - 1x Reset switch/Indicator lamp 1x Socket for handset 1x Audio driver 1x Staff emergency switch 1x Handset parking bracket 1x Handset parking clip		1
4		4	BED040	BED HEAD BUFFER/DOCKING device, bed and wall protection, horizontal, wall mounted, (internal clearance 1000-1400)		1
4		4	CAL050	HANDSET patient's typical facilities: Nurse call button with reassurance Channel display Channel selection Volume control Bedlight control		1
4		4	LIG003	LUMINAIRE Reading, adjustable arm, 100watt, wall/trunking/rail mounted		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
4		4	OUT012	SOCKET outlet switched 13amp twin, trunking mounted		1
4		4	OUT209	SOCKET outlet television aerial, single, trunking mounted		1
4		4	OUT217	SOCKET outlet telephone, trunking mounted		1
4		4	STC013	BEDHEAD SERVICES TRUNKING SYSTEM for electrical power, 2400mm nominal		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
2		2	TRA112	TRACK, curtain, two sided, L-shape, curved, 2900L 2500W		1
2		2	TRA113	TRACK, curtain, three sided, U-shape, 2900L 2500W		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
4		4	HOO019	HOOK, single, small, wall mounted		2
4		4	BED013	BED Kings Fund, variable height, two-way tilt, adjustable backrest, bedstripper, on castors		3
4		4	CHA007	CHAIR, easy, with open arms, high back, upholstered		3
4		4	CHA017	CHAIR, upright, upholstered, stacking		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
4		4	LOC002	LOCKER, bedside, 3 compartment, towel rail at rear, on castors, 902H 485W 485D		3

ADB	Schedule of Components by Room	B0607

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: B0607 Multi-bed room: Day care, 4 beds
Room Number: **Revision Date:** 09/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
4		4	MAT004	MATTRESS, Kings Fund bed, standard backrest, 1955L 865W 125D		3
4		4	TAB073	TABLE, overbed, cantilevered		3

ADB	Room Data Sheet	B1602

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	B1602	Isolation single bedroom: Critical care		
Room Number:			**Revision Date:**	07/04/2009

Activities:	1) Accommodating a patient needing continuous medical and nursing care using piped medical gases, vacuum and life-support system. 2) Medical and nursing procedures requiring all sides access to patient whilst 1-6 staff use specialised equipment. 3) Self dispensing medication or drugs. 4) Monitoring vital physiological signs. 5) Air control to provide source or protective isolation for patients at risk or liable to infect others. 6) Clinical hand washing.			
Personnel:	1 x Patient Up to 8 Staff			
Planning Relationships:	Overview from staff base required.			
Space Data:	**Area (m²):**	26.00	**Height (mm):**	3,000
Notes:	Push button 'crash' call is connected to hospital main switch board. Engineering services are integral to ceiling mounted supply system & include power supply & medical gases. Space required for equipment used intermittently at the bed space includes: EEG machine; mobile imaging; ultrasound/echocardiography; endoscopy (fibre-optic light source); defibrillators; invasive/non-invasive cardiac output monitoring devices haemodialysis; haeomfiltration. Water supply & drainage to haemodialysis machine see HBN Critical care; Joint union connection - (MSP008). Potable water - 15dia. stainless steel self-sealing instantaneous adaptor with finishing plate. Drain - 35 dia. stainless steel self-sealing instantaneous adaptor & pipe fixed to wall. Discharges over stainless steel Tundish - (DSP212). Tundish trap by gulley (maintained by WHB). Gulley - (DSP208) back inlet with sealed top.			

ADB	Room Environmental Data	B1602

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B1602	Isolation single bedroom: Critical care
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	27	Summer and winter (local control) temperature control: 16 to 27 deg.C
Summer Temperature (DegC):	16	
Mechanical Ventilation (Supply ac/hr):	6.0	Mechanical ventilation (supply): To provide source or protective isolation. Mechanical ventilation (extract): To provide source or protective isolation.
Mechanical Ventilation (Extract ac/hr):	6.0	
Pressure Relative to Adjoining Space:	BAL	Final filtration: EU10/11 to suit clinical requirements. Humidity: 40-60
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):	60	
General Notes:		
LIGHTING		
Service Illumination (Lux):		see local illumination
Service Illumination Night (Lux):	10.0	Bedhead
Local Illumination (Lux):	400.0	Bed (dimming required)
Colour Rendering Required:	Y	
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	B1602

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B1602	Isolation single bedroom: Critical care
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 3 i.e. Impervious, jointless, smooth Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3: Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 1 i.e. Smooth, imperforate, jointless Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Two sets of doors: 1x 1500mm, one & a half leaf, vision panel, obscurable; bed access. 1x 900mm, single leaf, vision panel, obscurable; person access
Windows:	(HTM 55) Clear, solar control, privacy control
Internal Glazing:	(HTM 57) Clear with privacy control
Hatch:	

Notes:

ADB	Schedule of Components by Room	B1602

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: B1602 Isolation single bedroom: Critical care
Room Number: **Revision Date:** 07/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	HOI006	HOIST PATIENT, electric, 24V, track ceiling mounted. (Length of the track to suit the individual needs.)		1
1		1	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	PEN017	PENDANT DATA services, lateral and vertical movement, ceiling mounted		1
1		1	PEN025	PENDANT INTENSIVE/CRITICAL CARE medical and power supply unit, 2 articulated arms, with docking system, ceiling mounted, medical gases and power outlets comprising: Infusion arm; 10x socket outlet 13amp single 4x outlet vacuum medical Ventilator arm; 18x socket outlet 13amp single 1x push button staff emergency call 1x push button staff 'crash' call 4x outlet oxygen medical 4x outlet compressed air medical 1x outlet compressed air surgical 1x socket outlet patient monitoring 1x switch dimmer modulating 1x outlet nitrous oxide medical (optional) 1x outlet gas scavenging medical, (AGS) (optional) Electrical 1x Telephone/nurse call socket 1x Bedlight control switch; ON/DIM/OFF 1x Bedlight fuse unit 1x Examination lamp 1x Warmer blood/fluid, maintains temperature between 36 - 43 deg.C at flow rates up to 500 ml/min, nominal 130H 910W 100D		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	BOA034	BOARD, marker, whiteboard, dry-wipe, with pen holder, wall mounted, 600H 900W		2
1		1	CAB065	CABINET, drugs, self dispensing medication, lockable, wall mounted, 315H 210W 155D		2
1		1	CLO004	CLOCK battery with second sweep hand, wall mounted		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS435	DISPENSER, disposable gloves, set of 3, wall mounted		2
1		1	DIS436	DISPENSER, disposable apron, wall mounted		2
1		1	BED016	BED, CCU/ITU, radio translucent rising backrest, two-way tilt, height adjustable (685-860), on castors		3

ADB	Schedule of Components by Room	B1602

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: B1602 Isolation single bedroom: Critical care
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
2		2	CHA018	CHAIR, upright, with arms, upholstered, stacking		3
1		1	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
6		6	INF002	INFUSION volumetric pump, 188H 110W 60D		3
1		1	MAT006	MATTRESS, ITU/CCU bed, extra care		3
1		1	MON013	MONITOR, vital signs, multi-parameter, with accessories, 280H 360W 215D		3
1		1	MST005	TROLLEY, small, half size, with 5 sets of runners, 400mm facing, 850H 445W 350D nominal, HTM71		3
8		8	SYR003	SYRINGE pump, battery operated, 170H 35W 75D		3
1		1	TRN007	TRANSPORTER ventilator, 540H 600W 580D, (compatible with medical supply unit - PEN025)		3
1		1	TRO130	TROLLEY, dressing/instrument, stainless steel, antistatic castors, 870H 450W450D		3
1		1	VEN025	VENTILATOR, portable, adjustable minute volume, 460H 470W 310D		3
1		1	WAR053	WARMER, blood/fluid, maintains temperature between 36 and 43 deg.C at flow rates up to 500 ml/min, 35H 235W 273D		3

ADB	Room Data Sheet	B1802

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B1802	Single bedroom: Children/young people, with relatives overnight stay
Room Number:		**Revision Date:** 23/04/2009

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Patient may arrive on a trolley or in a bed. 3) Transfer patient to/from bed, stretcher trolley, or wheelchair. 4) Patient to undress/dress in vicinity of bed, with/without assistance. 5) Patient to receive therapeutic and clinical attention from health team staff. 6) Self dispensing medication or drugs. 7) Patient to read, writes, listens to radio, views TV and use telephone. 8) Patient to take meals in bed or by the bed. 9) Patient to receive visitors. 10) Holding clothing and personal effects. 11) Displaying cards and pictures. 12) Day and overnight stays by parents, relatives and carers. 13) Children to view, through glazed panels, children and staff in adjacent spaces. 14) Using monitoring/diagnostic equipment. 15) Clinical hand washing.
Personnel:	1 x Patient 4 x Others
Planning Relationships:	Close to staff base. Close to supporting ancillary rooms. En-suite shower/wc/wash.

Space Data:	**Area (m²):**	16.50	**Height (mm):**	2,700

Notes:

Child bed can be replaced by variable height cot - project team option. Dispenser gloves and aprons situated on outside entrance of the room. Magnetic board can be replaced by Velcro board - project team option. Maintaining safety and security, all the equipment and furniture must be safe for children. Safe for valuables - project team option. Ceiling mounted hoist to ensuite required.

ADB	Room Environmental Data	B1802

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B1802	Single bedroom: Children/young people, with relatives overnight stay
Room Number:		**Revision Date:** 23/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	Winter temperature (degC): up to 24, independent control
Summer Temperature (DegC):	23	
Mechanical Ventilation (Supply ac/hr):		Mechanical ventilation (supply): Refer to HBN text. Mechanical ventilation (extract): In-patient barrier nursing. Refer to HBN text.
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		Pressure relative: WC NEG to bedroom.

LIGHTING		
Service Illumination (Lux):	100	Floor. Not less than 100 lux Bed centre. 30-50 Bedhead.
Service Illumination Night (Lux):	5.0	Floor. 1-5 Bed centre. 1 Bedhead. Evening (lux): 50 Bed centre.
Local Illumination (Lux):	150.0	Bedhead. Control ON/OFF/ DIM switch & bedhead.
Colour Rendering Required:	Y	Not night and local.
Standby Lighting Grade:		
General Notes:		

NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		

SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		

FIRE	
Enclosure:	
Automatic Detection:	Smoke

ADB	Room Design Character	B1802

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B1802	Single bedroom: Children/young people, with relatives overnight stay
Room Number:		**Revision Date:** 23/04/2009

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5 i.e. Imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Two sets of doors: 1x 1500mm, one & a half leaf, half glazed, obscurable; bed access. 1x2300mm, single leaf hinged with leaf and a half sliding/folding door, plain flush; wheelchair & ceiling hoist access, occupancy indicator, lockable, outside release.
Windows:	(HTM 55) Clear, solar control, privacy control. Window opening restrictors max 100mm at bottom
Internal Glazing:	(HTM 57) Blinds for glazed screens
Hatch:	
Notes:	

ADB	Schedule of Components by Room	B1802

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: B1802 Single bedroom: Children/young people, with relatives overnight stay
Room Number: **Revision Date:** 23/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	BED040	BED HEAD BUFFER/DOCKING device, bed and wall protection, horizontal, wall mounted, (internal clearance 1000-1400)		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	CAL050	HANDSET patient's typical facilities: Nurse call button with reassurance Channel display Channel selection Volume control Bedlight control		1
1		1	ECS010	ENTERTAINMENT/COMMUNICATION SYSTEM, PatientPower bedside , adjustable arm, trunking mounted incorporating: TV LCD flat screen headphones socket telephone/nurse call socket extra telephone socket for email on internet via PC connection to remote nurse call handset		1
1		1	ECS012	HANDSET ENTERTAINMENT/COMMUNICATION patient's typical facilities (Part of ECS010): Nurse call button with reassurance Channel selection programme Teletext information Voicemail facility Direct dial telephone handset Volume control		1
1		1	HOI006	HOIST PATIENT, electric, 24V, track ceiling mounted. (Length of the track to suit the individual needs.)		1
1		1	LIG003	LUMINAIRE Reading, adjustable arm, 100watt, wall/trunking/rail mounted		1
1		1	MSC187	CABINET base, 400mm facing, with 2 shelves, 1 door hinged right, on plinth, o/a height 900, HTM71		1
1		1	MSW062	WORKTOP, for 400mm facing inserts cabinets, 1200W 700D nominal, HTM71		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
3		3	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT209	SOCKET outlet television aerial, single, trunking mounted		1
1		1	OUT217	SOCKET outlet telephone, trunking mounted		1
1		1	OUT452	OUTLET 4 kPa compressed air medical, wall/trunking mounted		1
1		1	OUT471	OUTLET oxygen medical, wall/trunking mounted		1
1		1	OUT476	OUTLET vacuum medical, wall/trunking mounted		1
1		1	RAI134	RAIL, clinical equipment, wall mounted, 1600mm		1
1		1	STC001	BEDHEAD SERVICES TRUNKING SYSTEM for medical gases, electrical power, nurse call, 1800mm nominal		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1

ADB	Schedule of Components by Room	B1802

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: B1802 Single bedroom: Children/young people, with relatives overnight stay
Room Number: **Revision Date:** 23/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	BED020	BED, fold down		2
1		1	BOA022	BOARD, display/notice, magnetic, wall mounted, 900H 600W		2
1		1	BRA004	BRACKET, holder, suction unit, trunking mounted		2
1		1	CAB065	CABINET, drugs, self dispensing medication, lockable, wall mounted, 315H 210W 155D		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS435	DISPENSER, disposable gloves, set of 3, wall mounted		2
1		1	DIS436	DISPENSER, disposable apron, wall mounted		2
1		1	HOO019	HOOK, single, small, wall mounted		2
1		1	RAC362	RACK, catheter, vertical, 2 compartments, 420H 160W 65D		2
1		1	BED008	BED, Kings Fund, child, variable height, two-way tilt, adjustable backrest, on castors		3
1		1	CHA007	CHAIR, easy, with open arms, high back, upholstered		3
1		1	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	COM032	COMPUTER VDT MONITOR		3
1		1	COM033	COMPUTER KEYBOARD		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	LOC002	LOCKER, bedside, 3 compartment, towel rail at rear, on castors, 902H 485W 485D		3
1		1	MAT003	MATTRESS, Kings Fund bed, child, standard backrest, 1655L 865W 125D		3
1		1	MST005	TROLLEY, small, half size, with 5 sets of runners, 400mm facing, 850H 445W 350D nominal, HTM71		3
1		1	TAB073	TABLE, overbed, cantilevered		3
1		1	WAR007	WARDROBE, 1800H 400W 400D		3

ADB	Room Data Sheet	B1805

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B1805	Isolation single bedroom: Children/young people, with relatives overnight stay
Room Number:		**Revision Date:** 23/04/2009

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Patient may arrive on a trolley or in a bed. 3) Transfer patient to/from bed, stretcher trolley, or wheelchair. 4) Patient to undress/dress in vicinity of bed, with/without assistance. 5) Patient to receive therapeutic and clinical attention from health team staff. 6) Self dispensing medication or drugs. 7) Patient to read, writes, listens to radio, views TV and use telephone. 8) Patient to take meals in bed or by the bed. 9) Patient to receive visitors. 10) Holding clothing and personal effects. 11) Displaying cards and pictures. 12) Day and overnight stays by parents, relatives and carers. 13) Children to view, through glazed panels, children and staff in adjacent spaces. 14) Using monitoring/diagnostic equipment. 15) Holding toys, books and games. 16) Clinical hand washing.
Personnel:	1 x Patient 3 x Others
Planning Relationships:	Access via gowning lobby. Close to staff base. Close to supporting ancillary rooms. En-suite shower/wc/wash.

Space Data:	**Area (m²):**	25.50	**Height (mm):**	3,000

Notes: Child bed can be replaced by variable height cot - project team option. Magnetic board can be replaced by Velcro board - project team option. Maintaining safety and security, all the equipment and furniture must be safe for children.

ADB	Room Environmental Data	B1805

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B1805	Isolation single bedroom: Children/young people, with relatives overnight stay
Room Number:		**Revision Date:** 23/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	Winter temperature (degC): up to 24. independent control
Summer Temperature (DegC):	23	
Mechanical Ventilation (Supply ac/hr):		Mechanical ventilation (supply): Refer to HBN text. Mechanical ventilation (extract): In-patient barrier nursing. Refer to HBN text.
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:	BAL	Filtration: BS6540 Humidity: 65-42 summer, 68-38 winter
Filtration (%DSE and % Arrestance):	85/	
Humidity (%RH):		
General Notes:		Pressure relative: WC NEG to bedroom.

LIGHTING		
Service Illumination (Lux):	100	Floor. not less than 100 lux. Bed centre. 30-50 Bedhead.
Service Illumination Night (Lux):	5.0	Floor. 1-5 Bed centre. 1 Bedhead. Evening (lux): 50 Bed centre.
Local Illumination (Lux):	150.0	Bedhead. Control ON/OFF/ DIM switch & bedhead.
Colour Rendering Required:	Y	Not night and local.
Standby Lighting Grade:		B: Lighting of the level and quality one third to one half that provided by normal lighting. Day Bed centre: A: Lighting of the level and quality equal or nearly equal to that provided by normal lighting. For local examination & inspection.
General Notes:		

NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		

SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		

FIRE	
Enclosure:	
Automatic Detection:	Smoke

ADB	Room Design Character	B1805

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B1805	Isolation single bedroom: Children/young people, with relatives overnight stay
Room Number:		**Revision Date:** 23/04/2009

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5 i.e. Imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Two sets of doors: 1x 1500mm, one & a half leaf, vision panel, obscurable, lockable; bed access. 1x 1000mm, single leaf, plain flush, occupancy indicator, lockable, outside emergency release; wheelchair access. Door hinge protectors
Windows:	(HTM 55) Clear, solar control, privacy control. Window opening restrictors max 100mm at bottom, lockable, low sill
Internal Glazing:	(HTM 57) Observation window. Blinds, controlled by both sides
Hatch:	
Notes:	

ADB	Schedule of Components by Room	B1805

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: B1805 Isolation single bedroom: Children/young people, with relatives overnight stay
Room Number: **Revision Date:** 23/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	ECS010	ENTERTAINMENT/COMMUNICATION SYSTEM, PatientPower bedside , adjustable arm, trunking mounted incorporating: TV LCD flat screen headphones socket telephone/nurse call socket extra telephone socket for email on internet via PC connection to remote nurse call handset		1
1		1	ECS012	HANDSET ENTERTAINMENT/COMMUNICATION patient's typical facilities (Part of ECS010): Nurse call button with reassurance Channel selection programme Teletext information Voicemail facility Direct dial telephone handset Volume control		1
1		1	HOI006	HOIST PATIENT, electric, 24V, track ceiling mounted. (Length of the track to suit the individual needs.)		1
1		1	PEN017	PENDANT DATA services, lateral and vertical movement, ceiling mounted		1
1		1	PEN025	PENDANT INTENSIVE/CRITICAL CARE medical and power supply unit, 2 articulated arms, with docking system, ceiling mounted, medical gases and power outlets comprising: Infusion arm; 10x socket outlet 13amp single 4x outlet vacuum medical Ventilator arm; 18x socket outlet 13amp single 1x push button staff emergency call 1x push button staff 'crash' call 4x outlet oxygen medical 4x outlet compressed air medical 1x outlet compressed air surgical 1x socket outlet patient monitoring 1x switch dimmer modulating 1x outlet nitrous oxide medical (optional) 1x outlet gas scavenging medical, (AGS) (optional) Electrical 1x Telephone/nurse call socket 1x Bedlight control switch; ON/DIM/OFF 1x Bedlight fuse unit 1x Examination lamp 1x Warmer blood/fluid, maintains temperature between 36 - 43 deg.C at flow rates up to 500 ml/min, nominal 130H 910W 100D		1
1		1	RAI134	RAIL, clinical equipment, wall mounted, 1600mm		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	BED020	BED, fold down		2
1		1	BOA022	BOARD, display/notice, magnetic, wall mounted, 900H 600W		2
1		1	BRA004	BRACKET, holder, suction unit, trunking mounted		2
1		1	CAB065	CABINET, drugs, self dispensing medication, lockable, wall mounted, 315H 210W 155D		2
1		1	CLO004	CLOCK battery with second sweep hand, wall mounted		2

ADB	Schedule of Components by Room	B1805

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: B1805 Isolation single bedroom: Children/young people, with relatives overnight stay
Room Number: **Revision Date:** 23/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
2		2	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS435	DISPENSER, disposable gloves, set of 3, wall mounted		2
1		1	DIS436	DISPENSER, disposable apron, wall mounted		2
1		1	RAC362	RACK, catheter, vertical, 2 compartments, 420H 160W 65D		2
1		1	BED008	BED, Kings Fund, child, variable height, two-way tilt, adjustable backrest, on castors		3
1		1	CHA007	CHAIR, easy, with open arms, high back, upholstered		3
2		2	CHA017	CHAIR, upright, upholstered, stacking		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
6		6	INF002	INFUSION volumetric pump, 188H 110W 60D		3
1		1	LOC002	LOCKER, bedside, 3 compartment, towel rail at rear, on castors, 902H 485W 485D		3
1		1	MAT003	MATTRESS, Kings Fund bed, child, standard backrest, 1655L 865W 125D		3
1		1	MST005	TROLLEY, small, half size, with 5 sets of runners, 400mm facing, 850H 445W 350D nominal, HTM71		3
8		8	SYR003	SYRINGE pump, battery operated, 170H 35W 75D		3
1		1	TAB073	TABLE, overbed, cantilevered		3
1		1	TRN007	TRANSPORTER ventilator, 540H 600W 580D, (compatible with medical supply unit - PEN025)		3
1		1	TRO130	TROLLEY, dressing/instrument, stainless steel, antistatic castors, 870H 450W450D		3
1		1	VEN025	VENTILATOR, portable, adjustable minute volume, 460H 470W 310D		3
1		1	WAR007	WARDROBE, 1800H 400W 400D		3
1		1	WAR053	WARMER, blood/fluid, maintains temperature between 36 and 43 deg.C at flow rates up to 500 ml/min, 35H 235W 273D		3

ADB	Room Data Sheet	B1811

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	B1811	Single bedroom: Children/young people day care		
Room Number:			**Revision Date:**	06/08/2007

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Patient may arrive on a trolley or in a bed. 3) Transfer patient to/from bed, stretcher trolley, or wheelchair. 4) Patient to undress/dress in vicinity of bed, with/without assistance. 5) Patient to receive therapeutic and clinical attention from health team staff. 6) Self dispensing medication or drugs. 7) Patient to read, writes, listens to radio, views TV and use telephone. 8) Patient to take meals in bed or by the bed. 9) Holding clothing and personal effects. 10) Displaying cards and pictures. 11) Children to view, through glazed panels, children and staff in adjacent spaces. 12) Using monitoring/diagnostic equipment. 13) Clinical hand washing.			
Personnel:	1 x Patient 3 x Others			
Planning Relationships:	Close to staff base. Close to supporting ancillary rooms. WC/shower/personal washbasin en-suite.			
Space Data:	**Area (m²):**	14.50	**Height (mm):**	2,700

Notes: Child bed can be replaced by variable height cot - project team option. Dispenser gloves and aprons situated on outside entrance of the room. Magnetic board can be replaced by Velcro board - project team option. Maintaining safety and security, all the equipment and furniture must be safe for children.

ADB	Room Environmental Data	B1811

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B1811	Single bedroom: Children/young people day care
Room Number:		**Revision Date:** 06/08/2007

AIR	Requirements	Notes
Winter Temperature (DegC):	21	Winter Temperature (degC): up to 24, independent control
Summer Temperature (DegC):	23	
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	100	Floor. 200-400 Bed centre. 30-50 Bedhead.
Service Illumination Night (Lux):	5.0	Floor. 1-5 Bed centre. 1 Bedhead. Evening (lux): 50 Bed centre.
Local Illumination (Lux):	150.0	Bedhead. Examination luminaire to provide 1000 lux. Control ON/OFF/ DIM switch & bedhead.
Colour Rendering Required:	Y	Not night and local.
Standby Lighting Grade:		B: Lighting of the level and quality one third to one half that provided by normal lighting. Day Bed centre: A: Lighting of the level and quality equal or nearly equal to that provided by normal lighting. For local examination & inspection.
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	B1811

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B1811	Single bedroom: Children/young people day care
Room Number:		**Revision Date:** 06/08/2007

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5 i.e. Imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Two sets of doors: 1x 1500mm, one & a half leaf, half glazed, obscurable, lockable; bed access. 1x 1000mm, single leaf, plain flush, occupancy indicator, lockable, outside emergency release; wheelchair access. Door hinge protectors.
Windows:	(HTM 55) Clear, solar control, privacy control. Window opening restrictors max 100mm, low level sill (a maximum of 600mm)
Internal Glazing:	(HTM 57) Blinds for glazed screens
Hatch:	
Notes:	

ADB	Schedule of Components by Room	B1811

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: B1811 Single bedroom: Children/young people day care
Room Number: **Revision Date:** 06/08/2007

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	BED040	BED HEAD BUFFER/DOCKING device, bed and wall protection, horizontal, wall mounted, (internal clearance 1000-1400)		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	CAL050	HANDSET patient's typical facilities: Nurse call button with reassurance Channel display Channel selection Volume control Bedlight control		1
1		1	ECS010	ENTERTAINMENT/COMMUNICATION SYSTEM, PatientPower bedside , adjustable arm, trunking mounted incorporating: TV LCD flat screen headphones socket telephone/nurse call socket extra telephone socket for email on internet via PC connection to remote nurse call handset		1
1		1	ECS012	HANDSET ENTERTAINMENT/COMMUNICATION patient's typical facilities (Part of ECS010): Nurse call button with reassurance Channel selection programme Teletext information Voicemail facility Direct dial telephone handset Volume control		1
1		1	HOI006	HOIST PATIENT, electric, 24V, track ceiling mounted. (Length of the track to suit the individual needs.)		1
1		1	LIG003	LUMINAIRE Reading, adjustable arm, 100watt, wall/trunking/rail mounted		1
1		1	LIG058	LUMINAIRE examination, adjustable, 1000 lux, wall/trunking/rail mounted		1
1		1	MSC187	CABINET base, 400mm facing, with 2 shelves, 1 door hinged right, on plinth, o/a height 900, HTM71		1
1		1	MSW062	WORKTOP, for 400mm facing inserts cabinets, 1200W 700D nominal, HTM71		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
3		3	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT209	SOCKET outlet television aerial, single, trunking mounted		1
1		1	OUT217	SOCKET outlet telephone, trunking mounted		1
1		1	OUT452	OUTLET 4 kPa compressed air medical, wall/trunking mounted		1
1		1	OUT471	OUTLET oxygen medical, wall/trunking mounted		1
1		1	OUT476	OUTLET vacuum medical, wall/trunking mounted		1
1		1	RAI134	RAIL, clinical equipment, wall mounted, 1600mm		1
1		1	STC001	BEDHEAD SERVICES TRUNKING SYSTEM for medical gases, electrical power, nurse call, 1800mm nominal		1

ADB	Schedule of Components by Room	B1811

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: B1811 Single bedroom: Children/young people day care
Room Number: **Revision Date:** 06/08/2007

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	BOA022	BOARD, display/notice, magnetic, wall mounted, 900H 600W		2
1		1	BRA004	BRACKET, holder, suction unit, trunking mounted		2
1		1	CAB065	CABINET, drugs, self dispensing medication, lockable, wall mounted, 315H 210W 155D		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS435	DISPENSER, disposable gloves, set of 3, wall mounted		2
1		1	DIS436	DISPENSER, disposable apron, wall mounted		2
1		1	HOO019	HOOK, single, small, wall mounted		2
1		1	RAC362	RACK, catheter, vertical, 2 compartments, 420H 160W 65D		2
1		1	BED008	BED, Kings Fund, child, variable height, two-way tilt, adjustable backrest, on castors		3
1		1	CHA007	CHAIR, easy, with open arms, high back, upholstered		3
2		2	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	COM032	COMPUTER VDT MONITOR		3
1		1	COM033	COMPUTER KEYBOARD		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	LOC002	LOCKER, bedside, 3 compartment, towel rail at rear, on castors, 902H 485W 485D		3
1		1	MAT003	MATTRESS, Kings Fund bed, child, standard backrest, 1655L 865W 125D		3
1		1	MST005	TROLLEY, small, half size, with 5 sets of runners, 400mm facing, 850H 445W 350D nominal, HTM71		3
1		1	TAB073	TABLE, overbed, cantilevered		3
1		1	WAR007	WARDROBE, 1800H 400W 400D		3

ADB	Room Data Sheet	B2001

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B2001	Multi-bed room, day space: Children/young people, 4 beds, with relatives overnight stay
Room Number:		**Revision Date:** 23/04/2009

Activities:

1) Patient may arrive on foot or in a wheelchair.
2) Patient may arrive on a trolley or in a bed.
3) Transfer patient to/from bed, stretcher trolley, or wheelchair.
4) Patient to undress/dress in vicinity of bed, with/without assistance.
5) Patient to receive therapeutic and clinical attention from health team staff.
6) Self dispensing medication or drugs.
7) Patient to read, writes, listens to radio, views TV and use telephone.
8) Patient to take meals in bed, by the bed or in sitting space.
9) Patient to receive visitors.
10) Holding clothing and personal effects.
11) Displaying cards and pictures.
12) Day and overnight stays by parents, relatives and carers.
13) Children to view, through glazed panels, children and staff in adjacent spaces.
14) Using monitoring/diagnostic equipment.
15) Playing table and other quiet games.
16) Clinical hand washing.

Personnel: 4 x Patients 6 x Others

Planning Relationships: Close to staff base. Close to supporting ancillary rooms. WC/shower/personal washbasin en-suite

Space Data:

Area (m²):	68.00	Height (mm):	2,700

Notes: Child bed can be replaced by variable height cot - project team option. Dispenser gloves and aprons situated on outside entrance of the room. Magnetic board can be replaced by Velcro board project team option. Maintaining safety and security, all the equipment and furniture must be safe for children.

ADB	Room Environmental Data	B2001

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B2001	Multi-bed room, day space: Children/young people, 4 beds, with relatives overnight stay
Room Number:		**Revision Date:** 23/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	Winter temperature (degC): up to 24, independent control
Summer Temperature (DegC):	23	
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	100	Floor. 200-400 Bed centre. 30-50 Bedhead.
Service Illumination Night (Lux):	5.0	Floor. 1-5 Bed centre. 1 Bedhead. Evening (lux): 50 Bed centre.
Local Illumination (Lux):	150.0	Bedhead. Control ON/OFF/ DIM switch & bedhead.
Colour Rendering Required:	Y	Not night and local.
Standby Lighting Grade:		B: Lighting of the level and quality one third to one half that provided by normal lighting. Day Bed centre: A: Lighting of the level and quality equal or nearly equal to that provided by normal lighting. For local examination & inspection.
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	40	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	B2001

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B2001	Multi-bed room, day space: Children/young people, 4 beds, with relatives overnight stay
Room Number:		**Revision Date:** 23/04/2009

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5 i.e. Imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Two sets of doors: 1x 1900mm, double equal leaves, vision panel, obscurable, self closing (with detentes); bed access. 1x 1000mm, single leaf, plain flush, occupancy indictor, lockable, outside emergency release; wheelchair access. Door hinge protectors
Windows:	(HTM 55) Clear, solar control, privacy control. Window opening restrictors max 100mm at bottom
Internal Glazing:	(HTM 57) Blinds for glazed screens
Hatch:	
Notes:	

ADB	Schedule of Components by Room	B2001

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: B2001 Multi-bed room, day space: Children/young people, 4 beds, with relatives overnight stay
Room Number: **Revision Date:** 23/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
4		4	BED040	BED HEAD BUFFER/DOCKING device, bed and wall protection, horizontal, wall mounted, (internal clearance 1000-1400)		1
4		4	ECS010	ENTERTAINMENT/COMMUNICATION SYSTEM, PatientPower bedside , adjustable arm, trunking mounted incorporating: TV LCD flat screen headphones socket telephone/nurse call socket extra telephone socket for email on internet via PC connection to remote nurse call handset		1
4		4	ECS012	HANDSET ENTERTAINMENT/COMMUNICATION patient's typical facilities (Part of ECS010): Nurse call button with reassurance Channel selection programme Teletext information Voicemail facility Direct dial telephone handset Volume control		1
4		4	LIG003	LUMINAIRE Reading, adjustable arm, 100watt, wall/trunking/rail mounted		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
9		9	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
5		5	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
4		4	OUT452	OUTLET 4 kPa compressed air medical, wall/trunking mounted		1
4		4	OUT471	OUTLET oxygen medical, wall/trunking mounted		1
4		4	OUT476	OUTLET vacuum medical, wall/trunking mounted		1
4		4	RAI134	RAIL, clinical equipment, wall mounted, 1600mm		1
3		3	SHE221	SHELF, 1200W 300D		1
4		4	STC001	BEDHEAD SERVICES TRUNKING SYSTEM for medical gases, electrical power, nurse call, 1800mm nominal		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
2		2	TRA138	TRACK, curtain, two sided, L-shape, curved, 3600L 3600W		1
2		2	TRA139	TRACK, curtain, three sided, U-shape, 3600L 3600W		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
4		4	BED020	BED, fold down		2
4		4	BOA022	BOARD, display/notice, magnetic, wall mounted, 900H 600W		2
4		4	BRA004	BRACKET, holder, suction unit, trunking mounted		2
4		4	CAB065	CABINET, drugs, self dispensing medication, lockable, wall mounted, 315H 210W 155D		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2

ADB	Schedule of Components by Room	B2001

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: B2001 Multi-bed room, day space: Children/young people, 4 beds, with relatives overnight stay
Room Number:
Revision Date: 23/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
5		5	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS435	DISPENSER, disposable gloves, set of 3, wall mounted		2
1		1	DIS436	DISPENSER, disposable apron, wall mounted		2
4		4	RAC362	RACK, catheter, vertical, 2 compartments, 420H 160W 65D		2
4		4	BED008	BED, Kings Fund, child, variable height, two-way tilt, adjustable backrest, on castors		3
4		4	CHA007	CHAIR, easy, with open arms, high back, upholstered		3
4		4	CHA017	CHAIR, upright, upholstered, stacking		3
4		4	CHA031	CHAIR, child, upright, stacking, seat height 380mm		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
4		4	LOC002	LOCKER, bedside, 3 compartment, towel rail at rear, on castors, 902H 485W 485D		3
4		4	MAT003	MATTRESS, Kings Fund bed, child, standard backrest, 1655L 865W 125D		3
1		1	TAB060	TABLE, child, 470H 1200W 700D		3
4		4	TAB073	TABLE, overbed, cantilevered		3
4		4	WAR007	WARDROBE, 1800H 400W 400D		3

ADB	Room Data Sheet	B2011

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B2011	Multi-bed room: Children/young peoples day care, 4 beds
Room Number:		**Revision Date:** 23/04/2009

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Patient may arrive on a trolley or in a bed. 3) Transfer patient to/from bed, stretcher trolley, or wheelchair. 4) Patient to undress/dress in vicinity of bed, with/without assistance. 5) Patient to receive therapeutic and clinical attention from health team staff. 6) Self dispensing medication or drugs. 7) Patient to read, writes, listens to radio, views TV and use telephone. 8) Patient to take meals in bed or by the bed. 9) Holding clothing and personal effects. 10) Displaying cards and pictures. 11) Children to view, through glazed panels, children and staff in adjacent spaces. 12) Using monitoring/diagnostic equipment. 13) Clinical hand washing.			
Personnel:	4 x Patients 6 x Others			
Planning Relationships:	Close to staff base. Close to supporting ancillary rooms. En-suite WC, shower, personal washbasin.			
Space Data:	**Area (m²):**	73.00	**Height (mm):**	2,700

Notes:

Child bed can be replaced by variable height cot - project team option. Dispenser gloves and aprons situated on outside entrance of the room. Magnetic board can be replaced by Velcro board - project team option. In Day care unit for a curtain system see HBN Hosp. accom for children and young people Para 3.118. Maintaining safety and security, all the equipment and furniture must be safe for children.

ADB	Room Environmental Data	B2011

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B2011	Multi-bed room: Children/young peoples day care, 4 beds
Room Number:		**Revision Date:** 23/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	Winter temperature (degC): up to 24, independent control
Summer Temperature (DegC):	23	
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	100	Floor. 200-400 Bed centre. 30-50 Bedhead.
Service Illumination Night (Lux):	5.0	Floor. 1-5 Bed centre. 1 Bedhead. Evening (lux): 50 Bed centre.
Local Illumination (Lux):	150.0	Bedhead. Examination luminaire to provide 1000 lux.
Colour Rendering Required:	Y	Not night and local.
Standby Lighting Grade:		B: Lighting of the level and quality one third to one half that provided by normal lighting. Day Bed centre: A: Lighting of the level and quality equal or nearly equal to that provided by normal lighting. For local examination & inspection.
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	40	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	B2011

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B2011	Multi-bed room: Children/young peoples day care, 4 beds
Room Number:		**Revision Date:** 23/04/2009

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5 i.e. Imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Two sets of doors: 1x 1900mm, double equal leaves, vision panel, obscurable, self closing (with detentes); bed access. 1x 1000mm, single leaf, plain flush, occupancy indictor, lockable, outside emergency release; wheelchair access. Door hinge protectors.
Windows:	(HTM 55) Clear, solar control, privacy control. Window opening restrictors max 100mm at bottom.
Internal Glazing:	(HTM 57) Blinds for glazed screens.
Hatch:	
Notes:	

ADB	Schedule of Components by Room	B2011

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: B2011 Multi-bed room: Children/young peoples day care, 4 beds
Room Number: **Revision Date:** 23/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
4		4	BED040	BED HEAD BUFFER/DOCKING device, bed and wall protection, horizontal, wall mounted, (internal clearance 1000-1400)		1
4		4	ECS010	ENTERTAINMENT/COMMUNICATION SYSTEM, PatientPower bedside , adjustable arm, trunking mounted incorporating: TV LCD flat screen headphones socket telephone/nurse call socket extra telephone socket for email on internet via PC connection to remote nurse call handset		1
4		4	ECS012	HANDSET ENTERTAINMENT/COMMUNICATION patient's typical facilities (Part of ECS010): Nurse call button with reassurance Channel selection programme Teletext information Voicemail facility Direct dial telephone handset Volume control		1
1		1	LIG003	LUMINAIRE Reading, adjustable arm, 100watt, wall/trunking/rail mounted		1
4		4	LIG058	LUMINAIRE examination, adjustable, 1000 lux, wall/trunking/rail mounted		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
9		9	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
4		4	OUT452	OUTLET 4 kPa compressed air medical, wall/trunking mounted		1
4		4	OUT471	OUTLET oxygen medical, wall/trunking mounted		1
4		4	OUT476	OUTLET vacuum medical, wall/trunking mounted		1
4		4	RAI134	RAIL, clinical equipment, wall mounted, 1600mm		1
3		3	SHE221	SHELF, 1200W 300D		1
4		4	STC001	BEDHEAD SERVICES TRUNKING SYSTEM for medical gases, electrical power, nurse call, 1800mm nominal		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
2		2	TRA138	TRACK, curtain, two sided, L-shape, curved, 3600L 3600W		1
2		2	TRA139	TRACK, curtain, three sided, U-shape, 3600L 3600W		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
4		4	BOA022	BOARD, display/notice, magnetic, wall mounted, 900H 600W		2
4		4	BRA004	BRACKET, holder, suction unit, trunking mounted		2
4		4	CAB065	CABINET, drugs, self dispensing medication, lockable, wall mounted, 315H 210W 155D		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2

ADB	Schedule of Components by Room	B2011

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: B2011 Multi-bed room: Children/young peoples day care, 4 beds
Room Number: **Revision Date:** 23/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
4		4	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS435	DISPENSER, disposable gloves, set of 3, wall mounted		2
1		1	DIS436	DISPENSER, disposable apron, wall mounted		2
4		4	HOO019	HOOK, single, small, wall mounted		2
4		4	RAC362	RACK, catheter, vertical, 2 compartments, 420H 160W 65D		2
4		4	BED008	BED, Kings Fund, child, variable height, two-way tilt, adjustable backrest, on castors		3
4		4	CHA007	CHAIR, easy, with open arms, high back, upholstered		3
4		4	CHA017	CHAIR, upright, upholstered, stacking		3
4		4	CHA031	CHAIR, child, upright, stacking, seat height 380mm		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
4		4	LOC002	LOCKER, bedside, 3 compartment, towel rail at rear, on castors, 902H 485W 485D		3
4		4	MAT003	MATTRESS, Kings Fund bed, child, standard backrest, 1655L 865W 125D		3
1		1	TAB060	TABLE, child, 470H 1200W 700D		3
4		4	TAB073	TABLE, overbed, cantilevered		3
1		1	WAR007	WARDROBE, 1800H 400W 400D		3

ADB	Room Data Sheet	B2417

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B2417	Recovery bay: post anaesthetic, 1 place Bed space
Room Number:		**Revision Date:** 07/04/2009

Activities:	1) Post anaesthetic recovery of patients. 2) Observation by medical and nursing staff. 3) Preparing for clinical procedures. 4) Medical and nursing procedures will be performed by staff from the side or behind the patient. 5) Recording patient data/notes. 6) Holding sterile and disposable items. 7) Using services and mobile equipment 8) Manoeuvring mobile equipment, trolleys and beds. 9) Clinical hand washing.			
Personnel:	1 x Patients			
Planning Relationships:	Part of multi-bay. Close to Theatre room. Easy access to departmental exit. Some bays will act as holding area of AODOS patients and should avoid crossing the path of patients recovering..			
Space Data:	**Area (m²):**	13.50	**Height (mm):**	2,700
Notes:	Space required to accommodate use of hoist. Lamp indicator repeat call situated overdoor outside entrance of bay. WHB has been allowed for in each bay, discussion to be held with infection control nurses to confirm quantity required throughout the area.			

ADB	Room Environmental Data	B2417

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B2417	Recovery bay: post anaesthetic, 1 place Bed space
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		Part of multi-bay.
LIGHTING		
Service Illumination (Lux):	300	Floor. Dimming facilities are required.
Service Illumination Night (Lux):		
Local Illumination (Lux):	400.0	Bed. Examination luminaire to provide 1000 lux.
Colour Rendering Required:	Y	
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):		
Mechanical Services (NR):		
Intrusive Noise (NR Leq):		
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		Part of multi-bay.
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	B2417

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B2417	Recovery bay: post anaesthetic, 1 place Bed space
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 3 i.e. Impervious, jointless, smooth Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations To meet radiation protection requirements each bay should be separated by lead-lined solid partitions with a lead-lined curtain at the foot end.
Floor:	Surface Finish (HTM 61): 3: Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3 i.e. Smooth, imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) N/A
Windows:	(HTM 55) N/A
Internal Glazing:	(HTM 57)
Hatch:	
Notes:	

ADB	Schedule of Components by Room	B2417

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: B2417 Recovery bay: post anaesthetic, 1 place Bed space
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	BED040	BED HEAD BUFFER/DOCKING device, bed and wall protection, horizontal, wall mounted, (internal clearance 1000-1400)		1
1		1	CAL021	LAMP repeat staff emergency call, ceiling mounted, (green)		1
1		1	CAL047	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, trunking mounted		1
1		1	LIG003	LUMINAIRE Reading, adjustable arm, 100watt, wall/trunking/rail mounted		1
1		1	LIG053	LUMINAIRE examination adjustable, 1000 lux, ceiling mounted		1
1		1	MSC081	CABINET base, 600mm facing, (600x400 inserts), with formed plastic liners, 1 door hinged right, on plinth, o/a height 900, HTM71		1
1		1	MSW020	WORKTOP, for 600mm facing inserts cabinets, 1000W 500D nominal, HTM71		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
7		7	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT452	OUTLET 4 kPa compressed air medical, wall/trunking mounted		1
1		1	OUT471	OUTLET oxygen medical, wall/trunking mounted		1
2		2	OUT476	OUTLET vacuum medical, wall/trunking mounted		1
1		1	RAI136	RAIL, clinical equipment, wall mounted, 2100mm		1
1		1	STC003	BEDHEAD SERVICES TRUNKING SYSTEM for medical gases, electrical power, nurse call, 2400mm nominal		1
1		1	SWC031	SWITCH dimmer, fixed position, wall mounted		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	CLO004	CLOCK battery with second sweep hand, wall mounted		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS435	DISPENSER, disposable gloves, set of 3, wall mounted		2
1		1	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	COM033	COMPUTER KEYBOARD		3

ADB	Schedule of Components by Room	B2417

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: B2417 Recovery bay: post anaesthetic, 1 place Bed space
Room Number: **Revision Date:** 07/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	COM047	COMPUTER MONITOR, 17" TFT, digital flat panel display, touch screen, desk top		3
1		1	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	MST005	TROLLEY, small, half size, with 5 sets of runners, 400mm facing, 850H 445W 350D nominal, HTM71		3
1		1	STA142	STAND, infusion, twin hook, breaks, mobile		3

ADB	Room Data Sheet	B2418

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B2418	Recovery room: post anaesthetic, 1 place Bed space. (in DSU 2nd stage)
Room Number:		**Revision Date:** 13/08/2007

Activities:	1) Post anaesthetic recovery of patients. 2) Observation by medical and nursing staff. 3) Preparing for clinical procedures. 4) Medical and nursing procedures will be performed by staff from the side or behind the patient. 5) Recording patient data/notes. 6) Holding sterile and disposable items. 7) Using services and mobile equipment 8) Manoeuvring mobile equipment, trolleys and beds. 9) Clinical hand washing.			
Personnel:	1 x Patients 1 x Staff			
Planning Relationships:	Close to Theatre room. Easy access to departmental exit.			
Space Data:	**Area (m²):**	26.00	**Height (mm):**	2,700
Notes:	Space required to accommodate use of hoist. Lamp indicator repeat call situated overdoor on outside entrance of the room.			

ADB	Room Environmental Data	B2418

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B2418	Recovery room: post anaesthetic, 1 place Bed space. (in DSU 2nd stage)
Room Number:		**Revision Date:** 13/08/2007

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):	23	
Mechanical Ventilation (Supply ac/hr):	15.0	
Mechanical Ventilation (Extract ac/hr):	15.0	
Pressure Relative to Adjoining Space:	-ve	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Floor. Dimming facilities are required.
Service Illumination Night (Lux):		
Local Illumination (Lux):	400.0	Bed. Examination luminaire to provide 1000 lux.
Colour Rendering Required:	Y	
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	40	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	B2418

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	B2418	Recovery room: post anaesthetic, 1 place Bed space. (in DSU 2nd stage)
Room Number:		**Revision Date:** 13/08/2007

Walls:	Surface Finish (HTM 56): 3 i.e. Impervious, jointless, smooth Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3: Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3 i.e. Smooth, imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1500mm, one & a half leaf, vision panel, obscurable, self closing (with detentes), lockable; bed access
Windows:	(HTM 55) Obscure, solar control
Internal Glazing:	(HTM 57)
Hatch:	
Notes:	

ADB	Schedule of Components by Room	B2418

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: B2418 Recovery room: post anaesthetic, 1 place Bed space. (in DSU 2nd stage)
Room Number: **Revision Date:** 13/08/2007

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	BED040	BED HEAD BUFFER/DOCKING device, bed and wall protection, horizontal, wall mounted, (internal clearance 1000-1400)		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	CAL047	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, trunking mounted		1
1		1	LIG003	LUMINAIRE Reading, adjustable arm, 100watt, wall/trunking/rail mounted		1
1		1	LIG053	LUMINAIRE examination adjustable, 1000 lux, ceiling mounted		1
1		1	MSC081	CABINET base, 600mm facing, (600x400 inserts), with formed plastic liners, 1 door hinged right, on plinth, o/a height 900, HTM71		1
1		1	MSW020	WORKTOP, for 600mm facing inserts cabinets, 1000W 500D nominal, HTM71		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
1		1	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
6		6	OUT012	SOCKET outlet switched 13amp twin, trunking mounted		1
2		2	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT452	OUTLET 4 kPa compressed air medical, wall/trunking mounted		1
1		1	OUT471	OUTLET oxygen medical, wall/trunking mounted		1
2		2	OUT476	OUTLET vacuum medical, wall/trunking mounted		1
1		1	RAI136	RAIL, clinical equipment, wall mounted, 2100mm		1
1		1	STC003	BEDHEAD SERVICES TRUNKING SYSTEM for medical gases, electrical power, nurse call, 2400mm nominal		1
1		1	SWC031	SWITCH dimmer, fixed position, wall mounted		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	CLO004	CLOCK battery with second sweep hand, wall mounted		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS435	DISPENSER, disposable gloves, set of 3, wall mounted		2

ADB	Schedule of Components by Room	B2418

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: B2418 Recovery room: post anaesthetic, 1 place Bed space. (in DSU 2nd stage)
Room Number: **Revision Date:** 13/08/2007

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	COM033	COMPUTER KEYBOARD		3
1		1	COM047	COMPUTER MONITOR, 17" TFT, digital flat panel display, touch screen, desk top		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	MST005	TROLLEY, small, half size, with 5 sets of runners, 400mm facing, 850H 445W 350D nominal, HTM71		3
1		1	STA142	STAND, infusion, twin hook, breaks, mobile		3
1		1	TRO235	TROLLEY, contaminated linen, single ring, stainless steel		3
1		1	VEN024	VENTILATOR, adult, mechanical, mobile, 1340H 495W 520D		3

ADB	Room Data Sheet	C0201

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C0201	Consulting, examination room: double-sided couch access
Room Number:		**Revision Date:** 07/04/2009

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Interviewing and consultation. 3) Patient to undress/dress in privacy. 4) Clinical examination and assessment in privacy. 5) Minor clinical procedures. 6) Holding small items of equipment. 7) Clinical hand washing. 8) Accessing and updating electronic patient records (EPRs). 9) Use of visual display terminal(s). 10) Using telephone(s).			
Personnel:	1 x Patient 2 x Staff 1 x Other (escort)			
Planning Relationships:				
Space Data:	**Area (m²):**	16.50	**Height (mm):**	2,700
Notes:	Lamp indicator repeat call situated over door on outside entrance of the room. Provision of dictating facilities - project team option. Interconnecting doors required.			

ADB	Room Environmental Data	C0201

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C0201	Consulting, examination room: double-sided couch access
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Couch
Service Illumination Night (Lux):		
Local Illumination (Lux):	1,000.0	Examination lamp.
Colour Rendering Required:	Y	
Standby Lighting Grade:		A&B A Local, B Service.
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	C0201

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C0201	Consulting, examination room: double-sided couch access
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N: Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3: Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5: Imperforate Moisture Resistance (HTM 60): N: Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 2x 1000mm, single leaf, plain flush, lockable
Windows:	(HTM 55) Clear, solar control, privacy control
Internal Glazing:	(HTM 57)
Hatch:	
Notes:	

ADB	Schedule of Components by Room	C0201

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: C0201 Consulting, examination room: double-sided couch access
Room Number: **Revision Date:** 07/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL007	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	MSC197	CABINET top, 600mm facing, with 1 shelf, 1 door hinged right, wall mounted, HTM71		1
4		4	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT059	CONNECTION UNIT switched 13amp, flex, indicator light		1
2		2	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	TRA125	TRACK, curtain, two sided, L-shape, 2700L 2300W		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS435	DISPENSER, disposable gloves, set of 3, wall mounted		2
1		1	HOO022	HOOK, double, wall mounted		2
1		1	ILL010	ILLUMINATOR, x-ray film, double, wall mounted		2
3		3	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	CHA063	CHAIR, height adjustable, with arms, high back, swivel, 5 star base, on castors		3
1		1	COM032	COMPUTER VDT MONITOR		3
1		1	COM033	COMPUTER KEYBOARD		3
1		1	COU007	COUCH, examination/treatment, (2 section), with paper roll holder, variable height, retractable wheels		3
1		1	DES022	DESK, cantilever, single pedestal 3 drawer, cable management, modesty panel, 1600W 800D		3
1		1	HOL004	HOLDER, sack, with lid foot operated, small, freestanding		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	HOL014	HOLDER, sack, with lid foot operated, large, capacity 120 litres, mobile		3
1		1	LIG015	LUMINAIRE observation/examination, mobile, 1000 lux		3

ADB	Schedule of Components by Room	C0201

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: C0201 Consulting, examination room: double-sided couch access
Room Number: **Revision Date:** 07/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	MST005	TROLLEY, small, half size, with 5 sets of runners, 400mm facing, 850H 445W 350D nominal, HTM71		3

ADB	Room Data Sheet	C0203

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	C0203	Consulting, examination room: Audiology		
Room Number:			**Revision Date:**	05/05/2009

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Interviewing and consultation. 3) Clinical examination and assessment in privacy. 4) Clinical hand washing. 5) Accessing and updating electronic patient records (EPRs). 6) Using telephone(s).			
Personnel:	1 x Patient 2 x Staff 1 x Other (escort)			
Planning Relationships:	Easy access from waiting area. Easy access to patient reception area.			
Space Data:	**Area (m²):**	16.50	**Height (mm):**	2,700
Notes:	Room to be fitted with sound soak panels. TV camera/monitor & x-ray viewer - project team option. Refer to FBL_2003 Audiometric Room Specification Document adopted by SE Audiology Modernisation Project Board			

ADB	Room Environmental Data	C0203

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C0203	Consulting, examination room: Audiology
Room Number:		**Revision Date:** 05/05/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	ENT Chair
Service Illumination Night (Lux):		
Local Illumination (Lux):	1,000.0	Examination lamp.
Colour Rendering Required:	Y	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	C0203

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C0203	Consulting, examination room: Audiology
Room Number:		**Revision Date:** 05/05/2009

Walls:	Surface Finish (HTM 56): 5: Moisture Resistance (HTM 56): N: Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 6: Soft, impervious, jointless Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5 Moisture Resistance (HTM 60): N: Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1000mm, single leaf, plain flush
Windows:	(HTM 55) Clear, solar control, privacy control. Blackout
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	C0203

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: C0203 Consulting, examination room: Audiology
Room Number: **Revision Date:** 05/05/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL007	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	MSC197	CABINET top, 600mm facing, with 1 shelf, 1 door hinged right, wall mounted, HTM71		1
4		4	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT059	CONNECTION UNIT switched 13amp, flex, indicator light		1
2		2	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
1		1	OUT470	OUTLET oxygen medical, wall/trunking mounted		1
1		1	OUT475	OUTLET vacuum medical, wall/trunking mounted		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	TRA125	TRACK, curtain, two sided, L-shape, 2700L 2300W		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS435	DISPENSER, disposable gloves, set of 3, wall mounted		2
1		1	HOO022	HOOK, double, wall mounted		2
1		1	ILL010	ILLUMINATOR, x-ray film, double, wall mounted		2
3		3	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	CHA063	CHAIR, height adjustable, with arms, high back, swivel, 5 star base, on castors		3
1		1	COM032	COMPUTER VDT MONITOR		3
1		1	COM033	COMPUTER KEYBOARD		3
1		1	COU007	COUCH, examination/treatment, (2 section), with paper roll holder, variable height, retractable wheels		3
1		1	DES022	DESK, cantilever, single pedestal 3 drawer, cable management, modesty panel, 1600W 800D		3
1		1	HOL004	HOLDER, sack, with lid foot operated, small, freestanding		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	HOL014	HOLDER, sack, with lid foot operated, large, capacity 120 litres, mobile		3
1		1	LIG015	LUMINAIRE observation/examination, mobile, 1000 lux		3

ADB	Schedule of Components by Room	C0203

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: C0203 Consulting, examination room: Audiology
Room Number: **Revision Date:** 05/05/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	MST005	TROLLEY, small, half size, with 5 sets of runners, 400mm facing, 850H 445W 350D nominal, HTM71		3

ADB	Room Data Sheet	C0203A

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C0203A	Consulting, examination room: Audiology Child
Room Number:		**Revision Date:** 23/04/2009

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Interviewing and consultation. 3) Clinical examination and assessment in privacy. 4) Clinical hand washing. 5) Accessing and updating electronic patient records (EPRs). 6) Using telephone(s).			
Personnel:	1 x Patient 2 x Staff 1 x Other (escort)			
Planning Relationships:	Easy access from waiting area. Easy access to patient reception area.			
Space Data:	**Area (m²):**	30.30	**Height (mm):**	2,700
Notes:	Room to be fitted with sound soak panels. TV camera/monitor & x-ray viewer - project team option.			

ADB	Room Environmental Data	C0203A

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C0203A	Consulting, examination room: Audiology Child
Room Number:		**Revision Date:** 23/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	ENT Chair
Service Illumination Night (Lux):		
Local Illumination (Lux):	1,000.0	Examination lamp.
Colour Rendering Required:	Y	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	C0203A

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C0203A	Consulting, examination room: Audiology Child
Room Number:		**Revision Date:** 23/04/2009

Walls:	Surface Finish (HTM 56): 5: Moisture Resistance (HTM 56): N: Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 6: Soft, impervious, jointless Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5 Moisture Resistance (HTM 60): N: Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1000mm, single leaf, plain flush
Windows:	(HTM 55) Clear, solar control, privacy control. Blackout
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	C0203A

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: C0203A Consulting, examination room: Audiology Child
Room Number: **Revision Date:** 23/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL007	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	MSC197	CABINET top, 600mm facing, with 1 shelf, 1 door hinged right, wall mounted, HTM71		1
4		4	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT059	CONNECTION UNIT switched 13amp, flex, indicator light		1
2		2	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	TRA125	TRACK, curtain, two sided, L-shape, 2700L 2300W		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS435	DISPENSER, disposable gloves, set of 3, wall mounted		2
1		1	HOO022	HOOK, double, wall mounted		2
1		1	ILL010	ILLUMINATOR, x-ray film, double, wall mounted		2
3		3	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	CHA031	CHAIR, child, upright, stacking, seat height 380mm		3
1		1	CHA063	CHAIR, height adjustable, with arms, high back, swivel, 5 star base, on castors		3
1		1	COM032	COMPUTER VDT MONITOR		3
1		1	COM033	COMPUTER KEYBOARD		3
1		1	COU007	COUCH, examination/treatment, (2 section), with paper roll holder, variable height, retractable wheels		3
1		1	DES022	DESK, cantilever, single pedestal 3 drawer, cable management, modesty panel, 1600W 800D		3
1		1	HOL004	HOLDER, sack, with lid foot operated, small, freestanding		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	HOL014	HOLDER, sack, with lid foot operated, large, capacity 120 litres, mobile		3
1		1	LIG015	LUMINAIRE observation/examination, mobile, 1000 lux		3
1		1	MST005	TROLLEY, small, half size, with 5 sets of runners, 400mm facing, 850H 445W 350D nominal, HTM71		3

ADB	Schedule of Components by Room	C0203A

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: C0203A Consulting, examination room: Audiology Child
Room Number: **Revision Date:** 23/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	TAB060	TABLE, child, 470H 1200W 700D		3

ADB	Room Data Sheet	C0225

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C0225	Consulting, examination, treatment room: all-round couch access
Room Number:		**Revision Date:** 23/04/2009

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Interviewing and consultation. 3) Patient to undress/dress in vicinity of couch, with/without assistance. 4) Clinical examination and assessment in privacy. 5) Minor clinical procedures. 6) Weighing and measuring height of a patient. 7) Holding small items of equipment. 8) Clinical hand washing. 9) Accessing and updating electronic patient records (EPRs). 10) Use of visual display terminal(s). 11) Using telephone(s).			
Personnel:	1 x Patient 2 x Staff 2 x Other (escort)			
Planning Relationships:	Close to clean utility. Close to dirty utility.			
Space Data:	**Area (m²):**	16.00	**Height (mm):**	2,700
Notes:	Lamp indicator repeat call situated overdoor on outside entrance of the room. Room should be equipped: Wall mounted auroscope and opthaloscope is required. Personal alarm transmitter for staff security is required. Wall mounted telephone handset is required. Observation from adjacent room (name here) required.			

ADB	Room Environmental Data	C0225

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C0225	Consulting, examination, treatment room: all-round couch access
Room Number:		**Revision Date:** 23/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Couch
Service Illumination Night (Lux):		
Local Illumination (Lux):	1,000.0	Examination lamp.
Colour Rendering Required:	Y	
Standby Lighting Grade:		A&B A Local, B Service.
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	C0225

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C0225	Consulting, examination, treatment room: all-round couch access
Room Number:		**Revision Date:** 23/04/2009

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N: Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 4: Hard, impervious, jointless, extra slip resistance Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5: Imperforate Moisture Resistance (HTM 60): N: Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1500mm, one & a half leaf, plain flush, self closing, lockable; patinet trolley access
Windows:	(HTM 55) Clear, solar control, privacy control. Window opening restrictors max 100mm at bottom
Internal Glazing:	(HTM 57)
Hatch:	
Notes:	In HBN23 HACh & YP, door hinge protectors are required

ADB	Schedule of Components by Room	C0225

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: C0225 Consulting, examination, treatment room: all-round couch access
Room Number: **Revision Date:** 23/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL002	PUSH BUTTON patient/staff call, wall mounted		1
1		1	CAL007	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL012	RESET UNIT with repeat lamp, patient/staff call		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	MSC197	CABINET top, 600mm facing, with 1 shelf, 1 door hinged right, wall mounted, HTM71		1
3		3	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT059	CONNECTION UNIT switched 13amp, flex, indicator light		1
1		1	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
1		1	OUT453	OUTLET 4 kPa compressed air medical, wall/trunking mounted		1
1		1	OUT470	OUTLET oxygen medical, wall/trunking mounted		1
1		1	OUT475	OUTLET vacuum medical, wall/trunking mounted		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	TRA125	TRACK, curtain, two sided, L-shape, 2700L 2300W		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	BRA003	BRACKET, holder, suction unit, wall mounted		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS435	DISPENSER, disposable gloves, set of 3, wall mounted		2
1		1	HOL025	HOLDER, wide tear off paper roll, couch/bech/wall mounted		2
1		1	HOO022	HOOK, double, wall mounted		2
1		1	ILL010	ILLUMINATOR, x-ray film, double, wall mounted		2
1		1	RAC362	RACK, catheter, vertical, 2 compartments, 420H 160W 65D		2
1		1	CHA017	CHAIR, upright, upholstered, stacking		3
2		2	CHA032	CHAIR, child, upright, stacking, seat height 420mm		3
1		1	CHA063	CHAIR, height adjustable, with arms, high back, swivel, 5 star base, on castors		3
1		1	COM031	COMPUTER CPU		3
1		1	COM033	COMPUTER KEYBOARD		3

ADB	Schedule of Components by Room	C0225

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: C0225 Consulting, examination, treatment room: all-round couch access
Room Number: **Revision Date:** 23/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	COM049	COMPUTER MONITOR, 17" TFT, digital flat panel display, high-resolution screens, desk top		3
1		1	COU007	COUCH, examination/treatment, (2 section), with paper roll holder, variable height, retractable wheels		3
1		1	DES022	DESK, cantilever, single pedestal 3 drawer, cable management, modesty panel, 1600W 800D		3
1		1	HOL004	HOLDER, sack, with lid foot operated, small, freestanding		3
1		1	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	LIG015	LUMINAIRE observation/examination, mobile, 1000 lux		3
1		1	MST005	TROLLEY, small, half size, with 5 sets of runners, 400mm facing, 850H 445W 350D nominal, HTM71		3
1		1	SCA011	SCALE, baby		3
1		1	SCA081	SCALE COLUM, weighing person, with sliding weights, and telescopic column for height measure		3
1		1	TAB005	TABLE, 710H 900W 600D		3

ADB	Room Data Sheet	C0304

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	C0304	Assessment room: Paediatric, A&E		
Room Number:			**Revision Date:**	19/10/2006

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Patient to undress/dress in privacy. 3) Clinical examination and assessment in privacy. 4) Clinical procedures and dressings. 5) Holding small items of equipment. 6) Holding supply of medicines, lotions and drugs. 7) Disposal of contaminated dressings. 8) Clinical hand washing. 9) Accessing and updating electronic patient records (EPRs). 10) Use of visual display terminal(s). 11) Using telephone(s).			
Personnel:	1 x Patient 1 - 2 Staff 2 x Others (escort)			
Planning Relationships:	Adjacent to reception area.			
Space Data:	**Area (m²):**	16.00	**Height (mm):**	2,700
Notes:	Lamp indicator repeat call situated overdoor on outside entrance of the room. Illuminated sign "IN USE" sited outside the doorway of the room. Storage cabinet - accessible from corridor. Room should be suitably decorated, furnished and equipped for children, see 'Creating a friendly healthcare environment for children and young people'.			

ADB	Room Environmental Data	C0304

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C0304	Assessment room: Paediatric, A&E
Room Number:		**Revision Date:** 19/10/2006

AIR	Requirements	Notes
Winter Temperature (DegC):	21	Individual room temperature control required
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Couch/desk.
Service Illumination Night (Lux):		
Local Illumination (Lux):	1,000.0	Examination lamp.
Colour Rendering Required:	Y	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	C0304

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C0304	Assessment room: Paediatric, A&E
Room Number:		**Revision Date:** 19/10/2006

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N: Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3: Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5: Imperforate Moisture Resistance (HTM 60): N: Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Two sets of doors: each - 1500mm, one & half leaf, plain flush, lockable; patient trolley access.
Windows:	(HTM 55) Obscured glass, solar control
Internal Glazing:	(HTM 57)
Hatch:	
Notes:	

ADB	Schedule of Components by Room	C0304

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: C0304 Assessment room: Paediatric, A&E
Room Number: **Revision Date:** 19/10/2006

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL003	PUSH BUTTON patient/staff call with socket for extension pear push, wall mounted		1
1		1	CAL007	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL012	RESET UNIT with repeat lamp, patient/staff call		1
1		1	CAL015	LAMP repeat patient call, wall mounted (red)		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	CAL029	LAMP patient reassurance, wall mounted		1
1		1	LIG053	LUMINAIRE examination adjustable, 1000 lux, ceiling mounted		1
2		2	LIG073	ILLUMINATED SIGN "IN USE"		1
1		1	MIR010	MIRROR, wall mounted, 800H 300W		1
1		1	MSC127	CABINET top, 600mm facing, (600x400 inserts), with formed plastic liners, 1 door hinged right, wall mounted, HTM71		1
1		1	MSC128	CABINET top, 600mm facing, (600x400 inserts), with formed plastic liners, 1 door hinged left, wall mounted, HTM71		1
1		1	MSC612	CABINET, base, built-in, pass-through, 2 set of 2 doors, lockable, 900H 1310W 600D nominal		1
1		1	MSW002	WORKTOP, for 2x 600mm facing inserts cabinets, 1310W 500D nominal, HTM71		1
1		1	MSW025	WORKTOP, for 600mm facing inserts cabinets, 1500W 500D nominal, HTM71		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
4		4	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
2		2	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	CLO001	CLOCK battery, wall mounted		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS016	DISPENSER, paper sheet (for couch/trolley), wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
2		2	HOO024	HOOK, hat and coat, 1		2
1		1	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	CHA031	CHAIR, child, upright, stacking, seat height 380mm		3

ADB	Schedule of Components by Room	C0304

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: C0304 Assessment room: Paediatric, A&E
Room Number: **Revision Date:** 19/10/2006

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	CHA063	CHAIR, height adjustable, with arms, high back, swivel, 5 star base, on castors		3
1		1	COM033	COMPUTER KEYBOARD		3
1		1	COM034	COMPUTER PRINTER, inkjet, colour		3
1		1	COM046	COMPUTER MONITOR, 15" TFT, digital flat panel display, desk top		3
1		1	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	TRO131	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 450W 450D		3
1		1	TRO235	TROLLEY, contaminated linen, single ring, stainless steel		3
1		1	TRO282	TROLLEY PATIENT, accident, image top, with tilt and brakes, 540-1000H 740W 2110D		3

ADB	Room Data Sheet	C0701

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C0701	Investigation room: stress electrocardiography (ECG)
Room Number:		**Revision Date:** 07/04/2009

Activities:	1) Patient arrive on foot. 2) Patient to undergo electrocardiogram (ECG) exercise stress test. 3) Recording test results. 4) Using computer workstation(s). 5) Clinical hand washing.			
Personnel:	1 x Patient 2 x Staff, occasionally 3 staff 1 x other (relative or chaperone)			
Planning Relationships:				
Space Data:	**Area (m²):**	30.00	**Height (mm):**	2,700
Notes:	Lamp indicator repeat call situated overdoor on outside entrance of the room.			

ADB	Room Environmental Data	C0701

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C0701	Investigation room: stress electrocardiography (ECG)
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	Local temperature control required.
Summer Temperature (DegC):	23	
Mechanical Ventilation (Supply ac/hr):	6.0	Mechanical ventilation required to suit design.
Mechanical Ventilation (Extract ac/hr):	6.0	
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		Independent climate control is required.
LIGHTING		
Service Illumination (Lux):	300	Working plane, Dimmable
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	Y	
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):		
Mechanical Services (NR):		
Intrusive Noise (NR Leq):		
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	C0701

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C0701	Investigation room: stress electrocardiography (ECG)
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 5: Moisture Resistance (HTM 56): N: Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 5: Hard, impervious, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 4 Moisture Resistance (HTM 60): N: Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1500mm, single leaf, plain flush, lockable.
Windows:	(HTM 55) N/A or Clear, solar control, privacy control
Internal Glazing:	N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	C0701

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: C0701 Investigation room: stress electrocardiography (ECG)
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL007	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL008	PUSH BUTTON staff crash call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
2		2	MSC128	CABINET top, 600mm facing, (600x400 inserts), with formed plastic liners, 1 door hinged left, wall mounted, HTM71		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
16		16	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
4		4	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
2		2	OUT470	OUTLET oxygen medical, wall/trunking mounted		1
2		2	OUT475	OUTLET vacuum medical, wall/trunking mounted		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	TRA104	TRACK, curtain, one sided, 2500mm length		1
1		1	TRA112	TRACK, curtain, two sided, L-shape, curved, 2900L 2500W		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
2		2	CHA017	CHAIR, upright, upholstered, stacking		3
2		2	CHA063	CHAIR, height adjustable, with arms, high back, swivel, 5 star base, on castors		3
2		2	COM031	COMPUTER CPU		3
2		2	COM047	COMPUTER MONITOR, 17" TFT, digital flat panel display, touch screen, desk top		3
1		1	COU010	COUCH, examination/treatment, (3 section), with paper roll holder, variable height, retractable wheels		3
1		1	DES006	DESK, cantilever, single pedestal 3 drawer, modesty panel, 1200W 750D		3
2		2	EXE016	EXERCISE TREADMILL		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
2		2	MON011	MONITOR, electrocardiograph (ECG), 12-lead		3
2		2	MON014	MONITOR, electrocardiograph (ECG)/blood pressure, 280H 450W 360D		3

ADB	Schedule of Components by Room	C0701

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: C0701 Investigation room: stress electrocardiography (ECG)
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
2		2	MST001	TROLLEY, small, single, with handle, 5 sets of runners, 600mm facing, 850H 730W 450D nominal, HTM71		3
2		2	STO004	STOOL, height adjustable, swivel, mobile		3
2		2	TRO315	TROLLEY, cardiotocograph monitor		3

ADB	Room Data Sheet	C0701A

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C0701A	Investigation room: stress electrocardiography (ECG)
Room Number:		**Revision Date:** 23/04/2009

Activities:	1) Patient arrive on foot. 2) Patient to undergo electrocardiogram (ECG) exercise stress test. 3) Recording test results. 4) Using computer workstation(s). 5) Clinical hand washing.			
Personnel:	1 x Patient 2 x Staff, occasionally 3 staff 1 x other (relative or chaperone)			
Planning Relationships:				
Space Data:	**Area (m²):**	16.00	**Height (mm):**	2,700
Notes:	Lamp indicator repeat call situated overdoor on outside entrance of the room.			

ADB	Room Environmental Data	C0701A

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C0701A	Investigation room: stress electrocardiography (ECG)
Room Number:		**Revision Date:** 23/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	Local temperature control required.
Summer Temperature (DegC):	23	
Mechanical Ventilation (Supply ac/hr):	6.0	Mechanical ventilation required to suit design.
Mechanical Ventilation (Extract ac/hr):	6.0	
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		Independent climate control is required.
LIGHTING		
Service Illumination (Lux):	300	Working plane, Dimmable
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	Y	
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):		
Mechanical Services (NR):		
Intrusive Noise (NR Leq):		
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	C0701A

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C0701A	Investigation room: stress electrocardiography (ECG)
Room Number:		**Revision Date:** 23/04/2009

Walls:	Surface Finish (HTM 56): 5: Moisture Resistance (HTM 56): N: Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 5: Hard, impervious, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 4 Moisture Resistance (HTM 60): N: Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1500mm, single leaf, plain flush, lockable.
Windows:	(HTM 55) N/A or Clear, solar control, privacy control
Internal Glazing:	N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	C0701A

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: C0701A Investigation room: stress electrocardiography (ECG)
Room Number: **Revision Date:** 23/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL007	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL008	PUSH BUTTON staff crash call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	MSC128	CABINET top, 600mm facing, (600x400 inserts), with formed plastic liners, 1 door hinged left, wall mounted, HTM71		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
8		8	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
2		2	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
1		1	OUT470	OUTLET oxygen medical, wall/trunking mounted		1
1		1	OUT475	OUTLET vacuum medical, wall/trunking mounted		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	TRA104	TRACK, curtain, one sided, 2500mm length		1
1		1	TRA112	TRACK, curtain, two sided, L-shape, curved, 2900L 2500W		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
2		2	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	CHA063	CHAIR, height adjustable, with arms, high back, swivel, 5 star base, on castors		3
1		1	COM031	COMPUTER CPU		3
1		1	COM047	COMPUTER MONITOR, 17" TFT, digital flat panel display, touch screen, desk top		3
1		1	COU010	COUCH, examination/treatment, (3 section), with paper roll holder, variable height, retractable wheels		3
1		1	DES006	DESK, cantilever, single pedestal 3 drawer, modesty panel, 1200W 750D		3
1		1	EXE016	EXERCISE TREADMILL		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	MON011	MONITOR, electrocardiograph (ECG), 12-lead		3
1		1	MON014	MONITOR, electrocardiograph (ECG)/blood pressure, 280H 450W 360D		3

ADB	Schedule of Components by Room	C0701A

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: C0701A Investigation room: stress electrocardiography (ECG)
Room Number: **Revision Date:** 23/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	MST001	TROLLEY, small, single, with handle, 5 sets of runners, 600mm facing, 850H 730W 450D nominal, HTM71		3
1		1	STO004	STOOL, height adjustable, swivel, mobile		3
1		1	TRO315	TROLLEY, cardiotocograph monitor		3

ADB	Room Data Sheet	C0711

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C0711	Investigation room: echocardiography All-round couch access
Room Number:		**Revision Date:** 07/04/2009

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Patient to undergo Echocardiography test. 3) Recording test results. 4) Using telephone(s). 5) Clinical hand washing.			
Personnel:	1 x Patient 1 x Staff, occasionally 2 staff			
Planning Relationships:	Part of Non-Invasive Investigation Unit.			
Space Data:	**Area (m²):**	18.00	**Height (mm):**	2,700

Notes: Lamp indicator repeat call situated overdoor on outside entrance of the room.

ADB	Room Environmental Data	C0711

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C0711	Investigation room: echocardiography All-round couch access
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		Independent climate control is required.
LIGHTING		
Service Illumination (Lux):	300	
Service Illumination Night (Lux):		
Local Illumination (Lux):	1,000.0	Examination lamp.
Colour Rendering Required:	Y	
Standby Lighting Grade:		Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	C0711

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C0711	Investigation room: echocardiography All-round couch access
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N: Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3: Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5: Imperforate Moisture Resistance (HTM 60): N: Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1500mm, single leaf, plain flush, lockable.
Windows:	(HTM 55) Clear, solar control, privacy control.
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	C0711

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: C0711 Investigation room: echocardiography All-round couch access
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL007	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL008	PUSH BUTTON staff crash call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	LIG053	LUMINAIRE examination adjustable, 1000 lux, ceiling mounted		1
1		1	MSC081	CABINET base, 600mm facing, (600x400 inserts), with formed plastic liners, 1 door hinged right, on plinth, o/a height 900, HTM71		1
1		1	MSC082	CABINET base, 600mm facing, (600x400 inserts), with formed plastic liners, 1 door hinged left, on plinth, o/a height 900, HTM71		1
1		1	MSC083	CABINET base, 600mm facing, (600x400 inserts), with 6 telescopic runners, 1 door hinged right, on plinth, o/a height 900, HTM71		1
1		1	MSC085	CABINET base, 600mm facing, (600x400 inserts), with 3 telescopic runners, 1 door hinged right, on plinth, o/a height 900, HTM71		1
2		2	MSC197	CABINET top, 600mm facing, with 1 shelf, 1 door hinged right, wall mounted, HTM71		1
2		2	MSC198	CABINET top, 600mm facing, with 1 shelf, 1 door hinged left, wall mounted, HTM71		1
1		1	MSW034	WORKTOP, for 600mm facing inserts cabinets, 2400W 500D nominal, HTM71		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
8		8	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
1		1	OUT470	OUTLET oxygen medical, wall/trunking mounted		1
1		1	OUT475	OUTLET vacuum medical, wall/trunking mounted		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	TRA110	TRACK, curtain, one sided, 3600mm length		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	CLO001	CLOCK battery, wall mounted		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2

ADB	Schedule of Components by Room	C0711

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: C0711 Investigation room: echocardiography All-round couch access
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	DIS435	DISPENSER, disposable gloves, set of 3, wall mounted		2
1		1	HOO022	HOOK, double, wall mounted		2
1		1	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	CHA063	CHAIR, height adjustable, with arms, high back, swivel, 5 star base, on castors		3
1		1	COU010	COUCH, examination/treatment, (3 section), with paper roll holder, variable height, retractable wheels		3
1		1	CRD016	ECHOCARDIOGRAPHY MACHINE		3
1		1	DES006	DESK, cantilever, single pedestal 3 drawer, modesty panel, 1200W 750D		3
1		1	HOL004	HOLDER, sack, with lid foot operated, small, freestanding		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	MST001	TROLLEY, small, single, with handle, 5 sets of runners, 600mm facing, 850H 730W 450D nominal, HTM71		3
1		1	STO004	STOOL, height adjustable, swivel, mobile		3

ADB	Room Data Sheet	C1013

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C1013	Consulting, examination room: Orthoptic
Room Number:		**Revision Date:** 22/04/2009

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Examination and treatment by an orthoptist. 3) Examination and treatment of seated patient using a synoptophore. 4) Accessing and updating electronic patient records (EPRs). 5) Holding orthoptic equipment. 6) Clinical hand washing. 7) Recording patient data/notes.			
Personnel:	1x Patient 2 x Staff 1 x Other (escort)			
Planning Relationships:				
Space Data:	**Area (m²):**	20.00	**Height (mm):**	2,700

Notes: 6m Snellen test is essential in all rooms.

ADB	Room Environmental Data	C1013

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C1013	Consulting, examination room: Orthoptic
Room Number:		**Revision Date:** 22/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	18	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	50 minimum. Test workstation dimmer light is required.
Service Illumination Night (Lux):		
Local Illumination (Lux):	1,000.0	Chair; Examination lamp. 300 at desk.
Colour Rendering Required:	Y	Not required at desk.
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	C1013

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C1013	Consulting, examination room: Orthoptic
Room Number:		**Revision Date:** 22/04/2009

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N: Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 5: Hard, impervious, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5: Imperforate Moisture Resistance (HTM 60): N: Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	HTM 58: 1x 1000mm, single leaf, vision panel, lockable
Windows:	HTM 55: Clear, solar control, privacy control
Internal Glazing:	
Hatch:	
Notes:	

ADB	Schedule of Components by Room	C1013

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: C1013 Consulting, examination room: Orthoptic
Room Number: **Revision Date:** 22/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	LIG003	LUMINAIRE Reading, adjustable arm, 100watt, wall/trunking/rail mounted		1
2		2	MSC025	CABINET base, 400mm facing, (400x600 inserts), with 3 telescopic runners, open, on plinth, o/a height 900, HTM71		1
1		1	MSC187	CABINET base, 400mm facing, with 2 shelves, 1 door hinged right, on plinth, o/a height 900, HTM71		1
1		1	MSW013	WORKTOP, for 3x 400mm facing inserts cabinets, 1365W 700D nominal, HTM71		1
1		1	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT052	CONNECTION UNIT switched 13amp, wall/trunking mounted		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	WOR690	ORTHOPTIST WORKSTATION, comprising: angled worktop 700H 900/1650W 600/400D; 1x 3 open shelves unit on plinth 500W 500D; 1x 3 drawer unit lockable on plinth 600H 500W 500D; 1x top mounted storage unit open shelves 200H 1900W 200D; screen/blackboard 1100H 2440W		1
1		1	BOA034	BOARD, marker, whiteboard, dry-wipe, with pen holder, wall mounted, 600H 900W		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
2		2	HOO024	HOOK, hat and coat, 1		2
1		1	TES005	TEST Snellen, 6m, with controls, wall mounted		2
3		3	CHA002	CHAIR, height adjustable, medium back, swivel, 5 star base, on castors		3
2		2	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	CHA063	CHAIR, height adjustable, with arms, high back, swivel, 5 star base, on castors		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	SYN001	SYNOPTOPHORE, includes set of 12 pairs of slides, with accessories set, orthoptics		3
1		1	TAB111	TABLE, synoptophore, has 2 slide wells, 900H 700W 900D		3
1		1	TES006	TEST TYPE, near vision		3

ADB	Room Data Sheet	C1020

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	C1020	Examination room: visual fields test		
Room Number:			**Revision Date:**	19/10/2006

Activities:	1) Examining and investigating a patients visual field. 2) Holding notes and files. 3) Holding small items of equipment.			
Personnel:	2 x Patients 2 x Staff			
Planning Relationships:	Close to waiting area. Close to Consulting/examination suite. Within optometry area.			
Space Data:	**Area (m²):**	12.00	**Height (mm):**	2,700

Notes: Illuminated sign "IN USE" sited outside the doorway of the room.

ADB	Room Environmental Data	C1020

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C1020	Examination room: visual fields test
Room Number:		**Revision Date:** 19/10/2006

AIR	Requirements	Notes
Winter Temperature (DegC):	18	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Test. Workstation dimming required
Service Illumination Night (Lux):		
Local Illumination (Lux):	1,000.0	Examination lamp.
Colour Rendering Required:	Y	
Standby Lighting Grade:		A - Local, B - Service
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):		
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	C1020

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C1020	Examination room: visual fields test
Room Number:		**Revision Date:** 19/10/2006

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N: Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 5: Hard, impervious, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5: Imperforate Moisture Resistance (HTM 60): N: Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1000mm, single leaf, plain flush
Windows:	(HTM 55) Clear, solar control, privacy control. Blackout
Internal Glazing:	(HTM 57)
Hatch:	
Notes:	

ADB	Schedule of Components by Room	C1020

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: C1020 Examination room: visual fields test
Room Number: **Revision Date:** 19/10/2006

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	LIG073	ILLUMINATED SIGN "IN USE"		1
1		1	MSC198	CABINET top, 600mm facing, with 1 shelf, 1 door hinged left, wall mounted, HTM71		1
3		3	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
1		1	SWC031	SWITCH dimmer, fixed position, wall mounted		1
2		2	HOO024	HOOK, hat and coat, 1		2
1		1	CAB024	CABINET, filing, 2 drawer, 710H 470W 620D		3
2		2	CHA002	CHAIR, height adjustable, medium back, swivel, 5 star base, on castors		3
1		1	CHA063	CHAIR, height adjustable, with arms, high back, swivel, 5 star base, on castors		3
1		1	DES022	DESK, cantilever, single pedestal 3 drawer, cable management, modesty panel, 1600W 800D		3
1		1	OPH001	ANALYSER, visual test, perimeter, Henson, on stand		3
1		1	OPH003	ANALYSER, visual field, Friedmann, on stand		3

ADB	Room Data Sheet	C1027

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C1027	Test room: psychophysical, electrophysiology
Room Number:		**Revision Date:** 23/04/2009

Activities:	1) Patient to undergo psychophysical tests, such as dark adaptation, contrast sensitivity and colour vision. 2) Patient to undergo electrophysiology tests to measure the reaction of eye or brain to a light stimulus. 3) Recording patient data/notes. 4) Using telephone(s).			
Personnel:	1 x Patient			
Planning Relationships:				
Space Data:	**Area (m²):**	18.00	**Height (mm):**	2,700
Notes:	Psychophysical & Electrophysiology test equipment are a project specific. A special television display linked to a signal generator. Multi-channel trunking to suit may be required. Door screen is required. Monitoring equipment area should be screened from patient area.			

ADB	Room Environmental Data	C1027

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C1027	Test room: psychophysical, electrophysiology
Room Number:		**Revision Date:** 23/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	18	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Dimmer control, and complete blackout facilities are required.
Service Illumination Night (Lux):		
Local Illumination (Lux):	1,000.0	Examination lamp.
Colour Rendering Required:	Y	
Standby Lighting Grade:		A - Local, B - Service
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):		
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	C1027

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	C1027	Test room: psychophysical, electrophysiology
Room Number:		**Revision Date:** 23/04/2009

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N: Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 5: Hard, impervious, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5: Imperforate Moisture Resistance (HTM 60): N: Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1000mm, single leaf, plain flush; Door minimise electrical interference
Windows:	(HTM 55)Clear, solar control, privacy control; Blackout.
Internal Glazing:	N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	C1027

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: C1027 Test room: psychophysical, electrophysiology
Room Number: **Revision Date:** 23/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	CHA072	CHAIR, treatment, reclining, height adjustable		1
1		1	MSW065	WORKTOP, for 400mm facing inserts cabinets, 1500W 700D nominal, HTM71		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
8		8	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT207	SOCKET outlet aerial television, closed circuit, wall mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
1		1	SWC034	SWITCH dimmer modulating, wall mounted		1
1		1	TRA108	TRACK, curtain, one sided, 3300mm length		1
1		1	TRA142	TRACK, curtain, door, two sided, 1200L 1100W		1
2		2	HOO024	HOOK, hat and coat, 1		2
1		1	CHA063	CHAIR, height adjustable, with arms, high back, swivel, 5 star base, on castors		3
1		1	COM031	COMPUTER CPU		3
1		1	COM032	COMPUTER VDT MONITOR		3
1		1	COM033	COMPUTER KEYBOARD		3
1		1	COM038	COMPUTER PRINTER, laser, A4, 250H 380W 385D		3
1		1	DES022	DESK, cantilever, single pedestal 3 drawer, cable management, modesty panel, 1600W 800D		3
1		1	TRO397	TROLLEY, accommodates complete computer equipment, height adjustable 720-870mm and paper shelf, 870H 620W 840D		3

ADB	Room Data Sheet	E0113

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0113	Imaging room: Ultrasound, general With reporting workstation
Room Number:		**Revision Date:** 07/04/2009

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Patient may arrive on a trolley or in a bed. 3) Positioning/repositioning patients for examination. 4) Ultrasound examination. 5) Using oxygen and vacuum services for resuscitation. 6) Daily holding/sorting of documents, records, radiology films in clinical or diagnostic areas. 7) Holding linen supply. 8) Immediate reporting of ultrasound scanning. 9) Clinical hand washing. 10) Recording patient data/notes. 11) Use of visual display terminal(s). 12) Communicating within department (Two-way communication system) within and outside hospital (telephone). 13) Using gel warmer.			
Personnel:	1 x Patient 2 x Staff 2 x Additional staff intermittently Intermittent use			
Planning Relationships:	Close to dark room. Adjacent to ultrasound waiting/changing Adjacent to WC			
Space Data:	**Area (m²):**	16.00	**Height (mm):**	2,700

Notes: In the absence of changing cubicle, privacy screen is required. Link to departmental computer management system. Lamp indicator repeat call situated overdoor on outside entrance of the room. Electrical installation to comply to Meigan Standards.

ADB	Room Environmental Data	E0113

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0113	Imaging room: Ultrasound, general With reporting workstation
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):	23	
Mechanical Ventilation (Supply ac/hr):	6.0	Mechanical ventilation (supply & extract): To suit overall equipment design of area.
Mechanical Ventilation (Extract ac/hr):	6.0	
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	400	Floor. Dimming facilities are required.
Service Illumination Night (Lux):		
Local Illumination (Lux):		20-100 Couch Variable. Examination luminaire to provide 1000 lux.
Colour Rendering Required:	Y	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	E0113

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0113	Imaging room: Ultrasound, general With reporting workstation
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 3 i.e. Impervious, jointless, smooth Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 2 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3:Smooth, imperforate Moisture Resistance (HTM 60): N:Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1500mm, one & a half leaf, plain flush, self closing, lockable; bed access
Windows:	(HTM 55) Solar control, privacy control
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	E0113

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: E0113 Imaging room: Ultrasound, general With reporting workstation
Room Number: **Revision Date:** 07/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL007	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	LIG053	LUMINAIRE examination adjustable, 1000 lux, ceiling mounted		1
1		1	LIG074	ILLUMINATED SIGN "DO NOT ENTER"		1
2		2	MSC091	CABINET base, 400mm facing, (400x600 inserts), with formed plastic liners, 1 door hinged right, on plinth, o/a height 900, HTM71		1
1		1	MSC092	CABINET base, 400mm facing, (400x600 inserts), with formed plastic liners, 1 door hinged left, on plinth, o/a height 900, HTM71		1
1		1	MSC096	CABINET base, 400mm facing, (400x600 inserts), with 3 telescopic runners, 1 door hinged left, on plinth, o/a height 900, HTM71		1
1		1	MSW014	WORKTOP, for 4x 400mm facing inserts cabinets, 1820W 700D nominal, HTM71		1
1		1	MSW068	WORKTOP, for 400mm facing inserts cabinets, 1800W 700D nominal, HTM71		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
4		4	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT049	CONNECTION UNIT switched 13amp, flex outlet, wall/trunking mounted		1
1		1	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
1		1	OUT470	OUTLET oxygen medical, wall/trunking mounted		1
1		1	OUT475	OUTLET vacuum medical, wall/trunking mounted		1
1		1	SHE221	SHELF, 1200W 300D		1
2		2	SWC031	SWITCH dimmer, fixed position, wall mounted		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	BOA013	BOARD, display/notice, wall mounted, 900H 1200W		2
1		1	CLO001	CLOCK battery, wall mounted		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
2		2	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	HOO022	HOOK, double, wall mounted		2
1		1	ILL010	ILLUMINATOR, x-ray film, double, wall mounted		2

ADB	Schedule of Components by Room	E0113

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: E0113 Imaging room: Ultrasound, general With reporting workstation
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	CHA003	CHAIR, height adjustable 540-790, tilting back, adjustable footrest, swivel, 5 star base, on glides		3
1		1	CHA017	CHAIR, upright, upholstered, stacking		3
2		2	CHA063	CHAIR, height adjustable, with arms, high back, swivel, 5 star base, on castors		3
1		1	COM032	COMPUTER VDT MONITOR		3
1		1	COM033	COMPUTER KEYBOARD		3
1		1	COU010	COUCH, examination/treatment, (3 section), with paper roll holder, variable height, retractable wheels		3
2		2	CUP418	CUPBOARD/DRAWER UNIT, 1 drawer, 1 shelf, on castors, 660H 483W 390D		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	HOL008	HOLDER, sack with lid foot operated, large, freestanding, 960H 500W 415D		3
1		1	TRO131	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 450W 450D		3
1		1	ULT017	ULTRASOUND computed sonography, 128 channels, multi purpose, mobile, 1295H 635W 920D		3
1		1	WAR051	WARMER, ultrasound couplant gel, 200H 100W 150D		3

ADB	Room Data Sheet	E0127

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0127	Imaging room: conventional, general x-ray with chest x-ray No room layout
Room Number:		**Revision Date:** 07/04/2009

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Patient may arrive on a trolley or in a bed. 3) Positioning/repositioning patients for examination. 4) Using radiation protection equipment. 5) Imaging x-ray examination of patient. 6) Film cassette(s) taken to processing area. 7) Using oxygen and vacuum services for resuscitation. 8) Clinical hand washing. 9) Displaying notices. 10) Using marker/wall board. 11) Holding equipment manuals. 12) Storing small items of equipment. 13) Storing positioning aids e.g. wedges pillows and other immobilisation devices.			
Personnel:	1 x Patient 4 x Staff			
Planning Relationships:	Adjacent to Processing area. Close to changing facilities. Close to sub-waiting.			
Space Data:	**Area (m²):**	30.00	**Height (mm):**	3,100

Notes:

Ancillary items required. Wall mounted telephone handset is required. Radiation protection as required. Lighting control panel(s) depending on specific function of the room giving variable levels of illumination. Socket outlets at two metre intervals on each wall. Link to departmental computer management system. Lamp indicator repeat call situated overdoor on outside entrance of the room. Lamp indicator Radiation Warning at eye level at outside entrance. Space required for the following, which may be stored elsewhere: Infusion stand, twin hook, mobile (STA142). Examination lamp, mobile (LIG015). Electrical installation to comply to Meigan Standards.

ADB	Room Environmental Data	E0127

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0127	Imaging room: conventional, general x-ray with chest x-ray No room layout
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):	23	
Mechanical Ventilation (Supply ac/hr):	5.0	Mechanical ventilation (supply): Up to 6 ac/hr to suit equipment & depending on local conditions. Mechanical ventilation (extract): To suit overall equipment design of area.
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		Humidity control to suit equipment.
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	400	Floor. Dimming facilities are required.
Service Illumination Night (Lux):		
Local Illumination (Lux):		20-100 Couch Variable. Local examination luminaire either fixed or mobile to provide 1000 lux.
Colour Rendering Required:	Y	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	E0127

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0127	Imaging room: conventional, general x-ray with chest x-ray No room layout
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 3 i.e. Impervious, jointless, smooth Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 2 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3:Smooth, imperforate Moisture Resistance (HTM 60): N:Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Three sets of doors: 1x 1500mm, one & a half leaf, plain flush,lockable; bed access. & 1(or 2)x 900mm single leaf, plain flush, lockable; person access to ambulant changing room and 1x 1000mm single leaf, plain flush, lockable; person access. Both - Radiation proof with symbol.
Windows:	(HTM 55) In accordance with radiation protection advice, solar control. Blackout/dimout.
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	E0127

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: E0127 Imaging room: conventional, general x-ray with chest x-ray No room layout
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL007	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	CLO005	CLOCK impulse, wall mounted		1
1		1	LIG074	ILLUMINATED SIGN "DO NOT ENTER"		1
1		1	MSC091	CABINET base, 400mm facing, (400x600 inserts), with formed plastic liners, 1 door hinged right, on plinth, o/a height 900, HTM71		1
1		1	MSC092	CABINET base, 400mm facing, (400x600 inserts), with formed plastic liners, 1 door hinged left, on plinth, o/a height 900, HTM71		1
1		1	MSC096	CABINET base, 400mm facing, (400x600 inserts), with 3 telescopic runners, 1 door hinged left, on plinth, o/a height 900, HTM71		1
1		1	MSW013	WORKTOP, for 3x 400mm facing inserts cabinets, 1365W 700D nominal, HTM71		1
1		1	OUT002	OUTLET cable, wall/trunking mounted		1
8		8	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT059	CONNECTION UNIT switched 13amp, flex, indicator light		1
1		1	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
1		1	OUT470	OUTLET oxygen medical, wall/trunking mounted		1
1		1	OUT475	OUTLET vacuum medical, wall/trunking mounted		1
2		2	SHE221	SHELF, 1200W 300D		1
2		2	SWC062	EMERGENCY STOP switch button, wall mounted		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	BOA012	BOARD, display/notice, wall mounted, 900H 600W		2
1		1	BOA034	BOARD, marker, whiteboard, dry-wipe, with pen holder, wall mounted, 600H 900W		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
3		3	HOO024	HOOK, hat and coat, 1		2
1		1	ILL010	ILLUMINATOR, x-ray film, double, wall mounted		2
1		1	RAC196	RACK, x-ray lead apron, 5 hangers hinged, wall mounted		2

ADB	Schedule of Components by Room	E0127

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: E0127 Imaging room: conventional, general x-ray with chest x-ray No room layout
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	SCR061	SCREEN shielding, radiation proof, 2mm lead, solid/glass, 2000H 2100L, angle		2
1		1	XRA010	X-RAY CS, ceiling suspensions, with telescopic tube of column and rotating/tilting arm		2
1		1	XRA011	X-RAY CS CONTROL DESK UNIT, freestanding, (Part of XRA023)		2
1		1	XRA012	X-RAY CS STAND for control unit, (Part of XRA023)		2
2		2	XRA013	X-RAY CS GENERATOR CABINET, (Part of XRA010)		2
1		1	XRA018	X-RAY CS RAIL, ceiling suspensions, 2455mm (3655 w/optional extenstion rail)		2
1		1	XRA021	X-RAY TABLE PATIENT, floating top, motorised variable height horizontal bucky, 800H 2180W 700D		2
1		1	XRA030	X-RAY CHEST stand, universal, includes Bucky mechanism		2
1		1	CAB050	CABINET, x-ray cassette storage, mobile, 550H 700W 500D		3
2		2	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	CUP011	CUPBOARD, metal, with 4 pull out galvanised shelves, lockable, 1800H 1000W 500D		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	LAD001	STEP, 3 tread, 4 sprung wheels, 750H 600W 500D		3
1		1	MST001	TROLLEY, small, single, with handle, 5 sets of runners, 600mm facing, 850H 730W 450D nominal, HTM71		3
1		1	SCR064	SCREEN, x-ray radiation protection, lead rubber, mobile, 900H 700L, lead equivalent 0.5mm Pb.		3
1		1	TRO310	TROLLEY, emergency/resuscitation, complete with defibrillator, 955H 825W 575D		3

ADB	Room Data Sheet	E0151

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	E0151	Imaging room: Bone Mineral Densitometry (BMD)		
Room Number:			**Revision Date:**	07/04/2009

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Patient may arrive on a trolley or in a bed. 3) Positioning/repositioning patients for examination. 4) Using radiation protection equipment. 5) X-ray bone densitometry examination of patient. 6) Using oxygen and vacuum services for resuscitation. 7) Clinical hand washing. 8) Use of visual display terminal(s). 9) Displaying notices. 10) Using marker/wall board. 11) Storing small items of equipment.			
Personnel:	1 x Patient 2 x Staff			
Planning Relationships:				
Space Data:	**Area (m²):**	18.00	**Height (mm):**	2,700
Notes:	Radiation protection as required. Lighting control panel(s) depending on specific function of the room giving variable levels of illumination. Link to the GP surgery via the telephone wires. Lamp indicator repeat call situated overdoor on outside entrance of the room. Electrical installation to comply to Meigan Standards.			

ADB	Room Environmental Data	E0151

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0151	Imaging room: Bone Mineral Densitometry (BMD)
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):	23	
Mechanical Ventilation (Supply ac/hr):	5.0	Mechanical ventilation (supply): Up to 6 ac/hr to suit equipment & depending on local conditions.
Mechanical Ventilation (Extract ac/hr):		Mechanical ventilation (extract): To suit overall equipment design of area.
Pressure Relative to Adjoining Space:		Humidity control to suit equipment.
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	400	Floor. Dimming facilities are required.
Service Illumination Night (Lux):		
Local Illumination (Lux):		20-100 Couch Variable. Local examination luminaire either fixed or mobile to provide 1000 lux.
Colour Rendering Required:	Y	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting.
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	E0151

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0151	Imaging room: Bone Mineral Densitometry (BMD)
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 3 i.e. Impervious, jointless, smooth Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 2 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3:Smooth, imperforate Moisture Resistance (HTM 60): N:Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1500mm, one & a half leaf, plain flush, lockable; bed access. Radiation proof.
Windows:	(HTM 55) In accordance with radiation protection advice, solar control. Blackout/dimout.
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	E0151

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: E0151 Imaging room: Bone Mineral Densitometry (BMD)
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL007	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	LIG074	ILLUMINATED SIGN "DO NOT ENTER"		1
1		1	MSC092	CABINET base, 400mm facing, (400x600 inserts), with formed plastic liners, 1 door hinged left, on plinth, o/a height 900, HTM71		1
1		1	MSC187	CABINET base, 400mm facing, with 2 shelves, 1 door hinged right, on plinth, o/a height 900, HTM71		1
1		1	MSW014	WORKTOP, for 4x 400mm facing inserts cabinets, 1820W 700D nominal, HTM71		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
4		4	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT059	CONNECTION UNIT switched 13amp, flex, indicator light		1
2		2	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
1		1	OUT470	OUTLET oxygen medical, wall/trunking mounted		1
1		1	OUT475	OUTLET vacuum medical, wall/trunking mounted		1
1		1	SHE221	SHELF, 1200W 300D		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	BOA012	BOARD, display/notice, wall mounted, 900H 600W		2
1		1	CLO001	CLOCK battery, wall mounted		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
2		2	HOO024	HOOK, hat and coat, 1		2
1		1	ILL010	ILLUMINATOR, x-ray film, double, wall mounted		2
2		2	CHA017	CHAIR, upright, upholstered, stacking		3
2		2	CHA063	CHAIR, height adjustable, with arms, high back, swivel, 5 star base, on castors		3
1		1	COM032	COMPUTER VDT MONITOR		3
1		1	COM033	COMPUTER KEYBOARD		3
1		1	COM034	COMPUTER PRINTER, inkjet, colour		3
1		1	HOI003	HOIST PATIENT, chair type, mobile		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3

ADB	Schedule of Components by Room	E0151

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0151	Imaging room: Bone Mineral Densitometry (BMD)
Room Number:		**Revision Date:** 07/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	IMG055	IMAGER BONE DESITOMETRY UNIT, with rotating detector/X-ray tube and mowing couch, floor mounted, approximate 1500H 1500W 3000D		3
1		1	IMG056	IMAGER CONTROL CABINET for bone densitometry, approximate 1500H 750W 750D, (Part of IMG055)		3
1		1	SCR064	SCREEN, x-ray radiation protection, lead rubber, mobile, 900H 700L, lead equivalent 0.5mm Pb.		3

ADB	Room Data Sheet	E0305

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0305	Imaging room: remote fluoroscopy, barium No room layout
Room Number:		**Revision Date:** 07/04/2009

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Patient may arrive on a trolley or in a bed. 3) Patient to take barium contrast media. 4) Positioning/repositioning patients for examination. 5) Fluoroscopy examination of patient. 6) Using radiation protection equipment. 7) Using oxygen and vacuum services for resuscitation. 8) Clinical hand washing. 9) Recording patient data/notes. 10) Displaying notices. 11) Using marker/wall board. 12) Storing small items of equipment. 13) Using contrast media warmer/mixer.			
Personnel:	1 x Patient 5 x Staff			
Planning Relationships:	Ensuite changing facilities. Close to sub-waiting. Ensuite access to WC.			
Space Data:	**Area (m²):**	40.00	**Height (mm):**	3,100

Notes:

Diagnostic Investigations using an images intensifier will usually be carried out in conjunction with contrast media for a range of investigations. If clinical procedure using Endoscopes or Gastroscopes are conducted in this suite then additional space should be allocated for Endoscopy trolleys. These procedure do not involve the use of barium contrast. Additional equipment notes: Radiology screen, Infusion stand and Lamp examination mobile may be stored elsewhere. Wall mounted telephone handset is required. Radiation protection including Room Warning Light. Outlets 13A (OUT010) at two metre intervals on each wall. 'Do Not Enter' signals outside each door. Lighting control panel(s) for variable illumination. Wireway for link to departmental computer management system/PACS. Lamp indicator repeat call situated overdoor on outside entrance of the room. Electrical installation to comply to Meigan Standards.

ADB	Room Environmental Data	E0305

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0305	Imaging room: remote fluoroscopy, barium No room layout
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	Temperature: Control 21degC - 25degC
Summer Temperature (DegC):	23	
Mechanical Ventilation (Supply ac/hr):	5.0	Mechanical ventilation (supply): Up to 6 ac/hr. depending on local conditions. Mechanical ventilation (extract): Extract to suit overall design of diagnostic & processing areas.
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	400	Floor. Dimming facilities are required.
Service Illumination Night (Lux):		
Local Illumination (Lux):		20-100 Couch Variable.
Colour Rendering Required:	Y	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	E0305

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0305	Imaging room: remote fluoroscopy, barium No room layout
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 3 i.e. Impervious, jointless, smooth Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 2: Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3:Smooth, imperforate Moisture Resistance (HTM 60): N:Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Three sets of doors: 1x 1500mm, one & a half leaf, plain flush, lockable; bed access. 2x 1000mm single leaf, plain flush, lockable; person access. All - Radiation proof with symbol.
Windows:	(HTM 55) In accordance with radiation protection advice. Solar control. Blackout/dimout.
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	E0305

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: E0305 Imaging room: remote fluoroscopy, barium No room layout
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL007	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	IMG026	IMAGE INTENSIFIER and X-RAY TUBE FLUOROSCOPY, U-arm, floor mounted, (intensifier underneath the table, x-ray tube above)		1
1		1	LIG074	ILLUMINATED SIGN "DO NOT ENTER"		1
1		1	MSC091	CABINET base, 400mm facing, (400x600 inserts), with formed plastic liners, 1 door hinged right, on plinth, o/a height 900, HTM71		1
1		1	MSC092	CABINET base, 400mm facing, (400x600 inserts), with formed plastic liners, 1 door hinged left, on plinth, o/a height 900, HTM71		1
1		1	MSC096	CABINET base, 400mm facing, (400x600 inserts), with 3 telescopic runners, 1 door hinged left, on plinth, o/a height 900, HTM71		1
1		1	MSW013	WORKTOP, for 3x 400mm facing inserts cabinets, 1365W 700D nominal, HTM71		1
8		8	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT059	CONNECTION UNIT switched 13amp, flex, indicator light		1
2		2	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT207	SOCKET outlet aerial television, closed circuit, wall mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
1		1	OUT470	OUTLET oxygen medical, wall/trunking mounted		1
1		1	OUT475	OUTLET vacuum medical, wall/trunking mounted		1
2		2	SHE221	SHELF, 1200W 300D		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	BOA012	BOARD, display/notice, wall mounted, 900H 600W		2
1		1	BOA034	BOARD, marker, whiteboard, dry-wipe, with pen holder, wall mounted, 600H 900W		2
1		1	CLO001	CLOCK battery, wall mounted		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
3		3	HOO024	HOOK, hat and coat, 1		2
1		1	ILL010	ILLUMINATOR, x-ray film, double, wall mounted		2

ADB	Schedule of Components by Room	E0305

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: E0305 Imaging room: remote fluoroscopy, barium No room layout
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	IMG116	IMAGE GENERATOR/POWER DISTRIBUTION CABINET, (Part of fluoroscopy imager)		2
1		1	SCR062	SCREEN shielding, radiation proof, 2mm lead, solid/glass, 2000H 5100L, angle		2
1		1	XRA010	X-RAY CS, ceiling suspensions, with telescopic tube of column and rotating/tilting arm		2
1		1	XRA018	X-RAY CS RAIL, ceiling suspensions, 2455mm (3655 w/optional extenstion rail)		2
1		1	CAB050	CABINET, x-ray cassette storage, mobile, 550H 700W 500D		3
1		1	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	CHA063	CHAIR, height adjustable, with arms, high back, swivel, 5 star base, on castors		3
1		1	CUP011	CUPBOARD, metal, with 4 pull out galvanised shelves, lockable, 1800H 1000W 500D		3
1		1	DES006	DESK, cantilever, single pedestal 3 drawer, modesty panel, 1200W 750D		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
2		2	IMG102	MONITOR viewing flat panel display for image intensifier, (Part of IMG025, IMG026, IMG028 and IMG030)		3
2		2	IMG104	TROLLEY for monitor image intensifier, (Part of IMG102)		3
1		1	IMG105	TABLE PATIENT - image intensifier, X-ray, floating top, (Part of IMG026, or IMG030)		3
1		1	LAD001	STEP, 3 tread, 4 sprung wheels, 750H 600W 500D		3
1		1	MST001	TROLLEY, small, single, with handle, 5 sets of runners, 600mm facing, 850H 730W 450D nominal, HTM71		3
1		1	STO007	STOOL, metal frame, upholstered, 710 height		3
1		1	TRO181	TROLLEY, general purpose, 3 tier, buffered, 950H 890W 590D		3

ADB	Room Data Sheet	E0534

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0534	Reporting room: 4 workstations PACS No room layout
Room Number:		**Revision Date:** 07/04/2009

Activities:	1) Radiologist to report on scans previously carried out or to study digital diagnostic images.			
Personnel:	Up to 4 Staff Intermittent use			
Planning Relationships:				
Space Data:	**Area (m²):**	18.00	**Height (mm):**	2,700

Notes:

Picture Archive and Communication System (PACS) If Monitor Flat Panel is not in use, worktops required to be 850mm deep. Position of X-ray illuminator is a project specific. Wireway for link to departmental computer management system. Worktop to be maximised within room

ADB	Room Environmental Data	E0534

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0534	Reporting room: 4 workstations PACS No room layout
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):	25	
Mechanical Ventilation (Supply ac/hr):		Mechanical ventilation (supply): To suit heat gains from equipment.
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Working plane. Dimming facilities are required.
Service Illumination Night (Lux):		
Local Illumination (Lux):		Areas for VDT's: See CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001.
Colour Rendering Required:	N	
Standby Lighting Grade:		
General Notes:		
NOISE		
Privacy Factor Required (dB):	75	ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):		
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	E0534

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0534	Reporting room: 4 workstations PACS No room layout
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 5: Moisture Resistance (HTM 56): N:Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3: Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5:Imperforate Moisture Resistance (HTM 60): N:Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 900mm, single leaf, vision panel, lockable.
Windows:	(HTM 55) Solar control. Dim-out facilities are required.
Internal Glazing:	(HTM 57) N/A
Hatch:	To office/reception

Notes:

ADB	Schedule of Components by Room	E0534

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: E0534 Reporting room: 4 workstations PACS No room layout
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	WKT900	Worktop, cantilevered, length to suit		
2		2	DRA062	DRAWER UNIT, under worktop, 4 drawer, cut-out to front for film envelopes, 550H 600W 450D		1
4		4	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
9		9	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT052	CONNECTION UNIT switched 13amp, wall/trunking mounted		1
4		4	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	STF127	STORAGE UNIT, lower, cupboard, 2 door, 1 shelf, 550H 600W 450D, HTM63		1
1		1	CLO001	CLOCK battery, wall mounted		2
3		3	ILL011	ILLUMINATOR, x-ray film, triple, wall mounted		2
4		4	CHA002	CHAIR, height adjustable, medium back, swivel, 5 star base, on castors		3
5		5	COM033	COMPUTER KEYBOARD		3
5		5	COM049	COMPUTER MONITOR, 17" TFT, digital flat panel display, high-resolution screens, desk top		3

ADB	Room Data Sheet	E0601

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0601	Scanner room: Computed Tomography (CT) Modified, Room layout in preparation
Room Number:		**Revision Date:** 07/04/2009

Activities:

1) Patient may arrive on foot or in a wheelchair.
2) Patient may arrive on a trolley or in a bed.
3) Positioning/repositioning patient on the scanner table/couch.
4) Preparation of contrast media, I.V. injections and other sterile procedures.
5) Administration of contrast media.
6) Patient undergoes scanning with constant aural/visual contact - including when patient is on far side of CT Scanner gantry.
7) Performing lesion aspiration or needle biopsy.
8) Using radiation protection equipment.
9) Emergency resuscitation.
10) Using oxygen and vacuum services for resuscitation.
11) Clinical hand washing.
12) Storing small items of equipment.
13) Storing disposable items.
14) Using contrast media warmer/mixer.
15) Administration of general or local anaesthetic.

Personnel: 1 x Patient 4 x Staff Intermittent use

Planning Relationships: Adjacent to Control room with visual contact/aural contact/direct access. Close to sub-waiting. Close to WC. Close to Patient Prep Room.

Space Data:

Area (m²):	40.00	**Height (mm):**	3,100

Notes: Ancillary items required. Scanning apparatus selected and positioned as required. Space required for the following, which may be stored elsewhere: Infusion stand, twin hook, mobile, (STA142). Examination lamp, mobile, (LIG015). Anaesthesia unit, (ANA004). Telephone wall mounted is required. Link to departmental computer management system/PACS. Radiation protection as required//including warning light. Lighting control panel giving variable levels of illumination. Lamp indicator repeat call situated overdoor on outside entrance of the room. Electrical installation to comply to Meigan Standards.

ADB	Room Environmental Data	E0601

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0601	Scanner room: Computed Tomography (CT) Modified, Room layout in preparation
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	Temperature: Control 21 deg C - 25 deg C
Summer Temperature (DegC):	21	
Mechanical Ventilation (Supply ac/hr):	6.0	Mechanical ventilation (supply): Air volume to suit heat gains from equipment. Mechanical ventilation (extract): Medical gas scavenging required.
Mechanical Ventilation (Extract ac/hr):	6.0	
Pressure Relative to Adjoining Space:	To corridor	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Equipment. Dimming facilities are required.
Service Illumination Night (Lux):		
Local Illumination (Lux):		10-100 Variable Couch
Colour Rendering Required:	Y	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	E0601

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0601	Scanner room: Computed Tomography (CT) Modified, Room layout in preparation
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 3 i.e. Impervious, jointless, smooth Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 1: Hard, impervious, jointless, smooth, antistatic Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3:Smooth, imperforate Moisture Resistance (HTM 60): N:Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Two sets of doors: 1x 1500mm, one & a half leaf, plain flush, lockable; bed access. & 1x 1000mm single leaf, plain flush, lockable; person access. Both Radiation proof with symbol.
Windows:	(HTM 55) Solar control. Blackout/dimout.
Internal Glazing:	(HTM 57) Lead glass partition to control area.
Hatch:	

Notes:

ADB	Schedule of Components by Room	E0601

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: E0601 Scanner room: Computed Tomography (CT) Modified, Room layout in preparation
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL007	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL008	PUSH BUTTON staff crash call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	IMG061	IMAGER, COMPUTER TOMOGRAPHY (CT) , 16 slice unit		1
1		1	IMG066	TABLE PATIENT - CT imager, floating top, (Part of IMG061)		1
1		1	LIG074	ILLUMINATED SIGN "DO NOT ENTER"		1
1		1	LIG081	LUMINAIRE fitted with single fluorescent lamp with switch, below drug cupboard, 8watt, 400mm		1
1		1	MSC096	CABINET base, 400mm facing, (400x600 inserts), with 3 telescopic runners, 1 door hinged left, on plinth, o/a height 900, HTM71		1
2		2	MSC187	CABINET base, 400mm facing, with 2 shelves, 1 door hinged right, on plinth, o/a height 900, HTM71		1
1		1	MSC188	CABINET base, 400mm facing, with 2 shelves, 1 door hinged left, on plinth, o/a height 900, HTM71		1
1		1	MSW014	WORKTOP, for 4x 400mm facing inserts cabinets, 1820W 700D nominal, HTM71		1
5		5	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT050	OUTLET to controlled drugs cupboard, wall mounted		1
1		1	OUT052	CONNECTION UNIT switched 13amp, wall/trunking mounted		1
1		1	OUT056	CONNECTION UNIT unswitched 13amp, wall/trunking mounted		1
1		1	OUT207	SOCKET outlet aerial television, closed circuit, wall mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
1		1	OUT470	OUTLET oxygen medical, wall/trunking mounted		1
1		1	OUT475	OUTLET vacuum medical, wall/trunking mounted		1
1		1	OUT480	OUTLET gas scavenging medical (AGS), wall mounted		1
2		2	STF286	STORAGE UNIT, upper, cupboard, medicine, 2 door, lockable, 550H 600W 300D, HTM63		1
1		1	STF290	STORAGE UNIT, upper, cupboard, controlled drugs, 1 door, lockable, with warning light, 550H 600W 300D, HTM63		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1

ADB	Schedule of Components by Room	E0601

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: E0601 Scanner room: Computed Tomography (CT) Modified, Room layout in preparation
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	CAB034	CABINET warming, contrast media, stainless steel, wall mounted		2
1		1	CLO004	CLOCK battery with second sweep hand, wall mounted		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
2		2	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS024	DISPENSER, soap, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
2		2	HOO020	HOOK, single, large, wall mounted		2
3		3	HOO024	HOOK, hat and coat, 1		2
1		1	RAC196	RACK, x-ray lead apron, 5 hangers hinged, wall mounted		2
1		1	REF091	REFRIGERATOR, drug, capacity 35 litres, external temperature gauge, lockable, wall mounted, 510H 380W 445D		2
1		1	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	HOL004	HOLDER, sack, with lid foot operated, small, freestanding		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	SCR064	SCREEN, x-ray radiation protection, lead rubber, mobile, 900H 700L, lead equivalent 0.5mm Pb.		3
1		1	SYR001	SYRINGE INJECTOR, automatic, hi pressure injection, contrast media		3
1		1	TRO021	TROLLEY, 4 sets of runners, 850H 600W 600D		3
1		1	TRO133	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 750W 450D		3
1		1	TRO310	TROLLEY, emergency/resuscitation, complete with defibrillator, 955H 825W 575D		3

ADB	Room Data Sheet	E0608

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0608	Control room: serving 2 CT rooms No room layout
Room Number:		**Revision Date:** 07/04/2009

Activities:	1) Operating console, controlling each scan, monitoring VDT image. 2) Communicating with patient via two-way communication system. 3) Viewing x-ray films. 4) Retrieving stored data. 5) Producing hard copy of selected CT images. 6) Communicating with colleagues/offices/departments by telephone. 7) Reading reference books and notices. 8) Storing small items of equipment. 9) Storing stationery/paper. 10) Writing notes.			
Personnel:	6 x Staff With intermittent visitors.			
Planning Relationships:	Adjacent to C.T. scanner room with visual/aural contact & direct access. Convenient to C.T. reporting room. Direct access to C.T. suite corridor.			
Space Data:	**Area (m²):**	20.00	**Height (mm):**	2,700

Notes:

CT = Computed Tomography CT Operating console, data storage and hard copy unit - project team option. Good visual & voice contact with the CT scanner room. Activity note: Receiving colleagues/visitors for training/observation of C.T. session. Additional equipment notes: Direct wireway to CT scanner and diagnostic console positions. Link to departmental computer management system. Radiation protection as required.

ADB	Room Environmental Data	E0608

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0608	Control room: serving 2 CT rooms No room layout
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	Temperature: Control 21degC - 25degC
Summer Temperature (DegC):	23	
Mechanical Ventilation (Supply ac/hr):		Mechanical ventilation (supply & extract): Air volume to suit heat gains from equipment.
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		Humidity control to suit equipment.
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	150	Dimming facilities are required.
Service Illumination Night (Lux):		
Local Illumination (Lux):	350.0	Areas for VDT's: See CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001.
Colour Rendering Required:	N	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):		
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	E0608

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0608	Control room: serving 2 CT rooms No room layout
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 3 i.e. Impervious, jointless, smooth Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3: Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3:Smooth, imperforate Moisture Resistance (HTM 60): N:Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Three sets of doors: each - 1000mm, single leaf, plain flush, lockable. All Radiation proof with symbol.
Windows:	(HTM 55) Solar control. Dim-out facilities are required.
Internal Glazing:	(HTM 57) Window to CT scan room: Radiation proof, with roller blind on CT room side
Hatch:	
Notes:	

ADB	Schedule of Components by Room	E0608

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: E0608 Control room: serving 2 CT rooms No room layout
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	CLO005	CLOCK impulse, wall mounted		1
2		2	LIG074	ILLUMINATED SIGN "DO NOT ENTER"		1
4		4	MSC262	CABINET/DRAWER features, base, 400mm facing, 3 drawer, on plinth, o/a height 900, HTM71		1
4		4	MSC263	CABINET/DRAWER features, base, 400mm facing, 4 drawer, on plinth, o/a height 900, HTM71		1
2		2	MSW014	WORKTOP, for 4x 400mm facing inserts cabinets, 1820W 700D nominal, HTM71		1
1		1	OUT002	OUTLET cable, wall/trunking mounted		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
6		6	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
3		3	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT207	SOCKET outlet aerial television, closed circuit, wall mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
2		2	SHE061	SHELF, book, wall mounted with ends, 600W 200D		1
1		1	BOA012	BOARD, display/notice, wall mounted, 900H 600W		2
1		1	ILL011	ILLUMINATOR, x-ray film, triple, wall mounted		2
2		2	CAB025	CABINET, filing, 4 drawer, 1320H 465W 620D		3
3		3	CHA002	CHAIR, height adjustable, medium back, swivel, 5 star base, on castors		3
3		3	CHA017	CHAIR, upright, upholstered, stacking		3

ADB	Room Data Sheet	E0714

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0714	Imaging room: Gamma Camera multi detector SPECT Radionuclide
Room Number:		**Revision Date:** 07/04/2009

Activities:	1) Patient may be ambulant, in a wheelchair or on a trolley. 2) Positioning patient on examination couch or chair. 3) Radionuclide imaging examination of patient. 4) Use of Multiformat Imager or other hard copy device. 5) Clinical hand washing. 6) Storing small items of equipment. 7) Storing floppy disks. 8) Holding personal belongings. 9) Displaying notices.			
Personnel:	Patient and 2-3 staff (including Escort where needed).			
Planning Relationships:	Adjacent to "Hot" waiting room.			
Space Data:	**Area (m²):**	40.00	**Height (mm):**	3,100

Notes:

SPECT = Single photon emission computed tomography. Radiation protection mobile screen or fixed shielding is required. Drain must go direct to sewer for radiation protection purposes. "Supervised Area" warning sign. Gamma Camera PET and computer need clean electrical supply and with the A/C system need be on essential. Lamp indicator repeat call situated overdoor on outside entrance of the room. Link to departmental computer management system/PACS. Electrical installation to comply to Meigan Standards.

ADB	Room Environmental Data	E0714

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0714	Imaging room: Gamma Camera multi detector SPECT Radionuclide
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	See text ref. control of rate of cooling See text ref. control of rate of cooling for crystal detector.
Summer Temperature (DegC):	23	
Mechanical Ventilation (Supply ac/hr):	5.0	Mechanical ventilation (supply): Up to 6 ac/hr depending on local conditions. Extract to suit design.
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:	BAL	Humidity between 40 - 60%
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	400	Floor. Dimming facilities are required.
Service Illumination Night (Lux):		
Local Illumination (Lux):		20-100 couch variable.
Colour Rendering Required:	Y	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	E0714

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0714	Imaging room: Gamma Camera multi detector SPECT Radionuclide
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 3 i.e. Impervious, jointless, smooth Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 2 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3 i.e. Smooth, imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1500mm, one & a half leaf, retention, lockable. Radiation proof symbol
Windows:	(HTM 55) Obscured glass, radiation protection
Internal Glazing:	(HTM 57) Screen to control room
Hatch:	
Notes:	

ADB	Schedule of Components by Room	E0714

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: E0714 Imaging room: Gamma Camera multi detector SPECT Radionuclide
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL007	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	LIG073	ILLUMINATED SIGN "IN USE"		1
2		2	MSC091	CABINET base, 400mm facing, (400x600 inserts), with formed plastic liners, 1 door hinged right, on plinth, o/a height 900, HTM71		1
1		1	MSC092	CABINET base, 400mm facing, (400x600 inserts), with formed plastic liners, 1 door hinged left, on plinth, o/a height 900, HTM71		1
1		1	MSC096	CABINET base, 400mm facing, (400x600 inserts), with 3 telescopic runners, 1 door hinged left, on plinth, o/a height 900, HTM71		1
1		1	MSW014	WORKTOP, for 4x 400mm facing inserts cabinets, 1820W 700D nominal, HTM71		1
4		4	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT059	CONNECTION UNIT switched 13amp, flex, indicator light		1
2		2	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
2		2	SHE221	SHELF, 1200W 300D		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	BOA012	BOARD, display/notice, wall mounted, 900H 600W		2
1		1	CLO004	CLOCK battery with second sweep hand, wall mounted		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
3		3	HOO024	HOOK, hat and coat, 1		2
1		1	ILL010	ILLUMINATOR, x-ray film, double, wall mounted		2
1		1	IMG072	IMAGER GAMMA CAMERA, digital, multi detector/PET, with monitor		2
1		1	IMG073	TABLE PATIENT - SPECT, gamma camera, variable height, 970/730H 2060W 720D, Part of gamma camera)		2
1		1	IMG075	IMAGER COLLIMATOR RACK, gamma camera PET, (Included in IMG072 and IMG091)		2

ADB	Schedule of Components by Room	E0714

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: E0714 Imaging room: Gamma Camera multi detector SPECT Radionuclide
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	IMG076	IMAGER CART exchange collimator, gamma camera, 1270H 670W 910D, (Part of IMG070 and IMG072)		2
1		1	IMG077	CONSOLE UNIT and COMPUTER for gamma camera/PET, 1180H 1040W 900D, (Included in IMG070, IMG071, IMG072 and IMG091)		2
1		1	IMG079	IMAGER DISK UNIT optical, (Part of IMG077)		2
2		2	LOC012	LOCKER, wall mounted, 340H 300W 300D		2
1		1	BIN025	BIN, disposal, standard, pedal, epoxy coated steel, radioisotope symbol, 17 litres 6mm lead, 640H 240W 360D		3
1		1	CHA002	CHAIR, height adjustable, medium back, swivel, 5 star base, on castors		3
2		2	CHA017	CHAIR, upright, upholstered, stacking		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	IMG109	IMAGING CHAIR, with arms, tilt, on castors		3
1		1	SCR064	SCREEN, x-ray radiation protection, lead rubber, mobile, 900H 700L, lead equivalent 0.5mm Pb.		3
1		1	TRO131	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 450W 450D		3

ADB	Room Data Sheet	E0815

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0815	Scanner room: open Magnetic Resonance Imaging (MRI)
Room Number:		**Revision Date:** 07/04/2009

Activities:	1) Patient to arrive on foot or on MRI trolley, having been prepared for examination. 2) Positioning/repositioning patient on the scanner table/couch. 3) Patient undergoes scanning with constant aural/visual contact and possible vital function monitoring. 4) Administration of contrast media. 5) Interventional work or imaging procedure examination. 6) Maintenance of sedation during examination using appropriate equipment. 7) Patient to be removed from scanner in emergency and taken out of scanner room for emergency procedures/resuscitation. 8) Holding MR coils. 9) Storing MRI compatible equipment. 10) Holding small items of equipment. 11) Storing disposable items. 12) Clinical hand washing.
Personnel:	1 x Patient 2 - 8 Staff Intermittent use
Planning Relationships:	Convenient to Reporting Room with visual contact. Adjacent to Control Room - full visibility via RF window. Close to sub-waiting. Close to anaesthetic bay. Close to recovery bay. Close to resuscitation. Close to technical equipment room incl. gradient amplifiers, RF generators. Convenient to service entrance for cryogens delivery. Position on external wall assist venting requirement & changing of magnet (via removable panel/section). Close to changing facilities.

Space Data:	**Area (m²):**	84.00	**Height (mm):**	3,000

Notes:

Open MRI systems are available in two types of configuration: Type 1 - 'horizontal orientation coil systems' (hamburger system). Type 2 - 'vertical orientation coil system' (double doughnut magnets). Space required for the equipment MRI compatible which may be stored elsewhere: Anaesthetic apparatures (ANA007), Infusion pump (STA145). Equipment and fitting to be non-ferromagnetic and use authorised materials, e.g.: brass coat hooks, notice boards, chairs - non metallic. Room to have total radio-frequency (RF) radiation screening. All electrical circuits into room must be fitted with line RF filters. Wireways & pipe routes to technical equipment & control room to be via RF shielded access ports. An "emergency stop" button which cuts power to the computer console & stop the examination. Lamp indicator repeat call situated overdoor on outside entrance of the room. Requires adequate storage (vol 1 13.63) for receiver coils and QA phantoms and clinical items eg contrast media. Oxygen monitoring Emergency Quench Switch. Remote monitoring (CCVTV) Shielding (including RF, acoustic and magnetic) needs to be considered in line with magnet size. Storgae cupboard to comply with receiver coils. Location of other specialised imaging rooms imust not be within the vinicity of the MRI room. Electrical installation to comply to Meigan Standards.

ADB	Room Environmental Data	E0815

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0815	Scanner room: open Magnetic Resonance Imaging (MRI)
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	+/-2 deg.C. Ref.to HBN for temperature control.
Summer Temperature (DegC):	21	
Mechanical Ventilation (Supply ac/hr):		Mechanical ventilation (supply): Air volume to suit heat gain from equipment.
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		Humidity control to suit equipment.
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		If Interventional use for airflow & filtration; see guidance - Infection control in the built environment, HBN26 Operating dept., HTM03 Heating and ventilation system. Air conditioning (due to interventional work need to meet equipment manufacturers and operating theatre standards (vol 1 2.42)).
LIGHTING		
Service Illumination (Lux):	500	Floor. Dimming facilities are required.
Service Illumination Night (Lux):		
Local Illumination (Lux):	200.0	For patient examination. Dimmers or individual lamp device rectifiers should be used.
Colour Rendering Required:	Y	
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting
General Notes:		Lighting (vol 1 2.47-2.50)
NOISE		
Privacy Factor Required (dB):	80	
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		The MR room need to be shielded against Noise Pollution in respect of adjacent rooms.
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):		
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	E0815

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	E0815	Scanner room: open Magnetic Resonance Imaging (MRI)
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 3 i.e. Impervious, jointless, smooth Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 1: Hard, impervious, jointless, smooth, antistatic Cleaning Routine (HTM 61): To manufacturers recommendations Consider weight and floor reinforcement requirements. Route from external wall to MRI to take the wieght of MRI.
Ceiling:	Surface Finish (HTM 60): 3 i.e. Smooth, imperforate, non-ferrous Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1500mm, RF shielded, MR trolley access, retention 95 deg., one & a half leaf, plain fush, lockable.
Windows:	(HTM 55) N/A
Internal Glazing:	(HTM 57) RF shielding screen.
Hatch:	
Notes:	

ADB	Schedule of Components by Room	E0815

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: E0815 Scanner room: open Magnetic Resonance Imaging (MRI)
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL007	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	CUP112	CUPBOARD UNIT, non-ferrous, open, 3 adjustable shelf, on plinth, 850H 1000W 500D		1
1		1	CUP116	CUPBOARD/DRAWER UNIT, non-ferrous, 2 drawer, 1 adjustable shelf, on plinth, 850H 1000W 500D		1
1		1	IMG082	IMAGER, MAGNETIC RESONANCE IMAGING (MRI), open		1
1		1	IMG083	TABLE PATIENT - MRI imager, movable top, on castors, (Part of IMG082		1
1		1	LIG052	LUMINAIRE operating (minor), low ferrous metal content		1
1		1	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT453	OUTLET 4 kPa compressed air medical, wall/trunking mounted		1
1		1	OUT461	OUTLET nitrous oxide medical, wall/trunking mounted		1
1		1	OUT470	OUTLET oxygen medical, wall/trunking mounted		1
1		1	OUT475	OUTLET vacuum medical, wall/trunking mounted		1
1		1	SUC002	SUCTION UNIT, pipeline, high pressure, theatre		1
1		1	SWC001	SWITCH 5amp ac single pole, 1 way, wall mounted		1
1		1	SWC062	EMERGENCY STOP switch button, wall mounted		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	WOR130	WORKTOP, 2500W 600D		1
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	CHA083	CHAIR, stacking, polypropylene, with seat and back pads, 750H 534W 530D		3
1		1	MON051	MONITOR, patient, MR compatible, vital signs, multi-parameter, includes pulse oximeter, 280H 360W 215D		3
1		1	SYR005	SYRINGE INJECTOR, MRI compatible, automatic, hi pressure injection, media contrast		3
1		1	TRO139	TROLLEY, dressing/instrument, MRI compatible, 870H 450W 450D		3

ADB	Room Data Sheet	F0308

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	F0308	Servery serving central dining room		
Room Number:			**Revision Date:**	05/05/2009

Activities:	1) Holding cook/chill trolley. 2) Serving food. 3) Dispensing trays, crockery and cutlery.			
Personnel:	2 x Persons			
Planning Relationships:	Adjacent to central dining room/area(s). Easy access from circulation.			
Space Data:	**Area (m²):**	10.00	**Height (mm):**	2,400

Notes: Please note, this is a guide only and specialist companies advice should be sort to cater for quantities of diners expected.

ADB	Room Environmental Data	F0308

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	F0308	Servery serving central dining room
Room Number:		**Revision Date:** 05/05/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	18	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):	6.0	Mechanical ventilation (extract): Extract vent required to suit heat gains from equipment.
Mechanical Ventilation (Extract ac/hr):	6.0	
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Counter/equipment.
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	N	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):		
Mechanical Services (NR):		
Intrusive Noise (NR Leq):		
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	Domestic Hot Water: WHB 43. Sign required; 'Caution Very Hot Water' above the sink.
Hot Water Max. Temp (DegC):	60	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		

ADB	Room Design Character	F0308

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	F0308	Servery serving central dining room
Room Number:		**Revision Date:** 05/05/2009

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3 i.e. Smooth, imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) N/A, or Food trolley access/lockable if provided.
Windows:	(HTM 55) Clear, solar control.
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	F0308

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: F0308 Servery serving central dining room
Room Number:
Revision Date: 05/05/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
3		3	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
3		3	TRO060	TROLLEY hostess regeneration, chill and hot units, bulk supply, 1420W 775D		3

ADB	Room Data Sheet	F0612

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	F0612	Restaurant: 240 places With emergency call. Central dining room
Room Number:		**Revision Date:** 05/05/2009

Activities:	1) Consuming beverages and refreshments. 2) Dispensing chilled water. 3) Laying up tables. 4) Clearing used crockery and cutlery.			
Personnel:	240 x Persons			
Planning Relationships:	Easy access to hospital corridor. Easy access to wash-up area.			
Space Data:	**Area (m²):**	375.00	**Height (mm):**	2,700

Notes: Seperation of staff working in the two hospitals needs to be accommodated.

ADB	Room Environmental Data	F0612

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	F0612	Restaurant: 240 places With emergency call. Central dining room
Room Number:		**Revision Date:** 05/05/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	18	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):	6.0	
Mechanical Ventilation (Extract ac/hr):	6.0	
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	200	Tables/Counter.
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	Y	
Standby Lighting Grade:		
General Notes:		
NOISE		
Privacy Factor Required (dB):	70	
Mechanical Services (NR):	35	
Intrusive Noise (NR Leq):	45	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):		
General Notes:		

FIRE

Enclosure:

Automatic Detection:

ADB	Room Design Character	F0612

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	F0612	Restaurant: 240 places With emergency call. Central dining room
Room Number:		**Revision Date:** 05/05/2009

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 5 i.e. Hard, impervious, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 6 Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Two sets of doors: each - 1900mm, double equal leaves, vision panel
Windows:	(HTM 55) Clear, solar control if required. Window opening restrictors max 100mm at bottom
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	F0612

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: F0612 Restaurant: 240 places With emergency call. Central dining room
Room Number: **Revision Date:** 05/05/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
4		4	COU028	COUNTER UNIT, self service, wall mounted, cut outs for cutlery containers, with drinking water, 900H 1200W 700D		1
4		4	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
16		16	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
6		6	BOA012	BOARD, display/notice, wall mounted, 900H 600W		2
240		240	CHA017	CHAIR, upright, upholstered, stacking		3
4		4	DIS047	DISPENSER/TROLLEY, crockery basket, capacity 7 baskets (500W 500D) 1700H 700W 630D		3
32		32	TAB007	TABLE, 710H 900W 900D		3
28		28	TAB012	TABLE, 710H 1200W 900D		3
12		12	TRO332	TROLLEY, catering, clearing, side by side, 20 trays, 1660H 1140W 470D		3

ADB	Room Data Sheet	G0507

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	G0507	Lobby: gowning (isolation room) Entrance lobby for barrier nursing
Room Number:		**Revision Date:** 07/04/2009

Activities:	1) Clinical hand washing. 2) Dispensing disposable aprons. 3) Dispensing disposable gloves. 4) Disposal of clinical waste. 5) Disposal of non-clinical items.			
Personnel:	2 x Persons			
Planning Relationships:	Direct access to single bedroom.			
Space Data:	**Area (m²):**	6.00	**Height (mm):**	2,700

Notes: Source and protective isolation. For ventilated lobby details see HBN Isolation facilities in acute settings. The use of personal protective equipment (PPE) will be determined by local infection control policy.

ADB	Room Environmental Data	G0507

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	G0507	Lobby: gowning (isolation room) Entrance lobby for barrier nursing
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	20	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:	POS	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	150	Floor
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	N	
Standby Lighting Grade:		
General Notes:		
NOISE		
Privacy Factor Required (dB):	70	Ref: HTM2045
Mechanical Services (NR):	45	
Intrusive Noise (NR Leq):	50	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		

FIRE

Enclosure:	Fire hazard room, enclose in 30 minutes fire-resisting construction (integrity and insulation).
Automatic Detection:	Smoke

ADB	Room Design Character	G0507

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	G0507	Lobby: gowning (isolation room) Entrance lobby for barrier nursing
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 3 i.e. Impervious, jointless, smooth Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3: Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3:Smooth, imperforate Moisture Resistance (HTM 60): N:Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations Ceiling to be sealed and solid.
Doorsets:	(HTM 58) Two sets of doors: each- 1500mm, one and half leaf, plain flush
Windows:	(HTM 55) N/A
Internal Glazing:	(HTM 57) Clear with privacy control
Hatch:	
Notes:	

ADB	Schedule of Components by Room	G0507

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: G0507 Lobby: gowning (isolation room) Entrance lobby for barrier nursing
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS435	DISPENSER, disposable gloves, set of 3, wall mounted		2
1		1	DIS436	DISPENSER, disposable apron, wall mounted		2
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3

ADB	Room Data Sheet	H0502

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	H0502	Seminar room: 25 persons		
Room Number:			**Revision Date:**	07/04/2009

Activities:	1) Holding seminar. 2) Discussions. 3) Writing notes and/or reports. 4) Viewing x-ray films. 5) Viewing film and/or computer generated images. 6) Using specialised visual aids multi-media equipment. 7) Secure storage of equipment. 8) Hanging coats.			
Personnel:	25 x Persons Intermittent use			
Planning Relationships:				
Space Data:	**Area (m²):**	40.00	**Height (mm):**	2,700
Notes:	One wall to be suitable for projection. Adequate services to be provided to allow projection through/by computer.			

ADB	Room Environmental Data	H0502

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	H0502	Seminar room: 25 persons
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):	25	
Mechanical Ventilation (Supply ac/hr):		Mechanical ventilation to suit heat gain.
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Desk/Table. Areas for VDT's: See CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001. Main or secondary lighting to be dimmable.
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	N	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):		
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	H0502

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	H0502	Seminar room: 25 persons
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 5: Moisture Resistance (HTM 56): N:Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 6 i.e. Soft, impervious, jointless Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5:Imperforate Moisture Resistance (HTM 60): N:Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1000mm, single leaf, vision panel
Windows:	(HTM 55) Clear, solar control, privacy control
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	H0502

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: H0502 Seminar room: 25 persons
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
5		5	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT059	CONNECTION UNIT switched 13amp, flex, indicator light		1
1		1	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT207	SOCKET outlet aerial television, closed circuit, wall mounted		1
1		1	SCR044	SCREEN, projector, ceiling mounted, 1800H 2400W		1
1		1	BOA006	BOARD, marker, whiteboard, dry-wipe, with pen holder, wall mounted, 1200H1800W		2
2		2	BOA013	BOARD, display/notice, wall mounted, 900H 1200W		2
1		1	CLO001	CLOCK battery, wall mounted		2
15		15	HOO024	HOOK, hat and coat, 1		2
1		1	ILL010	ILLUMINATOR, x-ray film, double, wall mounted		2
1		1	PRO026	PROJECTOR, multi-media, ceiling mounted		2
1		1	BOA051	BOARD, flip chart, height adjustable, freestanding		3
26		26	CHA018	CHAIR, upright, with arms, upholstered, stacking		3
1		1	COM031	COMPUTER CPU		3
1		1	COM032	COMPUTER VDT MONITOR		3
1		1	COM033	COMPUTER KEYBOARD		3
1		1	CUP011	CUPBOARD, metal, with 4 pull out galvanised shelves, lockable, 1800H 1000W 500D		3
1		1	PRO023	PROJECTOR, overhead		3
1		1	REC030	RECORDER/VIDEO, playback		3
1		1	STA185	STAND, projector overhead, mobile, 865H 1140W 520D		3
2		2	TAB008	TABLE, 710H 1200W 600D		3
1		1	TRO372	TROLLEY, television/video, with adjustable shelves, 1510H 457W 762D		3
1		1	TVM006	TELEVISION monitor, colour, 585mm		3

ADB	Room Data Sheet	H0999

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	H0999	Classroom: 30 persons		
Room Number:			**Revision Date:**	23/04/2009

Activities:	1) Holding seminar. 2) Students/Participants to make use of books and to take notes. 3) Using specialised visual aids multi-media equipment. 4) Secure storage of equipment.			
Personnel:	Up to 30 x Children Up to 6 staff			
Planning Relationships:				
Space Data:	**Area (m²):**	60.00	**Height (mm):**	2,700

Notes: Fittings and furniture must permit flexible arrangement of seating layout and to be easily alterable.

ADB	Room Environmental Data	H0999

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	H0999	Classroom: 30 persons
Room Number:		**Revision Date:** 23/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):	25	
Mechanical Ventilation (Supply ac/hr):		Mechanical ventilation to suit heat gain.
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Working plane. Areas for VDT's: See CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001. Main or secondary lighting to be dimmable.
Service Illumination Night (Lux):		
Local Illumination (Lux):		Light over board
Colour Rendering Required:	N	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):		
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	H0999

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	H0999	Classroom: 30 persons
Room Number:		**Revision Date:** 23/04/2009

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 6 i.e. Soft, impervious, jointless Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5 i.e. Imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1000mm, single leaf, vision panel, lockable; equipment access
Windows:	(HTM 55) Clear, solar control, privacy control
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	H0999

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: H0999 Classroom: 30 persons
Room Number: **Revision Date:** 23/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	LIG096	LUMINAIRE fluorescent asymmetric distribution, 36watt, 1200mm, ceiling mounted		1
3		3	MSC187	CABINET base, 400mm facing, with 2 shelves, 1 door hinged right, on plinth, o/a height 900, HTM71		1
3		3	MSC188	CABINET base, 400mm facing, with 2 shelves, 1 door hinged left, on plinth, o/a height 900, HTM71		1
3		3	MSC192	CABINET top, 400mm facing, with 1 shelf, 1 door hinged right, wall mounted, HTM71		1
3		3	MSC193	CABINET top, 400mm facing, with 1 shelf, 1 door hinged left, wall mounted, HTM71		1
1		1	MSW016	WORKTOP, for 6x 400mm facing inserts cabinets, 2730W 700D nominal, HTM71		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
6		6	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT059	CONNECTION UNIT switched 13amp, flex, indicator light		1
2		2	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	BOA006	BOARD, marker, whiteboard, dry-wipe, with pen holder, wall mounted, 1200H1800W		2
3		3	BOA013	BOARD, display/notice, wall mounted, 900H 1200W		2
1		1	CLO001	CLOCK battery, wall mounted		2
15		15	HOO022	HOOK, double, wall mounted		2
1		1	PRO026	PROJECTOR, multi-media, ceiling mounted		2
26		26	CHA018	CHAIR, upright, with arms, upholstered, stacking		3
12		12	CHA031	CHAIR, child, upright, stacking, seat height 380mm		3
1		1	COM031	COMPUTER CPU		3
1		1	COM032	COMPUTER VDT MONITOR		3
1		1	COM033	COMPUTER KEYBOARD		3
1		1	CUP011	CUPBOARD, metal, with 4 pull out galvanised shelves, lockable, 1800H 1000W 500D		3
1		1	REC030	RECORDER/VIDEO, playback		3
10		10	TAB008	TABLE, 710H 1200W 600D		3
6		6	TAB060	TABLE, child, 470H 1200W 700D		3
1		1	TRO372	TROLLEY, television/video, with adjustable shelves, 1510H 457W 762D		3
1		1	TVM006	TELEVISION monitor, colour, 585mm		3

ADB	Room Data Sheet	K0378

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	K0378	Workshop: renal dialysis equipment Wet, dry area		
Room Number:			**Revision Date:**	08/04/2009

Activities:	1) Maintenance and servicing of equipment. 2) Displaying statutory notices. 3) Testing equipment. 4) Use of visual display terminal(s). 5) Hand washing.			
Personnel:	1 -2 x Persons Intermittent use			
Planning Relationships:				
Space Data:	**Area (m²):**	24.00	**Height (mm):**	2,700

Notes:

Space required to accommodate Renal dialysis machines. Outlet for filtered water with dialysis machine connectors. Outlets drain with 450mm high upstand waste, capped with dialysis machine connectors. A water supply and drainage facilities are required. RCD must be set for 15mA trip Emergency stop button should isolate power supplies to all socket outlets connected via RCD protected circuit at this and any other medical equipment workstation in the same room. Socket outlets, RCD and emergency stop button are mounted on plastic trunking along top rear of workbench.

ADB	Room Environmental Data	K0378

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	K0378	Workshop: renal dialysis equipment Wet, dry area
Room Number:		**Revision Date:** 08/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	20	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Bench, Areas for VDT's: See CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001.
Service Illumination Night (Lux):		
Local Illumination (Lux):	500.0	Workstations/sink
Colour Rendering Required:	Y	
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):		
Mechanical Services (NR):		
Intrusive Noise (NR Leq):		
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	Sign required: 'Caution Very Hot Water' above the sink. Water Max.Temp: Washbasin 41.
Hot Water Max. Temp (DegC):	60	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	K0378

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	K0378	Workshop: renal dialysis equipment Wet, dry area
Room Number:		**Revision Date:** 08/04/2009

Walls:	
Floor:	Surface Finish (HTM 61): 4 i.e. Hard, impervious, jointless, extra slip resistance Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 1 i.e. Smooth, imperforate, jointless Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) N/A
Windows:	(HTM 55) Clear glass, high level
Internal Glazing:	(HTM 57) Clear glass as necessary to allow supervision from office
Hatch:	

Notes:

ADB	Schedule of Components by Room	K0378

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: K0378 Workshop: renal dialysis equipment Wet, dry area
Room Number: **Revision Date:** 08/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS106	BASIN, medium, general pattern, vitreous china, 1 tap right hand hole, no overflow, bottom outlet, 500W 400D. HTM64LBGM		1
2		2	DRA010	DRAINER, stainless steel, 770H 1550W 800D		1
16		16	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
2		2	OUT096	OUTLET earthing point, shrouded, wall mounted		1
4		4	OUT126	SOCKET outlet switched 13amp double, with data protection mains RF filter/suppressor		1
2		2	OUT215	SOCKET outlet telephone, wall mounted		1
2		2	OUT454	OUTLET 7 kPa compressed air surgical, wall/trunking mounted		1
4		4	RES030	RESIDUAL CURRENT DEVICE (RDS), 30amp, S.P.& N, wall mounted		1
4		4	SHE251	SHELF, 2100W 300D		1
2		2	SIN115	KIEL SINK, stainless steel 425mm deep, undershelf 1250x550mm, 750H 1350W 800D		1
2		2	STF200	STORAGE UNIT, mid, shelf, 150H 300W 150D, HTM63		1
4		4	SWC062	EMERGENCY STOP switch button, wall mounted		1
2		2	TAP289	TAP monobloc, pillar mixer, integral thermostatic, short lever, HTM64TP6		1
1		1	TAP359	TAP pillar, high neck, long lever, pair hot and cold, 1/2 in. HTM64TP3		1
1		1	TAP360	*TAP pillar, 0.5in high neck, long lever, cold water connection. HTM64TP3. Replaced by: TAP359, 15/05/06		1
1		1	WAS100	WASTE, unslotted flush-grated, metal, 1.1/4 in. HTM64WT1		1
2		2	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
2		2	WST001	WASTE, recessed grated metal, 38mm with standpipe, overflow		1
4		4	BOA012	BOARD, display/notice, wall mounted, 900H 600W		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS024	DISPENSER, soap, wall mounted		2
4		4	LAB033	BENCH MAGNIFIER, with fluorescent lamp, wall mounted		2
2		2	MNT040	BREAK-TANK, pre-sterilizing, integral filter, wall mounted, 385H 395W 180D		2
2		2	SCR020	SCREEN, dividing, glazed, 1200H 800W		2
2		2	VIC001	VICE, bench mounted type, 250H 200W 400D		2
2		2	COM032	COMPUTER VDT MONITOR		3
2		2	COM033	COMPUTER KEYBOARD		3
4		4	CUP356	CUPBOARD, 1 adjustable shelf, lockable, on castors, 615H 610W 610D		3
2		2	HOL004	HOLDER, sack, with lid foot operated, small, freestanding		3
4		4	STO013	STOOL, swivel, with back, 710 height		3

ADB	Schedule of Components by Room	K0378

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: K0378 Workshop: renal dialysis equipment Wet, dry area
Room Number: **Revision Date:** 08/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
4		4	WOR052	WORKBENCH, steel construction, antistatic vinyl worktop with rolled front edge and rear upstand, 900x1800x900		3

ADB	Room Data Sheet	M0228

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	M0228	Office: 6 staff		
Room Number:			**Revision Date:**	09/04/2009

Activities:	1) Administration, clerical duties. 2) Maintaining case records. 3) Using computer workstation(s). 4) Using printer. 5) Displaying information. 6) Using telephone(s).			
Personnel:	Up to 6 staff			
Planning Relationships:				
Space Data:	**Area (m²):**	32.00	**Height (mm):**	2,700

Notes:

ADB	Room Environmental Data	M0228

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	M0228	Office: 6 staff
Room Number:		**Revision Date:** 09/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Desk. Areas for VDT's: See CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001.
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	N	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	Hot Surface: 82 deg.C, unless patients have access.
Hot Water Max. Temp (DegC):		
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	M0228

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	M0228	Office: 6 staff
Room Number:		**Revision Date:** 09/04/2009

Walls:	Surface Finish (HTM 56): 5: Moisture Resistance (HTM 56): N:Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 6 i.e. Soft, impervious, jointless Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5:Imperforate Moisture Resistance (HTM 60): N:Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1000mm, single leaf, vision panel, lockable
Windows:	(HTM 55) Clear glass with solar control, privacy control
Internal Glazing:	(HTM 57) Clear glass viewing/observation panel - where appropriate
Hatch:	
Notes:	

ADB	Schedule of Components by Room	M0228

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: M0228 Office: 6 staff
Room Number: **Revision Date:** 09/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
13		13	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
7		7	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
6		6	OUT215	SOCKET outlet telephone, wall mounted		1
12		12	SHE222	SHELF, 1200W 400D		1
2		2	BOA013	BOARD, display/notice, wall mounted, 900H 1200W		2
1		1	BOA037	BOARD, marker, whiteboard, dry-wipe, with pen holder, wall mounted, 900H 1200W		2
1		1	CLO001	CLOCK battery, wall mounted		2
6		6	HOO024	HOOK, hat and coat, 1		2
3		3	CAB025	CABINET, filing, 4 drawer, 1320H 465W 620D		3
2		2	CHA017	CHAIR, upright, upholstered, stacking		3
6		6	CHA063	CHAIR, height adjustable, with arms, high back, swivel, 5 star base, on castors		3
2		2	COM031	COMPUTER CPU		3
2		2	COM032	COMPUTER VDT MONITOR		3
2		2	COM033	COMPUTER KEYBOARD		3
1		1	COM038	COMPUTER PRINTER, laser, A4, 250H 380W 385D		3
1		1	CUP011	CUPBOARD, metal, with 4 pull out galvanised shelves, lockable, 1800H 1000W 500D		3
6		6	DES022	DESK, cantilever, single pedestal 3 drawer, cable management, modesty panel, 1600W 800D		3
6		6	DES027	DESK UNIT, cantilever, cable management, adjustable legs, modesty panel, 1600W 800D		3
6		6	DES028	DESK RETURN UNIT, cantilever, cable management, adjustable legs, modesty panel, freestanding, 1200W 600D		3
2		2	DRA056	DRAWER UNIT, 2 drawer, lockable, on castors, 600H 410W 600D		3
1		1	TAB179	TABLE, 720H 900W 600D		3

ADB	Room Data Sheet	M0304

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	M0304	Office: medical reporting, 1 staff		
Room Number:			**Revision Date:**	23/04/2009

Activities:	1) Deskwork for 1 person. 2) Using computer workstation(s). 3) Using printer. 4) Discussions and interviews. 5) Holding files, books and documents. 6) Communicating within department and outside hospital (telephone). 7) Using telephone(s). 8) Dictating centrally or locally. 9) Assessing x-ray images.			
Personnel:	1 x Staff 3 x Others			
Planning Relationships:	Associated with other administrative facilities. Close to theatres			
Space Data:	**Area (m²):**	10.50	**Height (mm):**	2,400
Notes:	Key cupboard - applies only to offices whose occupant has keyholder responsibility for an establishment.			

ADB	Room Environmental Data	M0304

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	M0304	Office: medical reporting, 1 staff
Room Number:		**Revision Date:** 23/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Desk. Areas for VDT's: See CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001.
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	Y	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	Hot Surface: 82 deg.C, unless patients have access.
Hot Water Max. Temp (DegC):		
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	M0304

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	M0304	Office: medical reporting, 1 staff
Room Number:		**Revision Date:** 23/04/2009

Walls:	Surface Finish (HTM 56): 5: Moisture Resistance (HTM 56): N:Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 6 i.e. Soft, impervious, jointless Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5: Imperforate Moisture Resistance (HTM 60): N: Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1000mm, single leaf, plain flush, lockable
Windows:	(HTM 55) Clear, solar control, privacy control
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	M0304

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: M0304 Office: medical reporting, 1 staff
Room Number: **Revision Date:** 23/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
3		3	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT059	CONNECTION UNIT switched 13amp, flex, indicator light		1
2		2	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
2		2	OUT215	SOCKET outlet telephone, wall mounted		1
3		3	SHE221	SHELF, 1200W 300D		1
1		1	BOA013	BOARD, display/notice, wall mounted, 900H 1200W		2
1		1	CLO001	CLOCK battery, wall mounted		2
1		1	CUP332	CUPBOARD, key, 30 hooks, lockable, wall mounted, 305H 230W 70D		2
3		3	HOO024	HOOK, hat and coat, 1		2
1		1	ILL010	ILLUMINATOR, x-ray film, double, wall mounted		2
1		1	CAB049	CABINET, lateral filing, 6 rails, 2 door, 1970H 1000W 470D		3
1		1	CHA006	CHAIR, easy, with open arms, low back, upholstered		3
2		2	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	CHA063	CHAIR, height adjustable, with arms, high back, swivel, 5 star base, on castors		3
1		1	COM031	COMPUTER CPU		3
1		1	COM032	COMPUTER VDT MONITOR		3
1		1	COM033	COMPUTER KEYBOARD		3
1		1	COM038	COMPUTER PRINTER, laser, A4, 250H 380W 385D		3
1		1	DES027	DESK UNIT, cantilever, cable management, adjustable legs, modesty panel, 1600W 800D		3
1		1	DES028	DESK RETURN UNIT, cantilever, cable management, adjustable legs, modesty panel, freestanding, 1200W 600D		3
1		1	DRA056	DRAWER UNIT, 2 drawer, lockable, on castors, 600H 410W 600D		3

ADB	Room Data Sheet	M0713

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	M0713	Interview/meeting room: 6 persons Emergency call lamp
Room Number:		**Revision Date:** 05/05/2009

Activities:	1) Interviewing. 2) Holding meeting formal and/or informal. 3) Displaying information.			
Personnel:	3 x Staff 3 x Others			
Planning Relationships:	Close to ward areas			
Space Data:	**Area (m²):**	14.00	**Height (mm):**	2,400

Notes: Emergency call system operated from communication base.

ADB	Room Environmental Data	M0713

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	M0713	Interview/meeting room: 6 persons Emergency call lamp
Room Number:		**Revision Date:** 05/05/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Desk
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	Y	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):		
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	M0713

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	M0713	Interview/meeting room: 6 persons Emergency call lamp
Room Number:		**Revision Date:** 05/05/2009

Walls:	Surface Finish (HTM 56): 5: Moisture Resistance (HTM 56): N:Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3: Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5: Imperforate Moisture Resistance (HTM 60): N: Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1000mm, single leaf, vision panel, lockable
Windows:	(HTM 55) Clear, solar control, privacy control
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	In HBN23 HACh & YP, door hinge protectors are required.

ADB	Schedule of Components by Room	M0713

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: M0713 Interview/meeting room: 6 persons Emergency call lamp
Room Number: **Revision Date:** 05/05/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	CAL017	LAMP repeat and buzzer with attenuating switch patient/staff call, wall mounted, (red)		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
2		2	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
1		1	BOA022	BOARD, display/notice, magnetic, wall mounted, 900H 600W		2
5		5	CHA018	CHAIR, upright, with arms, upholstered, stacking		3
1		1	TAB047	TABLE, committee, 710H 2400W 820D		3

ADB	Room Data Sheet	M1013

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	M1013	Workstations: 6 staff		
Room Number:			**Revision Date:**	22/04/2009

Activities:	1) Deskwork for 6 persons. 2) Using computer workstation(s). 3) Using printer. 4) Using telephone(s). 5) Filing. 6) Holding working supply of stationery and office accessories. 7) Security for personal items.			
Personnel:	6 x Persons			
Planning Relationships:				
Space Data:	**Area (m²):**	24.00	**Height (mm):**	2,700
Notes:	Suitable to use for IT resource also provide facilities for self- education and study.			

ADB	Room Environmental Data	M1013

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	M1013	Workstations: 6 staff
Room Number:		**Revision Date:** 22/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Desk. Areas for VDT's See: CIBSE lighting Guide LG3 "The Visual Environment For Display Screen Use" Addendum 2001.
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	N	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	Hot Surface: 82 deg.C, unless patients have access.
Hot Water Max. Temp (DegC):		
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	M1013

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	M1013	Workstations: 6 staff
Room Number:		**Revision Date:** 22/04/2009

Walls:	Surface Finish (HTM 56): 5: Moisture Resistance (HTM 56): N:Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 6 i.e. Soft, impervious, jointless Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5: Imperforate Moisture Resistance (HTM 60): N: Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1000mm, single leaf, vision panel, lockable
Windows:	(HTM 55) Clear, solar control, privacy control
Internal Glazing:	(HTM 57) Clear glass - where appropriate
Hatch:	
Notes:	

ADB	Schedule of Components by Room	M1013

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: M1013 Workstations: 6 staff
Room Number: **Revision Date:** 22/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	WKT900	Worktop, cantilevered, length to suit		
2		2	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
13		13	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
7		7	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
3		3	OUT215	SOCKET outlet telephone, wall mounted		1
12		12	SHE211	SHELF, 900W 300D		1
3		3	BOA013	BOARD, display/notice, wall mounted, 900H 1200W		2
3		3	BOA037	BOARD, marker, whiteboard, dry-wipe, with pen holder, wall mounted, 900H 1200W		2
1		1	CLO004	CLOCK battery with second sweep hand, wall mounted		2
2		2	CAB025	CABINET, filing, 4 drawer, 1320H 465W 620D		3
6		6	CHA063	CHAIR, height adjustable, with arms, high back, swivel, 5 star base, on castors		3
6		6	COM031	COMPUTER CPU		3
6		6	COM032	COMPUTER VDT MONITOR		3
6		6	COM033	COMPUTER KEYBOARD		3
1		1	COM038	COMPUTER PRINTER, laser, A4, 250H 380W 385D		3

ADB	Room Data Sheet	N0106

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	N0106	Operating theatre: general Modified, room layout in preparation
Room Number:		**Revision Date:** 15/09/2005

Activities:	1) Patient transferred to operating table. 2) Positioning patient on operating table. 3) Connecting patient to anaesthetic machine. 4) Assembling and connecting mobile equipment. 5) Use of surgical instruments on instrument trolley. 6) Surgical procedures under local or general anaesthetic. 7) Viewing film and/or computer generated images. 8) Checking, weighing and recording used swabs. 9) Displaying operating lists. 10) Recording patient data/notes. 11) Transfer patient from operating table to bed/trolley.			
Personnel:	1 x Patient 7 x Staff			
Planning Relationships:	Adjacent to preparation room. Adjacent to anaesthesia room. Adjacent to scrub-up room. Adjacent to utility room. Direct access to corridor/exit bay.			
Space Data:	**Area (m²):**	55.00	**Height (mm):**	3,000

Notes:

"IN USE" sign sited outside the doorway of the room. When laser surgery and X-rays are being undertaken, safety precautions should be employed, including the provision of the warning lights should be located in the corridor above the theatre doors which will be activated prior to laser surgery or X-rays being undertaken. Theatre control panel should be fully recessed and ideally should be accessible for maintenance from outside the theatre. Anaesthetic machine may be located on a dedicated medical supply unit - project team option. Patients hoist is required; type of hoist - project team option. Trolley, dressing/instrument size - project team option. DVT prophylaxis system maybe located on medical supply unit. In addition a CO2 outlet may be provided where there is specific need. All operating lamps should be fitted with provision for a video camera. Connection to the UPS/IPS systems where risk considerations in terms of patient safety dictate. Patient Administration System (PAS) networked to hospital mainframe. Wireways for CCTV to be installed with links to the seminar room and the hospital system as required. Low level background music - project team option.

ADB	Room Environmental Data	N0106

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	N0106	Operating theatre: general Modified, room layout in preparation
Room Number:		**Revision Date:** 15/09/2005

AIR	Requirements	Notes
Winter Temperature (DegC):	22	Summer and winter temperature control 15 to 25 degC.
Summer Temperature (DegC):	20	
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:	+ve	Humidity: 40 - 60 %RH.
Filtration (%DSE and % Arrestance):	30/	
Humidity (%RH):	60	
General Notes:		
LIGHTING		
Service Illumination (Lux):	400	Floor
Service Illumination Night (Lux):		
Local Illumination (Lux):	50,000.0	Minimum Operating cavity
Colour Rendering Required:	Y	
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):		
Hot Water Max. Temp (DegC):		
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		

ADB	Room Design Character	N0106

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	N0106	Operating theatre: general Modified, room layout in preparation
Room Number:		**Revision Date:** 15/09/2005

Walls:	Surface Finish (HTM 56): 1 i.e. Impervious, jointless, smooth Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 1 i.e. Hard, impervious, jointless, smooth, antistatic Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 1 i.e. Smooth, imperforate, jointless Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Four sets of doors: 2x 1900mm, double equal leaves, vision panel, obscurable, self closing delayed action, lockable; bed access. 2x 1000mm, single leaf, vision panel, lockable.
Windows:	(HTM 55) N/A or Obscured, solar control For laser or urology surgery see HBN26v2.
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	Doorsets fire resisting or X-ray resisting Ref: HTM81, HTM57-60, subject to trust decision. All doors should have laser-proof blinds.

ADB	Schedule of Components by Room	N0106

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: N0106 Operating theatre: general Modified, room layout in preparation
Room Number: **Revision Date:** 15/09/2005

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	LIG031	LUMINAIRE, operating theatre, table with satellite, shadowless, lux 140000 and lux 110000		1
1		1	LIG072	ILLUMINATED SIGN "LASER IN USE"		1
1		1	LIG073	ILLUMINATED SIGN "IN USE"		1
1		1	LIG074	ILLUMINATED SIGN "DO NOT ENTER"		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
8		8	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT052	CONNECTION UNIT switched 13amp, wall/trunking mounted		1
4		4	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
1		1	PAN053	PANEL operating theatre, to meet the theatre requirements		1
1		1	PEN006	PENDANT SURGICAL, medical and power supply unit, tandem, lateral and vertical movement, ceiling mounted, outlets comprising: 6x socket outlet 13amp double 1x outlet oxygen medical 1x outlet nitrous oxide medical 1x compressed air medical, (4 bar) 1x compressed air surgical, (7 bar) 2x outlet vacuum medical 1x AGS medical		1
1		1	PEN013	PENDANT ANAESTHETIC, medical and power supply unit, tandem, lateral and vertical movement, ceiling mounted, outlets comprising: 6x socket outlets 13amp double 1x outlet oxygen medical 1x outlet nitrous oxide medical 1x compressed air medical, (4 bar) 1x compressed air surgical, (7 bar) 2x outlet vacuum medical 1x AGS medical		1
2		2	SUC002	SUCTION UNIT, pipeline, high pressure, theatre		1
1		1	WKT144	WORKTOP, cantilevered from wall, 1200W 650D, HTM63		1
2		2	BOA034	BOARD, marker, whiteboard, dry-wipe, with pen holder, wall mounted, 600H 900W		2
1		1	ANA004	ANAESTHETIC MACHINE/WORKSTATION with ventilator, with accessories, mobile, 1580H 565W 695D		3
1		1	CAB052	CABINET, slide storage, 14 drawer, capacity 6000 slides, 140H 480W 480D		3
1		1	CHA024	CHAIR, anaesthetist, height adjustable		3
1		1	COM032	COMPUTER VDT MONITOR		3
1		1	COM033	COMPUTER KEYBOARD		3
1		1	CRY001	CRYOSURGICAL UNIT, with trolley		3
1		1	DIA004	DIATHERMY UNIT, surgical, monopolar, bipolar, argon compatible, 111H 356W 439D		3
1		1	DIA005	SMOKE EVACUATION SYSTEM, (diathermy) complete with trolley, 860H 487W 643D		3
2		2	INF002	INFUSION volumetric pump, 188H 110W 60D		3
2		2	KIC001	KICKABOUT, bowl stand, stainless steel, 360mm dia.		3

ADB	Schedule of Components by Room	N0106

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: N0106 Operating theatre: general Modified, room layout in preparation
Room Number: **Revision Date:** 15/09/2005

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	MIC029	MICROSCOPE, surgical, floor standing, 1700H 875W 1880D		3
1		1	MON042	MONITOR sedation depth, 169H 175W 100D		3
1		1	MON053	MONITOR, multi parameter with gas monitoring, 102H 368W 368D		3
2		2	PLA002	PLATFORM, step-stand, stackable, portable, 130H 480W 330D		3
1		1	SCA012	SCALE, swab, includes Mains adaptor		3
4		4	STA101	STAND, lotion bowl, single, stainless steel, (Bowls not included)		3
1		1	STA102	STAND, 2 lotion bowls, stainless steel, (Bowls not included).		3
1		1	STA142	STAND, infusion, twin hook, breaks, mobile		3
2		2	STO006	STOOL, surgeon/anaesthetist, height adjustable, includes anti-static seat pads		3
1		1	SUR008	LASER HOLMIUM/YAG, dual wavelength, multi-use, power 230V, 990H 480W 910D		3
1		1	SUR015	SCALPEL, ultrasonic system, with generator, optional hand activation, cart mounted		3
3		3	SYR002	SYRINGE pump, battery operated, 366H 127W 80D		3
1		1	TAB071	TABLE operating patient, powered with 250mm transverse top, complete with specialty accessories, 715H 600W 2102D		3
1		1	TRF002	AUTOTRANSFUSION cell separator, mobile, built in air and foam detector, 1620H 270W 585D		3
3		3	TRO131	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 450W 450D		3
2		2	TRO133	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 750W 450D		3
1		1	TRO201	TROLLEY, instruments, stainless steel, buffered, 870H 920W 620D		3
1		1	TRO204	TROLLEY instrument tray MAYO, 700W 400D		3
1		1	WAR053	WARMER, blood/fluid, maintains temperature between 36 and 43 deg.C at flow rates up to 500 ml/min, 35H 235W 273D		3
1		1	WAR058	WARMING UNIT patient, forced air warming therapy, mobile, 330H 250W 280D		3

ADB	Room Data Sheet	N0111

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	N0111	Operating theatre with ultra clean ventilation canopy (UCV) Interventional
Room Number:		**Revision Date:** 23/04/2009

Activities:	1) Patient transferred to operating table. 2) Positioning patient on operating table. 3) Connecting patient to anaesthetic machine. 4) Assembling and connecting mobile equipment. 5) Use of surgical instruments on instrument trolley. 6) Surgical procedures under local or general anaesthetic. 7) Viewing film and/or computer generated images. 8) Checking, weighing and recording used swabs. 9) Displaying operating lists. 10) Recording patient data/notes. 11) Transfer patient from operating table to bed/trolley.			
Personnel:	1 x Patient 7 - 9 Staff			
Planning Relationships:	Adjacent to preparation room. Adjacent to anaesthesia room. Adjacent to scrub-up room. Adjacent to utility room. Direct access to corridor/exit bay.			
Space Data:	**Area (m²):**	65.00	**Height (mm):**	3,000
Notes:	"IN USE" sign sited outside the doorway of the room. When laser surgery and X-rays are being undertaken, safety precautions in accordance with BS EN60825 should be employed, including the provision of the warning lights should be located in the corridor above the theatre doors which will be activated prior to laser surgery or X-rays being undertaken. Canopy to be provided with air diffuser ceiling and general lighting luminaires to manufacturers design/specification. Theatre control panel: Front or rear access - project team option. Trolley, dressing/instrument size - project team option. Wireways for CCTV to be installed with links to the Seminar Room & the hospital system as required. Demountable side screens, 1000mm clear from floor level.			

ADB	Room Environmental Data	N0111

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	N0111	Operating theatre with ultra clean ventilation canopy (UCV) Interventional
Room Number:		**Revision Date:** 23/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	22	Summer and winter temperature control 15 to 25 degC.
Summer Temperature (DegC):	20	
Mechanical Ventilation (Supply ac/hr):		Mechanical ventilation (supply): Designed to Operating Theatre ventilation systems (UCV).
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:	+ve	Filtration: Sodium flame test Eurovent 4/4 Humidity: 40 - 60 %RH. Refer to HBN26
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):	60	
General Notes:		
LIGHTING		
Service Illumination (Lux):	400	Floor
Service Illumination Night (Lux):		
Local Illumination (Lux):	500,000.(	Minimum operating cavity
Colour Rendering Required:	Y	
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):		
Hot Water Max. Temp (DegC):		
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	N0111

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	N0111	Operating theatre with ultra clean ventilation canopy (UCV) Interventional
Room Number:		**Revision Date:** 23/04/2009

Walls:	Surface Finish (HTM 56): 1: Impervious, jointless, smooth Moisture Resistance (HTM 56): N: Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 1 i.e. Hard, impervious, jointless, smooth, antistatic Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 1: Smooth, imperforate, jointless Moisture Resistance (HTM 60): N: Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Three sets of doors: 2x 1900mm, double equal leaves, vision panel, obscurable, self closing delayed action, lockable; bed access. 1 x 1000mm, single leaf, vision panel, lockable.
Windows:	(HTM 55) Obscured, solar control
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	Doorsets fire resisting or X-ray resisting Ref: HTM81, HTM57-60, subject to trust decision.

ADB	Schedule of Components by Room	N0111

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: N0111 Operating theatre with ultra clean ventilation canopy (UCV) Interventional
Room Number: **Revision Date:** 23/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	CAN010	CANOPY ultra clean ventilation (UCV), operating theatre, 2000mm clear from floor level underside, 3200W 3200D		1
1		1	LIG031	LUMINAIRE, operating theatre, table with satellite, shadowless, lux 140000 and lux 110000		1
1		1	LIG072	ILLUMINATED SIGN "LASER IN USE"		1
1		1	LIG073	ILLUMINATED SIGN "IN USE"		1
1		1	LIG074	ILLUMINATED SIGN "DO NOT ENTER"		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
8		8	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
4		4	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
1		1	PAN053	PANEL operating theatre, to meet the theatre requirements		1
1		1	PEN006	PENDANT SURGICAL, medical and power supply unit, tandem, lateral and vertical movement, ceiling mounted, outlets comprising: 6x socket outlet 13amp double 1x outlet oxygen medical 1x outlet nitrous oxide medical 1x compressed air medical, (4 bar) 1x compressed air surgical, (7 bar) 2x outlet vacuum medical 1x AGS medical		1
1		1	PEN013	PENDANT ANAESTHETIC, medical and power supply unit, tandem, lateral and vertical movement, ceiling mounted, outlets comprising: 6x socket outlets 13amp double 1x outlet oxygen medical 1x outlet nitrous oxide medical 1x compressed air medical, (4 bar) 1x compressed air surgical, (7 bar) 2x outlet vacuum medical 1x AGS medical		1
1		1	STF206	STORAGE UNIT, mid, writing shelf, fixed, 200H 600W 400D, HTM63		1
2		2	SUC002	SUCTION UNIT, pipeline, high pressure, theatre		1
1		1	WKT144	WORKTOP, cantilevered from wall, 1200W 650D, HTM63		1
1		1	BOA034	BOARD, marker, whiteboard, dry-wipe, with pen holder, wall mounted, 600H 900W		2
1		1	DIS435	DISPENSER, disposable gloves, set of 3, wall mounted		2
1		1	IMG021	IMAGE INTENSIFIER UNIT, C-arm, mobile		2
1		1	IMG023	IMAGE INTENSIFIER, monitor, (Part of IMG021)		2
1		1	IMG024	IMAGE INTENSIFIER, monitor trolley, (Part of IMG021)		2
1		1	ANA004	ANAESTHETIC MACHINE/WORKSTATION with ventilator, with accessories, mobile, 1580H 565W 695D		3
1		1	CHA024	CHAIR, anaesthetist, height adjustable		3
1		1	COM032	COMPUTER VDT MONITOR		3
1		1	COM033	COMPUTER KEYBOARD		3
1		1	CRD011	MACHINE HEART-LUNG BYPASS (perfusion)		3

ADB	Schedule of Components by Room	N0111

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: N0111 Operating theatre with ultra clean ventilation canopy (UCV) Interventional
Room Number: **Revision Date:** 23/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	CRD016	ECHOCARDIOGRAPHY MACHINE		3
1		1	DIA003	DIATHERMY APPARATUS, surgical, monopolar and bipolar operation, portable, 190H 400W 330D		3
1		1	HOL014	HOLDER, sack, with lid foot operated, large, capacity 120 litres, mobile		3
2		2	INF002	INFUSION volumetric pump, 188H 110W 60D		3
2		2	KIC001	KICKABOUT, bowl stand, stainless steel, 360mm dia.		3
1		1	MIC029	MICROSCOPE, surgical, floor standing, 1700H 875W 1880D		3
1		1	MON053	MONITOR, multi parameter with gas monitoring, 102H 368W 368D		3
2		2	PLA002	PLATFORM, step-stand, stackable, portable, 130H 480W 330D		3
1		1	SCA012	SCALE, swab, includes Mains adaptor		3
4		4	STA101	STAND, lotion bowl, single, stainless steel, (Bowls not included)		3
1		1	STA102	STAND, 2 lotion bowls, stainless steel, (Bowls not included).		3
1		1	STA142	STAND, infusion, twin hook, breaks, mobile		3
2		2	STO006	STOOL, surgeon/anaesthetist, height adjustable, includes anti-static seat pads		3
1		1	TAB071	TABLE operating patient, powered with 250mm transverse top, complete with specialty accessories, 715H 600W 2102D		3
3		3	TRO131	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 450W 450D		3
2		2	TRO133	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 750W 450D		3
1		1	TRO201	TROLLEY, instruments, stainless steel, buffered, 870H 920W 620D		3
1		1	TRO204	TROLLEY instrument tray MAYO, 700W 400D		3

ADB	Room Data Sheet	N0111A

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	N0111A	Cardiac Cathater Operating Theatre Lab		
Room Number:			**Revision Date:**	23/04/2009

Activities:	1) Patient transferred to operating table. 2) Positioning patient on operating table. 3) Connecting patient to anaesthetic machine. 4) Assembling and connecting mobile equipment. 5) Use of surgical instruments on instrument trolley. 6) Surgical procedures under local or general anaesthetic. 7) Viewing film and/or computer generated images. 8) Checking, weighing and recording used swabs. 9) Displaying operating lists. 10) Recording patient data/notes. 11) Transfer patient from operating table to bed/trolley.			
Personnel:	1 x Patient 7 - 9 Staff			
Planning Relationships:	Adjacent to preparation room. Adjacent to anaesthesia room. Adjacent to scrub-up room. Adjacent to utility room. Direct access to corridor/exit bay.			
Space Data:	**Area (m²):**	75.00	**Height (mm):**	3,000

Notes:

"IN USE" sign sited outside the doorway of the room. When laser surgery and X-rays are being undertaken, safety precautions in accordance with BS EN60825 should be employed, including the provision of the warning lights should be located in the corridor above the theatre doors which will be activated prior to laser surgery or X-rays being undertaken. Canopy to be provided with air diffuser ceiling and general lighting luminaires to manufacturers design/specification. Theatre control panel: Front or rear access - project team option. Trolley, dressing/instrument size - project team option. Wireways for CCTV to be installed with links to the Seminar Room & the hospital system as required. Demountable side screens, 1000mm clear from floor level.

ADB	Room Environmental Data	N0111A

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	N0111A	Cardiac Cathater Operating Theatre Lab
Room Number:		**Revision Date:** 23/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	22	Summer and winter temperature control 15 to 25 degC.
Summer Temperature (DegC):	20	
Mechanical Ventilation (Supply ac/hr):		Mechanical ventilation (supply): Designed to Operating Theatre ventilation systems (UCV).
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:	+ve	Filtration: Sodium flame test Eurovent 4/4 Humidity: 40 - 60 %RH. Refer to HBN26
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):	60	
General Notes:		
LIGHTING		
Service Illumination (Lux):	400	Floor
Service Illumination Night (Lux):		
Local Illumination (Lux):	500,000.(	Minimum operating cavity
Colour Rendering Required:	Y	
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):		
Hot Water Max. Temp (DegC):		
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	N0111A

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	N0111A	Cardiac Cathater Operating Theatre Lab
Room Number:		**Revision Date:** 23/04/2009

Walls:	Surface Finish (HTM 56): 1: Impervious, jointless, smooth Moisture Resistance (HTM 56): N: Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 1 i.e. Hard, impervious, jointless, smooth, antistatic Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 1: Smooth, imperforate, jointless Moisture Resistance (HTM 60): N: Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Three sets of doors: 2x 1900mm, double equal leaves, vision panel, obscurable, self closing delayed action, lockable; bed access. 1 x 1000mm, single leaf, vision panel, lockable.
Windows:	(HTM 55) Obscured, solar control
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	Doorsets fire resisting or X-ray resisting Ref: HTM81, HTM57-60, subject to trust decision.

ADB	Schedule of Components by Room	N0111A

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: N0111A Cardiac Cathater Operating Theatre Lab
Room Number: **Revision Date:** 23/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	CAN010	CANOPY ultra clean ventilation (UCV), operating theatre, 2000mm clear from floor level underside, 3200W 3200D		1
1		1	LIG031	LUMINAIRE, operating theatre, table with satellite, shadowless, lux 140000 and lux 110000		1
1		1	LIG072	ILLUMINATED SIGN "LASER IN USE"		1
1		1	LIG073	ILLUMINATED SIGN "IN USE"		1
1		1	LIG074	ILLUMINATED SIGN "DO NOT ENTER"		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
10		10	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
5		5	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
1		1	PAN053	PANEL operating theatre, to meet the theatre requirements		1
1		1	PEN006	PENDANT SURGICAL, medical and power supply unit, tandem, lateral and vertical movement, ceiling mounted, outlets comprising: 6x socket outlet 13amp double 1x outlet oxygen medical 1x outlet nitrous oxide medical 1x compressed air medical, (4 bar) 1x compressed air surgical, (7 bar) 2x outlet vacuum medical 1x AGS medical		1
1		1	PEN013	PENDANT ANAESTHETIC, medical and power supply unit, tandem, lateral and vertical movement, ceiling mounted, outlets comprising: 6x socket outlets 13amp double 1x outlet oxygen medical 1x outlet nitrous oxide medical 1x compressed air medical, (4 bar) 1x compressed air surgical, (7 bar) 2x outlet vacuum medical 1x AGS medical		1
1		1	STF206	STORAGE UNIT, mid, writing shelf, fixed, 200H 600W 400D, HTM63		1
2		2	SUC002	SUCTION UNIT, pipeline, high pressure, theatre		1
1		1	WKT144	WORKTOP, cantilevered from wall, 1200W 650D, HTM63		1
1		1	BOA034	BOARD, marker, whiteboard, dry-wipe, with pen holder, wall mounted, 600H 900W		2
1		1	DIS435	DISPENSER, disposable gloves, set of 3, wall mounted		2
1		1	IMG021	IMAGE INTENSIFIER UNIT, C-arm, mobile		2
1		1	IMG023	IMAGE INTENSIFIER, monitor, (Part of IMG021)		2
1		1	IMG024	IMAGE INTENSIFIER, monitor trolley, (Part of IMG021)		2
1		1	ANA004	ANAESTHETIC MACHINE/WORKSTATION with ventilator, with accessories, mobile, 1580H 565W 695D		3
1		1	CHA024	CHAIR, anaesthetist, height adjustable		3
2		2	COM032	COMPUTER VDT MONITOR		3
2		2	COM033	COMPUTER KEYBOARD		3
1		1	CRD011	MACHINE HEART-LUNG BYPASS (perfusion)		3

ADB	Schedule of Components by Room	N0111A

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: N0111A Cardiac Cathater Operating Theatre Lab
Room Number: **Revision Date:** 23/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	CRD016	ECHOCARDIOGRAPHY MACHINE		3
1		1	DIA003	DIATHERMY APPARATUS, surgical, monopolar and bipolar operation, portable, 190H 400W 330D		3
1		1	HOL014	HOLDER, sack, with lid foot operated, large, capacity 120 litres, mobile		3
2		2	INF002	INFUSION volumetric pump, 188H 110W 60D		3
2		2	KIC001	KICKABOUT, bowl stand, stainless steel, 360mm dia.		3
1		1	MIC029	MICROSCOPE, surgical, floor standing, 1700H 875W 1880D		3
1		1	MON053	MONITOR, multi parameter with gas monitoring, 102H 368W 368D		3
2		2	PLA002	PLATFORM, step-stand, stackable, portable, 130H 480W 330D		3
1		1	SCA012	SCALE, swab, includes Mains adaptor		3
4		4	STA101	STAND, lotion bowl, single, stainless steel, (Bowls not included)		3
1		1	STA102	STAND, 2 lotion bowls, stainless steel, (Bowls not included).		3
1		1	STA142	STAND, infusion, twin hook, breaks, mobile		3
2		2	STO006	STOOL, surgeon/anaesthetist, height adjustable, includes anti-static seat pads		3
1		1	TAB071	TABLE operating patient, powered with 250mm transverse top, complete with specialty accessories, 715H 600W 2102D		3
3		3	TRO131	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 450W 450D		3
2		2	TRO133	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 750W 450D		3
1		1	TRO201	TROLLEY, instruments, stainless steel, buffered, 870H 920W 620D		3
1		1	TRO204	TROLLEY instrument tray MAYO, 700W 400D		3

ADB	Room Data Sheet	N0216

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	N0216	Scrub-up and gowning room: 3 places
Room Number:		**Revision Date:** 07/04/2009

Activities:	1) Staff to don protective apron and face mask prior to scrubbing. 2) Staff to scrub up within sight of clock. 3) Donning sterile gowns and gloves, from a trolley, assisted by a circulating nurse. 4) Dispensing disposable aprons. 5) Holding sterile gown packs for one surgical session with a stock of glove packs and masks. 6) Disposal of pack wrappers and paper towels. 7) Displaying operating lists.			
Personnel:	Up to 4 staff			
Planning Relationships:	Between corridor & theatre. Observation panel to associated Theatre.			
Space Data:	**Area (m²):**	11.00	**Height (mm):**	2,700

Notes:

ADB	Room Environmental Data	N0216

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	N0216	Scrub-up and gowning room: 3 places
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):	6.0	
Mechanical Ventilation (Extract ac/hr):	6.0	
Pressure Relative to Adjoining Space:	BAL	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Work top
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	Y	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	75	Ref: HTM2045
Mechanical Services (NR):	35	
Intrusive Noise (NR Leq):	40	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	N0216

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	N0216	Scrub-up and gowning room: 3 places
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 1: Impervious, jointless, smooth Moisture Resistance (HTM 56): N: Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 4: Hard, impervious, jointless, extra slip resistance Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 1: Smooth, imperforate, jointless Moisture Resistance (HTM 60): N: Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1000mm, single leaf, vision panel, self closing delayed action; open to theatre
Windows:	(HTM 55) N/A
Internal Glazing:	(HTM 57)
Hatch:	
Notes:	

ADB	Schedule of Components by Room	N0216

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: N0216 Scrub-up and gowning room: 3 places
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	CLO005	CLOCK impulse, wall mounted		1
1		1	OUT002	OUTLET cable, wall/trunking mounted		1
4		4	SHE212	SHELF, 900W 400D		1
3		3	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	TRO603	TROUGH scrub-up, hospital pattern, stainless steel, triple, 75mm upstand, 950H 2400W 450D. HTM64SUH3		1
1		1	WAS102	WASTE, unslotted flush-grated, metal, 1.1/2 in. HTM64WT2		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
2		2	DIS006	DISPENSER, disposable nailbrush, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
2		2	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
2		2	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS435	DISPENSER, disposable gloves, set of 3, wall mounted		2
1		1	DIS436	DISPENSER, disposable apron, wall mounted		2
2		2	HOO019	HOOK, single, small, wall mounted		2
1		1	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	TRO133	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 750W 450D		3
1		1	TRO235	TROLLEY, contaminated linen, single ring, stainless steel		3

ADB	Room Data Sheet	N0305

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	N0305	Anaesthetic room With patient trolley and ceiling hoist
Room Number:		**Revision Date:** 10/08/2007

Activities:	1) Positioning patient on a trolley. 2) Administration of general or local anaesthetic. 3) Holding anaesthetic sundries. 4) Holding controlled and scheduled drugs. 5) Holding sterile supplies. 6) Holding stock of infusion fluids. 7) Refrigerated storage of drugs/medicines. 8) Displaying statutory notices. 9) Displaying operating lists. 10) Recording patient data/notes. 11) Collecting used anaesthetic accessories for reprocessing. 12) Collecting waste materials for disposal. 13) Clinical hand washing.			
Personnel:	1 x Patient 4 x Staff 1 x Relative accompanying child patient			
Planning Relationships:	Adjacent to operating theatre. Anaesthetic rooms can be sited at right-angles to the operating theatres.			
Space Data:	**Area (m²):**	19.00	**Height (mm):**	2,700

Notes: Illuminated sign "IN USE" sited outside the doorway of the room. Lamp indicator repeat call should be sited outside the doorway of the room. A music system should be provided to reduce patient anxiety.

ADB	Room Environmental Data	N0305

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	N0305	Anaesthetic room With patient trolley and ceiling hoist
Room Number:		**Revision Date:** 10/08/2007

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):	23	
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:	+ve	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	400	Working plane
Service Illumination Night (Lux):		
Local Illumination (Lux):	1,000.0	Couch/Trolley
Colour Rendering Required:	Y	Local and service
Standby Lighting Grade:		A & B a local, B service
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	N0305

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	N0305	Anaesthetic room With patient trolley and ceiling hoist
Room Number:		**Revision Date:** 10/08/2007

Walls:	Surface Finish (HTM 56): 1: Impervious, jointless, smooth Moisture Resistance (HTM 56): N: Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 1: Hard, impervious, jointless, smooth, antistatic Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 1: Smooth, imperforate, jointless Moisture Resistance (HTM 60): N: Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Two sets of door: each - 1900mm, double equal leaves, vision panel, obscurable, self closing delayed action; trolley access
Windows:	(HTM 55) N/A
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	N0305

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: N0305 Anaesthetic room With patient trolley and ceiling hoist
Room Number: **Revision Date:** 10/08/2007

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	CAL047	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, trunking mounted		1
1		1	CLO003	CLOCK synchronous with second sweep hand, wall mounted		1
1		1	HOI006	HOIST PATIENT, electric, 24V, track ceiling mounted. (Length of the track to suit the individual needs.)		1
1		1	LIG053	LUMINAIRE examination adjustable, 1000 lux, ceiling mounted		1
1		1	LIG073	ILLUMINATED SIGN "IN USE"		1
1		1	MSC041	CABINET tall, 600mm facing, (600x400 inserts), with formed plastic liners, 1 door hinged right, on plinth, o/a height 2100, HTM71		1
1		1	MSC081	CABINET base, 600mm facing, (600x400 inserts), with formed plastic liners, 1 door hinged right, on plinth, o/a height 900, HTM71		1
2		2	MSC083	CABINET base, 600mm facing, (600x400 inserts), with 6 telescopic runners, 1 door hinged right, on plinth, o/a height 900, HTM71		1
2		2	MSC086	CABINET base, 600mm facing, (600x400 inserts), with 3 telescopic runners, 1 door hinged left, on plinth, o/a height 900 HTM71		1
3		3	MSC197	CABINET top, 600mm facing, with 1 shelf, 1 door hinged right, wall mounted, HTM71		1
1		1	MSC503	PHARMACY CABINET, 600mm facing, with 4 shelves, 1 pull out prep. shelf, controlled drugs cupboard, warning light, 1 door hinged right w/security safe lock, o/a height 1200, HTM71		1
1		1	MSW040	WORKTOP, for 600mm facing inserts cabinets, 3000W 500D nominal, HTM71		1
5		5	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT046	CONNECTION UNIT unswitched 13amp, flex outlet, wall/trunking mounted		1
1		1	OUT049	CONNECTION UNIT switched 13amp, flex outlet, wall/trunking mounted		1
1		1	OUT050	OUTLET to controlled drugs cupboard, wall mounted		1
1		1	OUT056	CONNECTION UNIT unswitched 13amp, wall/trunking mounted		1
2		2	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT452	OUTLET 4 kPa compressed air medical, wall/trunking mounted		1
1		1	OUT463	OUTLET nitrous oxide medical, wall/trunking mounted		1

ADB	Schedule of Components by Room	N0305

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: N0305 Anaesthetic room With patient trolley and ceiling hoist
Room Number: **Revision Date:** 10/08/2007

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	OUT471	OUTLET oxygen medical, wall/trunking mounted		1
1		1	OUT476	OUTLET vacuum medical, wall/trunking mounted		1
1		1	OUT481	OUTLET gas scavenging medical (AGS), trunking mounted		1
1		1	STC002	BEDHEAD SERVICES TRUNKING SYSTEM for medical gases, electrical power, nurse call, 2100mm nominal		1
1		1	SUC001	SUCTION UNIT, pipeline, high/low pressure, rail/wall mounted		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	BOA034	BOARD, marker, whiteboard, dry-wipe, with pen holder, wall mounted, 600H 900W		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	REF091	REFRIGERATOR, drug, capacity 35 litres, external temperature gauge, lockable, wall mounted, 510H 380W 445D		2
1		1	ANA001	ANAESTHETIC MACHINE/WORKSTATION electrically powered piston ventilator, mobile, 1350H 750W 650D		3
2		2	COM031	COMPUTER CPU		3
2		2	COM046	COMPUTER MONITOR, 15" TFT, digital flat panel display, desk top		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	STA142	STAND, infusion, twin hook, breaks, mobile		3
1		1	STO006	STOOL, surgeon/anaesthetist, height adjustable, includes anti-static seat pads		3
2		2	SYR004	SYRINGE pump, anaesthetic use, with diprifusor, 115H 400W 180D		3
1		1	TRO131	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 450W 450D		3
1		1	TRO296	TROLLEY PATIENT, tilting/reclining		3

ADB	Room Data Sheet	N0305A

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	N0305A	Anaesthetic room With patient trolley and ceiling hoist		
Room Number:			**Revision Date:**	07/04/2009

Activities:	1) Positioning patient on a trolley. 2) Administration of general or local anaesthetic. 3) Holding anaesthetic sundries. 4) Holding controlled and scheduled drugs. 5) Holding sterile supplies. 6) Holding stock of infusion fluids. 7) Refrigerated storage of drugs/medicines. 8) Displaying statutory notices. 9) Displaying operating lists. 10) Recording patient data/notes. 11) Collecting used anaesthetic accessories for reprocessing. 12) Collecting waste materials for disposal. 13) Clinical hand washing.			
Personnel:	1 x Patient 4 x Staff 1 x Relative accompanying child patient			
Planning Relationships:	Adjacent to operating theatre. Anaesthetic rooms can be sited at right-angles to the operating theatres.			
Space Data:	**Area (m²):**	19.00	**Height (mm):**	2,700

Notes: Illuminated sign "IN USE" sited outside the doorway of the room. Lamp indicator repeat call should be sited outside the doorway of the room. A music system should be provided to reduce patient anxiety. Serves two theatres.

ADB	Room Environmental Data	N0305A

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	N0305A	Anaesthetic room With patient trolley and ceiling hoist
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):	23	
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:	+ve	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	400	Working plane
Service Illumination Night (Lux):		
Local Illumination (Lux):	1,000.0	Couch/Trolley
Colour Rendering Required:	Y	Local and service
Standby Lighting Grade:		A & B a local, B service
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	N0305A

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	N0305A	Anaesthetic room With patient trolley and ceiling hoist
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 1: Impervious, jointless, smooth Moisture Resistance (HTM 56): N: Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 1: Hard, impervious, jointless, smooth, antistatic Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 1: Smooth, imperforate, jointless Moisture Resistance (HTM 60): N: Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Three sets of door: each - 1900mm, double equal leaves, vision panel, obscurable, self closing delayed action; trolley access
Windows:	(HTM 55) N/A
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	N0305A

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: N0305A Anaesthetic room With patient trolley and ceiling hoist
Room Number: **Revision Date:** 07/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	CAL047	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, trunking mounted		1
1		1	CLO003	CLOCK synchronous with second sweep hand, wall mounted		1
1		1	HOI006	HOIST PATIENT, electric, 24V, track ceiling mounted. (Length of the track to suit the individual needs.)		1
1		1	LIG053	LUMINAIRE examination adjustable, 1000 lux, ceiling mounted		1
1		1	LIG073	ILLUMINATED SIGN "IN USE"		1
1		1	MSC041	CABINET tall, 600mm facing, (600x400 inserts), with formed plastic liners, 1 door hinged right, on plinth, o/a height 2100, HTM71		1
1		1	MSC081	CABINET base, 600mm facing, (600x400 inserts), with formed plastic liners, 1 door hinged right, on plinth, o/a height 900, HTM71		1
2		2	MSC083	CABINET base, 600mm facing, (600x400 inserts), with 6 telescopic runners, 1 door hinged right, on plinth, o/a height 900, HTM71		1
2		2	MSC086	CABINET base, 600mm facing, (600x400 inserts), with 3 telescopic runners, 1 door hinged left, on plinth, o/a height 900 HTM71		1
3		3	MSC197	CABINET top, 600mm facing, with 1 shelf, 1 door hinged right, wall mounted, HTM71		1
1		1	MSC503	PHARMACY CABINET, 600mm facing, with 4 shelves, 1 pull out prep. shelf, controlled drugs cupboard, warning light, 1 door hinged right w/security safe lock, o/a height 1200, HTM71		1
1		1	MSW040	WORKTOP, for 600mm facing inserts cabinets, 3000W 500D nominal, HTM71		1
5		5	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT046	CONNECTION UNIT unswitched 13amp, flex outlet, wall/trunking mounted		1
1		1	OUT049	CONNECTION UNIT switched 13amp, flex outlet, wall/trunking mounted		1
1		1	OUT050	OUTLET to controlled drugs cupboard, wall mounted		1
1		1	OUT056	CONNECTION UNIT unswitched 13amp, wall/trunking mounted		1
2		2	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT452	OUTLET 4 kPa compressed air medical, wall/trunking mounted		1
1		1	OUT463	OUTLET nitrous oxide medical, wall/trunking mounted		1

ADB	Schedule of Components by Room	N0305A

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: N0305A Anaesthetic room With patient trolley and ceiling hoist
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	OUT471	OUTLET oxygen medical, wall/trunking mounted		1
1		1	OUT476	OUTLET vacuum medical, wall/trunking mounted		1
1		1	OUT481	OUTLET gas scavenging medical (AGS), trunking mounted		1
1		1	STC002	BEDHEAD SERVICES TRUNKING SYSTEM for medical gases, electrical power, nurse call, 2100mm nominal		1
1		1	SUC001	SUCTION UNIT, pipeline, high/low pressure, rail/wall mounted		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	BOA034	BOARD, marker, whiteboard, dry-wipe, with pen holder, wall mounted, 600H 900W		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	REF091	REFRIGERATOR, drug, capacity 35 litres, external temperature gauge, lockable, wall mounted, 510H 380W 445D		2
1		1	ANA001	ANAESTHETIC MACHINE/WORKSTATION electrically powered piston ventilator, mobile, 1350H 750W 650D		3
2		2	COM031	COMPUTER CPU		3
2		2	COM046	COMPUTER MONITOR, 15" TFT, digital flat panel display, desk top		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	STA142	STAND, infusion, twin hook, breaks, mobile		3
1		1	STO006	STOOL, surgeon/anaesthetist, height adjustable, includes anti-static seat pads		3
2		2	SYR004	SYRINGE pump, anaesthetic use, with diprifusor, 115H 400W 180D		3
1		1	TRO131	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 450W 450D		3
1		1	TRO296	TROLLEY PATIENT, tilting/reclining		3

ADB	Room Data Sheet	Q0124

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	Q0124	Activities of daily living: bathroom With hoists
Room Number:		**Revision Date:** 15/09/2004

Activities:	1) Disabled patient may be ambulant with/without walking aids or in a wheelchair. 2) Undressing, dressing, using domestic bathroom, WC and aids. 3) Using mobile hoist. 4) Patient may require assistance during the activities.			
Personnel:	Intermittent use			
Planning Relationships:	Adjacent to Occupational therapy area.			
Space Data:	**Area (m²):**	13.00	**Height (mm):**	2,700

Notes: Lamp indicator call situated overdoor on outside entrance of the room.

ADB	Room Environmental Data	Q0124

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	Q0124	Activities of daily living: bathroom With hoists
Room Number:		**Revision Date:** 15/09/2004

AIR	Requirements	Notes
Winter Temperature (DegC):	22	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):	10.0	
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:	NEG	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	150	Floor
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	Y	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	70	
Mechanical Services (NR):	45	
Intrusive Noise (NR Leq):	50	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	Hot Water Max.Temp: Bath - 44. Shower - 41. Washbasin - 41.
Hot Water Max. Temp (DegC):	44	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		

ADB	Room Design Character	Q0124

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	Q0124	Activities of daily living: bathroom With hoists
Room Number:		**Revision Date:** 15/09/2004

Walls:	Surface Finish (HTM 56): 4 i.e. Impervious, smooth Moisture Resistance (HTM 56): H i.e. High humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 4 i.e. Hard, impervious, jointless, extra slip resistance Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 2 i.e. Smooth, imperforate Moisture Resistance (HTM 60): H i.e. High humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1000mm, Single leaf, plain flush. Wheelchair access.
Windows:	(HTM 55) Clear glass openable, privacy control.
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	Q0124

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: Q0124 Activities of daily living: bathroom With hoists
Room Number: **Revision Date:** 15/09/2004

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS107	BASIN, medium, general pattern, vitreous china, 2 tap holes, no overflow, bottom outlet, 500W 400D, HTM64LBGM		1
1		1	BAT008	BATH, general pattern, no tap holes, no overflow, no handgrips, 480-500H 1700W 800D. HTM64BAG		1
2		2	CAL005	CEILING PULL CORD patient/staff call		1
1		1	CAL012	RESET UNIT with repeat lamp, patient/staff call		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
2		2	CAL030	LAMP patient reassurance, ceiling mounted		1
1		1	CIS005	CISTERN WC, concealed, reversible. To suit WC HTM64		1
1		1	HOI006	HOIST PATIENT, electric, 24V, track ceiling mounted. (Length of the track to suit the individual needs.)		1
1		1	LIG063	LUMINAIRE fitted with single fluorescent lamp, 8watt, 300mm, wall mounted		1
1		1	MIR010	MIRROR, wall mounted, 800H 300W		1
1		1	OUT025	SOCKET outlet shaver, wall/trunking mounted		1
1		1	OUT052	CONNECTION UNIT switched 13amp, wall/trunking mounted		1
2		2	RAI048	RAIL, grab, vertical, wall mounted, 600mm		1
1		1	RAI049	RAIL, grab, vertical, wall mounted, 750mm		1
1		1	RAI056	RAIL, towel, single, stainless steel, 15mm dia. 600mm		1
1		1	RAI061	RAIL, towel, single stainless steel, 15mm dia. 450mm		1
1		1	RAI084	RAIL, grab, horizontal, cranked, wall mounted, 1900mm		1
3		3	RAI161	RAIL, grab, horizontal, wall mounted, 600mm		1
2		2	RAI175	RAIL, grab, hinged, wall mounted, 750mm		1
1		1	SHE202	SHELF, 600W 400D		1
2		2	STF200	STORAGE UNIT, mid, shelf, 150H 300W 150D, HTM63		1
1		1	TAP347	TAP pillar, short lever, pair hot and cold, 1/2 in. HTM64TP5		1
1		1	WAS101	WASTE, unslotted recessed grated, metal, 1.1/4 in, with plug and chain. HTM64WT3		1
1		1	WAS103	WASTE, unslotted recessed grated, metal, 1.1/2 in, with plug and chain. HTM64WT4		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	WCH005	WC with seat, 700 mm projection, hospital pattern, rimless pan, vitreous china, HTM64WCHD		1
1		1	HOL999	Holder toilet tissue, sheet		2
3		3	HOO019	HOOK, single, small, wall mounted		2
1		1	CHA094	CHAIR, bathroom		3
1		1	HOI004	HOIST PATIENT, sling type, mobile		3
1		1	HOL004	HOLDER, sack, with lid foot operated, small, freestanding		3

ADB	Room Data Sheet	Q0519

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	Q0519	Hydrotherapy pool hall		
Room Number:			**Revision Date:**	23/04/2009

Activities:	1) Hydrotherapy 2) Patients to receive individual physiotherapy. 3) Storing towels. 4) Storing training materials and aids. 5) Cleansing floor.			
Personnel:	2-3 Staff, 1-2 patients.			
Planning Relationships:				
Space Data:	**Area (m²):**	30.00	**Height (mm):**	4,500

Notes:

A disabled patient to gain access to the pool independently or with a walking aid or assisted by staff or to be hoisted from a wheelchair or trolley into the pool. Treatment: (a) by physiotherapists who will enter the water or will lean over side of the pool; assisted by others. (b) Patients may need flotation equipment. Temperature control of water between 34 to 40 deg.C. Lamp indicator call situated overdoor on outside entrance of the room.

ADB	Room Environmental Data	Q0519

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	Q0519	Hydrotherapy pool hall
Room Number:		**Revision Date:** 23/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	28	Winter temperature: To suit water temp.
Summer Temperature (DegC):	28	
Mechanical Ventilation (Supply ac/hr):		Mechanical ventilation (supply): 30.025 m3/sec per m2 wetted area of pool+10% fer to BN text. Mechanical ventilation (extract): 3 to suit overall design.Refer to B.N text.
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:	NEG	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):	60	
General Notes:		
LIGHTING		
Service Illumination (Lux):	200	Water level
Service Illumination Night (Lux):		Luminaires to I.P54
Local Illumination (Lux):	300.0	Writing level
Colour Rendering Required:	Y	
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	70	
Mechanical Services (NR):	35	
Intrusive Noise (NR Leq):	45	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):		
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		

ADB	Room Design Character	Q0519

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	Q0519	Hydrotherapy pool hall
Room Number:		**Revision Date:** 23/04/2009

Walls:	Surface Finish (HTM 56): 4 i.e. Impervious, smooth Moisture Resistance (HTM 56): H i.e. High humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 4 i.e. Hard, impervious, jointless, extra slip resistance Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 2 i.e. Smooth, imperforate Moisture Resistance (HTM 60): H i.e. High humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Two sets of doors: 1x 1000m, single leaf, plain flush. 1x 1500mm, one & a half leaf, vision panel; equipment access
Windows:	(HTM 55) High level, clear glass, privacy control
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	Q0519

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: Q0519 Hydrotherapy pool hall
Room Number:
Revision Date: 23/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
2		2	CAL005	CEILING PULL CORD patient/staff call		1
4		4	CAL009	CEILING PULL CORD staff emergency call		1
1		1	CAL012	RESET UNIT with repeat lamp, patient/staff call		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
2		2	CAL029	LAMP patient reassurance, wall mounted		1
1		1	CON101	CONNECTION, drainage		1
1		1	OUT211	SOCKET outlet, loudspeaker, wall mounted		1
2		2	OUT301	OUTLET cold water for equipment		1
1		1	OUT305	OUTLET hot water for equipment		1
1		1	OUT342	OUTLET, drain point		1
6		6	PEG001	PEGS, equipment, small, 2, wall mounted		1
1		1	POO002	POOL, hydrotherapy,		1
3		3	SHE408	SHELF, ends splayed and rounded, 1500W 300D		1
1		1	TAP885	TAP bib 12mm, hose union		1
1		1	CLO001	CLOCK battery, wall mounted		2
1		1	HOI001	HOIST/LIFT, patient, for pool stretcher, hydraulic, supplied with chair and stretcher, floor mounted		2
1		1	POO004	POOL COVER, mobile,		3

ADB	Room Data Sheet	T0106

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	T0106	Staff base: 3 staff, ward Mental Illness
Room Number:		**Revision Date:** 07/04/2009

Activities:	1) Supervising and observing patient activities by day and night. 2) Monitoring indicator panels. 3) Recording patient data/notes. 4) Using telephone(s). 5) Displaying staff notices, information and/or messages.			
Personnel:	3 x Persons Intermittent use			
Planning Relationships:	Close to offices/reporting area. Overlooking circulation area(s). Overlooking entrance to nursing section(s).			
Space Data:	**Area (m²):**	11.00	**Height (mm):**	2,700

Notes: Comfortable accommodation for informal staff/patient interaction. Lights indicating: Patient/Nurse call system indicator board & buzzer alarms. Light from alarm Controlled Drugs cupboard.

ADB	Room Environmental Data	T0106

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	T0106	Staff base: 3 staff, ward Mental Illness
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	200	to 300 Desk
Service Illumination Night (Lux):	30.0	Desk
Local Illumination (Lux):	200.0	Desk (Night), Light should be able to be dimmed.
Colour Rendering Required:	Y	Not night service illuminance
Standby Lighting Grade:		A & B A, B + local
General Notes:		
NOISE		
Privacy Factor Required (dB):	75	Ref: HTM2045
Mechanical Services (NR):	35	
Intrusive Noise (NR Leq):	40	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):		
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	T0106

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	T0106	Staff base: 3 staff, ward Mental Illness
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3: Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5:Imperforate Moisture Resistance (HTM 60): N:Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) N/A, open to circulation
Windows:	(HTM 55) Clear glass with solar control, privacy control. Window opening restrictors max 100mm at bottom
Internal Glazing:	(HTM 57)
Hatch:	

Notes:

ADB	Schedule of Components by Room	T0106

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: T0106 Staff base: 3 staff, ward Mental Illness
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	LIG138	LUMINAIRE indicating Controlled Drug cupboard repeat, wall mounted		1
1		1	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
1		1	PAN063	PANEL indicator, wall mounted		1
1		1	SWC055	SWITCH attenuating telephone, wall mounted		1
1		1	BOA013	BOARD, display/notice, wall mounted, 900H 1200W		2
1		1	CLO001	CLOCK battery, wall mounted		2
2		2	CHA006	CHAIR, easy, with open arms, low back, upholstered		3
1		1	CHA063	CHAIR, height adjustable, with arms, high back, swivel, 5 star base, on castors		3
1		1	DES022	DESK, cantilever, single pedestal 3 drawer, cable management, modesty panel, 1600W 800D		3
1		1	TAB056	TABLE, occasional, round, 415H 610mm dia.		3

ADB	Room Data Sheet	T0212

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	T0212	Staff communication base: 2 staff		
Room Number:			**Revision Date:**	05/05/2009

Activities:	1) Supervising patients needing special attention. 2) Managerial tasks associated with department control. 3) View of indicating lights of patient/staff call systems. 4) Recording patient data/notes. 5) Assessing x-ray images. 6) Using telephone(s). 7) Holding working supply of stationery. 8) Displaying staff notices, information and/or messages.			
Personnel:	3 x Staff			
Planning Relationships:	In HBN22 A&E; Central to working area of department. Close to Supplies Base.			
Space Data:	**Area (m²):**	11.00	**Height (mm):**	2,700
Notes:	In HBN A&E; Light/patient/staff call WHITE indicator from X-ray department. Computer keyboard should be with cleanable or disposable cover. Transfer switch (CAL016) to staff base control unit.			

ADB	Room Environmental Data	T0212

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	T0212	Staff communication base: 2 staff
Room Number:		**Revision Date:** 05/05/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Desk. Areas for VDT's: See CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001.
Service Illumination Night (Lux):	30.0	Desk.
Local Illumination (Lux):	200.0	Desk (night)
Colour Rendering Required:	Y	Not night illumination.
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	75	Ref: HTM2045
Mechanical Services (NR):	35	
Intrusive Noise (NR Leq):	40	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):		
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	T0212

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	T0212	Staff communication base: 2 staff
Room Number:		**Revision Date:** 05/05/2009

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5: Imperforate Moisture Resistance (HTM 60): N: Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58)
Windows:	(HTM 55) N/A or Obscured, solar control
Internal Glazing:	(HTM 57) Clear
Hatch:	
Notes:	

ADB	Schedule of Components by Room	T0212

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: T0212 Staff communication base: 2 staff
Room Number: **Revision Date:** 05/05/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	CAL016	SWITCH staff call transfer, wall mounted		1
1		1	CAL017	LAMP repeat and buzzer with attenuating switch patient/staff call, wall mounted, (red)		1
1		1	COU999	COUNTER UNIT, console top with modesty panel and lockable storage, 1020/720H length to suit space, HTM63		1
1		1	LIG138	LUMINAIRE indicating Controlled Drug cupboard repeat, wall mounted		1
7		7	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
3		3	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
3		3	OUT215	SOCKET outlet telephone, wall mounted		1
1		1	BOA012	BOARD, display/notice, wall mounted, 900H 600W		2
1		1	BOA034	BOARD, marker, whiteboard, dry-wipe, with pen holder, wall mounted, 600H 900W		2
1		1	CLO004	CLOCK battery with second sweep hand, wall mounted		2
2		2	CHA063	CHAIR, height adjustable, with arms, high back, swivel, 5 star base, on castors		3
2		2	COM031	COMPUTER CPU		3
2		2	COM033	COMPUTER KEYBOARD		3
2		2	COM046	COMPUTER MONITOR, 15" TFT, digital flat panel display, desk top		3

ADB	Room Data Sheet	T0212A

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	T0212A	Staff communication base: 15 staff		
Room Number:			**Revision Date:**	08/04/2009

Activities:	1) Supervising patients needing special attention. 2) Managerial tasks associated with department control. 3) View of indicating lights of patient/staff call systems. 4) Recording patient data/notes. 5) Assessing x-ray images. 6) Using telephone(s). 7) Holding working supply of stationery. 8) Displaying staff notices, information and/or messages.			
Personnel:	15 x Staff			
Planning Relationships:	In HBN22 A&E; Central to working area of department. Close to Supplies Base.			
Space Data:	**Area (m²):**	35.00	**Height (mm):**	2,700
Notes:	In HBN A&E; Light/patient/staff call WHITE indicator from X-ray department. Computer keyboard should be with cleanable or disposable cover. Transfer switch (CAL016) to staff base control unit.			

ADB	Room Environmental Data	T0212A

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	T0212A	Staff communication base: 15 staff
Room Number:		**Revision Date:** 08/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Desk. Areas for VDT's: See CIBSE Lighting Guide LG3 "The Visual Environment for Display Screen Use" Addendum 2001.
Service Illumination Night (Lux):	30.0	Desk.
Local Illumination (Lux):	200.0	Desk (night)
Colour Rendering Required:	Y	Not night illumination.
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	75	Ref: HTM2045
Mechanical Services (NR):	35	
Intrusive Noise (NR Leq):	40	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):		
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	T0212A

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	T0212A	Staff communication base: 15 staff
Room Number:		**Revision Date:** 08/04/2009

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5: Imperforate Moisture Resistance (HTM 60): N: Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58)
Windows:	(HTM 55) N/A or Obscured, solar control
Internal Glazing:	(HTM 57) Clear
Hatch:	
Notes:	

ADB	Schedule of Components by Room	T0212A

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: T0212A Staff communication base: 15 staff
Room Number: **Revision Date:** 08/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	CAL016	SWITCH staff call transfer, wall mounted		1
1		1	CAL017	LAMP repeat and buzzer with attenuating switch patient/staff call, wall mounted, (red)		1
1		1	COU999	COUNTER UNIT, console top with modesty panel and lockable storage, 1020/720H length to suit space, HTM63		1
1		1	LIG138	LUMINAIRE indicating Controlled Drug cupboard repeat, wall mounted		1
25		25	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
12		12	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
12		12	OUT215	SOCKET outlet telephone, wall mounted		1
3		3	BOA012	BOARD, display/notice, wall mounted, 900H 600W		2
4		4	BOA034	BOARD, marker, whiteboard, dry-wipe, with pen holder, wall mounted, 600H 900W		2
1		1	CLO004	CLOCK battery with second sweep hand, wall mounted		2
7		7	CHA063	CHAIR, height adjustable, with arms, high back, swivel, 5 star base, on castors		3
7		7	COM031	COMPUTER CPU		3
7		7	COM033	COMPUTER KEYBOARD		3
7		7	COM046	COMPUTER MONITOR, 15" TFT, digital flat panel display, desk top		3

ADB	Room Data Sheet	T0505

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	T0505	Clean utility
Room Number:		**Revision Date:** 07/04/2009

Activities:	1) Holding supply of sterile equipment and supplies. 2) Ordering, receiving checking and safekeeping: lotions, fluids, drugs, supplies. 3) Preparing/laying up trolleys for clinical procedures. 4) Storing non-controlled medicines and pharmaceuticals. 5) Storing controlled and scheduled drugs. 6) Refrigerated storage. 7) Clinical hand washing. 8) Parking dressing trolley.			
Personnel:	2 x Staff			
Planning Relationships:	Close to consulting rooms and consulting/treatment rooms. Close to dirty utility.			
Space Data:	**Area (m²):**	12.00	**Height (mm):**	2,700
Notes:	In Imaging Dept. - Should provided storage of contrast media used in diagnostic rooms. Provision necessary for out of hours access to controlled drugs needs to be considered (HBN Imaging Para16.27).			

ADB	Room Environmental Data	T0505

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	T0505	Clean utility
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	20	Summer temperature to be control to suit storage of drugs.
Summer Temperature (DegC):	20	
Mechanical Ventilation (Supply ac/hr):	6.0	
Mechanical Ventilation (Extract ac/hr):	6.0	
Pressure Relative to Adjoining Space:	+ve	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	200	Working plane.
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	Y	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	70	Ref: HTM2045
Mechanical Services (NR):	40	
Intrusive Noise (NR Leq):	50	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	82	Unless patients access.
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	T0505

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	T0505	Clean utility
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 3 i.e. Impervious, jointless, smooth Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 4: Hard, impervious, jointless, extra slip resistance Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3: Smooth, imperforate Moisture Resistance (HTM 60): N: Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1000mm, single leaf,vision panel, lockable; equipment access
Windows:	(HTM 55) N/A or obscure
Internal Glazing:	(HTM 57)
Hatch:	
Notes:	In HBN23 HACh & YP, door hinge protectors are required.

ADB	Schedule of Components by Room	T0505

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: T0505 Clean utility
Room Number: **Revision Date:** 07/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	LIG081	LUMINAIRE fitted with single fluorescent lamp with switch, below drug cupboard, 8watt, 400mm		1
5		5	MSC091	CABINET base, 400mm facing, (400x600 inserts), with formed plastic liners, 1 door hinged right, on plinth, o/a height 900, HTM71		1
1		1	MSC095	CABINET base, 400mm facing, (400x600 inserts), with 3 telescopic runners, 1 door hinged right, on plinth, o/a height 900 HTM71		1
4		4	MSC122	CABINET top, 400mm facing, (400x600 inserts), with formed plastic liners, 1 door hinged right, wall mounted, HTM71		1
1		1	MSC503	PHARMACY CABINET, 600mm facing, with 4 shelves, 1 pull out prep. shelf, controlled drugs cupboard, warning light, 1 door hinged right w/security safe lock, o/a height 1200, HTM71		1
1		1	MSW016	WORKTOP, for 6x 400mm facing inserts cabinets, 2730W 700D nominal, HTM71		1
1		1	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT049	CONNECTION UNIT switched 13amp, flex outlet, wall/trunking mounted		1
1		1	OUT050	OUTLET to controlled drugs cupboard, wall mounted		1
1		1	OUT056	CONNECTION UNIT unswitched 13amp, wall/trunking mounted		1
1		1	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
2		2	SHE241	SHELF, 1800W 300D		1
1		1	SHE469	SHELF, sloping, with lip, 1800W 400D		1
4		4	STF211	STORAGE UNIT, mid, support panel, 150H 600W 20D, HTM63		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS435	DISPENSER, disposable gloves, set of 3, wall mounted		2
1		1	DIS436	DISPENSER, disposable apron, wall mounted		2
1		1	REF091	REFRIGERATOR, drug, capacity 35 litres, external temperature gauge, lockable, wall mounted, 510H 380W 445D		2

ADB	Schedule of Components by Room	T0505

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: T0505 Clean utility
Room Number:
Revision Date: 07/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
12		12	STD275	TOTE BOX, plastic with open top, 120H 200W 300D		3
1		1	TRO131	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 450W 450D		3
2		2	TRO133	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 750W 450D		3
1		1	TRO208	TROLLEY, double sided, drug/pharmaceutical distribution, with locked boxes -30 boxes, 1000H 1450W 490D		3

ADB	Room Data Sheet	T0506

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	T0506	Medicines Management
Room Number:		**Revision Date:** 22/04/2009

Activities:	1) Holding supply of sterile equipment and supplies. 2) Ordering, receiving checking and safekeeping: lotions, fluids, drugs, supplies. 3) Preparing/laying up trolleys for clinical procedures. 4) Storing non-controlled medicines and pharmaceuticals. 5) Storing controlled and scheduled drugs. 6) Refrigerated storage. 7) Clinical hand washing. 8) Parking dressing trolley.			
Personnel:	2 x Staff			
Planning Relationships:	Close to consulting rooms and consulting/treatment rooms. Close to dirty utility.			
Space Data:	**Area (m²):**	14.00	**Height (mm):**	2,700

Notes:

ADB	Room Environmental Data	T0506

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	T0506	Medicines Management
Room Number:		**Revision Date:** 22/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	20	Summer temperature to be control to suit storage of drugs.
Summer Temperature (DegC):	20	
Mechanical Ventilation (Supply ac/hr):	6.0	
Mechanical Ventilation (Extract ac/hr):	6.0	
Pressure Relative to Adjoining Space:	+ve	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	200	Working plane.
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	Y	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	70	Ref: HTM2045
Mechanical Services (NR):	40	
Intrusive Noise (NR Leq):	50	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	82	Unless patients access.
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	T0506

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	T0506	Medicines Management
Room Number:		**Revision Date:** 22/04/2009

Walls:	Surface Finish (HTM 56): 3 i.e. Impervious, jointless, smooth Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 4: Hard, impervious, jointless, extra slip resistance Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3: Smooth, imperforate Moisture Resistance (HTM 60): N: Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1000mm, single leaf,vision panel, lockable; equipment access
Windows:	(HTM 55) N/A or obscure
Internal Glazing:	(HTM 57)
Hatch:	
Notes:	In HBN23 HACh & YP, door hinge protectors are required.

ADB	Schedule of Components by Room	T0506

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: T0506 Medicines Management
Room Number: **Revision Date:** 22/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	LIG081	LUMINAIRE fitted with single fluorescent lamp with switch, below drug cupboard, 8watt, 400mm		1
6		6	MSC091	CABINET base, 400mm facing, (400x600 inserts), with formed plastic liners, 1 door hinged right, on plinth, o/a height 900, HTM71		1
1		1	MSC095	CABINET base, 400mm facing, (400x600 inserts), with 3 telescopic runners, 1 door hinged right, on plinth, o/a height 900 HTM71		1
5		5	MSC122	CABINET top, 400mm facing, (400x600 inserts), with formed plastic liners, 1 door hinged right, wall mounted, HTM71		1
1		1	MSC503	PHARMACY CABINET, 600mm facing, with 4 shelves, 1 pull out prep. shelf, controlled drugs cupboard, warning light, 1 door hinged right w/security safe lock, o/a height 1200, HTM71		1
1		1	MSW016	WORKTOP, for 6x 400mm facing inserts cabinets, 2730W 700D nominal, HTM71		1
1		1	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT049	CONNECTION UNIT switched 13amp, flex outlet, wall/trunking mounted		1
1		1	OUT050	OUTLET to controlled drugs cupboard, wall mounted		1
1		1	OUT056	CONNECTION UNIT unswitched 13amp, wall/trunking mounted		1
1		1	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
2		2	SHE241	SHELF, 1800W 300D		1
1		1	SHE469	SHELF, sloping, with lip, 1800W 400D		1
4		4	STF211	STORAGE UNIT, mid, support panel, 150H 600W 20D, HTM63		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS435	DISPENSER, disposable gloves, set of 3, wall mounted		2
1		1	DIS436	DISPENSER, disposable apron, wall mounted		2
1		1	REF091	REFRIGERATOR, drug, capacity 35 litres, external temperature gauge, lockable, wall mounted, 510H 380W 445D		2

ADB	Schedule of Components by Room	T0506

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: T0506 Medicines Management
Room Number:
Revision Date: 22/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
12		12	STD275	TOTE BOX, plastic with open top, 120H 200W 300D		3
1		1	TRO131	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 450W 450D		3
2		2	TRO133	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 750W 450D		3
1		1	TRO208	TROLLEY, double sided, drug/pharmaceutical distribution, with locked boxes -30 boxes, 1000H 1450W 490D		3

ADB	Room Data Sheet	T0508

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	T0508	Clean Utility		
Room Number:			**Revision Date:**	22/04/2009

Activities:	1) Holding supply of sterile equipment and supplies. 2) Ordering, receiving checking and safekeeping: lotions, fluids, drugs, supplies. 3) Preparing/laying up trolleys for clinical procedures. 4) Storing non-controlled medicines and pharmaceuticals. 5) Storing controlled and scheduled drugs. 6) Refrigerated storage. 7) Clinical hand washing. 8) Parking dressing trolley.			
Personnel:	2 x Staff			
Planning Relationships:	Close to consulting rooms and consulting/treatment rooms. Close to dirty utility.			
Space Data:	**Area (m²):**	14.00	**Height (mm):**	2,700

Notes:

ADB	Room Environmental Data	T0508

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	T0508	Clean Utility
Room Number:		**Revision Date:** 22/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	20	Summer temperature to be control to suit storage of drugs.
Summer Temperature (DegC):	20	
Mechanical Ventilation (Supply ac/hr):	6.0	
Mechanical Ventilation (Extract ac/hr):	6.0	
Pressure Relative to Adjoining Space:	+ve	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	200	Working plane.
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	Y	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	70	Ref: HTM2045
Mechanical Services (NR):	40	
Intrusive Noise (NR Leq):	50	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	82	Unless patients access.
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	T0508

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	T0508	Clean Utility
Room Number:		**Revision Date:** 22/04/2009

Walls:	Surface Finish (HTM 56): 3 i.e. Impervious, jointless, smooth Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 4: Hard, impervious, jointless, extra slip resistance Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3: Smooth, imperforate Moisture Resistance (HTM 60): N: Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1000mm, single leaf,vision panel, lockable; equipment access
Windows:	(HTM 55) N/A or obscure
Internal Glazing:	(HTM 57)
Hatch:	
Notes:	In HBN23 HACh & YP, door hinge protectors are required.

ADB	Schedule of Components by Room	T0508

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: T0508 Clean Utility
Room Number: **Revision Date:** 22/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	LIG081	LUMINAIRE fitted with single fluorescent lamp with switch, below drug cupboard, 8watt, 400mm		1
6		6	MSC091	CABINET base, 400mm facing, (400x600 inserts), with formed plastic liners, 1 door hinged right, on plinth, o/a height 900, HTM71		1
1		1	MSC095	CABINET base, 400mm facing, (400x600 inserts), with 3 telescopic runners, 1 door hinged right, on plinth, o/a height 900 HTM71		1
5		5	MSC122	CABINET top, 400mm facing, (400x600 inserts), with formed plastic liners, 1 door hinged right, wall mounted, HTM71		1
1		1	MSC503	PHARMACY CABINET, 600mm facing, with 4 shelves, 1 pull out prep. shelf, controlled drugs cupboard, warning light, 1 door hinged right w/security safe lock, o/a height 1200, HTM71		1
1		1	MSW016	WORKTOP, for 6x 400mm facing inserts cabinets, 2730W 700D nominal, HTM71		1
1		1	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT049	CONNECTION UNIT switched 13amp, flex outlet, wall/trunking mounted		1
1		1	OUT050	OUTLET to controlled drugs cupboard, wall mounted		1
1		1	OUT056	CONNECTION UNIT unswitched 13amp, wall/trunking mounted		1
1		1	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
2		2	SHE241	SHELF, 1800W 300D		1
1		1	SHE469	SHELF, sloping, with lip, 1800W 400D		1
4		4	STF211	STORAGE UNIT, mid, support panel, 150H 600W 20D, HTM63		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS435	DISPENSER, disposable gloves, set of 3, wall mounted		2
1		1	DIS436	DISPENSER, disposable apron, wall mounted		2
1		1	REF091	REFRIGERATOR, drug, capacity 35 litres, external temperature gauge, lockable, wall mounted, 510H 380W 445D		2

ADB	Schedule of Components by Room	T0508

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: T0508 Clean Utility
Room Number:
Revision Date: 22/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
12		12	STD275	TOTE BOX, plastic with open top, 120H 200W 300D		3
1		1	TRO131	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 450W 450D		3
2		2	TRO133	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 750W 450D		3
1		1	TRO208	TROLLEY, double sided, drug/pharmaceutical distribution, with locked boxes -30 boxes, 1000H 1450W 490D		3

ADB	Room Data Sheet	T0526

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	T0526	Preparation room		
Room Number:			**Revision Date:**	07/04/2009

Activities:	1) Holding sterile pre-set trays and packs. 2) Storing sterile supplies. 3) Storing of non-sterile medical items/equipment. 4) Storing sterile fluids. 5) Preparing trays and laying up trolleys for surgical/clinical procedures. 6) Holding instrument trolley.			
Personnel:	2 - 3 Staff			
Planning Relationships:	Direct access to operating theatre. Access from corridor for delivery of supplies.			
Space Data:	**Area (m²):**	16.00	**Height (mm):**	2,700

Notes: CAB036 - Heated lotion cabinet could be provided in Central Store as option. Trolley dressing/instrument - number and size - project team option. Worktop must be mounted to allow trollies to fit under.

ADB	Room Environmental Data	T0526

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	T0526	Preparation room
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	22	Temperature range to follow theatre.
Summer Temperature (DegC):	20	
Mechanical Ventilation (Supply ac/hr):	6.0	
Mechanical Ventilation (Extract ac/hr):	6.0	
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		Ventilation; Conventional operating suite, pressure '+ve' to theare in Ultra-clean (laminar flow) operating suite, pressure '=' to theatre.
LIGHTING		
Service Illumination (Lux):	200	Working plane
Service Illumination Night (Lux):		
Local Illumination (Lux):	300.0	Trolley
Colour Rendering Required:	Y	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	70	Ref: HTM2045
Mechanical Services (NR):	40	
Intrusive Noise (NR Leq):	50	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	82	Unless patients access.
Hot Water Max. Temp (DegC):		
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	T0526

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	T0526	Preparation room
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 1 i.e. Impervious, jointless, smooth Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3: Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 1 i.e. Smooth, imperforate, jointless Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Three sets of doors: each - 1000mm, single leaf, vision panel, self closing delayed action; trolley access
Windows:	(HTM 55) Obscure, solar control
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	T0526

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: T0526 Preparation room
Room Number: **Revision Date:** 07/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
5		5	MSC001	CABINET tall, 600mm facing, (600x400 inserts), with formed plastic liners, open, on plinth, o/a height 2100, HTM71		1
1		1	MSW025	WORKTOP, for 600mm facing inserts cabinets, 1500W 500D nominal, HTM71		1
1		1	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT052	CONNECTION UNIT switched 13amp, wall/trunking mounted		1
1		1	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
1		1	CAB036	CABINET warming, lotion, 48x1 litre, 1320H 620W 630D		2
1		1	MSF026	FRAME long span shelving supports, with distance pieces, 1 bay, 400mm deep, 5 shelf (4 adjustable), steel, 2130H 1000W 465D nominal, HTM71		2
1		1	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	STA102	STAND, 2 lotion bowls, stainless steel, (Bowls not included).		3
2		2	TRO131	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 450W 450D		3
2		2	TRO133	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 750W 450D		3
1		1	TRO201	TROLLEY, instruments, stainless steel, buffered, 870H 920W 620D		3

ADB	Room Data Sheet	V1610

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	V1610	Shower, WC & personal wash: independent/assisted wheelchair accessible, en-suite
Room Number:		**Revision Date:** 07/04/2009

Activities:	1) Patient may be ambulant, in a wheelchair or sanitary chair. 2) Using shower. 3) Transfer patient to/from shower chair/seat. 4) Using WC. 5) Personal washing. 6) Grooming. 7) Using electric shaver. 8) Hanging clothes and towels. 9) Patient/user may require assistance during the activities.			
Personnel:	1 x Person 1 x Assistant if required Intermittent use			
Planning Relationships:	Easy access to/from patient bed areas. En-suite to bedroom. En-suite to overnight stay.			
Space Data:	**Area (m²):**	4.50	**Height (mm):**	2,700
	as in SoA HBN04			
Notes:	For layout of en-suite shower, chamfered - see HBN00-02 Sanitary spaces. Use of ceiling hoist.			

ADB	Room Environmental Data	V1610

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	V1610	Shower, WC & personal wash: independent/assisted wheelchair accessible, en-suite
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	22	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		Mechanical Ventilation (extract) is required.
Mechanical Ventilation (Extract ac/hr):	10.0	
Pressure Relative to Adjoining Space:	-ve	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	150	Floor
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	Y	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	70	Ref: HTM2045
Mechanical Services (NR):	45	
Intrusive Noise (NR Leq):	50	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	V1610

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	V1610	Shower, WC & personal wash: independent/assisted wheelchair accessible, en-suite
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 2: Impervious, jointless, smooth Moisture Resistance (HTM 56): H: High humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 4 i.e. Hard, impervious, jointless, extra slip resistance Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 2 i.e. Smooth, imperforate Moisture Resistance (HTM 60): H i.e. High humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x2300mm, single leaf hinged with leaf and a half sliding/folding door, plain flush; wheelchair & ceiling hoist access, occupancy indicator, lockable, outside release. Privacy maintained against an opening door
Windows:	(HTM 55) N/A or obscured
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	In HBN53; If used as en suite facilities to Isolation Room - Walls required frequent cleaning. In HBN23 HACh & YP, door hinge protectors are required

ADB	Schedule of Components by Room	V1610

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: V1610 Shower, WC & personal wash: independent/assisted wheelchair accessible, en-suite
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAC001	BACKREST, WC, padded, wall mounted		1
1		1	BAS109	BASIN, large, general pattern, vitreous china, 2 tap holes, no overflow, bottom outlet, 600W 500D, HTM64LBGL		1
2		2	CAL005	CEILING PULL CORD patient/staff call		1
1		1	CAL012	RESET UNIT with repeat lamp, patient/staff call		1
2		2	CAL030	LAMP patient reassurance, ceiling mounted		1
1		1	CIS005	CISTERN WC, concealed, reversible. To suit WC HTM64		1
1		1	EXT100	*EXTENTION PIECE WC, hospital pattern, adult, 450H 275W 150D, HTM64		1
1		1	LIG063	LUMINAIRE fitted with single fluorescent lamp, 8watt, 300mm, wall mounted		1
1		1	MIR001	MIRROR, wall mounted, 650H 300W		1
1		1	MIR004	MIRROR, wall mounted, 1600H 400W		1
1		1	OUT025	SOCKET outlet shaver, wall/trunking mounted		1
1		1	OUT345	OUTLET, floor drainage and grating, 150mm dia. hospital pattern. HTM64FOH		1
3		3	RAI048	RAIL, grab, vertical, wall mounted, 600mm		1
3		3	RAI161	RAIL, grab, horizontal, wall mounted, 600mm		1
4		4	RAI175	RAIL, grab, hinged, wall mounted, 750mm		1
1		1	RAI999	RAIL for shower curtain, to suit layout		1
1		1	SEA024	SEAT, tip-up, wall mounted , 400W 400D		1
1		1	SHO006	SHOWER, slip resistant floor, with drainage outlet,		1
1		1	SHO018	VALVE thermostatic mixer. Part of SHO020 HTM64TM1		1
1		1	SHO020	SHOWER, ajustable shower head, hand spray. HTM64TM1		1
1		1	STF200	STORAGE UNIT, mid, shelf, 150H 300W 150D, HTM63		1
1		1	TAP347	TAP pillar, short lever, pair hot and cold, 1/2 in. HTM64TP5		1
1		1	WAS101	WASTE, unslotted recessed grated, metal, 1.1/4 in, with plug and chain. HTM64WT3		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	WCH005	WC with seat, 700 mm projection, hospital pattern, rimless pan, vitreous china, HTM64WCHD		1
1		1	DIS024	DISPENSER, soap, wall mounted		2
1		1	HOL999	Holder toilet tissue, sheet		2
1		1	HOO019	HOOK, single, small, wall mounted		2
1		1	HOL003	HOLDER, sack, circular unit, small, freestanding		3

ADB	Room Data Sheet	V1612

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	V1612	Shower, WC & wash: assisted wheelchair accessible		
Room Number:			**Revision Date:**	23/04/2009

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Patient may arrive in sanitary chair. 3) Hanging clothes and towels. 4) Transfer patient to/from shower chair/seat. 5) Using shower. 6) Using WC. 7) Personal washing for a seated person. 8) Grooming for a seated person. 9) Patient requiring assistance during activities.			
Personnel:	1 x Patient 2 x Staff			
Planning Relationships:	Ensuite to 4 bed rooms			
Space Data:	**Area (m²):**	7.00	**Height (mm):**	2,700
Notes:	Call unit situated within wet area, adjacent to the shower control. Lamp indicator call situated overdoor on outside entrance of the room.			

ADB	Room Environmental Data	V1612

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	V1612	Shower, WC & wash: assisted wheelchair accessible
Room Number:		**Revision Date:** 23/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	22	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		Mechanical Ventilation (extract) is required.
Mechanical Ventilation (Extract ac/hr):	10.0	
Pressure Relative to Adjoining Space:	-ve	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	150	Floor
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	N	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	70	Ref: HTM2045
Mechanical Services (NR):	45	
Intrusive Noise (NR Leq):	50	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		

ADB	Room Design Character	V1612

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	V1612	Shower, WC & wash: assisted wheelchair accessible
Room Number:		**Revision Date:** 23/04/2009

Walls:	Surface Finish (HTM 56): 2: Impervious, jointless, smooth Moisture Resistance (HTM 56): H: High humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 4 i.e. Hard, impervious, jointless, extra slip resistance Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 2 i.e. Smooth, imperforate Moisture Resistance (HTM 60): H i.e. High humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1500mm, leaf and a half, plain flush, retention 90deg., occupancy indicator, lockable, outside emergency release, privacy maintained against an opening door
Windows:	(HTM 55) N/A
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	V1612

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: V1612 Shower, WC & wash: assisted wheelchair accessible
Room Number: **Revision Date:** 23/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAC001	BACKREST, WC, padded, wall mounted		1
1		1	BAS109	BASIN, large, general pattern, vitreous china, 2 tap holes, no overflow, bottom outlet, 600W 500D, HTM64LBGL		1
2		2	CAL005	CEILING PULL CORD patient/staff call		1
1		1	CAL012	RESET UNIT with repeat lamp, patient/staff call		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
2		2	CAL030	LAMP patient reassurance, ceiling mounted		1
1		1	CIS005	CISTERN WC, concealed, reversible. To suit WC HTM64		1
1		1	EXT100	*EXTENTION PIECE WC, hospital pattern, adult, 450H 275W 150D, HTM64		1
1		1	LIG063	LUMINAIRE fitted with single fluorescent lamp, 8watt, 300mm, wall mounted		1
1		1	MIR001	MIRROR, wall mounted, 650H 300W		1
1		1	MIR004	MIRROR, wall mounted, 1600H 400W		1
1		1	OUT345	OUTLET, floor drainage and grating, 150mm dia. hospital pattern. HTM64FOH		1
5		5	RAI048	RAIL, grab, vertical, wall mounted, 600mm		1
1		1	RAI161	RAIL, grab, horizontal, wall mounted, 600mm		1
3		3	RAI175	RAIL, grab, hinged, wall mounted, 750mm		1
1		1	RAI999	RAIL for shower curtain, to suit layout		1
1		1	SEA024	SEAT, tip-up, wall mounted , 400W 400D		1
1		1	SHO007	SHOWER, slip resistant floor, with drainage outlet, 1600W 1100D		1
1		1	SHO018	VALVE thermostatic mixer. Part of SHO020 HTM64TM1		1
1		1	SHO020	SHOWER, ajustable shower head, hand spray. HTM64TM1		1
1		1	STF200	STORAGE UNIT, mid, shelf, 150H 300W 150D, HTM63		1
1		1	TAP347	TAP pillar, short lever, pair hot and cold, 1/2 in. HTM64TP5		1
1		1	WAS101	WASTE, unslotted recessed grated, metal, 1.1/4 in, with plug and chain. HTM64WT3		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	WCH005	WC with seat, 700 mm projection, hospital pattern, rimless pan, vitreous china, HTM64WCHD		1
1		1	DIS024	DISPENSER, soap, wall mounted		2
1		1	HOL999	Holder toilet tissue, sheet		2
3		3	HOO019	HOOK, single, small, wall mounted		2
1		1	HOL003	HOLDER, sack, circular unit, small, freestanding		3

ADB	Room Data Sheet	W0110A

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	W0110A	ECMO & prep store
Room Number:		**Revision Date:** 23/04/2009

Activities:	1) Storing mobile equipment. 2) Manoeuvring large, mobile items. 3) Charging and recharging medical equipment.			
Personnel:	Intermittent use			
Planning Relationships:	Accessible from both cardiac theatres			
Space Data:	**Area (m²):**	20.00	**Height (mm):**	2,700

Notes: Cardiac machine storage

ADB	Room Environmental Data	W0110A

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	W0110A	ECMO & prep store
Room Number:		**Revision Date:** 23/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	16	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	100	Floor
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	N	
Standby Lighting Grade:		
General Notes:		
NOISE		
Privacy Factor Required (dB):		
Mechanical Services (NR):		
Intrusive Noise (NR Leq):		
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):		
General Notes:		

FIRE

Enclosure:	Fire hazard room, enclose in 30 minutes fire-resisting construction (integrity and insulation).
Automatic Detection:	Smoke

ADB	Room Design Character	W0110A

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	W0110A	ECMO & prep store
Room Number:		**Revision Date:** 23/04/2009

Walls:	Surface Finish (HTM 56): 4 i.e. Impervious, smooth Moisture Resistance (HTM 56): H i.e. High humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3 i.e. Smooth, imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1900mm, double equal leaves, vision panel, lockable; equipment access
Windows:	(HTM 55) N/A
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	W0110A

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: W0110A ECMO & prep store
Room Number: **Revision Date:** 23/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
2		2	MSC187	CABINET base, 400mm facing, with 2 shelves, 1 door hinged right, on plinth, o/a height 900, HTM71		1
2		2	MSC188	CABINET base, 400mm facing, with 2 shelves, 1 door hinged left, on plinth, o/a height 900, HTM71		1
2		2	MSC192	CABINET top, 400mm facing, with 1 shelf, 1 door hinged right, wall mounted, HTM71		1
2		2	MSC193	CABINET top, 400mm facing, with 1 shelf, 1 door hinged left, wall mounted, HTM71		1
1		1	MSW014	WORKTOP, for 4x 400mm facing inserts cabinets, 1820W 700D nominal, HTM71		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
6		6	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
2		2	MSF026	FRAME long span shelving supports, with distance pieces, 1 bay, 400mm deep, 5 shelf (4 adjustable), steel, 2130H 1000W 465D nominal, HTM71		2
4		4	MSF027	FRAME long span shelving supports, with distance pieces, additional bay, 400mm deep, 5 shelf (4 adjustable), steel, 2100H 1000W 465D nominal, HTM71		2
1		1	VEN035	VENTILATOR anaesthetic, battery, portable, 325H 225W 250D		3

ADB	Room Data Sheet	X0112

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0112	Treatment room Multifunctional, multidisciplinary use
Room Number:		**Revision Date:** 13/08/2007

Activities:	1) Patient may be ambulant, in a wheelchair or on a trolley. 2) Positioning patient on couch for treatment. 3) Minor surgical procedures under local anaesthetic. 4) Medical and nursing procedures. 5) Clinical procedures and dressings. 6) Physical examination of patient. 7) Holding supplies trolley for storage of sterile supplies and consumables. 8) Patient will change clothing if required. 9) Clinical hand washing.			
Personnel:	1 x Patient 1 x Staff			
Planning Relationships:	Adjacent to treatment waiting area. Close to clean utility. Close to dirty utility.			
Space Data:	**Area (m²):**	16.50	**Height (mm):**	2,700
Notes:	Treatment trolley can be used in place of couch. The use of oxygen, suction, medical air, nitrous oxide and anaesthetic gas scavenging (AGSS) are project option. See Health Technical Memorandum 02-01; 'Medical gases pipeline system' for further details. In HBN Sexual health clinics: Additional equipment may include diathermy, cryosurgery, a cold coagulator, a loop coagulator and a colposcope (possibly with a teaching arm or video camera/television screen). Many procedures will generate heat and odours that will need to be removed by means of appropriate mechanical ventilation.			

ADB	Room Environmental Data	X0112

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0112	Treatment room Multifunctional, multidisciplinary use
Room Number:		**Revision Date:** 13/08/2007

AIR	Requirements	Notes
Winter Temperature (DegC):	22	Summer and winter temperature control 15 to 25 degC.
Summer Temperature (DegC):	20	
Mechanical Ventilation (Supply ac/hr):	6.0	
Mechanical Ventilation (Extract ac/hr):	6.0	
Pressure Relative to Adjoining Space:	+ve	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Working plane. Dimming facilities are required.
Service Illumination Night (Lux):		
Local Illumination (Lux):	1,000.0	Couch. Examination lamp.
Colour Rendering Required:	Y	
Standby Lighting Grade:		B: Lighting of the level and quality one third to one half that provided by normal lighting.
General Notes:		
NOISE		
Privacy Factor Required (dB):		
Mechanical Services (NR):		
Intrusive Noise (NR Leq):		
***Acceptable Sound Level [L10dB(A)]:**	44	
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	43	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		

ADB	Room Design Character	X0112

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0112	Treatment room Multifunctional, multidisciplinary use
Room Number:		**Revision Date:** 13/08/2007

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3 i.e. Smooth, imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1500mm, one & a half leaf, vision panel, lockable; patient trolley access
Windows:	(HTM 55) Clear, solar and privacy control
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	X0112

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0112 Treatment room Multifunctional, multidisciplinary use
Room Number: **Revision Date:** 13/08/2007

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL003	PUSH BUTTON patient/staff call with socket for extension pear push, wall mounted		1
1		1	CAL007	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL012	RESET UNIT with repeat lamp, patient/staff call		1
1		1	CAL015	LAMP repeat patient call, wall mounted (red)		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	CAL029	LAMP patient reassurance, wall mounted		1
1		1	CLO002	CLOCK synchronous, wall mounted		1
1		1	LIG053	LUMINAIRE examination adjustable, 1000 lux, ceiling mounted		1
1		1	MSC091	CABINET base, 400mm facing, (400x600 inserts), with formed plastic liners, 1 door hinged right, on plinth, o/a height 900, HTM71		1
2		2	MSC092	CABINET base, 400mm facing, (400x600 inserts), with formed plastic liners, 1 door hinged left, on plinth, o/a height 900, HTM71		1
1		1	MSC095	CABINET base, 400mm facing, (400x600 inserts), with 3 telescopic runners, 1 door hinged right, on plinth, o/a height 900 HTM71		1
2		2	MSC187	CABINET base, 400mm facing, with 2 shelves, 1 door hinged right, on plinth, o/a height 900, HTM71		1
2		2	MSC188	CABINET base, 400mm facing, with 2 shelves, 1 door hinged left, on plinth, o/a height 900, HTM71		1
1		1	MSW014	WORKTOP, for 4x 400mm facing inserts cabinets, 1820W 700D nominal, HTM71		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
4		4	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT046	CONNECTION UNIT unswitched 13amp, flex outlet, wall/trunking mounted		1
3		3	OUT131	SOCKET outlet double data/voice, wall/trunking mounted		1
1		1	OUT452	OUTLET 4 kPa compressed air medical, wall/trunking mounted		1
1		1	OUT471	OUTLET oxygen medical, wall/trunking mounted		1
1		1	OUT476	OUTLET vacuum medical, wall/trunking mounted		1
1		1	SWC034	SWITCH dimmer modulating, wall mounted		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	THE005	THERMOSTAT, wall mounted		1
1		1	TRA106	TRACK, curtain, one sided, 4000mm length		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2

ADB	Schedule of Components by Room	X0112

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0112 Treatment room Multifunctional, multidisciplinary use
Room Number: **Revision Date:** 13/08/2007

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS438	DISPENSER, disposable gloves set of 3 and disposable apron, wall mounted		2
1		1	HOO022	HOOK, double, wall mounted		2
1		1	COM033	COMPUTER KEYBOARD		3
1		1	COM046	COMPUTER MONITOR, 15" TFT, digital flat panel display, desk top		3
1		1	COU007	COUCH, examination/treatment, (2 section), with paper roll holder, variable height, retractable wheels		3
1		1	HOL005	HOLDER, sack, medium, capacity 70 litres, freestanding		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	HOL020	HOLDER, sharps box, up to 7 litre capacity, rail/trolley hang or wall mounted, 170H 125W 100D		3
1		1	MST001	TROLLEY, small, single, with handle, 5 sets of runners, 600mm facing, 850H 730W 450D nominal, HTM71		3
1		1	MST002	TROLLEY, small, single, with handle and worktop, 5 sets of runners, 600mm facing, 850H 730W 450D nominal, HTM71		3
1		1	STO006	STOOL, surgeon/anaesthetist, height adjustable, includes anti-static seat pads		3
1		1	STO013	STOOL, swivel, with back, 710 height		3

ADB	Room Data Sheet	X0206

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	X0206	Treatment room: Plaster, 3 patients		
Room Number:			**Revision Date:**	08/04/2009

Activities:	1) Patient may be ambulant, in a wheelchair or on a trolley. 2) Patient transferred to a treatment chair/couch. 3) Removing plaster splints. 4) Application of plaster. 5) Minor clinical procedures and dressings. 6) Storing equipment. 7) Holding daily supply of plaster of Paris bandage. 8) Holding daily supply of resin plaster. 9) Disposal of plaster waste and discarded splints. 10) Dispensing disposable aprons. 11) Clinical hand washing. 12) Assessing x-ray images.			
Personnel:	2 x Patients 3 x Staff			
Planning Relationships:	Adjacent to main hospital street. These facilities to be provided within OPD for orthopaedic/plaster clinics.			
Space Data:	**Area (m²):**	24.00	**Height (mm):**	2,700

Notes: One cubicle should have a ceiling suspension position.

ADB	Room Environmental Data	X0206

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0206	Treatment room: Plaster, 3 patients
Room Number:		**Revision Date:** 08/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):	23	
Mechanical Ventilation (Supply ac/hr):	6.0	Mechanical ventilation (extract): Maximum 10ac/hr.
Mechanical Ventilation (Extract ac/hr):	6.0	
Pressure Relative to Adjoining Space:	NEG	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	400	Couch
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	Y	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Sound containment required
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	Sign required: 'Caution Very hot Water' above the sink. Hot Water Max.Temp: Washbasin 41.
Hot Water Max. Temp (DegC):	60	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	X0206

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0206	Treatment room: Plaster, 3 patients
Room Number:		**Revision Date:** 08/04/2009

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 4 Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1500mm, one & a half leaf, plain flush; bed access
Windows:	(HTM 55) Clear glass, solar control, privacy control
Internal Glazing:	(HTM 57)
Hatch:	
Notes:	

ADB	Schedule of Components by Room	X0206

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0206 Treatment room: Plaster, 3 patients
Room Number: **Revision Date:** 08/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
3		3	CAL003	PUSH BUTTON patient/staff call with socket for extension pear push, wall mounted		1
3		3	CAL012	RESET UNIT with repeat lamp, patient/staff call		1
3		3	CAL029	LAMP patient reassurance, wall mounted		1
3		3	MIR003	MIRROR, wall mounted, 1000H 300W		1
6		6	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
3		3	OUT059	CONNECTION UNIT switched 13amp, flex, indicator light		1
3		3	RAI081	RAIL, grab, horizontal, wall mounted, 900mm		1
1		1	SNS516	SINK, plaster, plain top, no tap holes, no upstand, no overflow, right hand drainer, stainless steel, 900H 1200W 600D. HTM64PSH.		1
3		3	STF200	STORAGE UNIT, mid, shelf, 150H 300W 150D, HTM63		1
3		3	STF275	STORAGE UNIT, upper, cupboard, 2 door, 1 shelf, lockable, 550H 600W 300D, HTM63		1
1		1	TAP809	TAP bib, lever, hospital pattern, pair hot and cold, 1/2 in. HTM64TBH1		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	TRA118	TRACK, curtain, one sided, curved, 2500mm length		1
2		2	TRA123	TRACK, curtain, two sided, L-shape, curved, 2700L 2500W		1
1		1	WAS102	WASTE, unslotted flush-grated, metal, 1.1/2 in. HTM64WT2		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	WKT263	WORKTOP, dished, stainless steel, cantilevered from wall, 900W 650D, HTM63		1
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
3		3	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS024	DISPENSER, soap, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS436	DISPENSER, disposable apron, wall mounted		2
3		3	HOO022	HOOK, double, wall mounted		2
6		6	HOO061	HOOK, limb sling, ceiling mounted		2
3		3	ILL010	ILLUMINATOR, x-ray film, double, wall mounted		2
3		3	BUC003	BUCKET, plaster, with stand, mobile, 900H 300W 300D		3
3		3	CHA023	CHAIR, upright, wood		3
3		3	COU007	COUCH, examination/treatment, (2 section), with paper roll holder, variable height, retractable wheels		3

ADB	Schedule of Components by Room	X0206

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0206 Treatment room: Plaster, 3 patients
Room Number: **Revision Date:** 08/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	HOL014	HOLDER, sack, with lid foot operated, large, capacity 120 litres, mobile		3
3		3	RES003	REST FOOT, height adjustable, washable cover		3
3		3	TRO133	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 750W 450D		3
3		3	TRO301	TROLLEY, plaster		3

ADB	Room Data Sheet	X0214

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	X0214	Treatment room: child		
Room Number:			**Revision Date:**	23/04/2009

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Patient may arrive on a trolley or in a bed. 3) Patient transferred to a couch. 4) Clinical examination and assessment in privacy. 5) Medical and nursing procedures. 6) Holding small items of equipment. 7) Clinical hand washing. 8) Recording patient data/notes.			
Personnel:	1 x Patient 3 x Others			
Planning Relationships:	Close to clean utility. Easy access to dirty utility.			
Space Data:	**Area (m²):**	16.00	**Height (mm):**	2,700
Notes:	Lamp indicator repeat call situated overdoor on outside entrance of the room.			

ADB	Room Environmental Data	X0214

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0214	Treatment room: child
Room Number:		**Revision Date:** 23/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):	23	
Mechanical Ventilation (Supply ac/hr):	6.0	
Mechanical Ventilation (Extract ac/hr):	6.0	
Pressure Relative to Adjoining Space:	BAL	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Workng plane
Service Illumination Night (Lux):		
Local Illumination (Lux):	1,000.0	Couch. Examination lamp.
Colour Rendering Required:	Y	
Standby Lighting Grade:		A&B A Local, B Service.
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Sound containment required.
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	X0214

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0214	Treatment room: child
Room Number:		**Revision Date:** 23/04/2009

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3 i.e. Smooth, imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1900mm, double equal leaves, plain flush, retention 90 degrees, lockable; bed access
Windows:	(HTM 55) Clear or obscured, solar & privacy control. Blackout
Internal Glazing:	(HTM 57)
Hatch:	
Notes:	Dooset vision panel with vistamatic control - project option. In HBN23 HACH & YP, door hinge protectors are required.

ADB	Schedule of Components by Room	X0214

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0214 Treatment room: child
Room Number: **Revision Date:** 23/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL003	PUSH BUTTON patient/staff call with socket for extension pear push, wall mounted		1
1		1	CAL007	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL012	RESET UNIT with repeat lamp, patient/staff call		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	CAL029	LAMP patient reassurance, wall mounted		1
1		1	CLO002	CLOCK synchronous, wall mounted		1
1		1	MSC197	CABINET top, 600mm facing, with 1 shelf, 1 door hinged right, wall mounted, HTM71		1
1		1	MSC198	CABINET top, 600mm facing, with 1 shelf, 1 door hinged left, wall mounted, HTM71		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
2		2	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT046	CONNECTION UNIT unswitched 13amp, flex outlet, wall/trunking mounted		1
1		1	OUT059	CONNECTION UNIT switched 13amp, flex, indicator light		1
1		1	OUT453	OUTLET 4 kPa compressed air medical, wall/trunking mounted		1
1		1	OUT470	OUTLET oxygen medical, wall/trunking mounted		1
1		1	OUT475	OUTLET vacuum medical, wall/trunking mounted		1
1		1	SWC001	SWITCH 5amp ac single pole, 1 way, wall mounted		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	BRA003	BRACKET, holder, suction unit, wall mounted		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS435	DISPENSER, disposable gloves, set of 3, wall mounted		2
1		1	DIS436	DISPENSER, disposable apron, wall mounted		2
1		1	HOO022	HOOK, double, wall mounted		2
2		2	HOO024	HOOK, hat and coat, 1		2
1		1	ILL010	ILLUMINATOR, x-ray film, double, wall mounted		2
2		2	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	COU007	COUCH, examination/treatment, (2 section), with paper roll holder, variable height, retractable wheels		3

ADB	Schedule of Components by Room	X0214

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0214 Treatment room: child
Room Number: **Revision Date:** 23/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	LIG015	LUMINAIRE observation/examination, mobile, 1000 lux		3
1		1	RES002	REST FOOT, height adjustable, 380-510H 501W 300D (Standard)		3
1		1	STO006	STOOL, surgeon/anaesthetist, height adjustable, includes anti-static seat pads		3
1		1	TRO133	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 750W 450D		3

ADB	Room Data Sheet	X0221

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	X0221	Treatment room: Endoscopy		
Room Number:			**Revision Date:**	22/04/2009

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Patient may arrive on a trolley or in a bed. 3) Patient transferred to a treatment trolley. 4) Administration of sedation or local anaesthetic. 5) Clinical procedures. 6) Holding working supply of clean and sterile materials for immediate use. 7) Clinical hand washing. 8) Assessing x-ray images.			
Personnel:	1 x Patient 4 x Staff			
Planning Relationships:	Close to dirty utility. Close to clean utility.			
Space Data:	**Area (m²):**	26.00	**Height (mm):**	2,700

Notes: Laser may be used. Monitor for endoscope is required. The ceiling services pendant may be a rigid or retractable column. Lamp indicator repeat call situated overdoor on outside entrance of the room. Computer keyboard should be with cleanable or disposable cover. All fixtures and fittings must be suitable for laser use within room.

ADB	Room Environmental Data	X0221

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0221	Treatment room: Endoscopy
Room Number:		**Revision Date:** 22/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):	23	
Mechanical Ventilation (Supply ac/hr):		
Mechanical Ventilation (Extract ac/hr):	10.0	
Pressure Relative to Adjoining Space:	P & N	Humidity (%RH): or 60
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):	40	
General Notes:		POS NEG; TS1
LIGHTING		
Service Illumination (Lux):	400	Bed/trolley
Service Illumination Night (Lux):		
Local Illumination (Lux):	15,000.0	Trolley
Colour Rendering Required:	Y	
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):		
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	X0221

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0221	Treatment room: Endoscopy
Room Number:		**Revision Date:** 22/04/2009

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3 i.e. Smooth, imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Two sets of doors: 1x 1500mm, one & a half leaf, plain flush, lockable. 1x 1000mm, Single leaf, plain flush. lockable; bed access
Windows:	(HTM 55) N/A
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	X0221

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0221 Treatment room: Endoscopy
Room Number: **Revision Date:** 22/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL007	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	LIG050	LUMINAIRE operating (minor)		1
4		4	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT049	CONNECTION UNIT switched 13amp, flex outlet, wall/trunking mounted		1
1		1	OUT059	CONNECTION UNIT switched 13amp, flex, indicator light		1
1		1	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	PEN003	PENDANT medical and power supply unit, outlets: 1x 13amp switched double; Medical Oxygen Nitrous oxide, Vacuum medical, Scavenging		1
3		3	SHE221	SHELF, 1200W 300D		1
2		2	STF128	STORAGE UNIT, lower, cupboard, 2 door, 1 shelf, lockable, 550H 600W 450D, HTM63		1
1		1	SUC002	SUCTION UNIT, pipeline, high pressure, theatre		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	WKT124	WORKTOP, cantilevered from wall, 1200W 550D, HTM63		1
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	ILL010	ILLUMINATOR, x-ray film, double, wall mounted		2
1		1	IMG021	IMAGE INTENSIFIER UNIT, C-arm, mobile		2
1		1	IMG023	IMAGE INTENSIFIER, monitor, (Part of IMG021)		2
1		1	IMG024	IMAGE INTENSIFIER, monitor trolley, (Part of IMG021)		2
1		1	CHA063	CHAIR, height adjustable, with arms, high back, swivel, 5 star base, on castors		3
1		1	COM031	COMPUTER CPU		3
1		1	COM032	COMPUTER VDT MONITOR		3
1		1	COM033	COMPUTER KEYBOARD		3
1		1	COM038	COMPUTER PRINTER, laser, A4, 250H 380W 385D		3
1		1	DES020	DESK, cantilever, single pedestal 3 drawer, cable management, modesty panel, 1800W 800D		3

ADB	Schedule of Components by Room	X0221

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0221 Treatment room: Endoscopy
Room Number:
Revision Date: 22/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	HOL014	HOLDER, sack, with lid foot operated, large, capacity 120 litres, mobile		3
1		1	REF060	REFRIGERATOR, reagents, capacity 110 litres, external temperature gauge, automatic defrost, underbench, 850H 500W 590D		3
1		1	TRO145	TROLLEY endoscope, 1680H 1190W 600D		3
1		1	TRO295	TROLLEY PATIENT, day surgery, with x-ray translucent platform, with brakes		3

ADB	Room Data Sheet	X0237

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	X0237	Resuscitation room: 4 places		
Room Number:			**Revision Date:**	13/08/2007

Activities:	1) Patient will arrive on trolley. 2) Resuscitation procedures. 3) Clinical procedures requiring all sides access to patient, minimum of 5 staff using variety of equipment. 4) Using ceiling suspensions medical supply unit. 5) Using ceiling mounted imaging x-ray equipment. 6) Patient may require surgical procedures under anaesthetic. 7) Holding controlled and scheduled drugs. 8) Holding sterile supplies. 9) Holding sterile equipment. 10) Holding contaminated linen prior to transfer to the disposal point. 11) Parking trolley(s). 12) Clinical hand washing. 13) Use of visual display terminal(s). 14) Assessing x-ray images. 15) Writing up patients notes.			
Personnel:	4 x Patients Minimum 5 staff per bay.			
Planning Relationships:	Easy access from consulting/examination/treatment spaces. Immediately adjacent to stretcher entrance.			
Space Data:	**Area (m²):**	116.00	**Height (mm):**	3,000
Notes:	One resuscitation bay must be equipped for babies, children and young people. Gantry for ceiling mounted imaging equipment across all the resuscitation bays is required. Mobile screen to contained each bay. Telephone "hand free", on medical supply unit or wall mounted. Warning lamp to be installed on outside entrance to resuscitation room. Lamp indicator repeat call situated overdoor on outside entrance of the room. Computer keyboard should be with cleanable or disposable cover.			

ADB	Room Environmental Data	X0237

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0237	Resuscitation room: 4 places
Room Number:		**Revision Date:** 13/08/2007

AIR	Requirements	Notes
Winter Temperature (DegC):	27	Summer and winter temperature control 16 to 27 degC.
Summer Temperature (DegC):	16	
Mechanical Ventilation (Supply ac/hr):	10.0	Mechanical ventilation (supply): Minimum to suit heat gains.
Mechanical Ventilation (Extract ac/hr):	6.0	
Pressure Relative to Adjoining Space:	POS	Final filtration EU10/11 to suit clinical requirements. Humidity 40 - 60
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):	60	
General Notes:		
LIGHTING		
Service Illumination (Lux):	400	Working plane
Service Illumination Night (Lux):		
Local Illumination (Lux):	30,000.0	1 Trolley only
Colour Rendering Required:	Y	Service, local
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	X0237

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0237	Resuscitation room: 4 places
Room Number:		**Revision Date:** 13/08/2007

Walls:	Surface Finish (HTM 56): 3 i.e. Impervious, jointless, smooth Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3: Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3: Smooth, imperforate Moisture Resistance (HTM 60): N: Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Two sets of doors: each - 1900mm, double equal leaves, plain flush; patient trolley access
Windows:	(HTM 55) Obscured glass, solar control
Internal Glazing:	(HTM 57)
Hatch:	

Notes:

ADB	Schedule of Components by Room	X0237

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0237 Resuscitation room: 4 places
Room Number: **Revision Date:** 13/08/2007

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
3		3	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	CLO009	CLOCK impulse with time elapse, wall mounted		1
2		2	CUP172	CUPBOARD, lower, built-in, pass-through, 2 set of 2 doors, lockable, 900H 1200W 600D		1
4		4	LIG050	LUMINAIRE operating (minor)		1
2		2	LIG074	ILLUMINATED SIGN "DO NOT ENTER"		1
1		1	LIG081	LUMINAIRE fitted with single fluorescent lamp with switch, below drug cupboard, 8watt, 400mm		1
15		15	MSC007	CABINET tall, 400mm facing, (400x600 inserts), with formed plastic liners and 10 telescopic runners, open, on plinth, o/a height 2100, HTM71		1
8		8	MSC095	CABINET base, 400mm facing, (400x600 inserts), with 3 telescopic runners, 1 door hinged right, on plinth, o/a height 900 HTM71		1
8		8	MSC096	CABINET base, 400mm facing, (400x600 inserts), with 3 telescopic runners, 1 door hinged left, on plinth, o/a height 900, HTM71		1
8		8	MSC197	CABINET top, 600mm facing, with 1 shelf, 1 door hinged right, wall mounted, HTM71		1
8		8	MSC198	CABINET top, 600mm facing, with 1 shelf, 1 door hinged left, wall mounted, HTM71		1
4		4	MSW014	WORKTOP, for 4x 400mm facing inserts cabinets, 1820W 700D nominal, HTM71		1
8		8	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT050	OUTLET to controlled drugs cupboard, wall mounted		1
1		1	OUT052	CONNECTION UNIT switched 13amp, wall/trunking mounted		1
1		1	OUT056	CONNECTION UNIT unswitched 13amp, wall/trunking mounted		1
4		4	OUT059	CONNECTION UNIT switched 13amp, flex, indicator light		1
4		4	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
4		4	PEN020	PENDANT RESUSCITIATION medical and power supply unit, 2 articulated arms, with docking system, ceiling mounted, medical gases and power outlets comprising: -Ventilator arm; 8x socket outlet switched 13amp single 1x outlet oxygen medical 1x outlet compressed air medical 1x outlet vacuum medical 1x outlet nitrous oxide medical 1x outlet gas scavenging (AGS) 1x socket outlet patient monitoring with cover plate - Power and media arm; 4x socket outlet switched 13amp single 1x push button staff emergency call 1x switch dimmer modulating 1x telephone socket outlet		1

ADB	Schedule of Components by Room	X0237

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0237 Resuscitation room: 4 places
Room Number: **Revision Date:** 13/08/2007

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	SNS704	SINK, single bowl, 2 tap holes, no overflow, stainless steel, 600W 650D. HTM64SK1. Use only with HTM63 profile.		1
1		1	STF127	STORAGE UNIT, lower, cupboard, 2 door, 1 shelf, 550H 600W 450D, HTM63		1
1		1	STF286	STORAGE UNIT, upper, cupboard, medicine, 2 door, lockable, 550H 600W 300D, HTM63		1
1		1	STF290	STORAGE UNIT, upper, cupboard, controlled drugs, 1 door, lockable, with warning light, 550H 600W 300D, HTM63		1
1		1	TAP809	TAP bib, lever, hospital pattern, pair hot and cold, 1/2 in. HTM64TBH1		1
3		3	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
7		7	TRA204	TRACK, curtain, one sided, radiation protection, lead/upvc, 4600mm length		1
1		1	WAS102	WASTE, unslotted flush-grated, metal, 1.1/2 in. HTM64WT2		1
3		3	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	WAS108	TRAP, bottle, 1.1/2 in, plastic resealing. HTM64TRR2/P		1
1		1	WKT144	WORKTOP, cantilevered from wall, 1200W 650D, HTM63		1
4		4	WKT150	WORKTOP, cantilevered from wall, 2100W 650D, HTM63		1
3		3	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
4		4	DIS013	DISPENSER, paper towel, wall mounted		2
3		3	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
4		4	HOO024	HOOK, hat and coat, 1		2
4		4	ILL010	ILLUMINATOR, x-ray film, double, wall mounted		2
1		1	XRA010	X-RAY CS, ceiling suspensions, with telescopic tube of column and rotating/tilting arm		2
1		1	XRA011	X-RAY CS CONTROL DESK UNIT, freestanding, (Part of XRA023)		2
1		1	XRA012	X-RAY CS STAND for control unit, (Part of XRA023)		2
1		1	XRA013	X-RAY CS GENERATOR CABINET, (Part of XRA010)		2
4		4	XRA015	X-RAY CS RAIL, ceiling suspensions, 6280mm, (Part of XRA010)		2
1		1	ANA001	ANAESTHETIC MACHINE/WORKSTATION electrically powered piston ventilator, mobile, 1350H 750W 650D		3
4		4	CHA017	CHAIR, upright, upholstered, stacking		3
4		4	COM032	COMPUTER VDT MONITOR		3
4		4	COM033	COMPUTER KEYBOARD		3
4		4	COM049	COMPUTER MONITOR, 17" TFT, digital flat panel display, high-resolution screens, desk top		3

ADB	Schedule of Components by Room	X0237

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0237 Resuscitation room: 4 places
Room Number: **Revision Date:** 13/08/2007

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
4		4	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	RAC197	RACK, x-ray lead apron, 6 swivel arms, mobile		3
4		4	RAC352	*RACK, wire mesh, strong, includes 6 shelves 227 wide and 8 shelves 152 wide, o/a 610H 1295W 305D		3
1		1	REF062	REFRIGERATOR, capacity 82 litres, external temperature gauge, lockable, 660H 500W 510D		3
4		4	STA142	STAND, infusion, twin hook, breaks, mobile		3
4		4	STO006	STOOL, surgeon/anaesthetist, height adjustable, includes anti-static seat pads		3
2		2	TRO131	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 450W 450D		3
6		6	TRO133	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 750W 450D		3
4		4	TRO235	TROLLEY, contaminated linen, single ring, stainless steel		3
4		4	TRO282	TROLLEY PATIENT, accident, image top, with tilt and brakes, 540-1000H 740W 2110D		3
2		2	TRO310	TROLLEY, emergency/resuscitation, complete with defibrillator, 955H 825W 575D		3
2		2	VEN025	VENTILATOR, portable, adjustable minute volume, 460H 470W 310D		3

ADB	Room Data Sheet	X0238

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	X0238	Resuscitation room: 6 places		
Room Number:			**Revision Date:**	05/05/2009

Activities:	1) Patient will arrive on trolley. 2) Resuscitation procedures. 3) Clinical procedures requiring all sides access to patient, minimum of 5 staff using variety of equipment. 4) Using ceiling suspensions medical supply unit. 5) Using ceiling mounted imaging x-ray equipment. 6) Patient may require surgical procedures under anaesthetic. 7) Holding controlled and scheduled drugs. 8) Holding sterile supplies. 9) Holding sterile equipment. 10) Holding contaminated linen prior to transfer to the disposal point. 11) Parking trolley(s). 12) Clinical hand washing. 13) Use of visual display terminal(s). 14) Assessing x-ray images. 15) Writing up patients notes.			
Personnel:	6 x Patients Minimum 5 staff per bay.			
Planning Relationships:	Easy access from consulting/examination/treatment spaces. Immediately adjacent to stretcher entrance.			
Space Data:	**Area (m²):**	172.00	**Height (mm):**	3,000
Notes:	One resuscitation bay must be equipped for babies, children and young people. Gantry for ceiling mounted imaging equipment across all the resuscitation bays is required. Mobile screen to contained each bay. Telephone "hand free", on medical supply unit or wall mounted. Warning lamp to be installed on outside entrance to resuscitation room. Lamp indicator repeat call situated overdoor on outside entrance of the room. Computer keyboard should be with cleanable or disposable cover.			

ADB	Room Environmental Data	X0238

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0238	Resuscitation room: 6 places
Room Number:		**Revision Date:** 05/05/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	27	Summer and winter temperature control 16 to 27 degC.
Summer Temperature (DegC):	16	
Mechanical Ventilation (Supply ac/hr):	10.0	Mechanical ventilation (supply): Minimum to suit heat gains.
Mechanical Ventilation (Extract ac/hr):	6.0	
Pressure Relative to Adjoining Space:	POS	Final filtration EU10/11 to suit clinical requirements. Humidity 40 - 60
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):	60	
General Notes:		

LIGHTING		
Service Illumination (Lux):	400	Working plane
Service Illumination Night (Lux):		
Local Illumination (Lux):	30,000.0	1 Trolley only
Colour Rendering Required:	Y	Colour Rendering:
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting
General Notes:		

NOISE		
Privacy Factor Required (dB):	80	
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		

SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		

FIRE	
Enclosure:	
Automatic Detection:	Smoke

ADB	Room Design Character	X0238

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0238	Resuscitation room: 6 places
Room Number:		**Revision Date:** 05/05/2009

Walls:	Surface Finish (HTM 56): 3 i.e. Impervious, jointless, smooth Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3: Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3: Smooth, imperforate Moisture Resistance (HTM 60): N: Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Two sets of doors: each - 1900mm, double equal leaves, plain flush; patient trolley access
Windows:	(HTM 55) Obscured glass, solar control
Internal Glazing:	(HTM 57)
Hatch:	
Notes:	

ADB	Schedule of Components by Room	X0238

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0238 Resuscitation room: 6 places
Room Number: **Revision Date:** 05/05/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
5		5	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
5		5	CLO009	CLOCK impulse with time elapse, wall mounted		1
3		3	CUP172	CUPBOARD, lower, built-in, pass-through, 2 set of 2 doors, lockable, 900H 1200W 600D		1
5		5	LIG050	LUMINAIRE operating (minor)		1
2		2	LIG074	ILLUMINATED SIGN "DO NOT ENTER"		1
1		1	LIG081	LUMINAIRE fitted with single fluorescent lamp with switch, below drug cupboard, 8watt, 400mm		1
42		42	MSC007	CABINET tall, 400mm facing, (400x600 inserts), with formed plastic liners and 10 telescopic runners, open, on plinth, o/a height 2100, HTM71		1
12		12	MSC095	CABINET base, 400mm facing, (400x600 inserts), with 3 telescopic runners, 1 door hinged right, on plinth, o/a height 900 HTM71		1
12		12	MSC096	CABINET base, 400mm facing, (400x600 inserts), with 3 telescopic runners, 1 door hinged left, on plinth, o/a height 900, HTM71		1
12		12	MSC197	CABINET top, 600mm facing, with 1 shelf, 1 door hinged right, wall mounted, HTM71		1
12		12	MSC198	CABINET top, 600mm facing, with 1 shelf, 1 door hinged left, wall mounted, HTM71		1
6		6	MSW014	WORKTOP, for 4x 400mm facing inserts cabinets, 1820W 700D nominal, HTM71		1
11		11	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT050	OUTLET to controlled drugs cupboard, wall mounted		1
1		1	OUT052	CONNECTION UNIT switched 13amp, wall/trunking mounted		1
1		1	OUT056	CONNECTION UNIT unswitched 13amp, wall/trunking mounted		1
6		6	OUT059	CONNECTION UNIT switched 13amp, flex, indicator light		1
6		6	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
6		6	PEN020	PENDANT RESUSCITIATION medical and power supply unit, 2 articulated arms, with docking system, ceiling mounted, medical gases and power outlets comprising: -Ventilator arm; 8x socket outlet switched 13amp single 1x outlet oxygen medical 1x outlet compressed air medical 1x outlet vacuum medical 1x outlet nitrous oxide medical 1x outlet gas scavenging (AGS) 1x socket outlet patient monitoring with cover plate - Power and media arm; 4x socket outlet switched 13amp single 1x push button staff emergency call 1x switch dimmer modulating 1x telephone socket outlet		1

ADB	Schedule of Components by Room	X0238

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0238 Resuscitation room: 6 places
Room Number: **Revision Date:** 05/05/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	SNS704	SINK, single bowl, 2 tap holes, no overflow, stainless steel, 600W 650D. HTM64SK1. Use only with HTM63 profile.		1
1		1	STF286	STORAGE UNIT, upper, cupboard, medicine, 2 door, lockable, 550H 600W 300D, HTM63		1
1		1	STF290	STORAGE UNIT, upper, cupboard, controlled drugs, 1 door, lockable, with warning light, 550H 600W 300D, HTM63		1
1		1	TAP809	TAP bib, lever, hospital pattern, pair hot and cold, 1/2 in. HTM64TBH1		1
5		5	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
10		10	TRA204	TRACK, curtain, one sided, radiation protection, lead/upvc, 4600mm length		1
1		1	WAS102	WASTE, unslotted flush-grated, metal, 1.1/2 in. HTM64WT2		1
5		5	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	WAS108	TRAP, bottle, 1.1/2 in, plastic resealing. HTM64TRR2/P		1
6		6	WKT150	WORKTOP, cantilevered from wall, 2100W 650D, HTM63		1
5		5	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
6		6	DIS013	DISPENSER, paper towel, wall mounted		2
5		5	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
6		6	HOO024	HOOK, hat and coat, 1		2
6		6	ILL010	ILLUMINATOR, x-ray film, double, wall mounted		2
1		1	XRA010	X-RAY CS, ceiling suspensions, with telescopic tube of column and rotating/tilting arm		2
1		1	XRA011	X-RAY CS CONTROL DESK UNIT, freestanding, (Part of XRA023)		2
1		1	XRA012	X-RAY CS STAND for control unit, (Part of XRA023)		2
1		1	XRA013	X-RAY CS GENERATOR CABINET, (Part of XRA010)		2
6		6	XRA015	X-RAY CS RAIL, ceiling suspensions, 6280mm, (Part of XRA010)		2
1		1	ANA001	ANAESTHETIC MACHINE/WORKSTATION electrically powered piston ventilator, mobile, 1350H 750W 650D		3
6		6	CHA017	CHAIR, upright, upholstered, stacking		3
6		6	COM032	COMPUTER VDT MONITOR		3
6		6	COM033	COMPUTER KEYBOARD		3
6		6	COM049	COMPUTER MONITOR, 17" TFT, digital flat panel display, high-resolution screens, desk top		3
6		6	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	RAC197	RACK, x-ray lead apron, 6 swivel arms, mobile		3

ADB	Schedule of Components by Room	X0238

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0238 Resuscitation room: 6 places
Room Number:
Revision Date: 05/05/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
6		6	RAC352	*RACK, wire mesh, strong, includes 6 shelves 227 wide and 8 shelves 152 wide, o/a 610H 1295W 305D		3
1		1	REF062	REFRIGERATOR, capacity 82 litres, external temperature gauge, lockable, 660H 500W 510D		3
6		6	STA142	STAND, infusion, twin hook, breaks, mobile		3
6		6	STO006	STOOL, surgeon/anaesthetist, height adjustable, includes anti-static seat pads		3
3		3	TRO131	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 450W 450D		3
10		10	TRO133	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 750W 450D		3
6		6	TRO235	TROLLEY, contaminated linen, single ring, stainless steel		3
6		6	TRO282	TROLLEY PATIENT, accident, image top, with tilt and brakes, 540-1000H 740W 2110D		3
2		2	TRO310	TROLLEY, emergency/resuscitation, complete with defibrillator, 955H 825W 575D		3
4		4	VEN025	VENTILATOR, portable, adjustable minute volume, 460H 470W 310D		3

ADB	Room Data Sheet	X0240

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0240	Major treatment/minor surgery room Space for resuscitation trolley (if required)
Room Number:		**Revision Date:** 07/04/2009

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Patient transferred to a treatment trolley. 3) Administration of local analgesics. 4) Minor surgical procedures under local anaesthetic. 5) Clinical procedures and dressings. 6) Emergency resuscitation. 7) Clinical hand washing. 8) Use of visual display terminal(s). 9) Assessing x-ray images.			
Personnel:	1 x Patient 4 x Staff			
Planning Relationships:	Adjacent to clean utility room/area. Adjacent to dirty utility room/area.			
Space Data:	**Area (m²):**	21.00	**Height (mm):**	2,700

Notes: Lamp indicator repeat call situated overdoor on outside entrance of the room. Computer keyboard should be with cleanable or disposable cover.

ADB	Room Environmental Data	X0240

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0240	Major treatment/minor surgery room Space for resuscitation trolley (if required)
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	Temperature: Control 21degC - 23degC
Summer Temperature (DegC):	23	
Mechanical Ventilation (Supply ac/hr):		Mechanical Vent. (supply): 0.3 m3/s.
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:	POS	
Filtration (%DSE and % Arrestance):	25/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	400	Working plane
Service Illumination Night (Lux):		
Local Illumination (Lux):	30,000.0	Trolley/couch
Colour Rendering Required:	Y	Service, local
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	X0240

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0240	Major treatment/minor surgery room Space for resuscitation trolley (if required)
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 3 i.e. Impervious, jointless, smooth Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 4 i.e. Hard, impervious, jointless, extra slip resistance Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 4 Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1900mm, double equal leaves, plain flush; patient trolley access
Windows:	(HTM 55) Obscured glass, solar control
Internal Glazing:	(HTM 57)
Hatch:	

Notes:

ADB	Schedule of Components by Room	X0240

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0240 Major treatment/minor surgery room Space for resuscitation trolley (if required)
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL007	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	LIG050	LUMINAIRE operating (minor)		1
1		1	MSC092	CABINET base, 400mm facing, (400x600 inserts), with formed plastic liners, 1 door hinged left, on plinth, o/a height 900, HTM71		1
1		1	MSC095	CABINET base, 400mm facing, (400x600 inserts), with 3 telescopic runners, 1 door hinged right, on plinth, o/a height 900 HTM71		1
1		1	MSW060	WORKTOP, for 400mm facing inserts cabinets, 1000W 700D nominal, HTM71		1
5		5	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT059	CONNECTION UNIT switched 13amp, flex, indicator light		1
2		2	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	PEN009	PENDANT outlets: 2x 13amp double - OUT010, Oxygen medical - OUT470, Vacuum medical OUT475, MA4 - OUT453		1
3		3	SHE221	SHELF, 1200W 300D		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	CLO004	CLOCK battery with second sweep hand, wall mounted		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	ILL010	ILLUMINATOR, x-ray film, double, wall mounted		2
1		1	COM031	COMPUTER CPU		3
1		1	COM032	COMPUTER VDT MONITOR		3
1		1	COM033	COMPUTER KEYBOARD		3
1		1	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	HOL014	HOLDER, sack, with lid foot operated, large, capacity 120 litres, mobile		3
2		2	KIC001	KICKABOUT, bowl stand, stainless steel, 360mm dia.		3

ADB	Schedule of Components by Room	X0240

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0240 Major treatment/minor surgery room Space for resuscitation trolley (if required)
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	PLA002	PLATFORM, step-stand, stackable, portable, 130H 480W 330D		3
1		1	RAC352	*RACK, wire mesh, strong, includes 6 shelves 227 wide and 8 shelves 152 wide, o/a 610H 1295W 305D		3
1		1	RAC354	RACK, wire mesh, sterile pack storage, (catheters)		3
6		6	STD275	TOTE BOX, plastic with open top, 120H 200W 300D		3
2		2	STO006	STOOL, surgeon/anaesthetist, height adjustable, includes anti-static seat pads		3
1		1	TRO133	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 750W 450D		3
1		1	TRO136	TROLLEY, dressing, MAYO, 900H 1050W 600D		3
1		1	TRO282	TROLLEY PATIENT, accident, image top, with tilt and brakes, 540-1000H 740W 2110D		3
1		1	TRO310	TROLLEY, emergency/resuscitation, complete with defibrillator, 955H 825W 575D		3

ADB	Room Data Sheet	X0242

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0242	Treatment room: A&E, multi-functional
Room Number:		**Revision Date:** 08/04/2009

Activities:	1) Patient may be ambulant, in a wheelchair or on a trolley. 2) Patient transferred to a treatment trolley. 3) Administration of local analgesics. 4) Minor surgical procedures under local anaesthetic. 5) Clinical procedures and dressings. 6) Monitoring vital physiological signs. 7) Holding supply of medicines, lotions and drugs. 8) Holding working supplies of disposable items. 9) Disposal of contaminated dressings. 10) Clinical hand washing. 11) Use of visual display terminal(s). 12) Assessing x-ray images.			
Personnel:	1 x Patient 1 - 4 Staff 2 x Others			
Planning Relationships:	Adjacent to clean utility room/area. Adjacent to dirty utility room/area. Adjacent to Resuscitation Room.			
Space Data:	**Area (m²):**	12.00	**Height (mm):**	2,700

Notes: Lamp indicator repeat call situated overdoor on outside entrance of the room. Illuminated sign "IN USE" sited outside the doorway of the room. Storage cabinet - accessible from corridor. Telephone - hands free, either wall mounted or attached to the medical supply unit. X-ray illuminator is optional to computer digital viewer. Computer keyboard should be with cleanable or disposable cover.

ADB	Room Environmental Data	X0242

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0242	Treatment room: A&E, multi-functional
Room Number:		**Revision Date:** 08/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	27	Summer and winter temperature control 16 to 27 degC.
Summer Temperature (DegC):	16	
Mechanical Ventilation (Supply ac/hr):		Mechanical Ventilation (supply): To suit heat gain.
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:	POS	Final filtration EU10/11 to suit clinical requirements. Humidity 40 - 60
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):	60	
General Notes:		

LIGHTING		
Service Illumination (Lux):	400	Trolley/couch
Service Illumination Night (Lux):		
Local Illumination (Lux):	30,000.0	Trolley/couch
Colour Rendering Required:	Y	Service, local
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting
General Notes:		

NOISE		
Privacy Factor Required (dB):	80	
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		

SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		

FIRE	
Enclosure:	
Automatic Detection:	Smoke

ADB	Room Design Character	X0242

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0242	Treatment room: A&E, multi-functional
Room Number:		**Revision Date:** 08/04/2009

Walls:	Surface Finish (HTM 56): 5: Moisture Resistance (HTM 56): N:Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 4 i.e. Hard, impervious, jointless, extra slip resistance Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3:Smooth, imperforate Moisture Resistance (HTM 60): N:Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) N/A
Windows:	(HTM 55) Obscured, solar control
Internal Glazing:	(HTM 57)
Hatch:	
Notes:	

ADB	Schedule of Components by Room	X0242

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0242 Treatment room: A&E, multi-functional
Room Number: **Revision Date:** 08/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL003	PUSH BUTTON patient/staff call with socket for extension pear push, wall mounted		1
1		1	CAL007	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL012	RESET UNIT with repeat lamp, patient/staff call		1
1		1	CAL015	LAMP repeat patient call, wall mounted (red)		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	CAL029	LAMP patient reassurance, wall mounted		1
1		1	LIG058	LUMINAIRE examination, adjustable, 1000 lux, wall/trunking/rail mounted		1
1		1	MIR010	MIRROR, wall mounted, 800H 300W		1
1		1	MSC127	CABINET top, 600mm facing, (600x400 inserts), with formed plastic liners, 1 door hinged right, wall mounted, HTM71		1
1		1	MSC128	CABINET top, 600mm facing, (600x400 inserts), with formed plastic liners, 1 door hinged left, wall mounted, HTM71		1
1		1	MSC612	CABINET, base, built-in, pass-through, 2 set of 2 doors, lockable, 900H 1310W 600D nominal		1
1		1	MSW002	WORKTOP, for 2x 600mm facing inserts cabinets, 1310W 500D nominal, HTM71		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
4		4	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT059	CONNECTION UNIT switched 13amp, flex, indicator light		1
1		1	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
1		1	OUT453	OUTLET 4 kPa compressed air medical, wall/trunking mounted		1
1		1	OUT470	OUTLET oxygen medical, wall/trunking mounted		1
1		1	OUT475	OUTLET vacuum medical, wall/trunking mounted		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	CLO004	CLOCK battery with second sweep hand, wall mounted		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS016	DISPENSER, paper sheet (for couch/trolley), wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2

ADB	Schedule of Components by Room	X0242

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0242 Treatment room: A&E, multi-functional
Room Number: **Revision Date:** 08/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
2		2	HOO024	HOOK, hat and coat, 1		2
1		1	ILL010	ILLUMINATOR, x-ray film, double, wall mounted		2
2		2	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	CHA063	CHAIR, height adjustable, with arms, high back, swivel, 5 star base, on castors		3
1		1	COM033	COMPUTER KEYBOARD		3
1		1	COM034	COMPUTER PRINTER, inkjet, colour		3
1		1	COM046	COMPUTER MONITOR, 15" TFT, digital flat panel display, desk top		3
1		1	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
2		2	KIC001	KICKABOUT, bowl stand, stainless steel, 360mm dia.		3
1		1	MON013	MONITOR, vital signs, multi-parameter, with accessories, 280H 360W 215D		3
1		1	STO006	STOOL, surgeon/anaesthetist, height adjustable, includes anti-static seat pads		3
1		1	TRO131	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 450W 450D		3
1		1	TRO133	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 750W 450D		3
1		1	TRO235	TROLLEY, contaminated linen, single ring, stainless steel		3
1		1	TRO282	TROLLEY PATIENT, accident, image top, with tilt and brakes, 540-1000H 740W 2110D		3

ADB	Room Data Sheet	X0242A

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	X0242A	Minor Injuries Treatment room: A&E, multi-functional		
Room Number:			**Revision Date:**	08/04/2009

Activities:	1) Patient may be ambulant, in a wheelchair or on a trolley. 2) Patient transferred to a treatment trolley. 3) Administration of local analgesics. 4) Minor surgical procedures under local anaesthetic. 5) Clinical procedures and dressings. 6) Monitoring vital physiological signs. 7) Holding supply of medicines, lotions and drugs. 8) Holding working supplies of disposable items. 9) Disposal of contaminated dressings. 10) Clinical hand washing. 11) Use of visual display terminal(s). 12) Assessing x-ray images.			
Personnel:	1 x Patient 1 - 4 Staff 2 x Others			
Planning Relationships:	Adjacent to clean utility room/area. Adjacent to dirty utility room/area. Adjacent to Resuscitation Room.			
Space Data:	**Area (m²):**	13.50	**Height (mm):**	2,700

Notes:

Lamp indicator repeat call situated overdoor on outside entrance of the room. Illuminated sign "IN USE" sited outside the doorway of the room. Storage cabinet - accessible from corridor. Telephone - hands free, either wall mounted or attached to the medical supply unit. X-ray illuminator is optional to computer digital viewer. Computer keyboard should be with cleanable or disposable cover. Inter-connecting doors required.

ADB	Room Environmental Data	X0242A

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0242A	Minor Injuries Treatment room: A&E, multi-functional
Room Number:		**Revision Date:** 08/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	27	Summer and winter temperature control 16 to 27 degC.
Summer Temperature (DegC):	16	
Mechanical Ventilation (Supply ac/hr):		Mechanical Ventilation (supply): To suit heat gain.
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:	POS	Final filtration EU10/11 to suit clinical requirements. Humidity 40 - 60
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):	60	
General Notes:		

LIGHTING		
Service Illumination (Lux):	400	Trolley/couch
Service Illumination Night (Lux):		
Local Illumination (Lux):	30,000.0	Trolley/couch
Colour Rendering Required:	Y	Service, local
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting
General Notes:		

NOISE		
Privacy Factor Required (dB):	80	
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		

SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		

FIRE	
Enclosure:	
Automatic Detection:	Smoke

ADB	Room Design Character	X0242A

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0242A	Minor Injuries Treatment room: A&E, multi-functional
Room Number:		**Revision Date:** 08/04/2009

Walls:	Surface Finish (HTM 56): 5: Moisture Resistance (HTM 56): N:Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 4 i.e. Hard, impervious, jointless, extra slip resistance Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3:Smooth, imperforate Moisture Resistance (HTM 60): N:Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) Two doorsets: 1x 1500mm, one & half leaf, plain flush, lockable, 1x 1000mm, single leaf, plain flush, lockable
Windows:	(HTM 55) Obscured, solar control
Internal Glazing:	(HTM 57)
Hatch:	

Notes:

ADB	Schedule of Components by Room	X0242A

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0242A Minor Injuries Treatment room: A&E, multi-functional
Room Number: **Revision Date:** 08/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL003	PUSH BUTTON patient/staff call with socket for extension pear push, wall mounted		1
1		1	CAL007	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL012	RESET UNIT with repeat lamp, patient/staff call		1
1		1	CAL015	LAMP repeat patient call, wall mounted (red)		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	CAL029	LAMP patient reassurance, wall mounted		1
1		1	LIG050	LUMINAIRE operating (minor)		1
1		1	LIG073	ILLUMINATED SIGN "IN USE"		1
1		1	MIR010	MIRROR, wall mounted, 800H 300W		1
1		1	MSC127	CABINET top, 600mm facing, (600x400 inserts), with formed plastic liners, 1 door hinged right, wall mounted, HTM71		1
1		1	MSC128	CABINET top, 600mm facing, (600x400 inserts), with formed plastic liners, 1 door hinged left, wall mounted, HTM71		1
1		1	MSC612	CABINET, base, built-in, pass-through, 2 set of 2 doors, lockable, 900H 1310W 600D nominal		1
1		1	MSW002	WORKTOP, for 2x 600mm facing inserts cabinets, 1310W 500D nominal, HTM71		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
4		4	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT059	CONNECTION UNIT switched 13amp, flex, indicator light		1
1		1	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
1		1	PEN009	PENDANT outlets: 2x 13amp double - OUT010, Oxygen medical - OUT470, Vacuum medical OUT475, MA4 - OUT453		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	WOR119	WORKTOP, 1500W 600D		1
1		1	CLO004	CLOCK battery with second sweep hand, wall mounted		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS016	DISPENSER, paper sheet (for couch/trolley), wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2

ADB	Schedule of Components by Room	X0242A

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0242A Minor Injuries Treatment room: A&E, multi-functional
Room Number: **Revision Date:** 08/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
2		2	HOO024	HOOK, hat and coat, 1		2
1		1	ILL010	ILLUMINATOR, x-ray film, double, wall mounted		2
2		2	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	CHA063	CHAIR, height adjustable, with arms, high back, swivel, 5 star base, on castors		3
1		1	COM033	COMPUTER KEYBOARD		3
1		1	COM034	COMPUTER PRINTER, inkjet, colour		3
1		1	COM046	COMPUTER MONITOR, 15" TFT, digital flat panel display, desk top		3
1		1	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
2		2	KIC001	KICKABOUT, bowl stand, stainless steel, 360mm dia.		3
1		1	MON013	MONITOR, vital signs, multi-parameter, with accessories, 280H 360W 215D		3
1		1	STO006	STOOL, surgeon/anaesthetist, height adjustable, includes anti-static seat pads		3
1		1	TRO131	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 450W 450D		3
1		1	TRO133	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 750W 450D		3
1		1	TRO235	TROLLEY, contaminated linen, single ring, stainless steel		3
1		1	TRO282	TROLLEY PATIENT, accident, image top, with tilt and brakes, 540-1000H 740W 2110D		3

ADB	Room Data Sheet	X0251

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	X0251	Treatment cubicle: dialysis, 1 patient With bed		
Room Number:			**Revision Date:**	08/04/2009

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Positioning patient on bed for treatment. 3) Patient receiving dialysis treatment. 4) Clinical hand washing. 5) Patient to read, writes, listens to radio, views TV and use telephone. 6) Writing up patients notes. 7) Holding clothing and personal effects. 8) Holding small items of equipment. 9) Disposal of waste.			
Personnel:	1 x Patient 1 x Staff			
Planning Relationships:	Part of multi-dialysis room. Adjacent to clean utility room/area. Close to dirty utility room/area.			
Space Data:	**Area (m²):**	13.50	**Height (mm):**	2,700
	Area includes allowances for share circulation and access to basin.			
Notes:	Clinical hand wash basin and clinical waste bins may be shared between two stations. Mobile examination lamp and shpygmomanometer can be shared between the stations. Lamp indicator repeat call situated outside entrance of the bay. Communication and entertainment system - project team option. Medical gases - oxygen and suction - project team option.			

ADB	Room Environmental Data	X0251

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0251	Treatment cubicle: dialysis, 1 patient With bed
Room Number:		**Revision Date:** 08/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):	23	
Mechanical Ventilation (Supply ac/hr):	6.0	
Mechanical Ventilation (Extract ac/hr):	6.0	
Pressure Relative to Adjoining Space:	BAL	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Couch/reclining chair
Service Illumination Night (Lux):		
Local Illumination (Lux):	1,000.0	Examination lamp.
Colour Rendering Required:	Y	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half of that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	X0251

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0251	Treatment cubicle: dialysis, 1 patient With bed
Room Number:		**Revision Date:** 08/04/2009

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5 i.e. Imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) N/A, Part of multi-dialysis room
Windows:	(HTM 55) Clear, solar control, privacy control. Outside view from reclining chair
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	X0251

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0251 Treatment cubicle: dialysis, 1 patient With bed
Room Number: **Revision Date:** 08/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL007	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL021	LAMP repeat staff emergency call, ceiling mounted, (green)		1
1		1	DIA011	RENAL HAEMODIALYSIS MACHINE		1
1		1	LIG003	LUMINAIRE Reading, adjustable arm, 100watt, wall/trunking/rail mounted		1
1		1	OUT004	OUTLET cable fused, ceiling mounted		1
4		4	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT052	CONNECTION UNIT switched 13amp, wall/trunking mounted		1
2		2	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT202	OUTLET, piped music with headphones		1
1		1	OUT208	SOCKET outlet television aerial, single, ceiling mounted		1
1		1	OUT215	SOCKET outlet telephone, wall mounted		1
1		1	OUT470	OUTLET oxygen medical, wall/trunking mounted		1
1		1	OUT475	OUTLET vacuum medical, wall/trunking mounted		1
1		1	PAN069	PANEL media, for satellite dialysis machine, wall mounted		1
2		2	SHE209	SHELF, 800W 300D		1
1		1	SWC001	SWITCH 5amp ac single pole, 1 way, wall mounted		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	BRA010	BRACKET, TV, height adjustable, ceiling mounted		2
1		1	CLO004	CLOCK battery with second sweep hand, wall mounted		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	BED013	BED Kings Fund, variable height, two-way tilt, adjustable backrest, bedstripper, on castors		3
1		1	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	LIG015	LUMINAIRE observation/examination, mobile, 1000 lux		3
1		1	LOC002	LOCKER, bedside, 3 compartment, towel rail at rear, on castors, 902H 485W 485D		3
1		1	TAB073	TABLE, overbed, cantilevered		3

ADB	Schedule of Components by Room	X0251

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0251 Treatment cubicle: dialysis, 1 patient With bed
Room Number: **Revision Date:** 08/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	TRO131	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 450W 450D		3
1		1	TVM004	TELEVISION/VIDEO monitor, (TV/Video) combi unit, colour, 340mm, 340H 360W 360D		3

ADB	Room Data Sheet	X0253

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0253	Treatment cubicles: dialysis, 4 patients With bed & glazes screens
Room Number:		**Revision Date:** 22/04/2009

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Positioning patient on bed for treatment. 3) Patient receiving dialysis treatment. 4) Clinical hand washing. 5) Patient to read, writes, listens to radio, views TV and use telephone. 6) Writing up patients notes. 7) Holding clothing and personal effects. 8) Holding small items of equipment. 9) Disposal of waste.			
Personnel:	4 x Patient up to 4 x Staff			
Planning Relationships:	Adjacent to clean utility room/area. Close to dirty utility room/area.			
Space Data:	**Area (m²):**	44.00	**Height (mm):**	2,700
	Area includes allowances for share circulation and access to basin.			
Notes:	Clinical hand wash basin and clinical waste bins may be shared between two stations. Mobile examination lamp and shpygmomanometer can be shared between the stations. Lamp indicator repeat call situated outside entrance of the bay. Communication and entertainment system - project team option. Medical gases - oxygen and suction - project team option.			

ADB	Room Environmental Data	X0253

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0253	Treatment cubicles: dialysis, 4 patients With bed & glazes screens
Room Number:		**Revision Date:** 22/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):	23	
Mechanical Ventilation (Supply ac/hr):	6.0	
Mechanical Ventilation (Extract ac/hr):	6.0	
Pressure Relative to Adjoining Space:	BAL	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Couch/reclining chair
Service Illumination Night (Lux):		
Local Illumination (Lux):	1,000.0	Examination lamp.
Colour Rendering Required:	Y	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half of that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	X0253

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0253	Treatment cubicles: dialysis, 4 patients With bed & glazes screens
Room Number:		**Revision Date:** 22/04/2009

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5 i.e. Imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 5000mm, one & half leaf, plain flush, lockable
Windows:	(HTM 55) Clear, solar control, privacy control. Outside view from reclining chair
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	X0253

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0253 Treatment cubicles: dialysis, 4 patients With bed & glazes screens
Room Number: **Revision Date:** 22/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
2		2	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
4		4	CAL007	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, wall mounted		1
5		5	CAL021	LAMP repeat staff emergency call, ceiling mounted, (green)		1
4		4	DIA011	RENAL HAEMODIALYSIS MACHINE		1
4		4	LIG003	LUMINAIRE Reading, adjustable arm, 100watt, wall/trunking/rail mounted		1
4		4	OUT004	OUTLET cable fused, ceiling mounted		1
9		9	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
4		4	OUT052	CONNECTION UNIT switched 13amp, wall/trunking mounted		1
8		8	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
1		1	OUT202	OUTLET, piped music with headphones		1
4		4	OUT208	SOCKET outlet television aerial, single, ceiling mounted		1
4		4	OUT215	SOCKET outlet telephone, wall mounted		1
4		4	OUT470	OUTLET oxygen medical, wall/trunking mounted		1
4		4	OUT475	OUTLET vacuum medical, wall/trunking mounted		1
4		4	PAN069	PANEL media, for satellite dialysis machine, wall mounted		1
8		8	SHE209	SHELF, 800W 300D		1
4		4	SWC001	SWITCH 5amp ac single pole, 1 way, wall mounted		1
2		2	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
2		2	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
4		4	BRA010	BRACKET, TV, height adjustable, ceiling mounted		2
1		1	CLO004	CLOCK battery with second sweep hand, wall mounted		2
2		2	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
2		2	DIS013	DISPENSER, paper towel, wall mounted		2
2		2	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
2		2	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
4		4	BED013	BED Kings Fund, variable height, two-way tilt, adjustable backrest, bedstripper, on castors		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	LIG015	LUMINAIRE observation/examination, mobile, 1000 lux		3
4		4	LOC002	LOCKER, bedside, 3 compartment, towel rail at rear, on castors, 902H 485W 485D		3
4		4	TAB073	TABLE, overbed, cantilevered		3

ADB	Schedule of Components by Room	X0253

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0253 Treatment cubicles: dialysis, 4 patients With bed & glazes screens
Room Number: **Revision Date:** 22/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
4		4	TRO131	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 450W 450D		3
4		4	TVM004	TELEVISION/VIDEO monitor, (TV/Video) combi unit, colour, 340mm, 340H 360W 360D		3

ADB	Room Data Sheet	X0255

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0255	Treatment room: Continuous ambulatory peritoneal dialysis, 1 patient
Room Number:		**Revision Date:** 19/10/2006

Activities:	1) Patient may be ambulant, in a wheelchair or on a trolley. 2) Patient transferred to a treatment chair/couch. 3) Performing clinical procedures requiring inserting and changing the lines, cannulae required by CAPD and haemodialysis patient. 4) Clinical hand washing. 5) Holding of contaminated dressings and sharps. 6) Hanging clothing.			
Personnel:	1 x Patient 1 x Staff			
Planning Relationships:	Adjacent to the dialysis area. Adjacent to clean utility. Adjacent to dirty utility.			
Space Data:	**Area (m²):**	16.50	**Height (mm):**	2,700
Notes:	CAPD - Continuous ambulatory peritoneal dialysis. In Satellite dialysis unit used as "Line change room". Lamp indicator repeat call situated overdoor on outside entrance of the room.			

ADB	Room Environmental Data	X0255

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0255	Treatment room: Continuous ambulatory peritoneal dialysis, 1 patient
Room Number:		**Revision Date:** 19/10/2006

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):	23	
Mechanical Ventilation (Supply ac/hr):	6.0	
Mechanical Ventilation (Extract ac/hr):	6.0	
Pressure Relative to Adjoining Space:	BAL	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Couch
Service Illumination Night (Lux):		
Local Illumination (Lux):	47,500.0	47500 lux @ 0.61m, ceiling mounted.
Colour Rendering Required:	Y	
Standby Lighting Grade:	B	Lighting of the level and quality one third to one half that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	Ref: HTM2045
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	35	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	Y	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	X0255

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0255	Treatment room: Continuous ambulatory peritoneal dialysis, 1 patient
Room Number:		**Revision Date:** 19/10/2006

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 4: Hard, impervious, jointless, extra slip resistance Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3 i.e. Smooth, imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 5000mm, one & half leaf, plain flush, lockable
Windows:	(HTM 55) Clear, solar control. Window opening restrictors max 100mm at bottom.
Internal Glazing:	(HTM 57) Observation panel
Hatch:	
Notes:	

ADB	Schedule of Components by Room	X0255

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0255 Treatment room: Continuous ambulatory peritoneal dialysis, 1 patient
Room Number: **Revision Date:** 19/10/2006

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL003	PUSH BUTTON patient/staff call with socket for extension pear push, wall mounted		1
1		1	CAL007	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL012	RESET UNIT with repeat lamp, patient/staff call		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	CAL029	LAMP patient reassurance, wall mounted		1
1		1	LIG055	LUMINAIRE variable spotlight beam produce around 40000 lux @ 1m and 60000 lux @ 0.8m. flexible arm, wall/ceiling mounted		1
1		1	MSC187	CABINET base, 400mm facing, with 2 shelves, 1 door hinged right, on plinth, o/a height 900, HTM71		1
2		2	MSC188	CABINET base, 400mm facing, with 2 shelves, 1 door hinged left, on plinth, o/a height 900, HTM71		1
2		2	MSC198	CABINET top, 600mm facing, with 1 shelf, 1 door hinged left, wall mounted, HTM71		1
1		1	MSC264	CABINET/DRAWER features, base, 400mm facing, 5 drawer, on plinth, o/a height 900, HTM71		1
1		1	MSW014	WORKTOP, for 4x 400mm facing inserts cabinets, 1820W 700D nominal, HTM71		1
1		1	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
4		4	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	STF205	STORAGE UNIT, mid, writing shelf, hinged, 200H 600W 400D, HTM63		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	TRA141	TRACK, curtain, door, one sided, 1500mm doorset		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	DIS435	DISPENSER, disposable gloves, set of 3, wall mounted		2
1		1	DIS436	DISPENSER, disposable apron, wall mounted		2
1		1	HOO022	HOOK, double, wall mounted		2
1		1	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	COU007	COUCH, examination/treatment, (2 section), with paper roll holder, variable height, retractable wheels		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3

ADB	Schedule of Components by Room	X0255

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0255 Treatment room: Continuous ambulatory peritoneal dialysis, 1 patient
Room Number: **Revision Date:** 19/10/2006

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	RES002	REST FOOT, height adjustable, 380-510H 501W 300D (Standard)		3
1		1	STO006	STOOL, surgeon/anaesthetist, height adjustable, includes anti-static seat pads		3
1		1	TRO133	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 750W 450D		3

ADB	Room Data Sheet	X0312

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0312	Activity area: Physiotherapy, 5 patients
Room Number:		**Revision Date:** 07/04/2009

Activities:	1) Rehabilitation exercises 2) Deskwork. 3) Clinical hand washing.			
Personnel:	2-3 staff, up to 5 patients			
Planning Relationships:	Near to Individual Treatment Area.			
Space Data:	**Area (m²):**	55.00	**Height (mm):**	3,200

Notes:

Individual treatment or re-education of patients whose treatment does not require privacy, but does require the use of specialised equipment giving rise to greater activity than is possible in and needing more space than is available in the Individual Treatment cubicles or exercise area. Treatment: Some with privacy & progresses during course of treatment. 1) Patient may stand, sit, or lie on mats, or on exercise table for treatment. 2) Treatment will be supervised by physiotherapist and will involve: exercise without equipment. Use of wall-fixed pulley equipment & other exercises. Use of parallel bars and fixed wall mirror: for walking practice, posture mirror, free-standing equipment. Staff handwashing. Lamp indicator repeat call situated overdoor on outside entrance of the room.

ADB	Room Environmental Data	X0312

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0312	Activity area: Physiotherapy, 5 patients
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		Mechanical ventilation (supply): Vent maybe required to suit location.
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Couch/desk
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	Y	
Standby Lighting Grade:		B: Lighting of the level and quality one third to one half that provided by normal lighting.
General Notes:		
NOISE		
Privacy Factor Required (dB):		
Mechanical Services (NR):		
Intrusive Noise (NR Leq):		
***Acceptable Sound Level [L10dB(A)]:**	55	
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	X0312

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0312	Activity area: Physiotherapy, 5 patients
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5 i.e. Imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1500mm, one & a half leaf, vision panel, lockable; patient trolley access
Windows:	(HTM 55) Clear glass, high level, openable
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	X0312

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0312 Activity area: Physiotherapy, 5 patients
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL007	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	MIR008	MIRROR, triple leaf, wall mounted, 1500H 1500W		1
4		4	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
9		9	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT052	CONNECTION UNIT switched 13amp, wall/trunking mounted		1
4		4	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
2		2	OUT215	SOCKET outlet telephone, wall mounted		1
1		1	OUT315	OUTLET drinking water for equipment		1
1		1	OUT347	OUTLET, tundish, drain point		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	BOA013	BOARD, display/notice, wall mounted, 900H 1200W		2
1		1	BOA037	BOARD, marker, whiteboard, dry-wipe, with pen holder, wall mounted, 900H 1200W		2
1		1	CLO001	CLOCK battery, wall mounted		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	EXE003	EXERCISE BARS, parallel, 3600mm long		2
1		1	EXE007	*EXERCISE BARS, wall, 2400H 920W. Replaced by: EXE025		2
1		1	PUL013	PULLEY, exercise system, wall mounted, 1800H 560W		2
1		1	REF105	REFRIGERATOR MACHINE, ice production 75kg per 24 hours, 720H 485W 570D		2
3		3	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	CHA063	CHAIR, height adjustable, with arms, high back, swivel, 5 star base, on castors		3
1		1	COM031	COMPUTER CPU		3
1		1	COM032	COMPUTER VDT MONITOR		3
1		1	COM033	COMPUTER KEYBOARD		3
1		1	COU010	COUCH, examination/treatment, (3 section), with paper roll holder, variable height, retractable wheels		3
1		1	DES006	DESK, cantilever, single pedestal 3 drawer, modesty panel, 1200W 750D		3

ADB	Schedule of Components by Room	X0312

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0312 Activity area: Physiotherapy, 5 patients
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	EXE008	EXERCISE BENCH, 400H 2655W 300D		3
1		1	EXE013	EXERCISE STEPS, corner configuration, different heights, 1400H 1230W 1530D		3
1		1	EXE014	EXERCISE BICYCLE, ergometer		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
2		2	MIR012	MIRROR, unbreakable/safety glass, mobile, 1600H 500W		3
2		2	STO015	STOOL, wooden, 400H 400W 400D		3
1		1	TAB003	TABLE, 710H 600W 450D		3
1		1	TAB091	TABLE, therapy treatment, quadriceps, folding, 710H 1240W 610D		3

ADB	Room Data Sheet	X0312A

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	X0312A	Activity area: Physiotherapy, 4 patients		
Room Number:			**Revision Date:**	07/04/2009

Activities:	1) Rehabilitation exercises 2) Deskwork. 3) Clinical hand washing.			
Personnel:	2-3 staff, up to 4 patients			
Planning Relationships:	Close to all each generic ward			
Space Data:	**Area (m²):**	40.00	**Height (mm):**	3,200

Notes:

Individual treatment or re-education of patients whose treatment does not require privacy, but does require the use of specialised equipment giving rise to greater activity than is possible in and needing more space than is available in the Individual Treatment cubicles or exercise area. Treatment: Some with privacy & progresses during course of treatment. 1) Patient may stand, sit, or lie on mats, or on exercise table for treatment. 2) Treatment will be supervised by physiotherapist and will involve: exercise without equipment. Use of wall-fixed pulley equipment & other exercises. Use of parallel bars and fixed wall mirror: for walking practice, posture mirror, free-standing equipment. Staff handwashing. Lamp indicator repeat call situated overdoor on outside entrance of the room.

ADB	Room Environmental Data	X0312A

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0312A	Activity area: Physiotherapy, 4 patients
Room Number:		**Revision Date:** 07/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):		
Mechanical Ventilation (Supply ac/hr):		Mechanical ventilation (supply): Vent maybe required to suit location.
Mechanical Ventilation (Extract ac/hr):		
Pressure Relative to Adjoining Space:		
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Couch/desk
Service Illumination Night (Lux):		
Local Illumination (Lux):		
Colour Rendering Required:	Y	
Standby Lighting Grade:		B: Lighting of the level and quality one third to one half that provided by normal lighting.
General Notes:		
NOISE		
Privacy Factor Required (dB):		
Mechanical Services (NR):		
Intrusive Noise (NR Leq):		
***Acceptable Sound Level [L10dB(A)]:**	55	
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	X0312A

Project:	08045	New South Glasgow Hospital
Department:	GEN-SGH	Generic Rooms
Room:	X0312A	Activity area: Physiotherapy, 4 patients
Room Number:		**Revision Date:** 07/04/2009

Walls:	Surface Finish (HTM 56): 5 Moisture Resistance (HTM 56): N i.e. Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 3 i.e. Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 5 i.e. Imperforate Moisture Resistance (HTM 60): N i.e. Normal Humidity Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1500mm, one & a half leaf, vision panel, lockable; patient trolley access
Windows:	(HTM 55) Clear glass, high level, openable
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	X0312A

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0312A Activity area: Physiotherapy, 4 patients
Room Number: **Revision Date:** 07/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
1		1	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
1		1	CAL007	PUSH BUTTON staff emergency call, reset and integral/adjacent indicator lamp, wall mounted		1
1		1	CAL020	LAMP repeat staff emergency call, wall mounted, (green)		1
1		1	MIR008	MIRROR, triple leaf, wall mounted, 1500H 1500W		1
4		4	OUT005	SOCKET outlet switched 13amp single, wall mounted		1
11		11	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
1		1	OUT052	CONNECTION UNIT switched 13amp, wall/trunking mounted		1
5		5	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
2		2	OUT215	SOCKET outlet telephone, wall mounted		1
1		1	OUT315	OUTLET drinking water for equipment		1
1		1	OUT347	OUTLET, tundish, drain point		1
1		1	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	BOA013	BOARD, display/notice, wall mounted, 900H 1200W		2
1		1	BOA037	BOARD, marker, whiteboard, dry-wipe, with pen holder, wall mounted, 900H 1200W		2
1		1	CLO001	CLOCK battery, wall mounted		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
1		1	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	EXE003	EXERCISE BARS, parallel, 3600mm long		2
1		1	PUL013	PULLEY, exercise system, wall mounted, 1800H 560W		2
1		1	REF105	REFRIGERATOR MACHINE, ice production 75kg per 24 hours, 720H 485W 570D		2
3		3	CHA017	CHAIR, upright, upholstered, stacking		3
1		1	CHA063	CHAIR, height adjustable, with arms, high back, swivel, 5 star base, on castors		3
1		1	COM031	COMPUTER CPU		3
1		1	COM032	COMPUTER VDT MONITOR		3
1		1	COM033	COMPUTER KEYBOARD		3
1		1	COU010	COUCH, examination/treatment, (3 section), with paper roll holder, variable height, retractable wheels		3
1		1	DES006	DESK, cantilever, single pedestal 3 drawer, modesty panel, 1200W 750D		3
1		1	EXE008	EXERCISE BENCH, 400H 2655W 300D		3

ADB	Schedule of Components by Room	X0312A

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0312A Activity area: Physiotherapy, 4 patients
Room Number: **Revision Date:** 07/04/2009

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	EXE013	EXERCISE STEPS, corner configuration, different heights, 1400H 1230W 1530D		3
1		1	EXE014	EXERCISE BICYCLE, ergometer		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
2		2	MIR012	MIRROR, unbreakable/safety glass, mobile, 1600H 500W		3
2		2	STO015	STOOL, wooden, 400H 400W 400D		3
1		1	TAB003	TABLE, 710H 600W 450D		3
1		1	TAB091	TABLE, therapy treatment, quadriceps, folding, 710H 1240W 610D		3

ADB	Room Data Sheet	X0999

Project:	08045	New South Glasgow Hospital		
Department:	GEN-SGH	Generic Rooms		
Room:	X0999	Day Room: 8 Chairs		
Room Number:			**Revision Date:**	23/04/2009

Activities:	1) Patient may arrive on foot or in a wheelchair. 2) Positioning patient on reclining chair for treatment. 3) Clinical examination and assessment in privacy. 4) Patient to receive scalp cooling (cold cap), before and during administration of cytotoxic drugs. 5) Administration of cytotoxic drugs by injection or intravenous drip. 6) Parking dressing trolley. 7) Clinical hand washing. 8) Recording patient data/notes.			
Personnel:	8 x Patients 4- 6 Staff			
Planning Relationships:	Close to/from clean utility. Easy access to/from dirty utility. Observation required from receptrion			
Space Data:	**Area (m²):**	36.00	**Height (mm):**	2,700
Notes:	Computer keyboard should be with cleanable or disposable cover.			

ADB	Room Environmental Data	X0999

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Room Number:		**Revision Date:** 23/04/2009

AIR	Requirements	Notes
Winter Temperature (DegC):	21	
Summer Temperature (DegC):	23	
Mechanical Ventilation (Supply ac/hr):	6.0	
Mechanical Ventilation (Extract ac/hr):	6.0	
Pressure Relative to Adjoining Space:	BAL	
Filtration (%DSE and % Arrestance):	/	
Humidity (%RH):		
General Notes:		
LIGHTING		
Service Illumination (Lux):	300	Couch or reclining chair
Service Illumination Night (Lux):		
Local Illumination (Lux):	1,000.0	Couch or reclining chair; Examination lamp.
Colour Rendering Required:	N	
Standby Lighting Grade:	A	Lighting of the level and quality equal or nearly equal to that provided by normal lighting
General Notes:		
NOISE		
Privacy Factor Required (dB):	80	
Mechanical Services (NR):	30	
Intrusive Noise (NR Leq):	40	
***Acceptable Sound Level [L10dB(A)]:**		
***Speech Privacy Required:**	N	
***Quality Which Cannot Be Tolerated:**		
(* alternative format)		
General Notes:		
SAFETY		
Hot Surface Max. Temp (DegC):	43	
Hot Water Max. Temp (DegC):	41	
General Notes:		
FIRE		
Enclosure:		
Automatic Detection:		Smoke

ADB	Room Design Character	X0999

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Walls:	Surface Finish (HTM 56): 5: Moisture Resistance (HTM 56): N:Normal humidity. Cleaning Routine (HTM 56): To manufacturers recommendations
Floor:	Surface Finish (HTM 61): 2: Hard, impervious, jointless, smooth Cleaning Routine (HTM 61): To manufacturers recommendations
Ceiling:	Surface Finish (HTM 60): 3:Smooth, imperforate Moisture Resistance (HTM 60): N:Normal humidity. Cleaning Routine (HTM 60): To manufacturers recommendations
Doorsets:	(HTM 58) 1x 1500mm, one & a half leaf, plain flus; patient trolley access
Windows:	(HTM 55) Clear/obscured. Solar & privacy control
Internal Glazing:	(HTM 57) N/A
Hatch:	
Notes:	

ADB	Schedule of Components by Room	X0999

Project: 08045 New South Glasgow Hospital
Department: GEN-SGH Generic Rooms
Room: X0999 Day Room: 8 Chairs
Room Number: **Revision Date:** 23/04/2009

Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
2		2	BAS101	BASIN, medium, hospital pattern, vitreous china, no tap holes, no overflow, integral back outlet, 500W 400D. HTM64LBHM		1
8		8	BED022	BEDHEAD SERVICES UNIT - TRUNKING MOUNTED incorporating: Electrical panel - 6x Double socket outlet 1x Bedlight control switch; ON/DIM/OFF 1x Bedlight fuse unit Patient/Nurse call panel - 1x Reset switch/Indicator lamp 1x Socket for handset 1x Audio driver 1x Staff emergency switch 1x Handset parking bracket 1x Handset parking clip		1
8		8	CAL050	HANDSET patient's typical facilities: Nurse call button with reassurance Channel display Channel selection Volume control Bedlight control		1
8		8	LIG003	LUMINAIRE Reading, adjustable arm, 100watt, wall/trunking/rail mounted		1
1		1	MSC091	CABINET base, 400mm facing, (400x600 inserts), with formed plastic liners, 1 door hinged right, on plinth, o/a height 900, HTM71		1
1		1	MSC096	CABINET base, 400mm facing, (400x600 inserts), with 3 telescopic runners, 1 door hinged left, on plinth, o/a height 900, HTM71		1
1		1	MSW012	WORKTOP, for 2x 400mm facing inserts cabinets, 910W 700D nominal, HTM71		1
19		19	OUT010	SOCKET outlet switched 13amp twin, wall/trunking mounted		1
9		9	OUT121	SOCKET outlet computer data, wall/trunking mounted		1
8		8	OUT470	OUTLET oxygen medical, wall/trunking mounted		1
8		8	OUT475	OUTLET vacuum medical, wall/trunking mounted		1
2		2	TAP892	TAP bib, 2x8mm thermostatic mixer, automatic action, sensor operated non-touch. HTM64TBH6		1
8		8	TRA124	TRACK curtain, L-shape, 2400x2000		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing. HTM64TRR1/P		1
1		1	CLO004	CLOCK battery with second sweep hand, wall mounted		2
1		1	DIS011	DISPENSER, barrier cream, disposable single cartridge, wall mounted		2
2		2	DIS013	DISPENSER, paper towel, wall mounted		2
9		9	DIS026	DISPENSER, Medical hand sanitizer, lever action, wall mounted		2
2		2	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	CHA002	CHAIR, height adjustable, medium back, swivel, 5 star base, on castors		3
8		8	CHA091	CHAIR, easy, reclining, 1000H 630W 1880D		3
2		2	COM031	COMPUTER CPU		3
2		2	COM033	COMPUTER KEYBOARD		3
2		2	COM046	COMPUTER MONITOR, 15" TFT, digital flat panel display, desk top		3

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Quantity						
New	Trans	Total	Code	Description	Alt. Code	Grp
4		4	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
8		8	STA142	STAND, infusion, twin hook, breaks, mobile		3
8		8	TAB073	TABLE, overbed, cantilevered		3
8		8	TRO131	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 450W 450D		3

SCOTTISH HOSPITALS INQUIRY

Bundle of documents for Oral hearings commencing from 13 May 2025 in relation to the Queen Elizabeth University Hospital and the Royal Hospital for Children, Glasgow

Bundle 43 – Volume 4
Procurement, Contract, Design and Construction Miscellaneous

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