GT GARDINER &THEOBALD

NHS Property Services

PRIMARY CARE/COMMUNITY HEALTH PREMISES SCHEDULE OF STANDARDS AND MINIMUM DESIGN REQUIREMENTS

March 2025

This document sets out NHS Property Services (NHSPS) standard design requirements for the development or redevelopment of Primary Care/Community Health Premises in England.

Gardiner & Theobald LLP are the custodians of the document and changes to it can only be made by them, with due authorisation from NHSPS.

Version No	Main Issue Description	Date	By whom
1	Base document	10/01/18	Gardiner & Theobald LLP
2	Updated to reflect NHSPS comments and required amendments	27/03/18	Gardiner & Theobald LLP
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6	Updated to reflect NHSPS, NHSPS IT and Kier comments	23/05/18	Gardiner & Theobald LLP
7	Open/bookable space requirements	12/07/19	Gardiner & Theobald LLP
8	Reference to HBN added into clause 2.02 (in checking doc re HBN 11-01)	17/07/19	Gardiner & Theobald LLP
9	Appendix H added – Shell and Core	05/11/19	Gardiner & Theobald LLP
10	1. Note added re Shell and Core doc 2. NHS England Net Zero Carbon target aspiration added 3. Appendix I added – Room Data Sheets and note added to refer thereto	24/02/20	Gardiner & Theobald LLP
11	1. Title of document changed 2. References made to NHSE&I Modern Methods of Construction (MMC) directions and appendix added 3. Net Zero Carbon (NZC) text amendments 4. Requirements to reflect Digitally Enabled SMART hospital requirements 5. Matrix of usage added and a reference thereto	29/01/21	Gardiner & Theobald LLP
12	MEP sections generally redrafted/replaced by NHS PS technical MEP team	23/09/22	Gardiner & Theobald LLP
13	General update following NHS PS team reviews and feedback .1 Construction .2 MEP .3 Health and Safety .4 Environmental	09/12/22	Gardiner & Theobald LLP
14	General update following NHS PS team reviews and feedback	27/01/23	Gardiner & Theobald LLP
15	Final update and formatting	09/03/23	Gardiner & Theobald LLP

REVISIONS LOG

Version No	Item amended	Summary of amendment	Reason for amendment
2	Various	Various minor amendments requested by NHSPS	Requested by NHSPS
3	Various	Various minor amendments requested by NHSPS	Requested by NHSPS
4	Various	Various minor amendments requested by CHP through NHSPS	Requested by NHSPS
5	Various	Section 2.3 – Sustainability Requirements revised and references to BREEAM changed to refer back to the Sustainability Requirements generally. General minor amendments requested by Jim Goatley (NHSPS)	Requested by NHSPS
6	Various	Section 8.15.13 Comms room sizes note added, together with Appendix F Appendix E – Structural advice added Numerous minor amendments suggested by Kier	Requested by NHSPS
7	Various	Item 2.0.4 - Open/bookable space requirements Appendix G	Requested by NHSPS
8	2.02	Reference to HBN added	Suggested by TB+A
9	Appendix H	Added	Requested by NHSPS
10	Various	1. Note added re Shell and Core doc (see item 1.6) 2. NHS England Net Zero Carbon target aspiration added (see item 2.3.13) 3. Appendix I added – Room Data Sheets and note added to refer thereto (see item 2.0.5)	Requested by NHSPS
11	Various	1. Title of document changed (to avoid confusion with workshop and materials specifications) 2. Requirement added to meet NHSE&I Modern Methods of Construction (MMC) directives (item 1.4.9) and Appendix J added 3. Net Zero Carbon (NZC) text amendments (items 1.4.7 and 2.3.3.13) 4. Requirement added to deliver Digitally Enabled SMART hospital requirements (new item 8.16.1) 5. Appendix K added - Matrix of usage and a reference thereto (section 1.0, new item 1.2)	Suggested by G&T re current initiatives or requested by NHSPS
12	MEP section and various 2.0 2.4 3.11 4.22 5.20 5.21	MEP sections generally redrafted/replaced by NHS PS technical MEP team HTM reference updates The use of EPDM (Ethylene Propylene Diene Monomer) flexible braided rubber hoses prohibited Infrastructure Asset Tagging included Kitchen/food prep etc - section redrafted Fixtures and fittings, including sanitary installations - section redrafted Sanitary installations for specific applications –new section added	Requested by NHSPS

	Generally 7.6.11 7.10 7.14 8.0 9.3 Appendix E	7.3, 74, 7.5, 7.6, 7.7, 7.8, 7.9, 7.11 Mechanical sections re-drafted Note that this section needs reviewing/replacing Hydrofluorocarbon gas systems – new section added Closed water systems – new section added Electrical engineering section – completely rewritten Property drawing database – section rewritten Omission of references to others re MEP due to NHS PS redrafting	
13	2.0.1	Introduction of NHS PS document library – reference made thereto	Requested by NHSPS
	Appendix B	Completion processes – omitted – now covered by processes set out in the NHS PS document library	
	2.2	Details of HBN's and HTM's omitted – all the latest to apply	
	2.3.2 2.3.3	Revised generally re Greener NHS Team and NHS PS Green Plan	
	2.4	Responsible Procurement (Social Value) – new section added	
	2.5	New item 16 re prohibition of flexible hoses	
	3.3.1	Amended to SharePoint	
	3.9	CDM requirements updated	
	3.9.3	NHS PS SSIP accreditation requirements – item added	
	3.9.4	Operation and maintenance manual information – item added	
	3.9.5	NHPS reporting of incidents requitements added	
	3.11	Infrastructure Asset Tagging– section added	
	3.12	Format of costed proposal – item added	
	4.22	Kitchen / Food Prep – Café Areas – section re-drafted	
	4.21.6	NHS PS define all plant and boiler rooms and the like as Confined Spaces – item added	
	5.1	Net Zero Carbon requirements expanded generally	
	5.6.1	Asbestos item amended	
	5.20	Fixtures and Fittings, including Sanitary Installations – section re-drafted	
	5.21	Sanitary Installations for Specific Applications – new section added	
	9.1.6	Completion processes referred back to compliance with those set out in the NHS PS document library.	
	9.4	Health and safety file – can yellow text be omitted if now in the NHSPS document library?	
	Appendix E	NHS PS contributors listed updated	
14	Various	Updated to reflect various comments provided by Katie Proctor NHSPS.	Requested by NHSPS
		Link to NHSPS Technical library added to Item 2.1 along with a link to NHS England HTMs for Item 2.2.	
		Amendments to item 7.6.11 as requested by Kevin Maginnis NHSPS now removed	
		General correction of typos and punctuation.	
15	Various	Final minor amendments by NHSPS and general formatting	
16		BMS upgrades – item 7.12 O&M requirements upgrades – various section 6.10 Fuel tanks clarification – section 8.5 Solar panels – section 2.3.4	

		EV charger requirements upgraded Various upgrades to FM requirements (hand dryers, floor finishes, remote locks). Infection control lead clarified Note on usb charging devices added Upgrades to fire escalation routes as agreed with NHS PS fire lead	
17		Incorporation of Tech standards Appendix B and references throughout document.	
		Added reference to BMS strategy document	
18		Updated MMC requirements	13.03.2025

APPENDIX A - Schedule of Accommodation Template

APPENDIX B - Not Used

APPENDIX C - Standard Conditions (Preliminaries)

APPENDIX D - Matrix of Equipment Provision and Responsibility

APPENDIX E - Those Consulted to Date and Comments Now Incorporated

APPENDIX F - Comms Room Layout Examples

APPENDIX G - Open/Bookable Space Requirements

APPENDIX H - Shell and Core Outline Specification

APPENDIX I - Room Data Sheets

APPENDIX J - Moderns Methods of Construction Guidance

APPENDIX K - Usage matrix

1.0 Introduction

1.1 This brief represents NHSPS design requirements for the development, or redevelopment, of Primary Care/Community Health Premises in England. It sets out broad project management principles, building, mechanical and electrical engineering parameters and guidance for project handover. It is intended to be used as a brief for projects let under any procurement route, be it traditional (using a design team led approach and then tendering to a contractor), ProCure22, or as part of a development agreement (whereby for example a developer has undertaken to provide a health facility as part of and within an overall development). This brief therefore sets out NHSPS's minimum requirements for such schemes, for either a design team to design to and/or a developer/contractor to deliver, with the ultimate responsibility for meeting such requirements being defined finally in any contractual arrangement

1.2 The document is intended solely for use in NHSPS buildings. NHSPS makes no warranties or representations, express or implied, regarding the accuracy, completeness, or applicability of these specifications for non-NHSPS buildings. NHSPS shall not be liable for any damages, losses, or issues arising from the use of these specifications by third parties. Any third parties choosing to utilise the content of this document do so at their own risk. It is the responsibility of third parties to conduct their own due diligence, including but not limited to, inspections, assessments, and compliance checks, to ensure suitability for their specific purposes.

1.2 A matrix setting out how it might be used in the various development option scenarios possible is included as a guide as Appendix K.

1.3 Various occupiers, partner organisations and independent service providers may occupy specific areas of any proposed development. Design teams should note on occasion each occupant may have specialist requirements which should be read alongside this document however instruction should only be taken from NHSPS.

1.4 Our eleven key success criteria are:

1) **Safety** – it is critical the project is delivered and operated with safety as a paramount concern. This includes the safety of the construction workforce, the public during and after construction, operational Clinical staff and future maintenance personnel.

2) **Quality** – the facility is to deliver an ideal patient experience. This shall be independently evaluated via a formal design appraisal process such as the Construction Industry Council's Design Quality Indicator (DQI) for Health Tool (see http://www.dqi.org.uk/case-studies/healthcare), or ProCure22's AEDET process. The contractor will pay all fees and charges associated with this process from appointment unless agreed otherwise in writing.

3) **Environment** – the facility is to deliver an exceptional staff experience. The contractor will assist NHSPS in carrying out a full post project evaluation review and report, with SMART objectives. This shall be assumed to include a Post Project Evaluation (PPE), Project End Review (PER), Project Completion Report (PCR) and Pre and Post Occupancy Evaluations (POE), all of which will cover the staff and patient experience.

4) **Quality and Performance** – the project is to be delivered 'defect free' at handover to the highest standards.

5) **Cost** – the project is to be delivered within the agreed cost parameters which can be obtained on request from NHSPS for each project.

6) **Time** – the project is to be delivered on schedule as agreed by NHSPS.

7) **Sustainability** – the project is to be delivered to minimise its environmental impact during construction and in operation. The team will strive to achieve a fully flexible, ultra-low energy

and **Net Zero Carbon (NZC)** solution in accordance with the sustainability requirements (Section 2.3). Considerations shall also be made toward climate adaptation measures. The project is to be delivered in a manner that maximises social value benefits through the implementation of one or more of the 5 social value themes.

8) **Flexibility** – the project is to be adaptable and expandable for varying future health and other uses. NHSPS preferred solution is that sizes of functional rooms should be on a 'grid system' which takes into consideration the flexibility of the space. (i.e. All room sizes are to be multiples of $4m^2$. Such as $16m^2$ consulting rooms etc). The contractor can only move away from this aspiration with written agreement of NHSPS. NHSPS does however support the use of the Department of Health's ProCure22 repeatable rooms initiative and as such is open to their use on schemes where appropriate. This is understood to be a potential derogation (agreed by the Department of Health) to the standard Health Building Notes (HBN's) room size recommendations and the $4m^2$ module approach set out above. In adopting any such repeatable rooms on any scheme, the team shall also take cognisance of NHS England's/NHS Improvement's requirements and recommendations regarding combinations of Consult/Exam room sizes and the like and the combinations thereof and for example any treatment rooms shall be appropriately sized for the clinical function proposed to be carried out in such rooms. A structural framed construction with internal partitioning is considerate of flexibility and alternative floor layouts.

9) **Modern Methods of Construction** – The UK Government, including the Department of Health and Social Care, have demonstrated a strong commitment to Modern Methods of Construction (MMC). This support is reflected in several key policy documents and initiatives:
   - The Construction Playbook, issued by the Cabinet Office, establishes a "presumption in favour" of offsite construction across government departments.
   - DHSC interim guidance directs NHS England and NHS Improvement to "assume that all schemes start out as MMC".
   - Business case checklists for NHS capital projects now include MMC-related requirements at various stages (SOC, OBC and FBC).
   - The New Hospital Programme prioritises MMC to deliver healthcare facilities more efficiently and sustainably.

   These policies align with broader government objectives to improve construction productivity, reduce carbon emissions, and accelerate the delivery of critical infrastructure. Notably, the Construction Playbook mandates that contracting authorities "develop an organisational strategy for the promotion and implementation of MMC, running through their portfolios and down to individual projects".

   In line with the above all new build schemes over 500m2 will Implement a Consistent MMC Assessment: Each project should measure the adoption of MMC using NHS MMC Toolkit at each gateway stage.

   A threshold of 70% MMC is required for all new NHS PS projects over 500m2

   MMC adoption will be measured using the MMC construction assessment toolkit attached at Appendix J.

   Design teams should develop a scheme specific MMC strategy during the early planning stages of the scheme, this strategy should detail how the requirement to deliver the 70% will be achieved. On design and build schemes the requirement to meet this target must be built into the employers requirements and tested via the selection process.

10) **'Lean'** facility – the project is to support the adoption of 'lean' ways of working in both construction and operation. The Contractor will help NHSPS in its aspirations to adopt Lean principles.

11) **Partnership** – the facility will be delivered in an atmosphere of mutual trust and respect between all parties.

1.5 In addition NHSPS has the following underlying design aspirations:

1) **Heal** – We see the building and landscape design as a major contributing factor to the health, wellbeing and quality of experience of the users of our facilities.

2) **Stimulate** – smell, colour/sight touch and sound

3) **Calm/reflective** – particularly in any courtyard areas, circulation and waiting spaces and common areas.

4) **Access/Connectivity** – The building needs to be easy to navigate and understand and fully accessible to all, including motorised wheelchairs (note: bariatric patient and/or visitor access requirements shall be set out by NHSPS for each project), irrespective of physical ability. The landscape design (where applicable) needs to reinforce structured new and existing routes across the site, some formal, some less so.

5) **Screen/Protect/shelter** – Use the form of the building and planting to screen key areas (visually and acoustically). Ensure the building captures the essence of shelter.

6) **Biodiversity/reinforcement** – Desire to create a 'living' green oasis within and around the facility.

7) **Community amenity** - Maximise community 'ownership' for all ages. Consider the community offer to proposed, new and existing neighbours.

8) **Outlook** – use the built form and landscape to frame views. Outward as well as inward looking spaces and opportunities need to be accommodated.

1.6 This document is primarily focused on new build projects, it is however largely applicable to refurbishment and developer shell fit-out projects. Any changes to this scope to reflect any refurbishment and/or fit out type projects are to be agreed in writing ahead of appointment.

1.7 Where a base-build shell and core building only is required, an outline minimum guide specification document is included as Appendix H. The base-build shall facilitate the fit-out of any primary care/community health facility according to the full requirements of this document, unless agreed otherwise in writing by NHSPS.

1.8 Any reference to a "Designer" shall mean an NHSPS appointed goods or service supplier, to include a Consultant, Contractor or Developer tasked with undertaking the design whether it be via a traditional tender, Design and Build, Development Agreement procurement route and/or fit-out of a developer provided shell as part of an overall development to discharge a planning condition.

1.9 Any reference to a "Contractor" or "Developer" shall mean the contractor or developer or vice versa. If projects are developed more traditionally with a design team ahead of any contractor/developer appointment, this document is used as a brief but adjusted accordingly to reflect the time the contractor becomes involved.

1.10 **FOR THE AVOIDANCE OF ANY DOUBT** - Where preferred products and/or manufacturers have been named in this document NHSPS is open to the use of other manufacturers' products should a suitable case be made for their use, both economically and on a comparable quality and life cycle cost basis.

1.11 This document was prepared with reference to: -

- CHP Construction Requirements schedule v6.0

2.0 General Design Principles

2.1 Generally

2.1.1 The document is provided to ensure new developments are sustainable, durable and flexible. This specification mandates the minimum standards to be achieved unless agreed otherwise in writing and builds upon the base standards set out in the following: -

- **NHS PS now maintains a document library of all the standards, processes and the like etc, it expects to apply across all projects generally. This is a live register and suite of documents that is constantly updated and as such is not replicated in this standards document, it is however available at Technical Standards Management System (sharepoint.com) That suite of documents takes precedence over the contents of this standards document, unless this documents also asks for other proposed solutions for consideration in addition to the NHSPS standard position.**

- NHS Estates Health Technical Memoranda (HTMs) (as applicable to the clinical content and uses of each scheme) https://www.gov.uk/government/collections/health-technical-memorandum-disinfection-and-sterilization

- Health Building Notes (HBNs) (as applicable to the clinical content and uses of each scheme)
  https://www.gov.uk/government/publications/guidance-for-facilities-for-providing-primary-and-community-care-services

- Infection Control in the Built Environment
  https://www.gov.uk/government/publications/guidance-for-infection-control-in-the-built-environment

- Care Quality Commission Regulations – Premises
  http://www.cqc.org.uk/content/regulation-15-premises-and-equipment

- Valuation Office Guidance for Building Engineering Works for Primary Care Developments. This document outlines certain performance criteria for the building in line with NHS requirements.

2.1.2 The key relevant design standards current at the time of writing and to be complied with are set out below. This list may not be exhaustive and the standard current at the time any project contract is awarded shall apply in all instances, unless agreed otherwise in writing.
All projects will need to comply with Building Regulations, the link below provides connection to the government planning portal for the latest approved documents with the table providing key headings to the various parts. Where the (HBNs) and/or (HTMs) requirements exceed the requirements as set out within the approved documents, then the more onerous is to be used unless agreed otherwise in writing with NHS PS.

https://www.planningportal.co.uk/info/200135/approved_documents

Part A	Structure
Part B	Fire Safety
Part C	Site Preparation and resistance to contaminates and moisture
Part D	Toxic Substances
Part E	Resistance to Passage of Sound
Part F	Ventilation
Part G	Sanitation, hot water safety and water efficiency
Part H	Drainage and Waste Disposal

Part J	Combustion appliances and fuel storage systems
Part K	Protection from falling, collision and impact
Part L	Conservation of fuel and Power (Part 2A and 2B for non-dwelling)
Part M	Access to and use of buildings
Part N	Glazing Safety (withdrawn 2013 guidance subsumed in Part K)
Part P	Electrical Safety
Part Q	Security
Part R	Physical Infrastructure for high-speed electronic communications networks
Regulation 7	Materials and Workmanship

Projects should be designed and constructed in accordance with the latest HBNs and HTMs current at the time the works are contracted, unless agreed otherwise in writing by NHSPS. The latest HBNs and HTMs can be found at https://www.england.nhs.uk/estates/health-technical-memoranda/ .

2.1.3 Engineering services designs shall reflect standards and regulations current at the time. This is further detailed in section 6.0.

Where deviations are proposed, a design compliance statement and/or Derogation Schedule is to be produced, developed and discussed with the NHSPS key stakeholders for sign off. This shall be a dynamic document that is consistently reviewed and updated where necessary throughout the life of the project. Only those derogations agreed by NHSPS in writing are added to the schedule.

2.1.4 At the outset a Schedule of Accommodation shall be defined and agreed and that will set the parameters of the brief project required with suitably identified clinical operational policies that reinforce the established SoA. NHSPS has an open/bookable space initiative and this shall be incorporated as set out in the SoA (refer also Appendix G for further details).

2.1.5 A set of standard Room Data Sheets have been prepared (refer Appendix I). These are the base criteria for any such rooms and shall be adhered to unless agreed otherwise in writing by NHSPS.

2.1.6 The design should also take into consideration any other relevant documentation provided as guidance by the Department of Health and Social Care.

2.1.7 The design shall be scrutinised by NHSPS and relevant departments/outside agencies, such that it provides a robust development. These departments and agencies are listed (not exhaustively) below:

- Local Authority Planning Dept.
- Local Authority Building control (or similar)
- NHSPS Fire Officer (or NHSPS appointed external consultant)
- Infection Prevention and Control Team (or NHSPS appointed external consultant)
- NHSPS Estates Department (or NHSPS appointed external consultant)
- NHSPS Facilities Team
- Healthcare staff & Public bodies

2.1.8 It is recommended design teams utilise the current version of the National Building Specification (NBS), Uniclass and NES+ Approved DoH Edition specifications to ensure workmanship clause specifications are fully up to date.

2.1.9 Materials and goods shall be suitable for the particular purpose to which they are put. For a particular material to be considered suitable it shall be:

- In accordance with relevant British Standards or European Standards
- Be of proven reliability

All materials shall be compatible with those others around it and not have deleterious effect on one another. Metals used in locations where corrosion may arise shall be stainless steel or non-ferrous, or otherwise protected to prevent corrosion.

2.1.10 The main structure should be designed for a minimum lifespan of 60 years as defined in BS 7543 (unless agreed otherwise in writing, for example the adoption of volumetric modular solutions and the like). The parties shall also work together to choose materials for roofing, cladding and windows which do not require major maintenance within 20 years (provided that routine maintenance is carried out in accordance with manufacturers written recommendations). Warranties and/or insurance backed guarantees for materials and workmanship shall be provided wherever possible/available.

2.1.11 The Parties agree to work together to identify materials/components which give a more optimal life cycle costing whilst remaining within the identified budget and satisfying the standardisation criteria of NHSPS.

2.1.12 For the avoidance of doubt:

i) Reference to clinical rooms shall mean Consulting, Examination, Nurse, Treatment, Minor Surgery or other rooms used for like purposes or in connection therewith, including clean and dirty utility rooms and prep rooms and the like.

ii) The Contractor shall use their best endeavours to obtain all necessary Planning Permissions and Building Control Approvals and shall be responsible for the successful discharge of any associated conditions in a timely manner so as to enable the project to progress on programme.

2.1.13 The works to be undertaken will comply with the following non-exhaustive or exclusive list:

1) Current Building Regulations;
2) All relevant and current British Standards and Codes of Practices;
3) Current applicable EC Regulations and Directives where there is no applicable British Standard and/or Codes of Practice;
4) The Health and Safety at Work Etc. Act 1974 associated regulations and legal guidance.
5) All relevant manufacturer's literature and Agreement certificates;
6) Relevant recommendations of appropriate trade bodies and associations;
7) The recommendations of the NHSPS Fire Officer (or NHSPS appointed external consultant), local Fire Brigade and the Public Health Officer.
8) The recommendations of the NHSPS Infection Prevention and Control Team (or NHSPS appointed external consultant).
9) Specific requirements instructed by the NHSPS Project Manager (PM) through user consultation, design workshops etc.
10) HBNs and HTMs, unless agreed otherwise in writing (refer also section 4.0).
11) Any BIM Level 2 requirements in accordance with PAS1192-2:2013 and the Government mandate from 2016.

2.1.14 This document does not in itself constitute any form of design. The Contractor / Developer / Design Team shall ensure and take full responsibility that scheme proposals and designs developed are fully compliant with all current statutory requirements, health standards and recommendations and best practice generally, unless agreed otherwise in writing by NHSPS.

2.1.15 The Contractor shall maintain a design compliance schedule and/or Derogation Schedule for agreement with NHSPS at all times.

2.2 Fixtures Furniture and Equipment (FF&E)

2.2.1 The NHS standard equipment groupings are defined as follows: -

Group 1 – items (including terminal outlets) which are supplied and fixed within the terms of the building contract.

Group 2 – items which have specific requirements with regard to space and/or building construction and/or engineering services and are fixed within the terms of the building contract but supplied under arrangements separate from the building contract.

Group 3 – as Group 2, but supplied and fixed (or placed in position) under arrangements separate from the building contract.

Group 4 – items which are supplied under arrangements separate from the building contract possibly with storage implications but otherwise having no effect on the requirements for space or engineering services.

The Contractor/Developer shall be responsible for:

- **Group 1** The specification, supply and installation of all (fixed) equipment, e.g., shelving, worktops, storage cupboards, fixed seating etc. and all services. Where specific diagnostics equipment (e.g., MRI, CT and Xray imaging scanners, dentistry and audiology equipment and the like) is selected by the clinical team for specific clinical requirements, this will be defined in a timely manner to enable the Contractors to coordinate and ensure suitable provision within the build programme (see also Group 2 below). Note: Specialist medical diagnostic equipment will not be provided by NHSPS. Refer also Appendix D.

- **Group 2** Taking delivery and installation of equipment (fixed) which the client or occupiers will specify and either purchase or transfer from other facilities, e.g., paper towel/soap dispensers, notice boards, white boards, clocks, etc.

  This group may also include specialist equipment where an installation or associated 'fit-out' is required, such as MRI, CT and Xray imaging scanners, dentistry and audiology equipment and the like. Where specialist equipment is listed as group 2 it is the contractor's responsibility to ensure the specialist fit-out contractors are priced within the construction contract sum and that the necessary liaison with specialist contractors is carried out in order to ensure that the services are coordinated. The extent of this equipment is to be reviewed on a project-by-project basis and agreed ahead of appointment. Such works would be co-ordinated, managed and supervised by the appointed Principal Contractor.

- **Group 3** (loose) equipment will be specified, supplied and placed in position by NHSPS, the Clinical Commissioning Group or GP Practice occupiers or the like, for example chairs, trolleys, computers, desks, disposables etc. These shall be brought into the facility following Completion and the Contractor has no obligation here other than in planning and incorporation of fixtures into the design/drawings.

NHSPS shall be responsible for confirming/providing all dimensional and servicing information for both new and transferred items supplied to the Contractor, to enable this information to be included within the design proposals.

The Contractor shall also allow for the supply and installation of any mounting plates, pattresses etc that need to be built into the structure to accommodate the fixing of such items. Particular attention needs to be paid to pattresses required for medical equipment and patient call screens, accessible grab rails etc.

All proposals for equipment must be submitted to the NHSPS Project Manager for comment prior to the placement of orders and should be of good quality and co-ordinate with the overall style and interior design of the building.

The scope of FF&E responsibility is likely to vary per project. For example, with responsibility needing to be set out between the contractor, NHSPS, the relevant Clinical Commissioning Group and the occupying GP practice. The developer/contractor shall work with NHSPS to allocate FF&E responsibilities generally where the boundaries differ to that set out above. A matrix as to the likely bounds of responsibility for equipment is included as Appendix D.

It is likely that specialist medical equipment, for example MRI, CT, Xray, dental chairs and the like, will be procured and provided by the Occupier post Practical Completion. The boundaries of responsibility for such equipment provision shall be established at the outset.

2.2.2 Categories of equipment for each room shall be set out in the relevant Room Data Sheets and C sheets provided by the Designer/Contractor during the detailed design process.

As part of the design process the Designer/Contractor shall provide fully loaded floor plans which are colour coded to represent the above groups. Each group to be set to a separate layer within the BIM model. This will ensure that all responsibilities for FF&E are fully defined and understood by all parties. This colour coding shall also be repeated on 1:50 room loaded drawings for user/occupier review purposes.

2.2.3 The NHSPS Project Manager will provide schedules of equipment for transfer (including dimensional and servicing requirements) and if applicable, the contractor must incorporate these into the project proposals and provide the engineering services and drainage as necessary to incorporate such into the completed facility. Note: The contractor shall assume that any equipment transferred is fully compliant with current applicable standards and in full working order.

2.2.4 Any contractor responsibility for ongoing maintenance of any equipment is to be established on a project-by-project basis.

2.3 Sustainability Requirements ("the sustainability strategy")

2.3.1 NHSPS would like to see a new approach to sustainability, focussing on development of efficient, ultra-low energy, flexible facilities that are adaptable to climate change. Construction and operation practices should help NHSPS achieve buildings that are fit for purpose and good for both the environment and the people within them. What NHSPS builds and uses should reflect its mission of providing the best health-promoting environments while using natural resources efficiently and effectively.

2.3.2 No single certification or framework is likely to satisfy the numerous needs of NHSPS, but for simplicity and continuity we would expect to achieve performance consistent with BREEAM "Excellent" (new build) and "Very Good" (existing build), while embodying new best practices contained in frameworks such as the WELL Building Standard. Our overall goal is not necessarily to attain a design certification level but rather to promote and maintain efficient, flexible, ultra-low energy, resilient and healthy facilities over time.

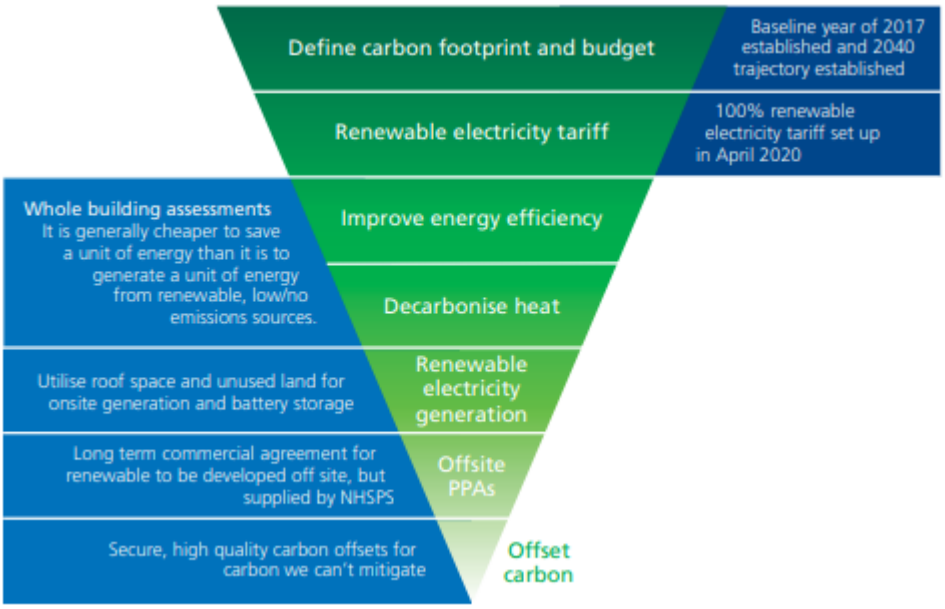
The contractor shall propose a best practice approach to this in its tender for consideration.

In doing so the following shall be considered: -

1) Reflect best practice and current thinking in sustainability, demonstrated by such guidance issued by the Greener NHS Team and the like. Information on the Greener NHS Team can be found at Greener NHS (england.nhs.uk)

2) NHSPS has issued its Green Plan. In addition to the sustainability requirements of NHSPS the Contractor shall also be aware that Integrated Care Systems (ICS's) should also issue a Green Plan or equivalent. These requirements shall be identified by the NHSPS Project Manager and agreed with the Contractor at pre-design or design stage. The Contractor shall take account of the Green Plan which sets out the key drivers for the move towards more sustainable healthcare provision, together with any other locally generated strategy documents issued.

3) For new Construction projects the Contractor will design to a Net-Zero Carbon standard and for retrofits the focus will be on decarbonising the property as far as possible with aim of removing fossil fuels as far as is practicable and following the Carbon Hierarchy in the Green Plan.



4) When designing works for retrofits the aim will always be to reduce the heat demands of a property in the first instance, which will then aid the transition away from fossil fuels to a no/zero carbon (NZC) alternative technology.

5) These NZC technologies, and any other aspect of the design should take account of the Minimum Specification Standards that sit alongside this document.

6) These NZC technologies are not listed here as the speed of advancements and changes will prohibit the ability to stay up to date. However, consideration should be made to these technologies, where feasible, although this is not an exhaustive list:

   a. Air Source Heat Pumps
   b. Ground Source Heat Pumps
   c. Water Source Heat Pumps
   d. Stand-alone split systems or multiple VRF systems
   e. Far-Infrared electric Radiant heating
   f. Variable Speed Drives (VSD)
   g. EC Fans
   h. Solar PV Panels (ideally, and if suitable, combined with green roof technologies)
   i. Solar Thermal Panels (in conjunction with dual core electric DHW calorifiers)
   j. Up to date, remotely connected Building Management Systems or control systems
   k. Insulation systems to ensure low levels of heat loss through building fabric elements
   l. Battery storage
   m. Electricity export and demand response technologies

7) Consideration should be made to utilise the Energy Technology List, which is maintained by BEIS, as a procurement tool for suitable technologies – Energy Technology List

8) The general principles for the overall design should follow the NHS 'Estates Net-Zero Carbon Delivery Plan' (2021) approach to decarbonising the NHS Estate. This approach follows four main steps:

    a. Making every kWh count: Investing in no-regrets energy saving measures
    b. Preparing buildings for electricity-led heating: Upgrading building fabric
    c. Switching to non-fossil fuels heating: Investing in innovative new energy sources
    d. Increasing on-site renewables: Investing in on-site generation

9) Sub-metering of energy users and for each occupier's demise and/or department/wing/section will be installed to allow energy use to be monitored effectively. Energy-efficient plant and equipment should be specified. This will include sub-metering for heating and cooling networks. The Contractor shall illustrate a sub-metering strategy based on demised plans for approval by the NHSPS Project Manager. Metering should be used to inform pro-active, preventative energy-efficient maintenance.

10) Water efficiency measures should be incorporated including sub-meters, leak detection and, where relevant, Sustainable Urban Drainage Systems (SUDS).

11) As the impacts of climate change are already occurring, adaptation measures such as flood prevention, control and diversion shall be considered and so too should nature-based solutions applicable to the design. Designs shall account for measures that reduce impact of chronic (i.e., gradual changes in weather) or acute (i.e., extreme weather events) from events such as heatwaves, storms, flooding, freeze and thaw occurrence.

12) Site ecology should be examined prior to development to mitigate the ecological impact of the development and enhance site biodiversity where practicable. Designs shall therefore be nature positive utilising nature that is resilient to weather extremes.

13) Sustainable travel should be promoted by incorporating safe, secure and suitable facilities for bicycles and cyclists, safe cycle and pedestrian routes and providing appropriate facilities to enable travel information to be presented.

14) Sustainable travel considerations should also make provision for appropriate staff changing, shower and storage facilities.

15) Sustainable travel considerations should also include the provision of electric vehicle charging points on the following basis but taking account of the requirements under **Approved Document S –** ***Infrastructure for the charging of electric vehicles***:

    a. For every 10 car parking spaces 1 EV charging point (7kW or 22kW) should be installed with cabling supplied to another charging point (to be developed in the future, based on demand)
    b. NHSPS will be able to provide the installer to complete the works, based on the agreed strategy of the time.
    c. Any EV chargers installed must have the ability to process charges and be able to be set to public or private.
    d. Refer to Appendix B – Technical Specification for approved suppliers

16) A healthy travel plan should be developed in consultation with building users and developed in conjunction with the NHSPS Project Manager.

17) The contractor shall meet any Local Authority planning stipulated sustainability targets and requirements, especially in relation to Section 106 requirements.

The contractor will consider the principles of health and wellbeing and work with others to provide a strategy that uses design, materials and systems that enable good air quality, natural light, comfortable conditions (thermal, acoustic, etc) that are conducive to a good patient and staff experience. For guidance on health and wellbeing criteria, the WELL Building Standard can provide elements of good practice.

2.3.3 In establishing the sustainability strategy the Contractor shall also: -

1) Provide carbon reduction calculations for the work it is intending to complete, so that NHSPS can utilise this information for reporting and ongoing development purposes. The Contractor should assess the expected change in energy/water consumption and the resulting change in carbon emissions resulting from the works. At the same time the Contractor shall provide an overall 'cost of carbon' metric for the project as a whole. The 'cost of carbon' metric should be in the format of

- £/tCO_2eLT
- Where: CO_2e = Carbon Dioxide equivalent, based on the latest carbon emissions factors produced by the Environment Agency
- LT = Life Time of the technology, based on the latest persistence factors utilised by Salix and the Public Sector Decarbonisation Scheme (PSDS) numbers.

2) The Contractor will also provide the change in benchmark for the property from the works being completed (where there is already a property in place that is consuming energy).

This will be in the format of a before and after kWh/m^2 and CO_2e/m^2, which will enable NHSPS to assess the improvement in energy and carbon intensity from the project.

3) Establish current in-use energy profiles for similar facilities using representative data based on typical building performance and working patterns.

4) Ensure that design modelling procedures are implemented across the design team, based on realistic and representative data and that seasonal commissioning and soft landings practices are incorporated into any development.

5) Ensure that distribution losses of hot pipework (where present, and if required) are taken account of in modelling to minimise uncontrolled heating inputs, including modelling the zone(s) they are contributing heat to.

6) Ensure that well insulated and airtight spaces are properly considered in relation to water safety associated with any pipework running in such.

7) If any natural ventilation of facilities is to be relied upon the Contractor shall ensure that the design and validation of such is robust, based on appropriate, representative and reliable data to mitigate the risk of overheating after Completion.

8) In any natural ventilation proposals ensure that any permanent or automatic ventilators are designed to eliminate the risk of draughts and to take account of human behaviour in their operation.

9) Contractors should also consider climate adaptation measures, localised weather patterns and long-term resiliency concerns in heating and ventilation strategies.

10) The Contractor shall adopt the Climate Based Daylighting Modelling (CBDM) approach to daylight modelling to properly assess whether daylight is actually being used, then measuring against suitable and relevant benchmarks in design scenarios.

11) NHSPS would like to see in-use energy usage modelling developed further to ensure that any design operation and targets can be measured and realised in completed facilities, including use of sensitivity analysis of outputs produced and used in design solutions and as to how these may then be affected by future reductions in targets for energy and carbon usage.

12) For new construction projects the aim of the contractor should be to achieve Net-Zero carbon and a resultant EPC rating as such.

13) For retrofit projects the aim is to reduce heat demand and decarbonisation and also bear in mind the need to maximise the EPC rating for the property. There should be an aim on making sure that the projects work towards any future requirements for EPC ratings, such as a 'B' rating by 2030.

14) NHSPS would like to see the implementation of Dynamic Simulation Modelling (DSM) to obtain maximum value at each stage in the building lifecycle and to facilitate change early in the design process to avoid more costly building service led solutions. The Contractor shall provide a protocol for adopting such.

15) Buildings shall be flexible to allow future changes of use and clinical models, noting current NHS England and NHS Improvement directions regarding space standards and the like (see also Section 1.3.8). The contractor should consider future building needs and make provision for interchangeable space, adaptability, changing use and future climate adaptation needs.

16) Taking into account all of the above factors the Contractor shall propose a sustainability strategy for adoption on the project, to be agreed in writing with NHSPS ahead of commencement. Compliance with this strategy will then be a requirement of the project.

2.3.4 Solar Panels (Refer to Appendix B – Technical Specification for approved suppliers)

Any Solar systems install must have enabled remote connectivity and send data back to our chosen solar Portal – Solar Edge.

2.4 Responsible Procurement (Social Value)

Central government's Social Value Model, including net zero emissions requirements, as outlined in Procurement Policy Note (PPN) 06/20 has been adopted by NHS England and applied since 1 April 2022. From 1st April 2022, NHS England have extended the reach of PPN 06/20 to the commissioning and purchase of goods and services by NHS organisations, as well as to organisations acting on behalf of such commissioners and purchasers. NHSPS therefore regarded as an 'In Scope Organisation'. As such, Social Value should be explicitly evaluated, where the requirements are related and proportionate to the subject-matter of the contract, rather than just 'considered' as currently required under the Public Services (Social Value) Act 2012. (See following links, Public Procurement Notice (PPN) 06/20; The Social Value Model; Guide to using Social Value Model; NHS England - Applying Net Zero & Social Value into Procurement Guidance).

Procurement instigated by this development should aim to provide benefits on the following 3 pillars:

1) Environmental sustainability – achievement of net zero carbon target, building resilience to climate change, ensuring compliance, minimising environmental impacts, and encouraging innovation throughout the supply chains of goods, services and works.

2) Social responsibility - protecting the health and wellbeing of employees, providing fair employment opportunities, and supporting local communities.

3) Ethical compliance – supply chain conforming with Modern Slavery Act 2015.

That being said the following social value model themes shall be incorporated within procurement:

Themes		Priority Areas
Theme 1	Fighting climate change	Reduce emissions
		Reduce air pollution
		Promote circular economy principles
		Reduce consumption and waste
Theme 2	COVID 19 recovery	Support individuals affected by Covid-19
Theme 3	Tackling economic inequality	Employment as an economic and health intervention
		Living wages
Theme 4	Equal opportunity	Support a diverse workforce
		Equity by design
		Eliminate modern slavery
Theme 5	Wellbeing	Support physical and mental health

2.5 Prohibited Materials

Materials shall be selected and sourced with reference to the British Council for Offices (BCO) Guide 'Good Practice in the Selection of Construction Materials'. The Works shall not involve the use of any prohibited materials, including but not limited to any of the materials or items listed below without the expressed written permission of the NHSPS Project Manager:

1) High alumina cement in structural elements

2) Marine aggregate or their derivatives where the chloride ion content by mass or cement exceeds the requirements of Table 6.4 of BS8110 Part 1.

3) Aggregate where the drying shrinkage characteristics, when tested in accordance with BS812: Part 120 exceeds a value of 0.05%.

4) Wood wool slabs in permanent formwork to concrete or in structural elements.

5) Calcium chloride in admixtures for use in reinforced concrete or reinforced masonry construction.

6) Aggregates for use in reinforced concrete which do not comply with British Standard Specification 882 and aggregates for use in concrete which do not comply with the provisions of British Standard Specification BS8110.

7) Calcium Silicate bricks incorporated within any load bearing or other areas of the construction being structural in any way.

8) Asbestos or asbestos-containing products.

9) Lead, or any material containing lead, which may be ingested, inhaled or absorbed except where copper alloy fittings containing lead are specifically permitted in drinking water pipe work by any statutory requirement.

10) Urea formaldehyde foam or materials which may release formaldehyde in quantities which may be hazardous with reference to the limits wet from time to time by the Health and Safety Executive, at the time of incorporation into the Works comprising the project.

11) Slip bricks – unless approved otherwise in writing on a project-by-project basis.

12) Vermiculite plaster.

13) Other substances which at the time of their incorporation into the project have been designated by the Building Research Establishment Digest and published in the Building Research Establishment Digest as deleterious to health and safety or deleterious to the durability of the fabric in the particular circumstances in which these substances are used.

14) Light weight or air entrained concrete bricks.

15) Any restrictions on the use of insulated cladding panels or PIR insulation.

16) The use of EPDM (Ethylene Propylene Diene Monomer) flexible braided rubber hoses shall be prohibited in the installation of domestic water facilities. This applies to flexible hoses from mixed domestic water supplies as well as to separate hot and cold-water systems and feeds. This does not apply to primary heating circuits, sealed chilled water systems or shower hoses (between mixer and showerhead).

    If fixed pipework cannot be installed, it is permissible as a last resort for WRAS approved non-EPDM flexible pipework such as PE (polyethylene), PEX (cross-linked polyethylene), LLDPE (linear low-density polyethylene) and PVC C (post-chlorinated PVC) to be used. Where non-EPDM products are installed, these must be clearly marked and certification gained to confirm their WRAS approval and composition. Care should be taken during installation to avoid kinking or distortion.

    It should be noted that it is not unduly time consuming nor costly to use copper pipework rather than Flexible Hoses.

2.6 Intellectual Property Rights

2.6.1 In relation to any drawings, details, plans, reports, models, specifications, bills of quantities, calculations, and any other documents of any nature whatsoever which have been or are hereafter provided by the Designer/Contractor associated with any particular Project the Designer/Contractor grants NHSPS a royalty-free non-exclusive licence to use and to reproduce all Documents for any purpose whatsoever connected with the Project and such other purposes as are reasonably foreseeable including, but without limitation, the carrying out, completion, maintenance, letting, advertisement, modification, extension, reinstatement, reconstruction and repair of the Project. Such licence will carry the right to grant sub-licences and will be transferable to third parties but shall not entitle the owner of such licence or any sub-licences to reproduce the designs contained in the Documents. Such licence shall take effect from the date of this appointment or (in relation to Documents not yet in existence) from the date of the creation of the relevant Document and shall continue notwithstanding any termination of this appointment. NHSPS nor any recipient of any sub-licence under this paragraph shall hold the Designer /Contractor liable for any use NHSPS may make of the Documents for any purpose other than that for which they were originally provided by it.

2.6.2 The Designer/Contractor shall agree on reasonable request at any time and following reasonable written prior notice to give NHSPS, or those authorised by it, access to the Documents and to provide copies (including copy negatives and CAD disks) thereof at NHSPS's expense.

2.6.3 The Designer/Contractor shall warrant to NHSPS that the Documents (save to the extent duly appointed sub-consultants have been used to prepare the same) are their own original work and that in any event their use in connection with the Project will not infringe the rights of any third party.

3.0 General Project Requirements

3.1 Planning and Party Walls

3.1.1 The overall design of the building shall comply with the requirement of the Planning Approval and other relevant Statutory Approvals as amended and take account of Party Wall issues if applicable.

3.1.2 Any matters arising with regard to party or boundary wall issues will be resolved by the Contractor/Developer/NHSPS as pertinent to the case but unless agreed otherwise in writing the Contractor shall appoint a Party Wall Surveyor as required and be responsible for discharging all party wall issues and pay all fees and charges associated therewith. Approvals in respect of The Building Regulations, demolition notices and any further Planning Approvals & discharge of conditions as necessary as the design is developed together with all requirements of the Local Fire and Rescue Service shall be the responsibility of the Contractor/Developer; NHSPS require compliance to NHS Fire Code as detailed later in this document.

3.1.3 The building shall be so designed to maximise clinical space and make optimum use of the current site and to allow future flexibility/changes in the medical use/layouts to the reasonable satisfaction of NHSPS, so long as this can be achieved in the initial construction and future adaptations with the minimal amount of cost and possible disruption.

3.1.4 The contractor shall work with NHSPS to understand any CIL and/or Section 106 requirements and the like generally and will include all the fees, charges and costs associated with complying with such, unless agreed otherwise in writing.

3.2 Enabling Works

3.2.1 Enabling works shall be defined as all works necessary to facilitate a project. Consideration shall be given to ensure design certainty at the early stage of a construction project. Topics include, but are not limited to:

- Functional safety
- Site preparation
- Site investigations – soil contaminants, usage, earthworks, piling, excavation etc.
- Neighbouring buildings or infrastructure
- Access routes and limitations
- Security fencing, ramps and signage
- Temporary accommodation, structures – the erecting and demolition/removal of, as well as the suitability and duration of use
- Clearance of site; hazardous waste; removal of obstacles; demolition requirements and the like generally
- Preparation of intrusive surveys as may be required, particularly in refurbished buildings.

3.2.2 Depending on the nature of the project a decant strategy may be required to deliver refurbishment elements. Where this is required the Contractor will make allowance for this within the project master schedule and through working with the PM shall lead in the production of this strategy.

3.3 Project Management Systems

3.3.1 Project documents will be stored on an external SharePoint site, adopted for the electronic project and documentation Management system for the project (unless agreed otherwise in writing by NHSPS). NHSPS will administer the system and provide training and licenses as necessary.

3.3.2 Issue of drawings for approval may be via electronic issue (through project management system or email). However, the Contractor should note that the NHSPS Project Manager may request hard copies of drawings to be delivered for review. All documents issued should be accompanied by an associated documents issue register to track and keep a record of such.

3.3.3 In general the NHSPS Project Manager shall be the primary contact for the Contractor and their team, however the NHSPS Project Manager will identify individuals forming part of the client team to enable direct discussions on specific areas such as IT, Infection Prevention and Control, Fire Safety etc. Though direct discussions with these teams are encouraged as part of the design process all instructions are to be confirmed in writing via the NHSPS Project Manager. NHSPS will advise on a project-by-project basis if these personnel are not available and are to be provided by the contractor.

3.3.4 NHSPS has adopted Prince2 as its preferred project management method.

3.4 Approvals

3.4.1 The following periods shall be allowed by the Contractor for NHSPS PM to comment:

i)	Architect's drawings and details:	**10 working days**
ii)	Structural Engineer's drawings and details:	**10 working days**
iii)	MEP Engineer's drawings and technical submissions	**10 working days**

If an urgent response is identified as being required by the Contractor from the Project Manager in exceptional circumstances 5 working days shall be allowed.

If adjustments to any of the above timescales are required these shall be agreed at the outset on a project-by-project basis in writing.

3.4.2 The Contractor shall, before construction commences of any relevant section of works, provide the NHSPS Project Manager with full details of all materials, not already detailed in the Works Information, for comment. The Contractor shall ensure that enough time is available to compile any samples etc. to allow the NHSPS Project Manager to assess fully.

3.4.3 The NHSPS Project Manager will coordinate the process of design comments and internal sign-off as required. This will involve elements including:

- Schedule of Accommodation/Operational Policies
- General arrangement
- 1:50 room loaded drawings
- Room Data Sheets (RDS)
- Specifications
- Fire strategy
- M&E Design / components
- Security and access strategy
- Maintenance strategy
- Design for infection prevention and control
- Emergency planning
- Agreed derogations

3.4.4 The Contractor shall not have the right to substitute any materials specified or indicated in the Works Information without prior written consent from the NHSPS Project Manager. If a change is requested the Contractor shall provide samples of alternatives with proof of comparable performance, along with full details of any effect on cost. All change management shall be via NHSPS Project Manager WEB.

3.4.5 Access to the site shall be made available to the NHSPS Project Manager or his representative at all reasonable times during the contract period.

3.5 Programme

3.5.1 The Contractor shall submit an agreed programme prior to commencement showing the agreed commencement and completion dates of each working activity and highlighting all relevant milestones and float associated with each activity.

This programme shall be updated monthly by the Contractor and re-issued to enable NHSPS to track progress.

The contractor will work with NHSPS to ensure that the programme encompasses the whole development programme from appointment to completion and occupation, not just construction and shall cover User and Stakeholder engagement and all associated governance and approval processes and the like.

In the case or refurbishment works to live sites, the programme shall address all phasing issues and the like required to maintain operation of the existing facility.

3.5.2 The Contractor shall also assist the NHSPS Project Manager in formulating a transition programme which will cover the period from approx. 10 weeks prior to completion to full occupancy and 'go-live' of the building. This will embrace “Soft Landings” best practice and shall include snagging, rectification of defects, deliveries, cleaning, IT installations (subject to NHSPS/occupier responsibility demarcation), specialist installations, commissioning, training, etc.

3.5.3 NHSPS requires a defects rectification period concurrent with that required under the agreed procurement / contract type (ProCure22 etc). NHSPS would like to see a 24-month defect period, this being consistent with that adopted by ProCure22. If the contractor can offer a significant saving for a reduced period, perhaps 12 months, NHSPS would consider this on a project-by-project basis.

3.5.4 NHSPS shall require the supply and erection of one development signboard on the site by prior agreement with the Contractor. The Contractor shall erect the board on suitable structures which shall not be moved, obstructed or removed without the NHSPS consent. This signboard shall include reference to the new development.

Exact Wording, design and livery to be agreed. NHSPS Corporate Identity Guidelines shall be applicable to all site signage and are available via the NHSPS Project Manager.

The Contractor should also note NHS Identity guidance for site hoardings, and ensure hoardings comply with these.

3.6 Operational Estates / Maintenance

3.6.1 NHSPS Operations team shall have the overall responsibility for the maintenance of the new facility and as such will require input into the design from an early stage. The Operational Estates team shall require input in the following areas:

- Manufacturers of materials and components
- Legionella management

- Testing and witnessing
- Systems familiarisation and training
- Approval and receipt of handover information
- User instructions
- Approval of plant space design
- Approval of plant access provisions
- The BIM model

3.7 Building Information Modelling (BIM)

3.7.1 BIM Level 2 shall be achieved on all projects.

In addition to this requirement to utilise BIM, NHSPS are keen to benefit from its advantage over traditional means of building design including:

- Virtual models and walk-throughs (the contractor shall set out any additional costs associated with renders and walk-throughs for consideration)
- Increased capacity for prefabrication
- Less site issues due to clash detection
- Quicker production of room loaded drawings / C sheets
- Less replication in design and therefore less room for error
- Better design coordination
- Better/faster production of revisions

3.7.2 NHSPS have managed schemes designed via integrated models and recognise associated efficiencies which can be gained. Therefore, the production of information using BIM is mandatory unless agreed otherwise in writing. To facilitate this a BIM Execution Plan shall be agreed and adopted at the outset of the project and the Contractor shall provide a BIM Manager/Co-ordinator. NHSPS are developing a standard BIM protocol document and will provide in due course.

3.7.3 The Contractor should ensure that handover information can be delivered in both unlocked electronic model form (with associated information attached) along with traditional plans/as built information as detailed in section 9.0 and all in accordance with the BIM Execution Plan.

3.8 Derogations

3.8.1 NHSPS require the Designers and contractors to endeavour to meet all required standards for building and engineering works/installations. However, there may be circumstances where it may be impossible or impractical to attain these standards.

3.8.2 Where the Contractor and design team find that there are specific parts of HTM/HBN documentation or similar that cannot be achieved this must be raised with the NHSPS Project Manager as soon as possible and entered into a schedule of derogations once agreed.

3.8.3 Awareness of these issues should be shared throughout the design process as they are encountered, not retained until late in the design period and presented at once.

3.8.4 The NHSPS Project Manager will work with the Contractor and design team to interrogate the derogation from the relevant standard and the associated constraints. At this point the Contractor must prove that a detailed study of what can be done to overcome the issue and satisfy the requirement/standard has been carried out.

3.8.5 The NHSPS Project Manager can then take a view as to whether they can agree the derogation or not, relying on clinical input and advice as necessary.

3.9 Construction (Design & Management) Regulations 2015 (CDM)

3.9.1 It is intention of NHSPS that this document be utilised as a specific NHS healthcare premises design specification standard to be considered by others in the pursuit of the provision of an actual design; and that design responsibility and the subsequent obligations of the CDM will pass to those actually designing the scheme. Any possible conflict between this document and the Design Risk Information identified by Designer, including principal designer of a particular project should be brought to the attention of NHSPS and other CDM duty holders for agreement on the way forward. Any deviation from the Department of Health and NHS Property Services specification must be recorded in the design risk information by the designer, including principal designer with justification. This is irrespective of any derogations made as identified in section 3.8.

3.9.2 This document forms the basis of the Employer's and the landlord and occupier's requirements to develop premises that are fit for purpose; it should be read in conjunction with the design brief generated for each specific project. NHSPS is the 'Client of the construction work' under CDM and this must be reflected in all project documentation irrespective of any sub-contracted contractual arrangements. The products / methods specified here are intended to ensure consistency across the building portfolio in general. Once applied to a specific scheme the duty shall fall to the designer, including principal designer as stated in the above paragraph.

3.9.3 NHSPS requires all contractors and sub-contractors to evidence their health and safety competencies which will include a valid Safety Schemes in Procurement (SSIP) certificate.

3.9.4 NHSPS has developed a standards Operation & Maintenance Manual format available on request from the Technical Services team (or stored in the document library. This requires all parties to supply information in that prescribed format.

3.9.5 Any incident that has caused harm or the potential of harm to site workers or anyone effected by the construction site activities to be immediately notified to NHSPS. Incident/accident performance statistics will be shared with NHSPS on a regular frequency, which will not exceed monthly reporting frequency. All investigation reports will be shared within a maximum of 20 calendar days from that date of the incident with NHSPS for comment. For Reporting of Diseases or Dangerous Occurrences Regulations, (RIDDOR) NHSPS reserves the right to enter site, send an independent advisor on their behalf and carry out a joint investigation with the contractor (including the Principal Contractor).

3.10 Samples for Approval and Sample Areas

3.10.1 Samples to be provided for all (or as agreed otherwise in writing on a project-by-project basis) materials, components and finishes for the occupiers to approve or comment. Once approved no changes shall be made unless agreed in writing by all parties.

3.10.2 Sample areas and/or sample rooms for quality benchmarking are to be agreed in consideration of the programme and in conjunction with the NHSPS and/or their representative. Such areas and rooms shall be completed earlier in the programme as agreed and maintained as a quality benchmark of standards required.

3.10.3 Approved material samples are to be securely retained on site until conclusion of the project for reference. The Contractor shall maintain a schedule of sample approvals required and agreed.

3.10.4 Large samples of all envelope components to be allowed for, to ensure full consideration to be given to design development issues including sign off with the Local Planning Authority.

3.11 Infrastructure Asset Tagging

3.11.1 Asset tagging shall be implemented on all new assets utilising NHSPS dual bar code and QR coding. The contractor shall ensure every new Infrastructure Asset is affixed with an Asset tag/label which will be provided by the Authority to the contractor.

3.11.2 The Contractor shall keep track of utilisation of the Asset tags/labels and which assets they relate to in order to prevent any duplications. The supplier shall adhere to NHSPS Asset tags/labelling conventions as depicted below -

Black Outline = Cutter Guide

60 x 30 mm

3.12 Submission of costed proposals

3.12.1 All project cost proposals shall be submitted in both elemental format, adopting a standard RICS NRM format build-up (NHS PS are working up a standard NHS PS project costs capture template for use generally to be issued in due course) and also NHSE OB form format in accordance with current NHSE business cases guidance.

4.0 Building Design Requirements

4.1 Relevant Policy Guidance

Throughout this document, reference is made to various guidance documents relating to the design of health facilities, as published the Department of Health. These include Health Building Notes (HBN's), Health Technical Memoranda (HTM's), Primary and Social Care: Premises Planning and Design Guidance.

4.2 Guidance and Statutory Compliance

4.2.1 All development of new estate (and where possible, reconfiguration of existing estate), shall comply with the guidance as set down in HBN 11-01 - 'Facilities for primary and community care services'.

4.2.2 A considerable amount of information available to the designer/provider is contained in HTM which provides specification and design guidance on building components for healthcare buildings which are more specific/prescriptive than those covered by British Standards.

4.2.3 The design team members should explore varied additional avenues to achieve alternative technologies and techniques for energy efficiency and ecological construction as these are not well referenced at present in the HTM's and HBN's.

4.2.4 Refer to section 2.0 for records of other applicable HBN's, HTM's and the like.

4.2.5 It is acknowledged that the HBN and HTM documentation is guidance rather than a statutory requirement and where considered appropriate by the contractor other design solutions may be proposed. However, prior to pursuing these alternative solutions they must be approved by the NHSPS Project Manager in writing and any derogations from the health standards are to be documented accordingly clearly using a checked derogation schedule. The emphasis is to start with a fully compliant scheme, not a set of initial derogations.

4.2.6 In some circumstances the HTM and HBN make reference to "…fitness for purpose…" and the like. For the avoidance of doubt the HTM and HBN shall confer on the Contractor no greater responsibility for fitness for purpose than the Contract which shall be a duty to use "reasonable skill and care".

4.2.7 Where options exist within HTM and HBN the selection of these options shall be at the discretion of the Contractor following consultation with the NHSPS Project Manager for their preferred solution, unless specifically requested within the Works Information.

4.2.8 In the event that discrepancies are identified between the requirements of different HTM and/or HTN the Contractor shall select the most appropriate design solution. In selecting the most appropriate design solution the Contractor shall consider the requirements of the Works Information and shall have exercised due reasonable skill and care in selecting the most appropriate design solution. The Contractor shall notify significant identified discrepancies to the NHSPS Project Manager for clarification and guidance.

4.2.9 In particular planning relationships, department sizes and room sizes will comply with the Works Information which may be contained within a remaining portion of an existing building and may not necessarily comply with HTM and HBN. The Contractor shall notify the Project Manager of any such non compliances with the HTM, HTN and Health Facility Notes and shall await the NHSPS Project Manager's approval to proceed on this matter.

4.2.10 The Contractor shall be responsible for ensuring the room sizes are adequate to accommodate the equipment identified in the Room Data Sheets and shall have made reasonable assumptions of the size of equipment not specifically stated.

4.2.11 As an example the following design decisions have been incorporated into the Works:

Clocks are battery powered not mains electricity powered. The contractor shall provide extra over costs for mains powered and then also IT networked clocks.

Use of stretchers is excluded. It is assumed that patients will be transported on ambulance trolleys/chairs in emergency situations.

Computers are not provided with essential supplies.

These are examples only and to be confirmed on a project-by-project basis.

4.2.12 All labour shall be executed by skilled tradesmen and experienced labourers with no less than any stipulated or industry recognised proportion of apprentices at the time of appointment and the workmanship shall be of the required standards of NHSPS. NHSPS supports the use of local labour and current Government backed apprenticeship initiatives and the contractor shall also be expected to embrace such initiatives and evidence such.

4.2.13 All materials and goods shall be new and of the quality specified.

4.2.14 All materials and components shall be supplied and fitted in compliance with the manufacturer's recommendations and specifications.

4.2.15 All materials shall be obtained from approved manufacturers and suppliers and properly stored and protected from water, frost and inclement weather. Any damaged or defective materials shall not be incorporated in the works but removed from site and replaced with sound materials at the expense of the contractor.

4.2.16 The Contractor shall make available to NHSPS (and occupying occupier where applicable), at all times, copies of such documents which demonstrate that materials incorporated into the works are of a satisfactory standard and in compliance with the works information/employer's requirements.

4.3 Fitness for Purpose

4.3.1 The Contractor shall be responsible for the design and construction of the premises to comply with the works information and in relation to fitness for purpose shall be required to use all reasonable skill and care in the discharge of his duties.

4.4 Image and Environment

4.4.1 Unless agreed in writing with the Infection Control Consultant Advisor via the NHSPS Project Manager the Contractor shall only use compliant finishes and fittings, but in a way that enables the design to look and feel non-clinical.

4.4.2 Natural daylight and ventilation are important to health and wellbeing and should be present in all patient and staff areas in preference to mechanical ventilation where possible. Thermal calculations shall be carried out to determine the environmental criteria to all areas.

4.5 Confidentiality

4.5.1 Due regard must be given to patient privacy and confidentiality within the building both by sound attenuation and by room design generally. All construction and components

must be designed and installed to satisfy the requirements set out in the relevant HTM's and shall be tested and certified prior to completion of the scheme.

4.5.2 NHSPS places great emphasis on compliance with acoustic standards and shall fully interrogate the design, installation and testing of these elements to ensure all standards are met once any rooms to be tested have been fully equipment. The contractor is required to test a range of sample rooms of differing types and locations within the building at the Contractors risk in order to prove the required acoustic ratings have been achieved. On refurbishment projects the extent of this requirement shall be agreed on a project-by-project basis.

4.6 Security

4.6.1 The Contractor shall in the discharge of its design obligation apply all relevant guidance contained in the "Secured by Design" scheme documentation. In addition, the Contractor shall liaise with all relevant parties, including the NHSPS Senior Estate Manager and proposed occupier (where applicable) via the NHSPS Project Manager on specific areas of design including locking requirements, CCTV, security alarms, component specification and perimeter fencing etc. See section 4.25 for further details.

4.6.2 The design team are to consider remote lock/unlock technology in conjunction with the operational team managing the site. Whilst there may be overriding reasons why this is not appropriate for a particular sites the preference is that this should be starting point for any design solution and ruled out if necessary.

4.7 Flexibility / Future Expansion

4.7.1 The Contractor shall identify how the building might be increased in size by a further minimum of 15% of its GIA. The Contractor shall seek informal confirmation from the local planning authority of their agreement in principle to the identified future expansion, subject to appropriate applications and consultation at the time of application. This requirement would not be applied to refurbishment schemes or those involving fit-out of developer provided shells.

4.7.2 The extent of any future expansion required shall be agreed on a project-by-project basis and the contractor shall be expected to assist the NHSPS Project Manager to develop an expansion strategy and advise on the cost implications of such to allow NHSPS to make informed decisions as to its adoption.

- Foundations
- Structure
- M&E Services (infrastructure only)
- General Arrangement

4.7.3 To aid future internal flexibility the internal partitions shall where-ever possible be of a non-load bearing construction, built off the screed. Any acoustic issues associated with this approach to be addressed.

4.7.4 The contractor shall include a section within the handover manuals which details future development opportunities, any outline agreements with the Local Authority, structural information, service locations/details etc. where appropriate.

4.7.5 To account for expansion the contractor is to highlight any provisions for expansion, not only in terms of the physical clinical spaces, but also in terms of plant allowances for all effected MEP services and the like (as set out in clauses 4.7.1, 4.21.5 and clause 8.4.3 where electrical supply provisions are described.

4.8 Access and Circulation

4.8.1 Consideration should be given at the Entrance to the building to ways of minimising the ingress of dirt and water.

4.8.2 The Contractor should provide a range of options for barrier matting at the main entrance and seek NHSPS Project Manager approval. In design of the building entrance access for the disabled must be considered a high priority with no raised thresholds, spacious entrance lobbies and clear signage etc (see also item 5.19.3).

4.8.3 To assist the free movement of patients around the building, hold open devices should be fitted to doors on circulation routes as agreed with the NHSPS Project Manager. Hold open devices fitted to fire doors must auto release on fire alarm activation. The use of automatic opening doors should be explored and options presented to the NHSPS Project Manager for consideration.

4.8.4 The design team shall work with all relevant parties including the NHSPS Senior Estates Manager and/or NHSPS Soft FM Security SME and proposed occupier (where applicable) via the NHSPS Project Manager to formulate a formalised and signed off access control strategy which may include hold open devises, magnetic locking systems, mechanical digi-locks, audio/visual intercom, CCTV, panic alarms and intruder detection.

4.8.5 The Contractor is also required to formulate a zoning strategy which separates the occupants. As occupier operational hours will vary the facility must allow for access to occupier demises whilst others remain locked / armed. The NHSPS Project Manager shall guide the production of demised floor plans for review with the Contractor during the design phase. Security and maintenance will be key factors and should be considered and addressed generally.

4.9 Disabled Facilities

4.9.1 The building design shall meet but ideally exceed the compliance required using relevant Building Regulations; The Equality Act 2010 and best practice current at the date of the agreement. In the assessment of designs, particular attention will be given to the provision for disabled people, including people with impaired hearing (e.g., induction loops) and vision (e.g., effective use of colour, texture and lights, etc).

4.9.2 The design shall ensure that equal access is given to all areas of the building and shall provide good access for everyday and emergency situations, avoiding the need for stairs and ramps.

4.9.3 All routes, including escape routes and assembly points shall be clearly and properly illuminated (in accordance with regulations/guidance) and where practicable access from car parks should link to the general footpath provided. Use of both private and public transport is to be provided must be available for all, irrespective of physical ability and way finding and signage which is clear and an integral part of the design solution and part of the fire strategy documentation and Building Control approval process.

4.9.4 Entry and exit positions must be well illuminated (in accordance with regulations/guidance and should open onto public areas.

4.9.5 Elements for consideration (not exhaustive):

- Provision of 'Changing Places' bathroom (likely to be considered for larger facilities – NHSPS to stipulate if required)
- Provision of family WC / changing facilities
- Entrance door thresholds
- Range of waiting room seating to suit accessible requirements
- Audible and visual call systems and alarm systems
- Induction loops (including portable units and fixed units at reception desks)

- Car park design (location and number of accessible bays and appropriate access paths to the building entrances and fire escapes) (subject also to planning constraints and requirements and the agreed sustainability strategy)
- Consideration of the increase in use of mobility scooters and how these are to be managed/accommodated generally
- Main approach to building (appropriate levels, signage etc.)
- Need for patient hoists (fixed or mobile)
- Consideration of specific patient group needs such as dementia

4.9.6 NHSPS will set out any requirement for the provision of bariatric facilities on a project-by-project basis.

4.10 Interior Design and Artwork

4.10.1 The design of waiting areas, main circulation areas etc. should seek to promote the relaxation of the patient whilst still fulfilling the exacting requirements of the occupier's Infection Prevention and Control Team and all HTM's and HBN's (refer also item 4.4.1).

4.10.2 The design should allow space for the client to display fixed artwork integrated into the fabric of the building with particular attention paid to the main entrance and common areas. Artwork will relate to the local community groups and users of the building where required.

4.10.3 The Contractor will have an obligation under the contract to co-ordinate with the NHSPS appointed artist for a scheme and make necessary allowances for fixing points, access and lighting etc.

4.10.4 As part of the Contractors input into the overall art proposals they will be required to provide proposals for feature lighting and artwork with the appointed artist to provide a coordinated installation.

4.10.5 The Contractors attention is drawn to the following guidance documents in relation to artwork: -

1. Art for Health, DoH (2000)
2. Improving the Patient Experience DoH (2002)
3. Arts Council England (2007) 'A prospectus for arts and health'
4. NHS Estates (2002) 'The art of good health – a practical handbook
5. NHS Estates (2002) 'The art of good health – using visual arts in healthcare

4.11 Deliveries

4.11.1 Adequate provision for access, manoeuvring and safe off-loading shall be made. Separate external transportation routes should be identified and clearly marked for service vehicles as opposed to general site vehicular or pedestrian movements.

4.11.2 Consideration shall be given to the movement of service vehicles including refuse and delivery vehicles as well as emergency services.

4.11.3 The contractor shall work with the NHSPS Project Manager to determine the type of vehicles required to access the site and ensure that the required access provisions are included within the design.

4.11.4 A separate NHS colleague entrance, which avoids the need to pass through public spaces is generally required and should be provided as part of the scheme. This should be discussed with the users and the scheme NHSPS Project Manager and documented as part of the building access strategy.

4.12 Mobile Diagnostics Facilities

4.12.1 Provision for mobile diagnostics facilities should be made as part of the overall design as required by the NHSPS Project Manager and as established on a project-by-project basis. This may include MRI, Breast Screening, Ultrasound services.

4.12.2 The relevant HBN/HTM documentation should be utilised in planning these areas which will require a suitable hard-standing, logical link with the building layout in terms of patient journey and sub-waiting etc.

4.12.3 The necessary service connections are also required, and particular attention should be noted on the proximity to surrounding services and any impact these may have on the medical equipment or adjustments to layouts to enable mobile diagnostics facilities.

4.12.4 These mobile facilities and provision of the necessary infrastructure form an important part of a scheme and should be considered from the outset of design work.

4.12.5 Particular points for consideration are:

- The requirement for a hard standing to site the mobile equipment
- An access strategy and swept path analysis proving that all necessary trailers/portable appliances can access the site safely and without significant operational impact
- External plug-in points and service requirements are provided/satisfied.
- Conflict with other electrical services which may cause interference to the medical equipment.

4.12.6 NHSPS have standardised 'plug-in' arrangements to accommodate a range of portable appliances and their service requirements. Details can be provided via the NHSPS PM.

4.13 Parking

4.13.1 Separate easily identifiable designated parking should be provided at the facility for the following:

- Doctors/Clinicians Spaces (for on call clinicians only)
- Disabled Persons Spaces
- Parent and Child Spaces (where possible)
- Ambulance Space and associated turning area - ground to be marked
- Electrical vehicle recharging points (where applicable)
- Patient Transfer Service vehicles (where applicable)
- Motorcycle parking bays
- Cycle storage (public and staff)
- Vehicle drop off facility
- MRI/diagnostic vehicles bays where required
- Service vehicle delivery and waiting areas
- NHSPS colleague and patient parking shall be segregated unless agreed otherwise in writing
- Use of barriers, access control and payment systems shall be considered on a project-by-project basis

4.13.2 Provision for secure and weather protected bicycle storage is to be accommodated within the site with adjacency to the main building entrance (in accordance with any specific requirements of the agreed sustainability strategy).

4.13.3 Though the design of car parking should be as efficient as possible in terms of provision of parking spaces, the ease of manoeuvring around the car park and parking vehicles should be considered. The Contractor should note the NHSPS parking policy (copy obtainable from the NHSPS Project Manager) in design of parking areas.

4.13.4 The design of any parking areas should address the requirements of Secure by Design and also comply with Park Mark. The contractor shall pay all fees and charges associated with such.

4.13.5 The design and capacity of any parking areas shall comply with any planning stipulations, implications and the like, together with an operational assessment of the likely demand for the site in question to be signed off by the users. It shall also be in accordance with the agreed sustainability strategy. The design team shall discuss and agree with the operational team whether car parking controls will be required at the site and include as appropriate.

4.14 Patient and User Facilities

4.14.1 Where a schedule of accommodation has not been established at the outset (as item 2.03) the NHSPS Project Manager will work closely with the Contractor in the early stages of the project to define an outline schedule of accommodation which will be developed and agreed during the design phase.

4.15 Specialist Facilities

4.15.1 Requirements for specialist healthcare facilities are very specific and both contractor and design team should fully interrogate all associated guidance documents required including HTM's/HBN's. Where these standards and guidance leave room for interpretation the NHSPS Project Manager should be consulted to finalise any decisions.

4.15.2 Specialist facilities may include: -

- **Audiology rooms** (which may require a 'booth' or walls lined in sound absorbent material etc)
- **X-Ray** (which will require specialist supporting structure/ceilings for the overhead equipment, lead lined partitions and doors, floor trunking etc)
- **Ultrasound** (which will require specialist lighting, blackout blinds to any windows etc)
- **Minor Operations Room** (which will require operating theatre spec walls, ceilings, light fittings etc. and any associated rooms such as recovery, changing and scrub rooms). Any requirements for medical gas shall be established on a project-by-project basis, including any infrastructure and storage issues associated with such.
- **MRI/CT/X-ray rooms and the like (**which may require operating theatre spec walls, ceilings, light fittings, faraday cages, quench pipes etc. and any associated rooms such as recovery and changing rooms). Any requirements for medical gas shall be established on a project-by-project basis, including any infrastructure and storage issues associated with such.
- **Dentistry suites generally** (which will require specialist equipment and may require lead lined partitions and doors, floor trunking etc)
- **Renal dialysis suites** (which may require specialist RO water systems and other specialist medical equipment, fittings, furniture and the like)

Where any X-ray installations or the like are required to be approved by a Radiation Protection Advisor (RPA), this advisor will be provided by NHSPS.

Patient, staff and materials flow in such facilities must be considered carefully during the design.

All such specialist facilities proposals shall be worked up in detail in accordance with current standards and best practice as required for the proposed clinical use of such spaces and provided to NHSPS Project Manager for comment.

4.16 Waste Disposal and cleaning stores

4.16.1 Storage areas shall be sufficient and secure with some facilities for waste segregation and recycling in line with NHSPS (and our partners) Waste Management Policies. The location shall be discrete and away from patient/user sight and access. The refuse point needs to be of sufficient size to hold at least 4nr 770ltr bins for at least four individual waste streams (general, recycling, non-hazardous and clinical).

4.16.2 The Contractor shall liaise directly with the NHSPS Service Assurance waste lead to ensure type, size, and location of the waste compound are appropriate. The NHSPS Service Assurance waste lead shall also provide guidance on requirements for internal bins, recycling, disposal routes and the requirement for any disposal 'holds' internally or externally.

4.16.3 Where possible external bin stores shall be located away from the building to avoid any potential spread of fire. They should be lockable and have a roof or 'lid'.

4.16.4 A range of bin types are required within each clinical room to handle 4 different waste categories. Provision for these bins should be considered as part of the room design.

4.16.5 The approach to waste management needs to be co-ordinated with the agreed sustainability strategy.

4.16.6 Wash down facilities shall be provided to all refuse stores and the like, including associated below ground drainage installations, gullies and the like.

4.16.7 Cleaners stores – These need to be sizeable enough for cleaning machinery and have the appropriate charging facilities (often overlooked), as well as room for stock, cleaning trolleys and other equipment. I'd also ensure good water pressure in these facilities for filling the machines at pace (often poor water pressure can eat up valuable cleaning time).

4.17 Communications

4.17.1 A full copy of the required IT / Comms standards is available from the NHSPS Project Manager. It is essential that the contractor review this document in full as part of the scheme design and note its provisions on all elements of IT infrastructure.

4.17.2 NHSPS primary requirements in terms of IT/Comms are detailed in section **8.15**.

4.17.3 The Integrated Care Board (ICB) and/or the GP Practice occupier will provide the actual communications and IT equipment.

4.18 Centre Policies

4.18.1 All NHSPS premises operates a no smoking policy. This will apply to all areas of the proposed building and grounds. Site specific policies will be developed by the NHSPS managed user groups and implemented as appropriate within the completed facility.

4.18.2 The Contractor shall allow for assisting in preparation of these operational documents where appropriate and where technical input is required - for example with regard to access control, and car park management etc.

4.18.3 Operational policies of this facility will include access control, opening hours, security, fire plans, fire strategy, car park management etc. all of which will be developed under the management of the NHSPS Project Manager with specialist input from the Contractor.

4.19 Reception and Waiting Areas

4.19.1 Reception desks should be open on a similar basis to a hotel reception and not institutional in plan and appearance. Reference should be made to recent NHSPS projects (details can be obtained from the NHSPS Project Manager). The Contractor and design team can arrange visits to these premises via the NHSPS Project Manager.

4.19.2 Depending on the location of the premises, the types of services occupying the building and the specific requirements of the occupants the degree of security will vary and will need to be agreed early in the scheme design. Inclusion of security screens above reception desks, roller shutters etc. may be required.

4.19.3 The NHSPS Project Manager shall in consultation with the CCTV lead advise on the exact requirements through design development.

4.19.4 Where glazed screens are installed they must be designed to allow the patient/receptionist to communicate easily without blockage of sound. And provide space to pass objects under the screen (usually gap of 150mm).

4.19.5 It will be necessary to provide discrete means to close off the reception counter when not in use. This can be achieved either by using an electrically/mechanically operated roller shutter or within the specific project layout to achieve similar without the need for a roller shutter. (Refer to Appendix B – Technical Specification for approved suppliers). The agreed solution shall acknowledge the differing operational hours of services within the facility.

4.19.6 Reception desks should be designed for ease of operation by a single staff member, and ease of use by wheelchair users should also be facilitated in accordance with Building Regulations requirements.

4.19.7 Usual working practice for GP surgeries and other healthcare services is to have 2 or more reception colleague working at one time. The requirement for workstations at reception should be identified early in the design.

4.19.8 A fixed induction loop is required to all waiting areas, receptions, large meeting rooms.

Portable induction loop systems for transportation to private areas during consultations/examinations are to be supplied under the contract. One to be provided to each reception desk.

4.19.9 Waiting area/Sub-Waiting areas/Reception Area seating should be arranged on an informal basis to mix with clusters of loose seating and cater for differing needs in terms of seat height, width and style.

4.19.10 Where possible flooring, ceiling and wall finishes should assist in identifying seating areas and circulation routes within the waiting area.

4.19.11 A play area specifically designed for children to wait may be required. The location of this should be discussed and agreed with the NHSPS Project Manager and NHS PS' security CCTV lead as it is a critical element in terms of NHS colleague and parents' ability to oversee children and shall address any associated security issues.

4.19.12 In general NHSPS would encourage shared waiting areas wherever practical to make efficient use of space and use of patient call screens etc. This may not always be possible, or appropriate therefore careful consideration of the service needs is required with particular

emphasis on circulation routes, privacy and confidentiality, call screen locations, self-check in locations, seat numbers and types etc.

4.19.13 It is likely that a patient call system will be required as part of the project. Whilst the screens, PC and software will be procured by the occupants directly, provision must be made in terms of high-level power and data outlets at agreed locations, along with any fixing supports required.

4.19.14 Self check in points may also be required and along with power and data to agreed locations.

4.19.15 Key points for consideration in reception and waiting area design are as follows:

- Number of reception staff
- Degree of security
- Daily appointment numbers / numbers of waiting seats required
- Types of waiting seats (varying heights/widths for accessibility, beam seating, individual seats etc)
- Layout (efficient yet not overcrowded)
- Clear circulation routes
- Type and location of patient call systems (screens, PA systems etc)
- Clear signage
- Colour scheme and artwork
- Provision of background music
- Inclusion of children's play area
- Privacy at reception desk (waiting seats not too close to desk)
- Provision of interview room adjacent to reception area
- Access to drinking water
- WC's
- Health promotion/information opportunities

4.19.16 Patient WC's – Hand Dryers are preferred to paper towel systems. Provision should be made for fused spurs for hand dryers on all WC's refurbishments. Design team should liaise with the local FM lead for current preferred manufacturer. Design team should request access to the following guidance documents:-

- Soft FM Expertise & Delivery Assurance - HBN_00-09_infection_control (sharepoint.com)
- We have a selection of hand dryers available from PHS which does include a HEPA filtered hand dryer.
- We have created a section on the intranet which has all guidance, specs etc.
- Waste Services - Washroom Services (sharepoint.com)

4.20 Consulting and Treatment Facilities

4.20.1 There is a range of HBN/HTM guidance on the correct sizes/layouts of consulting and treatment rooms within healthcare premises. This guidance should always be used as a basis of the proposed design however requirements of individual occupiers may vary in terms of room layouts. Though room sizes me be altered through discussions and agreements with user groups and ultimately with the NHSPS Project Manager, consulting rooms should all be provided at 16m² and treatment facilities at 18m² (noting that 18m² is a departure from the stipulated 4m² grid). NHSPS supports the use of the Department of Health's ProCure22 repeatable rooms initiative and as such is open to their use on schemes (noting the single and two sided couch access variants). This is understood to be a potential derogation (agreed by the Department of Heath) to the standard HBN room size recommendations and the 4m²

module approach set out above. In adopting such any such repeatable rooms, the team shall also take cognisance of NHS England's/NHS Improvement's requirements and recommendations regarding combinations of Consult/Exam room sizes and the like and the combinations thereof and for example any treatment rooms shall be appropriately sized for the clinical function proposed to be carried out in such rooms.

4.20.2 Though NHSPS does not discourage use of irregular room shapes in some areas (curves, chamfers etc) clinical rooms shall generally be provided in standard rectangular form with proportions in line with HBN recommendations.

4.20.3 The Contractor shall work with the NHSPS Project Manager to produce room layouts that consider operational health and safety, NHS clinical service and the patients' health conditions before and after treatment, lean working principles aspirations, infection control issues, security, privacy and dignity.

Layouts shall follow the design principles and layouts adopted under ProCure22 (or any successor framework to it) standard and repeatable rooms but will adhere to HBN space standards, unless agreed otherwise in writing. NHSPS are prepared to consider space standard derogations but only where evidenced based, addressing a primary care setting.

4.20.4 For particular consideration:

- Couch access (right hand, left hand or three sided access required)
- Location of practitioner desk (if required) and patient seats
- Type of exam light required (mobile, wall or ceiling mounted and focus adjustment and reach requirements)
- Cubicle track location and arrangement allowing suitable working room around the couch
- Basin position (to minimise practitioner route to/from)
- Fitted storage location and arrangement
- Avoid hard to clean recesses (specifically no gaps less than 400mm to allow adequate access for floor cleaning machinery)

4.20.5 The NHSPS Project Manager will play a key role in agreeing room layouts and work closely with the contractor to satisfy all necessary standards and user requirements. NHSPS would support the development of a standard set of rooms for adoption elsewhere, for example perhaps a set of ProCure22 Repeatable Rooms for primary care.

4.21 Plant Space

4.21.1 The Contractor shall allow for whatever plant space is necessary in respect of the engineering design for this building. Sufficient space shall be allowed for maintenance access and due consideration of the replacement of all parts must be demonstrated however particular care should be taken to ensure that plant rooms are not oversized.

4.21.2 This will be reviewed at the design stage by the designer (including principal designer) with the appropriate design consultant and the Contractor, along with a nominated engineer from NHSPS to assess access and safety.

4.21.3 The design needs to encompass any specific areas for third party installations i.e., for independent installations by a pharmacy, private dental surgery etc.

4.21.4 Size, location, layout and access to plant areas is a key element of the design and the NHSPS Operational Estates team will require early input into this.

4.21.5 The requirement to allow 15% future expansion space (as section 3.6) also needs to be applied to plant areas. The Contractor should provide options for additional plant space and discuss /

agree with the NHSPS Project Manager. This requirement would not be applied to refurbishment schemes or those involving fit-out of developer provided shells.

4.21.6 NHSPS define all plant and boiler rooms as Confined Spaces and this needs to be identified in the Health and Safety file accordingly.

4.22 Kitchen / Food Prep - Cafe Areas

4.22.1 NHSPS requires that the elements of food preparation/serving area design are given due consideration by the architects and service providers for inclusion at the planning stage of the building.

4.22.2 NHSPS appreciates that the majority of kitchen facilities within their health centres are not full commercial type facilities and are generally not expected to be designed as such. Early discussion and agreement with the NHSPS Project Manager is required to ensure the scheme specific requirement is met.

4.22.3 The requirements for kitchen facilities within NHSPS facilities are as follows:

- Staff beverage bay within each occupier's demise (a small room holding a fridge, provision for boiling and chilled mains fed drinking water unit, sink/drainer unit, commercial grade dishwasher, cabinets to store cups etc) Integrated chilled water dispensers and tea boilers are to be installed in each of the beverage bays and kitchen areas. The NHSPS preferred fitting is Zip Hydrotap combined filter, boiler and chiller unit. Consideration is required to the fitting location and required under bench storage of mechanical unit and associated venting.

- Staff room (usually one room provided for use by all occupants) This should be situated well outside of public circulation/sight. This room will be larger and may have more than one fridge, tables and chairs, AV connection, sink/drainer unit, commercial grade dishwasher and a wider range of cabinets for storage.

- The contractor shall work with NHSPS to establish the type of fittings required within staff areas, for example as to whether they are required to be commercial or domestic standard.

4.22.4 Note: both of the above facilities require a wash basin for handwashing - in addition to the sink provided.

4.23 External Works

4.23.1 All external works, both on and off site shall be provided, including stopping up, junctions and accesses, service roads, pavements, car parking, drainage, lighting, fencing, and hard and soft landscaping as required by the nature of each project. Note the use of internal manholes will not be permitted under any circumstances. The Contractor shall be responsible for any Section 278 Highways works, including all crossovers and shall pay all fees, charges and the like in connection therewith.

4.23.2 All elements of external work shall be designed to approval of both the local planning authority and Secured by Design lead (see section 4.25).

4.23.3 The Contractor shall include for all works as necessary associated with the reinstatement of the temporary site after the removal of the temporary accommodation in full accordance with the requirements of the Local Authority and terms of the Licence for temporary accommodation.

4.23.4 The external site is to be hard and soft landscaped to maximise patient enjoyment, views from the facility, ease of site navigation and the maximisation of parking locations. Small and large scale planting will be required and external signage provision. External landscaping paving, planting and parking shall be designed to meet the requirements of the Planning Approval. The scheme proposed should be aesthetically pleasing but easily maintainable and should pre-empt accidental damage to reduce future maintenance and repair costs.

4.23.5 An external night and dusk lighting scheme will be required with due consideration given to the close proximity of neighbouring dwellings.

4.23.6 External garden areas, internal courtyards and roof gardens shall be considered as part of the scheme and may feature seating, planters, and lighting (subject to the adopted BREEAM strategy/BRE light pollution requirements). Consideration shall be given to the use of internal planting.

4.23.7 Planting should be specified in view of keeping maintenance to an absolute minimum and specifications should be agreed with the Operational Maintenance team, via the NHSPS Project Manager, in advance. Consideration shall be given to the re-use of existing plants and shrubs removed from the existing site during site clearance for integration into the proposed landscaping scheme.

4.23.8 The Contractor shall include for maintenance and replacement of any plant failures for a period of 24 months from Practical Completion including watering as necessary. An extended maintenance programme shall be prepared and issued to the NHSPS Project Manager prior to completion. Subject to any agreement for a reduced period under item 3.5.3 above.

4.23.9 The primary access to all sections of roof shall be by internal staircase. Landscaping and access around the building should be designed to permit access to all elevations from access equipment without the need to apply for road closures or seek licences from any third party or adjacent occupier/owner.

Landscaping should be designed in order to enhance drainage from the site rather than impede it.

4.23.10 The Contractor shall establish whether any new mains connections are required in respect of water, fire mains, power, gas, IT, telecoms and the like and shall pay all fees, charges and the like associated therewith, including the provision of all necessary substations, external generator plant and the like as required.

4.24 Activity Levels/Intensity of Use

4.24.1 The Contractor should take account of the following:

- The different occupants of the building are likely to operate different hours of service with each of the occupier's demise needing to be secured individually outside of their own operating hours. Each occupier must have the ability to enter their own demise without disarming other areas of the building wherever possible. Circulation and access routes must also be considered carefully to avoid unnecessary access through demised areas i.e., location of shared staff rooms, IT hub rooms etc.

- In respect of the above, provision should be made in the design for all Departments/Service Areas to be individually controlled in respect of security and zoned for lighting, heating, ventilation etc. Where appropriate zoning of the fire alarm system may also reflect this separation of services.

- It is possible that the proposed facility may in the future operate up to 24 hours per day, 7 days per week, 365 days of the year. This intensity of use may not be required at the

outset of the buildings operation but future proofing access and alarm systems etc. is required to accommodate future changes in operational hours etc. If this requirement prevents any consideration as to the use of thermal mass for night-time cooling, this shall be discussed with the NHSPS Project Manager.

- There is a necessity to monitor and meter/sub-meter all energy sources and usage throughout the building on a service by service and user basis, linked electronically back to the proposed new BMS for logging and billing. This is also likely to be advantageous under the agreed sustainability strategy. There are specific NHSPS requirements for BMS systems which should be discussed directly with the NHSPS Estates Team via the NHSPS Project Manager (refer to section 8.0 for further details). Should BMS not be proposed for this interface separate arrangements shall be agreed with NHSPS and adopted.

4.25 Secured by Design

4.25.1 All appropriate measures shall be incorporated to assure the security and safety of patients, staff and visitors and their property within the Premises and its immediate vicinity. The Premises must also include adequate provision for safeguarding the security of equipment, patients' records, drugs, etc.

4.25.2 The project shall be certified as having been Secured by Design.

4.25.3 The design and specification of Facilities shall be carried out in consultation with the local Police Architectural Liaison Officer/Crime Prevention Officer and the stakeholders' representatives.

As part of the overall approach to security systems, the design may include, but not be limited to:

- Suitable locks on doors to contain/control occupier and patient access within appropriate areas. This may include keypad/swipe entry systems and specialist 'two-way' release door latches etc. An access control strategy and lock suiting system shall be agreed with the NHSPS Project Manager.

- CCTV and passive infra-red detectors/shock sensors/door contacts; telephone link to outside monitoring (Emizon).

- Occupants attack system.

- A personal attack alarm system may be required in areas where practitioners and other NHS colleagues may be at risk of attack (see section 8.17).

- The security system should be designed to interface with and avoid conflict with the fire alarm system.

- Design and management of parking areas shall comply with Park Mark standards and Health Technical Memorandum 07-03: NHS car-parking management, environment and sustainability (england.nhs.uk).

- Any site specific requirements from the existing/developer's new building's insurers.

- Consider Vehicle Mitigation Measures in conjunction with the NHS PS security lead based on the specifics of the site in question.

5.0 Building Performance Specification

5.1 Energy Efficiency/Net Zero Carbon

5.1.1 The Designers / Contractor will organise, host and attend a series of workshops to review the agreed sustainability strategy (which will include a holistic approach to Net-Zero Carbon design, Climate Adaptation measures and Biodiversity) assessment criteria to ensure the project team exploit every possible opportunity to achieve the agreed sustainability strategy and energy rating (focus on maximising the EPC rating) throughout the design development and construction stages, achieved within the overall project budget (bearing in mind the ability to request uplift funding from the Energy Team, if required to achieve the desired goals). Adopting solutions aligned to the NHSPS Green Plan will be a fundamental requirement of the project. NHSPS are open to developing a standard template for such to then be rolled out nationally.

5.1.2 The Designer will ensure reducing heat demand (with a focus on removing fossil fuels and improving thermal performance) is a key component of the design and features such as reducing climate impact and improving biodiversity are incorporated into the building wherever appropriate.

5.1.3 Though the NHSPS Project Manager shall be responsible for producing the required information evidence in support of any 'client side credits', the Designer / Contractor shall hold overall responsibility for co-achieving the agreed sustainability strategy rating.

The Designer shall develop an energy and sustainability strategy and design that delivers compliance with the following:

- Building Regulations Part L – project compliance with the Building Regulations Part L is a statutory requirement with Part L2A for new build and Part L2B for refurbishment. The Designer shall confirm the requirements with the Building Control officer at an early stage.

- Planning Requirements – The local council may have energy target requirements over and above those of the Building Regulations Part L. The Designer shall ascertain the Local Authority requirements with the Planners at an early stage and implement into the design strategies accordingly.

- NHSPS Strategy documentation current at the time the works are contracted, such as adhering to the principals of the Green Plan, utilising the Minimum Specification Standards and adhering to the Climate Adaptation and Biodiversity strategies.

The Designer will develop the base building design to deliver a net-zero carbon solution prior to the design of the engineering services system and selection of plant.

The selection of plant with high operational efficiencies contributes a very large part in driving down energy use. The efficiencies set out in Building Regulations and associated documents shall be met as a minimum, with the Minimum Specification Standards utilised to know what efficiency criteria should be adhered to. The use of tools such as the Energy Technology List (Home: Energy Technology List (beis.gov.uk)) should be considered when specifying efficient technologies.

Below is list of engineering services measures that shall be considered in the design solutions, driving energy down to the project target. This list is a guide, is not exhaustive and shall be reviewed on a project-by-project basis, with the first point of call being to review the Minimum Specification Standards document, which will be updated on a regular basis to ensure specification meets the demand of NHSPS.

- Ventilation system heat recovery – Minimum 70%
- Specific fan powers shall be 1.8W/l/s
- Variable speed drives on all motors.
- High efficiency motors to IE4 minimum.
- Low loss pipework system design.
- Low velocity ductwork design to also minimise noise.
- Optimum use of automated building energy management systems.
- Fully Zoned engineering services systems and controls.
- Night-time setback on heating systems in 12 hour areas.
- PIR flushing of toilets/ urinals and/or waterless urinals.
- PIR lighting control to areas such as toilets and stores.
- Daylight sensors in offices.
- Rooms to have multiple lighting circuits to enable part switching.
- Power Factor better than 0.96.
- Electrical Harmonic filtration.
- Weather compensated heating circuits.
- Optimum start/stop control.
- Thermostatic devices (TRV's) on all heat emitters.
- Domestic water services pipework to be a minimum 25 mm thickness and have insulation thermal conductivity of no greater than 0.025W.mK to reduce HWS losses.
- High efficiency lamp sources such as LED to achieve minimum 65 luminaire lumens per circuit watt.

5.2 Infection Control

5.2.1 NHSPS are required to develop the facility in line with the Infection Prevention and Control Guidelines as applicable for the facility and use stipulated by NHSPS (for example HBN00-09 and Infection Prevention and Control Guidelines for GP Practices and any others that might apply for the intended facility's use). NHSPS shall employ an Infection Control Consultant Advisor (or may agree to nominate an infection control lead from one of the occupying tenants teams) early in the project to allow their input to be incorporated into the design where appropriate.

5.2.2 The Infection Control Consultant Advisor will be involved from the early design stages through to completion and handover concluding their involvement with a final site check at completion. It is imperative that check points are built into the programme for liaison with the Infection Control. This process should conclude with a physical sign-off by the appointed infection control officer at the end of the design development stage.

5.3 Security

5.3.1 The NHSPS Project Manager shall identify an NHSPS Service Assurance Lead for Security (or shall appoint an external consultant) with whom the Designer shall liaise on all aspects of security, including building fabric, access control, CCTV etc. It is imperative that dates and milestones are built into the programme for liaison and agreement with the nominated security officer. This process should conclude with a physical sign off by the appointed security officer at the end of the design development stage. See section 4.25 for detail on Secured by Design. http://www.securedbydesign.com/ and section 8.00 for system design parameters,

New builds should consider at the new design stage a all purpose room that can be used in the event of incident that can be used as a saferoom for in-evacuation / shelter in the event of a terror related incident UK protect Bill forthcoming

5.4 Fire Safety

5.4.1 The NHSPS Technical Fire Manager (or appointed external consultant provided by NHSPS) shall be involved in the development of the scheme from an early stage and shall verify the design and fire strategy at key milestones. It is imperative that check points are built into the programme for liaison with the nominated fire officer. This process should conclude with a physical sign off by the appointed fire officer at the end of the design development stage. *Initial consultation should be via the Building Assurance Specialist for the premises. If necessary they will escalate to their Regional Fire Lead who in turn may escalate to the Hard FM Specialist- Fire (HFMS- F). The HFMS- F may seek assistance from the Primary Authority Scheme Partner"*

5.4.2 The Contactor should be aware that the majority of healthcare schemes will need to comply with the requirements of Fire code (HTM 05-02). The fire officer may agree to production of a fire strategy in line with Approved Document B where appropriate, however the use of Fire code should be assumed until agreed otherwise and formally verified by the NHSPS Project Manager. NHSPS to confirm the strategy with regard to HTM Fire code compliance on 'low risk' sites on a project-by-project basis.

5.5 Fire Stopping

5.5.1 The Designer shall consider the development of the building in conjunction with the relevant Fire code Health Technical Memoranda, as a minimum standard.

5.5.2 The Contractor shall ensure that any gaps, cavities or imperfections of fit between building elements (fire barrier), which are required to have fire resistance and/or resist the passage of smoke, are completely sealed to comply with the building fire strategy. All vertical and horizontal cavities and holes to be considered a material breach of the fire barrier zoning. All proprietary fire stopping products are to be used and installed strictly in compliance with the manufacturer's recommendations and guidance to ensure that they will perform with their tested capabilities in the situation they are being used.

5.5.3 The design shall include for effective fire separation within roof voids and proprietary cavity fire barriers at all intermediate perimeter floor junctions.

5.5.4 All fire-stopping works required shall be highlighted by the Contractor prior to work progressing. The contractor shall identify and document all fire-stopping carried out and shall make allowance for the NHSPS Technical Fire Lead to assess the proposed and completed works on site. NHSPS will advise on a project-by-project basis if a NHSPS Technical Fire Lead is not available and if an agreed alternative is to be provided by the contractor.

5.5.5 All fire stopping works shall be carried out by a specialist sub-contractor with FIRAS accreditation.

5.5.6 Where the scheme involves refurbishment of existing buildings, firestopping should be assessed within the immediate vicinity of the area where the works are being undertaken. It may be necessary to increase this area where, for example, a fire stopped detail extends further away i.e. ventilation ductwork passing through the area being worked on and extending through Means of Escape. A pragmatic approach should be used.

5.5.7 The NHSPS Project Manager shall pay particular attention to these installations during early snagging surveys and shall require advance notice of erection of ceilings etc. which conceal penetrations.

5.6 Asbestos

5.6.1 Where necessary the Contractor shall employ a competent company and personnel to carry out any refurbishment and demolition asbestos surveys and any sampling activities. Where asbestos containing materials (ACMs) are identified, the Contractor shall then appoint a competent company and personal to carry out the necessary removal works. Derogations must

be made to NHSPS for carried out by contractors who are not Health and Safety Executive (HSE) Licenced Asbestos Removal Contractors

5.7 Ceiling and Roof Access

5.7.1 The Contractor shall provide for access and maintenance to all void spaces and roofs as well as to mechanical and electrical installations. A minimum co-ordinated opening dimension of 600 x 600mm shall be achieved into ceilings. Thermal, fire and acoustic ratings equal to the adjacent ceiling structure shall be maintained. Ceiling and roof hatches shall have locking mechanisms to prevent unwarranted access and tethers to prevent accidental dropping.

5.7.2 The Contractor shall provide lighting above the hatch for access and egress.

5.7.3 The contractor shall provide safe access to all areas requiring access for maintenance, including areas above ceilings, motor rooms, roof hatches etc. The use and reliance on unfixed and fixed ladder access and man-safe harness systems to be avoided/designed out wherever possible.

5.8 Windows and External Doors

5.8.1 All new windows shall incorporate integral controllable background trickle vents within the window heads to provide the required level of background ventilation and associated acoustic attenuation in accordance with the current Building Regulations.

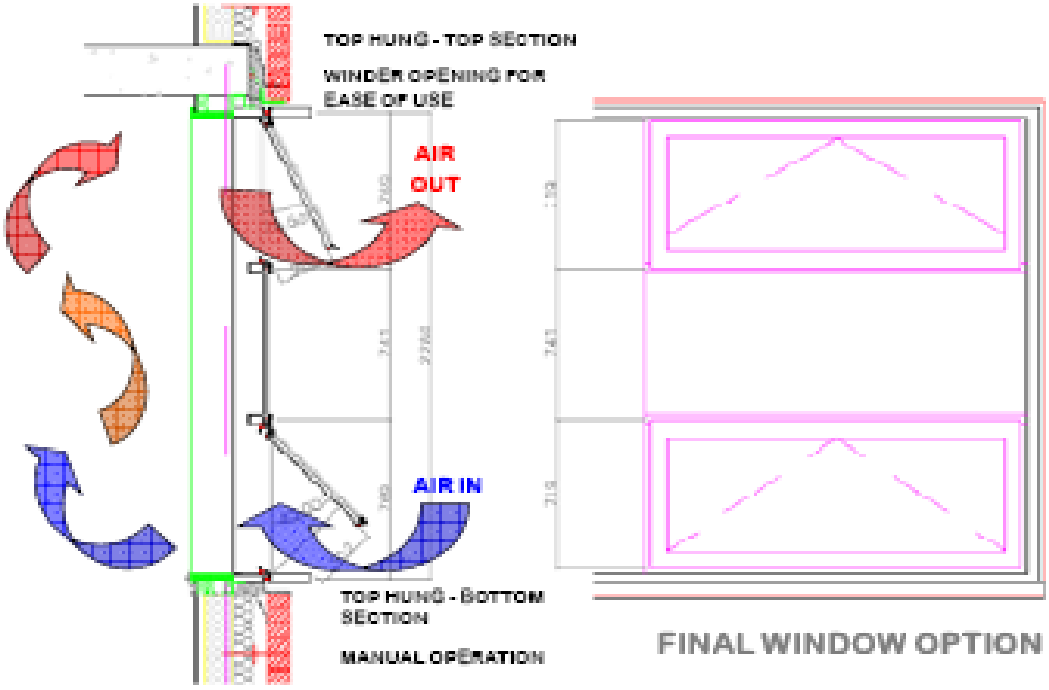
5.8.2 Opening lights, when required, shall have an approved opening mechanism fitted with key controlled restricted friction hinges and espagnolette locking. Restrictors shall limit openings to a 100mm CLEAR maximum opening (in conformity with HTM's) for day-to-day operation (on 'reachable' openings only) with override to facilitate external cleaning. Window locks to be provided to all openable windows. Openable lights shall be capable of being locked in the open position for night-time cooling. Any opening not proposed to be restricted will be risk assessed and agreed with NHSPS in writing.

5.8.3 Openable lights shall be on friction stay hinges to achieve an open gap to the top of the opening sash to aid airflow. The opening sash should appear to "drop" when open. The clear openable gap shall be defined by the measurement of the "clear gap" and not simply from the front of frame to the inside of sash - this measurement is usually less than the clear opening permitted, and due consideration needs to be given to external obstructions such as projecting sills or frame overhangs etc. to maximise clear vent area.

5.8.4 All external doors and windows shall be thermally broken to prevent cold spots and all frames shall be effectively draft and acoustically sealed when closed.

5.8.5 Window frames are preferred to be of a low maintenance PPC Aluminium, all to be finished to a 60 micron level. NHSPS corporate preference is for grey frames, but the actual colour selection is to be agreed with the NHSPS Project Manager on a project-by-project basis.

5.8.6 High and low level opening lights should be provided to encourage airflow through the room.



5.8.7 Windows shall be provided to Clinical rooms, Waiting rooms, and designated Waiting and Sub-waiting areas, Offices and Staff/Administration areas, together with the staircase, in accordance with details first approved by NHSPS, to provide a glazed area of not less than 10% of the floor area of the room thereby lit and an openable area of not less than 5% of each room area (unless specifically not required due to the room's function or due to site and/or planning restrictions or security issues or the like, or as amended by Building Regulation requirements).

5.8.8 Provision shall be made for acoustic baffles where required where confidentiality is to be observed.

5.8.9 Where window films are required for glare control and/or privacy the contractor shall arrange for suggested types and arrangements of materials to be supplied to the NHSPS Project Manager for consideration / discussion. Film is however generally not preferred over obscured glazing.

5.9 Internal glazing / manifestations

5.9.1 Where internal glazing is present to automatic doors, atrium spaces, balustrades etc the Contractor shall ensure that all necessary standards are met in terms of safety standards utilising laminated and toughened glass as required and set out in the Building Regulation Approved Documents.

5.9.2 In some instances glass manifestations shall be required, if so the NHSPS Project Manager shall advise on the type/arrangement to be used.

5.10 Blinds

5.10.1 Vertical louvre blinds are required to all windows as a minimum other than those within store rooms, cleaner's cupboards and, IT hub. Where additional black out blinds are needed this is to be defined on a project-by-project basis etc. All blinds are to be fitted with anti-ligature chain stays. Guide wires to be fitted with spring loaded fixings to avoid breakage.

5.10.2 Where roller blinds are used, they shall be dual fabric and incorporate both mesh, and solid material. Details of fabric configuration to be agreed with the NHSPS Project Manager to ensure night time privacy and day time airflow.

5.10.3 All fabrics to be washable to 71 degrees. If lower temperatures provide a wider range of fabric this needs to be agreed with the NHSPS Project Manager and Infection Control representative and assessed on a project-by-project basis.

5.11 Internal Walls and Partitions

5.11.1 The construction of internal walls should be appropriate taking into account the following factors and in accordance with HTM 08-01 - Acoustics:

- Patient Privacy and Confidentiality,
- Sound insulation - both impact and reverberance noise should be considered,
- Fire protection rating required,
- Risk of damage - severity rating required,
- Fixing of equipment, and
- Flexibility.

5.11.2 Adequate provision should be made in stud partitions for fixing of equipment including a degree of flexibility with regard to the positioning of such equipment. Store rooms shall be fully lined with suitable plywood.

5.11.3 Detailing and construction is to be appropriate to achieve the acoustic requirements of 50db onsite. Note the acoustic ratings of most materials are laboratory test ratings not on site results.

5.11.4 The minimum acoustic standards NHSPS shall accept are the performance ratings specified as HTM 08-01. The agreed sustainability strategy shall set out whether the building is then tested ahead and as part of Completion as having been achieved.

5.11.5 The Contractor shall ensure that all partitions are installed to the design requirements and arrange for pre-handover testing and certification relating to acoustics.

5.12 Doors

5.12.1 Main entrance doors and staff entrance doors to be polyester powder coated aluminium to 60 micron, commercial quality, with automatic operation to the front entrance fitted with double glazed laminated glass units. Polyester powder coated aluminium is to be installed to BS6262 and compliant with Secured by Design. This requirement may be varied on a project-by-project basis should existing building and/or planning conditions stipulate otherwise. Main entry point doors if possible should be linked to remote opening / access control from reception to control ingress intercom system

5.12.2 Automatic doors are to be controlled by infrared detection with local isolation required for out-of-hours usage if necessary and be fitted with double weather-stripping, complete with threshold. The doors should have a fail open device in the event of fire alarm or failure. All automatic doors shall be fitted with suitable safety barriers, systems and the like to safeguard all using the building.

5.12.3 As the layout of healthcare facilities will generally place a reception point near to the main entrance (and possible waiting room seating) the design, configuration and operation of the main entrance doors should look to minimise draughts to staff and patients.

5.12.4 Locking shall as a minimum meet the requirements of BS 3621:1998. Multi-point locking to be fitted where possible.

5.12.5 The doors shall be provided with security hinges and where appropriate concealed panic bars to provide multi point locking and fitted by proprietary door manufacturer. Operation and key suiting to suit door use. Minimum 10-year guarantee is to be provided.

Where the doors also act as a staff entrance, the ironmongery shall be appropriate for the dual use and be fitted with security-controlled access system/card reader to enable keyless entry during normal working hours.

5.12.6 Where possible, a separate staff entrance shall be provided to avoid health centre staff having to use the main entrance. Staff entrances should be of the same standards and specification as the main entrance doors; however, they shall not be automatic and may not contain any glazed section.

5.12.7 Where required on plant room doors, ventilation grilles will only be permitted if factory installed as part of an integral feature, grilles fitted afterward are not permitted.

5.13 Internal Timber Flush Door sets (in accordance with HTM 58)

5.13.1 Doors shall be of solid core construction. The surface finish of all doors and the reception counters shall be Oak (or other agreed) veneer other than Treatment Suites/Minor Operations Suites/High Clinical Content Rooms where a chemical resistant scrub down laminate finish is required to the clinical side. In public areas a high-quality finish is required of consistent appearance throughout. NHSPS is open to discussion around the use of laminate faced doors in lieu of oak veneer doors, subject to a convincing case being made, both economically and on a comparable quality and life cycle cost basis.

Doors to Consulting, Treatment, Interview and Examination rooms are to have acoustic seals to head and jambs to achieve a close fit and are to have drop down acoustic seals rebated into the bottom of the door to reduce the passage of sound (the full life cycle costing impact and in-use maintenance etc of such shall be established and discussed with NHSPS on a scheme-by-scheme basis ahead of adoption).

In accordance with HTM 08-01 double doors to be 30dB and single door sets to be 35dB.

5.13.2 Lever handles, lock cases, locks, cylinders, roses, push plates, pull handles and thumb turns etc. shall be provided where necessary. Ironmongery to be 25mm diameter brushed stainless steel.

5.13.3 Kick plates, doorstops shall be required to all doors. Note: Healthcare facilities require larger kickplate depths than standard installations. 400mm depth is required for NHSPS projects.

5.13.4 Fully adjustable door closers shall be required to all FR doors and may be required elsewhere depending on user requirements - all to be agreed with the NHSPS Project Manager.

5.13.5 Patient toilets will require a locking device with an external quick release facility for use by staff in the case of an emergency and outward opening override. Attention is drawn to the latest Part M guidance.

5.13.6 In addition to room designation/wayfinding signage on the doors themselves all internal doors are to be fitted with a room identification tag to the upper RH corner. The NHSPS Project Manager shall advise on this numbering system as part of agreeing the signage schedules. Doors also require a sign as shown in section 3.19 and any required FR identifiers 'FD30' / 'FD60' etc.

5.13.7 Doors - General

Doors are to be suitable for easy use by disabled persons. Care should be taken to ensure orientation of doors particularly in toilet cores and access routes favours ease of use by wheelchair users.

Doors within or across areas of general circulation shall be provided with high and low level vision panels with clear safety glazing, to permit inter-visibility as required by statute. Glazing to be secured within hardwood beads secured with countersunk fixings.

Doors providing general staff access between patient accessible areas and staff areas shall be operated by an access control system to avoid the reliance on keys.

Doors serving common circulation routes to be fitted with hold open devices where necessary. In all instances, the hold open devices shall be linked to the fire alarm system.

Fire doors to be provided and constructed in accordance with relevant Fire code requirements (and Building Regulations BS. 476), complete with intumescent fire and smoke seals; and fully marked up using the TRADA 'Q-Mark' system (or similar) - coloured door jamb inserts to indicate fire door type. (Refer to Appendix B – Technical Specification for approved suppliers)

Ironmongery shall be selected to provide the required colour contrast to the proposed door finish / colour as required under the Building Regulations.

Ironmongery generally shall be from approved healthcare ironmongery approved suppliers and of quality solid stainless steel.

Lever handles to be 25mm diameter minimum on sprung concealed fixed roses; with heavy sprung profile 72 mm c/cs sash lock. Associated items (pull handles, push plates, kick plates, etc) to match.

Kick plates and push plates shall be provided on the 'common areas' side of all doors, and additionally on both faces of doors to WCs and doors across staircases or corridors.

A minimum of two coat hooks shall be provided per room, these can be either door or wall mounted to an appropriate backing panel, refer to Room Data Sheets. Coat hook pattresses required in oak (or other agreed hardwood/laminate).

All doors opening back onto an adjacent wall or against equipment/fittings shall be provided with door mounted rubber door stops.

WCs shall be provided with large easy action snibs, with indicators and provision for unlocking. Hat and coat hooks with door stop buffers shall be provided.

All doors excluding stores and cupboards (others may be specified as part of agreed fire strategy) shall be fitted with adjustable overhead closers offering low resistance to opening and, where applicable, delayed action closing. Self-closers are to be provided to all fire doors.

Doors shall address and cater for the likelihood of children being in the buildings in accordance with best practice, for example with the use of finger guard devices and the like. This shall apply to all public areas, with an extra over cost quoted for it to apply throughout the facility.

5.14 Internal Signage

5.14.1 Signage shall provide the building user with information in line with NHS Wayfinding Guidance. Generally it shall advise (as a minimum) that:

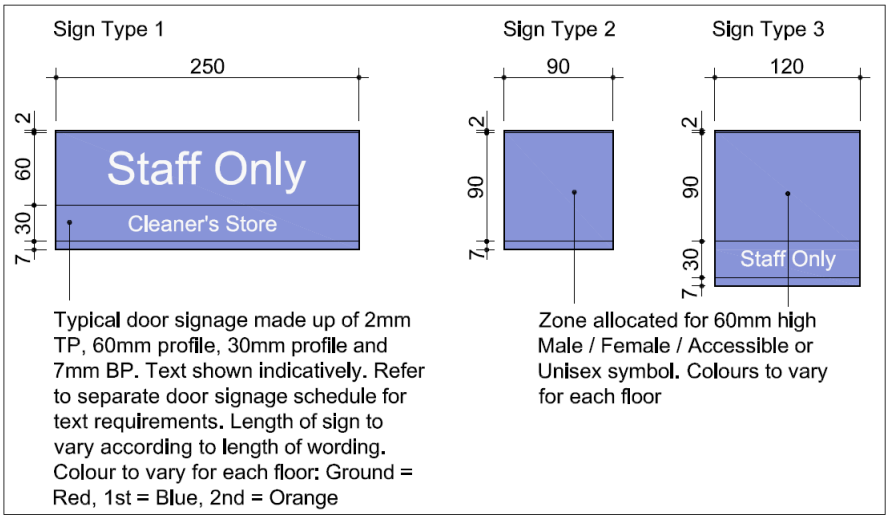
- They have arrived and the route to reception
- The route to take in order to get to a specific location
- The route back to reception (or other areas as required)

- The exit route
- The route to toilet facilities and the like
- Room designation
- Locations of toilets/baby change facilities etc.
- Signage for in evacuation and shelter in accordance with UK Protect Bill (large builds, tier 1 sites and acute locations).

Signage shall be clear & concise and be an integral part of the design solution. It should reflect the NHSPS Identity Standards (copy available from the NHSPS Project Manager).

It may include a number of options as determined by the Design Team, which include, but are not limited to:

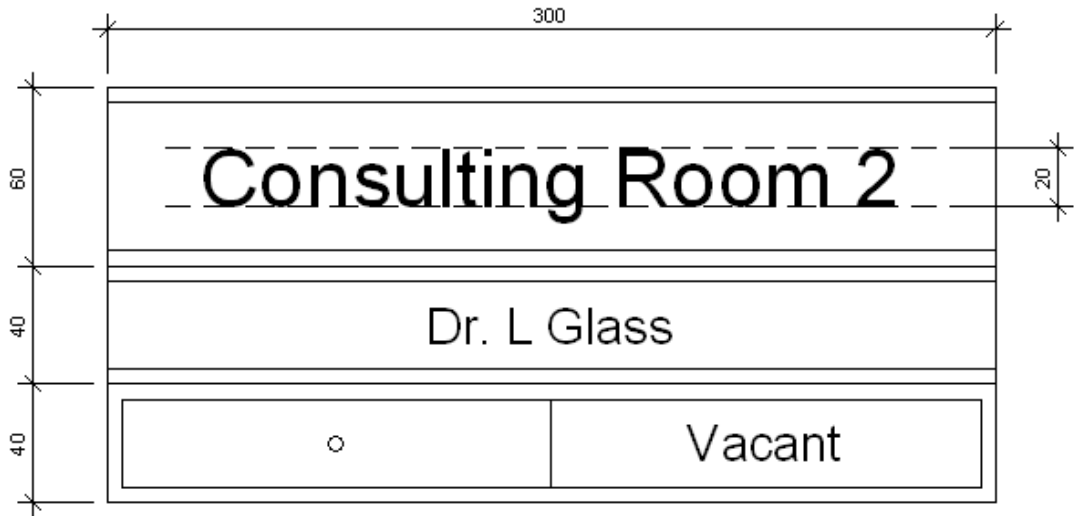
- Braille indicators for those with partial sight (to selected signs only)
- Pictograms
- Supporting languages – where specifically required and vetted for use



5.14.2 An approved sliding inset aluminium system of room & reference code signage shall be provided to all doors and match the ironmongery. Titles of rooms shall follow the corporate thinking on defining the room activity, though there may be circumstances and preferences which would require inclusion of room users' names. The sample shown on the following page is typical of a standard door sign showing the room name, Dr name, and vacant/engaged sliding panel.

5.14.3 The panel displaying the practitioner's name shall be interchangeable to allow occupiers to change as required.

5.14.4 The example below is typical of a consulting room door, however the requirements will vary by room type.



5.14.5 All rooms will require a unique identification number which NHSPS use for maintenance and facilities management. These reference numbers should be supplied engraved into an aluminium plate (to match hardware) and shall be located to the top right hand corner of the door to each room. The NHSPS Project Manager can advise on these requirements.

5.14.6 Within multi-occupancy buildings, particularly those with a number of waiting areas it is essential that each service is considered individually in terms of patient routes and associated directional signage.

5.15 External Signage

5.15.1 A complete signage scheme both internally in the building and externally on the site will be required. All directional signage should be in accordance with NHS Way Finding guidance.

5.15.2 Signage shall provide the client with information in line with general NHS guidelines and NHSPS identity guide (available from the NHSPS Project Manager).

5.15.3 The Contractor will be required to liaise with the Highways Management Section of the relevant Local Authority to develop an offsite road signage proposal to direct users and visitors to the facility as part of the contract.

5.15.4 The main building sign should be 'halo lit' and the necessary cabling needs to be incorporated to allow this.

5.15.5 Signs to consist of individual 3D lettering in stainless steel (unless agreed otherwise) (all text to be agreed).

5.15.6 Signage proposals to be issued to the planning authority either as part of an initial planning application, or as part of a condition discharge, to ensure all proposals are acceptable to the relevant Local Authority.

5.15.7 The contractor shall analyse the building shape, size and orientation advising on the most appropriate locations and sizes for building signage. The recommendations should take into account views from surrounding areas in order to maximise prominence of the signage.

5.15.8 Within the curtilage of the site NHSPS require standard corporate signage to be displayed.

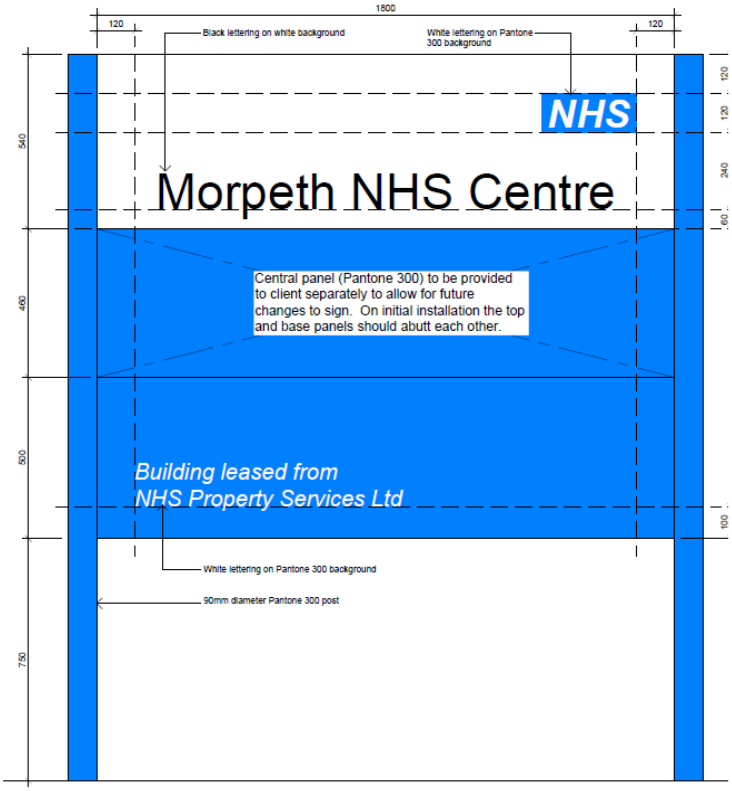
5.15.9 A '2 post' sign as shown below may be required near to the main site entrance. Further signage (in the same style) may also be required near to the main entrance of the building,

and may include details of occupants (where the building is multi-occupancy) etc. This requirement may vary from project to project and shall be assessed for relevance on specific project locations.

5.15.10 Standard graphics for NHSPS and partner organisations are available via the NHSPS Project Manager for insertion into signage designs where required.

5.15.11 Further external signage required may include the following:

- Notice of CCTV recordings
- No smoking
- Opening times
- Fire notices (including assembly points)
- Speed restriction
- Directional signs
- Accessible parking
- Parent and child parking
- Electro-bay parking
- Car park use liability signage (wording to be advised by the NHSPS Project Manager)



5.16 Key Suiting

5.16.1 Locks shall be provided with Master Key operation with euro-profile cylinder having three keys provided for each lock.

5.16.2 Suiting arrangements to be confirmed per site and to include a minimum of three keys per lock generally and seven Master keys. Typically, suiting shall be:

1. Master (7 copies)
2. Office accommodation
3. Clinical accommodation
4. Cleaner's & storage
5. Nominated 'safe' rooms - on individual key basis
6. External envelope – inclusive of emergency escape (if required to be locked with access), boiler and service duct rooms

5.16.3 In multi occupancy buildings a separate suite is required per occupier.

Key suiting requirements shall be developed in conjunction with the NHSPS Project Manager and facilities team.

5.17 Door Access Solution

5.17.1 A proximity card access system is to be provided to specific zoned areas; security; staff facilities; patient areas etc. Locations of the read heads to be defined by the Occupier/NHSPS and approved by NHSPS. Read heads should not be positioned on the hinge side of doors.

5.17.2 Due to the requirements of providing a secure and stable system whilst minimising ongoing maintenance costs the door access system should be a Hard Wired System rather than a Wireless system.

The systems shall be linked to the fire alarm system.

The product shall fall in line with the current ICT specification and requirements for systems that integrate into the overall network strategy.

5.17.3 Blank cards shall be provided for Occupier/NHSPS – number to be determined during design development.

5.17.4 Refer to section 8.00 for further detail on system design parameters.

5.18 Wall and ceiling Finishes

5.18.1 The Contractor shall provide, in due course, a schedule of wall and ceiling finishes for approval by the NHSPS Project Manager (as per room data sheets and HTM 00-10 Part B – Walls and ceilings).

5.18.2 Allowance should be made for suitable material to provide waterproof and easily cleanable finishes in wet areas and those areas requiring a high level of cleanliness. All worktops are to incorporate post formed up stands and leading edges and be complete with thermoplastic pvc, vinyl or coloured glass splash backs. All WHB's shall be fitted to IPS panels (in accordance with HTM 00-10 Part C – Sanitary Assemblies). Where splashbacks are required at work surfaces/sinks a homogenous waterproof sheet type material is to be used (e.g., coloured glass, vinyl, perspex).

5.18.3 Impact protection is required to all exposed or particularly vulnerable areas of flat wall and all corners to a height of 1200mm. All patient corridors shall include for a combined handrail and bump rail. Protection shall be included as necessary and general wall protection included where required. Protection shall be of a suitable healthcare standard as approved by the NHSPS Project Manager. As a minimum wall protection shall be required to the rear of bins, patient chairs, couch/bed heads, waiting room chairs (where appropriate) and some corridors.

5.18.4 The Contractor shall provide a suggested layout of all bump rail / handrail and other wall protection measures including corner guards etc. for approval by the NHSPS Project Manager.

5.18.5 Elastomeric paint finishes shall be required to Minor Operations facilities, and Treatment Rooms, including to walls and plasterboard ceilings (in accordance with HBN 00-10 Part B – Walls and ceilings).

5.18.6 The majority of new ceilings shall be suspended lay-in grid tegular ceilings. Perimeter tiles must be rebated or installed with proprietary tegular blocks to eliminate small gaps (these present an infection control risk in clinical facilities). Unless otherwise approved by the NHSPS Project Manager a minimum ceiling height of 2500mm shall be provided (uninterrupted), and 2700mm from finished floor level in the main waiting/reception area (uninterrupted). These heights are a minimum requirement of NHSPS, the Contractor should look to provide highest (consistent) ceiling heights and in accordance with the HBN's.

5.18.7 The ceiling height in certain areas – Atria; Reception Counters; Training Suites; Lecture rooms etc. are to be considered on an individual basis.

5.18.8 The preferred ceiling tiles for general use are Tegular edge tile using standard 600x600mm sizes or 1200 x 600 planks, all are to be selected from approved suppliers' healthcare ranges depending on the room type.

The preferred ceiling tile type for treatment areas will be determined by the level of intervention/ clinical procedure and may be either a gridded Tegular edge tile (600x600mm) system or solid plasterboard. This needs to be assessed and agreed on a project-by-project basis.

A suitable ceiling tile shall be selected and agreed for high humidity areas.

5.18.9 Ceiling requirement/specifications should be agreed with the NHSPS Project Manager during the design period and the Contractor is responsible for specification in line with acoustic and fire safety requirements.

5.18.10 Adequate access provision to ceilings shall be made for maintenance purposes. Where MF type ceilings are installed to treatment and minor ops rooms and the like, 600 x 600mm access hatches will be provided at locations agreed with the NHSPS Project Manager. All hatches to be provided with the required fire and acoustic ratings appropriate to the location.

5.19 Floor Finishes (in accordance with HBN 00-10 Part A – Flooring)

5.19.1 The Contractor shall provide a schedule of floor finishes for approval by the NHSPS Project Manager.

5.19.2 The NHSPS standard preferred specification is set out below. NHSPS is open to the use of other floor finishes should a suitable case be made for their use, both economically and on a comparable quality and life cycle cost basis.

- **Carpet (areas not required to be vinyl as set out below)**
  Heavy duty tufted contract carpet tiles or sheet with impervious backing and 100% synthetic yarn.

- **Vinyl (consult rooms)**
  Minimum 2mm thick Homogenous vinyl or Linoleum sheet flooring with hot seam welded coved skirting to 100mm and joints. BRE Green Guide Class 'A' rating system certification.

- **Vinyl (corridors etc)**
  Minimum 2mm thick Homogenous vinyl or Linoleum sheet flooring with hot seam welded coved skirting to 100mm and joints. BRE Green Guide Class 'A' rating system certification.

- **Vinyl (waiting / circulation)**
  Minimum 2mm thick Homogenous vinyl or Linoleum sheet flooring with hot seam welded coved skirting to 100mm and joints. BRE Green Guide Class 'A' rating system certification. Decorative timber effect vinyl sheet be considered for these areas.

- **Non-slip floor covering**
  Slip resistant vinyl sheet flooring with hot seam welded coved skirting to 100mm and joints. BRE Green Guide Class 'A' certification.

- **Non–slip flooring to wet rooms/showers**
  Extra Slip resistant vinyl sheet flooring for bare foot areas with hot seam welded coved skirting to 150mm and joints. BRE Green Guide Class 'A' certification.

5.19.3 A heavy duty barrier mat will be required at the main and any other entrances, for example separate staff entrances and secondary patient entrances. This shall be fully recessed. The Contractor shall provide 2-3 options for the barrier mat to be considered by the NHSPS Project Manager.

5.19.4 Common spaces including waiting areas and corridors shall have the option to be fitted with a timber effect vinyl flooring. This will be a vinyl sheet, not plank type. NHSPS is open to the use of other flooring should a suitable case be made for its use, both economically and on a comparable quality and life cycle cost basis. Should timber effect vinyl flooring be used, appropriate skirting options shall be discussed and agreed.

5.19.5 Skirtings to rooms with vinyl floors to be 100mm (150mm to wet rooms/showers) hot seamed profiled coved skirtings with capping strips, sealed/adhered the full length against the wall, or of the inset coved type (to be agreed on a project-by-project basis taking account of current best practice).

5.19.6 Skirtings to timber effect vinyl floors to be 'set-in' type fully adhered to wall, and welded to floor finish (sit-on type will not be accepted)

5.19.7 Softwood or hardwood skirtings to be installed to carpeted areas – 100mm chamfered or pencil rounded to carpeted areas/rooms.

5.19.8 Avoid white/light colours on flooring where possible. Maintenance free products are preferable as they do not need periodic maintenance.

5.20 Fixtures and Fittings, including Sanitary Installations

5.20.1 The Contractor shall submit for approval by NHSPS Project Manager details of all reception counters, cabinetry, shelving and any other specialist joinery installations.

5.20.2 All shelving is to be Spur type adjustable, in white, with outer exposed corners of all shelves to incorporate a radius of 100mm to avoid impact injury. Book ends (Spur wire clip in type) to be provided at each end of each shelf. All shelving to be screwed through brackets and adjustable.

5.20.3 General fixtures and fittings shall be provided in accordance with the Room Data Sheets and shall be identified as shown in section 4.0.

5.20.4 Worktops should comply with the relevant HTM along with all other cabinetry components. Worktops should have a light colour finish to accommodate easy cleaning. Worktop finish to be agreed with the NHSPS Project Manager prior to ordering.

5.20.5 Fixtures and fittings to clinical areas where necessary shall be compliant with the requirements of relevant HBN's and HTM's and other such guidance including floor and wall mounted cabinets, and IPS assemblies. Any derogations brought about by client request or similar shall be highlighted by the contractor to the NHSPS Project Manager.

5.20.6 All wall mounted cabinets to have sloping tops to meet infection control requirements regarding avoidance of dust traps.

5.20.7 All showers shall be designed as fully accessible. Showers to be fed from DHW supply and fitted with thermostatic mixer valves. Adjustable showerheads are not to be utilised. – ref paragraph 10.61 in HTM 04-01 Part A. Note specific requirements under NHSPS Document Standardised Specifications for Water System Fittings and Components SA/HFM/OG/001 (as supplied by NHSPS Project Manager) with regard to shower installations and hose types etc.

5.20.8 All hot and cold water feeds shall be fitted with room-by-room isolation to support maintenance. This may be at the point where the water enters the room or within appropriate IPS.

5.20.9 Cisterns, pipework etc installed in relation to sanitary installations should be insulated and concealed in proprietary IPS units and boxings. IPS units shall generally be formed as detailed within the relevant HBN's and HTM's and finished in a colour selected from the manufacturer's standard range to all rooms. There may be a requirement for different colour panels to some rooms. All finishes to be agreed with NHSPS Project Manager and to match the interior design concept on a project-by-project basis.

5.20.10 IPS units to extend approx. 150mm above ceiling level. IPS assembly to be thoroughly cleaned out prior to completion and all exposed edges shall be sealed with varnish to avoid water damage. A suitable coved detail at the junction with the floor shall be agreed with NHSPS Project Manager and the Infection Prevention and Control team. All IPS units are to be made from high pressure laminate finish.

5.21 Sanitary Installations for Specific Applications

5.21.1 Sanitaryware (in accordance with HBN 00-10 Part C – Sanitary assemblies)

All sanitaryware shall be as manufactured by reputable suppliers and comply with relevant HTM's. Note must be taken of the specific requirements within NHSPS Document ***Standardised Specifications for Water System Fittings and Components SA/HFM/OG/001*** The use of taps from manufacturers who offer free of charge training on the installation, maintenance and repair of their products is desirable, to ensure colleagues involved in maintenance and repair activities receive appropriate instructions and are fully conversant with the equipment they are required to work on.

Clinical basins are to be provided in clinical areas in accordance with HBN recommendations.

Taps shall be of chrome plated commercial quality as follows:

- All taps are to be lever operated and free from aerators and diffusers to reduce the potential for harbouring contamination in the spout.
- All taps required to discharge mixed flow water are to include the mixer valve within the tap. Separate thermostatic mixer valve and tap arrangements should not be used.
- Tail pipes supplied with taps for connecting to supply pipe work are to be copper. Flexible pipes are not to be used.

In addition to the above, taps provided for different applications are to meet the following specifications:

5.21.2 Application – All Clinical staff use hand washing stations (Integrated Plumbing System (IPS) or false wall mounted).

1. TMV 3 scheme approved thermostatic mixer.
2. Elbow operable single sequential long lever
3. Built-in thermal cleansing function
4. Fully serviceable in position
5. Integral strainers and isolation valves
6. Demountable from front of the IPS panel
7. Shielded hot supply / safe surface temperature of tap body
8. Unrestricted, antimicrobial, self-draining and detachable spout
9. Components able to withstand disinfection by washer disinfector and autoclave.
10. Typically used in conjunction with HTM / HBN / Infection Control compliant basin with anti-splash (ridged) bowl, antimicrobial glaze, back outlet drain, no overflow or plug, 60cm width (or 50cm where space is limited).

5.21.3 Application – All Staff only areas non-handwashing use, e.g., sinks for, equipment decontamination, kitchen preparation / wash-up, janitorial units, waste disposal hoppers, etc.

Hot and cold bib taps for IPS or false wall mounting.

• Elbow operable 150mm levers.
• To provide full flow cold and hot (No Thermostatic Mixing Valve) water.
For deck mounted high neck hot and cold pillar taps the application and specifications as the same as above.

5.21.4 Application – Patient and general public hand washing, or other non-clinical hand washing where scald protection is required, e.g., Toilets, bathrooms, patient kitchens / dining areas, etc.

1. TMV 3 scheme approved thermostatic mixer.
2. Single sequential cold to hot lever operation
3. Shieled hot supply / safe surface temperature of tap body
4. Built-in thermal cleansing function
5. Integral strainers and isolation valves
6. Demountable & serviceable from the top of the basin
7. Unrestricted, antimicrobial, self-draining & detachable spout
8. Components able to withstand disinfection by washer disinfector and autoclave.
9. Typically used with left or right-handed single taphole, 50cm and 40cm width basins, with or without overflow, drain plug and chain stay, dependent on specific application

5.21.5 Application – Non-clinical area colleague hand washing, e.g., Staff toilets and shower rooms, Kitchen's, Laundry's, rest rooms, etc. where scald protection is not required.

1. Sequential cold to blended (non-thermostatic) hot with temperature limit stop and vertical on / off action lever operation.
2. Self-draining, unrestricted and antimicrobial spout

5.21.6 Application – Bath filler
Baths, where required, shall comply with relevant HTM's and fitted with thermostatic mixer valves -
1. TMV 3 scheme approved thermostatic mixer.
2. ¾" BSP connections
3. High flow rate – (20 Litres / minute @ 3 Bar)
4. Shielded hot supply / safe surface temperature of tap body.
5. Built-in thermal cleansing function
6. Self-draining, unrestricted & antimicrobial spout.
7. Wall and deck mountable.

5.22 Painting and Decorating

5.22.1 A colour scheme, in accordance with the NHSPS corporate colour palette, shall be submitted for the approval by the NHSPS Project Manager. A copy of the NHSPS corporate identity standards is available from the NHSPS Project Manager.

5.22.2 The colour scheme should reflect standard NHSPS requirements and take account of patient group needs such as dementia, however all final colours shall be approved by the NHSPS Project Manager. A full colour schedule shall be developed for approval.

5.22.3 Where required, splash backs shall be jointless proprietary material, either coloured glass or thermoplastic pvc, together with edging.

5.22.4 Elastomeric Hygiene finishes shall be required to Minor Operations facilities, and Treatment Rooms, including elastomeric paint to walls and plasterboard ceilings.

5.22.5 Though NHSPS may opt to vary its standard colour scheme in certain areas of a development, the standard palette should be utilised unless otherwise agreed with the NHSPS Project Manager in advance.

5.22.6 NHSPS reserves the right to invite occupiers to select one further colour (per occupier demise) to widen the final adopted colour scheme.

5.22.7 In non clinical areas scrubbable matt paint should be used.

6.0 Engineering Design Requirements

6.1 Standards

The following standards, current at the time, shall be utilised by the designer to inform the design proposals.

- British and European Standards
- NHS Publications including HBN's and HTM's
- Building Regulations
- CIBSE Guides, Commissioning Coder, Application Manuals and Technical Memoranda

A considerable amount of information available to the Designer is contained in HTM which provide specification and design guidance on building components for healthcare buildings which are not adequately covered by British Standards.

The design shall be compliant with the above standards, although it is recognised there are areas where the guides are not aligned or do not match current best practice.

In addition, in terms of refurbishment projects, there may be reliance on some existing services which may be non-compliant due to their age.

In these instances, a design compliance statement schedule is to be provided, developed and discussed with the NHSPS key stakeholders for sign-off at every design gateway.

6.2 General Guidance

6.2.1 The designer shall follow a structured design process in line with RIBA Stages as defined in BSRIA Guide BG6.

The purpose of this section of the specification is to give an indication of the required quality of installations and to provide details of specific client requirements where applicable. This shall also include all new incoming services and any necessary works to off-site infrastructure. It sets out the design requirements and standards of any new Engineering Services Installations. Guidance is also given as to the overall design philosophy of the various engineering services installations.

6.2.2 Notwithstanding any guidance contained in the specification, the Designer shall be responsible for formulating and developing the design of the various systems to provide complete installations which satisfy all aspects of the design requirements and standards. It shall be noted that existing systems will continue to be the responsibility of NHSPS though the Designer is responsible for ensuring any interface with these systems is adequate.

6.2.3 The Designer shall produce a suite of specifications utilising the NHS Department of Health approved version software package, or approved equivalent.

This shall be utilised as it is a direct replacement of the archived NHS Model Engineering Specification.

6.2.4 The design team members should explore varied additional avenues to achieve alternative technologies and techniques for energy efficiency and ecological construction as these are not well referenced at present in the HTM's and HBN's.

6.2.5 Where surveys are required, these shall be initially carried out by the Designer to ascertain the nature of the existing engineering services and any constraints these may impose on the design philosophies and installation works.

The Designer shall identify the level of intrusive surveys required to be undertaken by the Contractor to enable the diversion, strip out or connection off and gain a clear understanding of their configuration so as to minimise disruption to the occupier's ongoing clinical operations when the installation works commence.

6.2.6 Soft landings were introduced into the industry to deliver operationally ready buildings that perform to expectations, reducing costs and operational issues.

The Designer shall adopt a soft landings approach from the outset to develop working practices and designs such that they are sustainable, maintainable and appropriate for the life cycle of the building.

6.2.7 Systems to be Included in the Scheme (the contractor shall allow for and provide all builder's works, ducting and the like associated with each)

Whilst every project will be different, the Designer shall consider the following engineering services within their design proposals.

1. New and existing incoming mains water service and associated cold water break tanks. Isolation to be at the perimeter of the site and to incorporate none-return valves and flow monitoring etc. Any requirement for new connections to be established by the Designer, with all fees and charges associated with provision of such shall be borne by the Contractor.
2. New and existing incoming electrical power supplies; Main and sub-mains electrical distribution systems. Any requirement for new connections to be established by the Designer, with and all fees and charges associated with provision of such shall be borne by the Contractor.
3. New and existing gas mains services; Any requirement for new connections to be established by the contractor and all fees and charges associated with provision of such shall be borne by the contractor.
4. New and existing telecoms services; Any requirement for new connections to be established by the Designer, with and all fees and charges associated with provision of such shall be borne by the Contractor unless agreed otherwise in writing before appointment.
5. New and existing IT services (including N3 connection); Any requirement for new connections to be established by the Designer, with and all fees and charges associated with provision of such shall be borne by the Contractor unless agreed otherwise in writing before appointment.
6. Back-up power requirements to be established on a project-by-project basis (see also Section 8.25).
7. General Lighting including range of low energy options, inclusive of; Examination lighting; External lighting including car park lighting; Feature lighting (including reception)
8. Emergency lighting.
9. LV systems and distribution.
10. Individual, dedicated power supplies required for various engineering facilities including, for example: entrance doors, roller shutter doors, fire alarm panels.
11. Data/telecommunications wiring installation termination by nominated specialist contractor.
12. CCTV surveillance hardware systems and associated infrastructure wiring routed to main server.
13. Hearing loop systems.
14. Patient call systems and panic alarm installation.
15. Redcare type communication assistance installation.

16. EMIZON fire alarm monitoring system (or other system approved in writing).
17. Earthing systems including lightning protection.
18. Radio and television installation.
19. Mechanical plant and services.
20. Plant rooms.
21. LPHW heating systems.
22. Under floor heating systems.
23. Supply and extract ventilation systems.
24. Building Management Control Systems (BMS) (including seasonal commissioning thereof as required by the agreed sustainability strategy).
25. Lift motor rooms and supplies.
26. Drainage systems including water recovery.
27. Fire detection systems.
28. Security systems.
29. Disabled Refuge alarms.
30. BMS / Link to NHSPS FM Delivery Department.

Further detail can be found within sections 7.00 and 8.00.

6.3 Technical Preliminaries

6.3.1 The CIBSE external design guide shall be used for temperatures and infiltration rates, where appropriate, and for calculating the heating and cooling loads.

6.3.2 Water services shall be contained within fully accessible ceiling voids or floor ducts where necessary. Horizontal and vertical casings shall be kept to an absolute minimum and be accessible. Colour code identification and durable labels shall be provided to all water bearing pipes and controls.

6.3.3 All services shall be designed in a fully co-ordinated manner and shall provide ease of access for maintenance and all services and equipment are to be set out in a neat and un-obstructive manner.

6.3.4 All service routes shall be fully planned before installation and all pipe work and services shall be concealed to assist with the management of infection control.

6.3.5 All services and routes shall be designed in consideration with the fire strategy document, in order to ensure that penetrations, dampers, support and other aspects are fully considered so as to ensure compliance with Fire code.

6.3.6 Surface mounted fittings, pipes and conduits are to be avoided. Any services which are required to be accessible shall be concealed within structure, behind access panels (Pendoc or similar approved) or within the ceiling void. The size of such linings and access panels should be kept to an absolute minimum and details provided before construction.

6.3.7 Design shall include the location of low surface temperature radiators with each room use, mounted in such a way as to eliminate voids under the unit. LST radiators should be elevated above floor level to allow cleaning under the unit.

6.3.8 Mechanical installations shall observe the principals set out in “Infection Control in the Built Environment” as far as possible, as relevant to the primary care setting.

6.3.9 All the new works provided shall be inspected, tested and commissioned in accordance with all relevant British Standard Specifications and Codes of Practice and the details given in the specification and/or as indicated on the drawings, to the entire satisfaction of the NHSPS Project Manager.

6.3.10 The Designer shall determine the number, location and type of all environmental terminals, i.e., radiators, ventilation grilles, luminaries, fire detectors, call points and the like, necessary to meet

the operational requirements of the building with due consideration of any existing systems in connected buildings.

6.3.11 The Designer shall be responsible for developing and co-ordinating the overall design of the engineering services systems into fully integrated design intent solution. The Designer shall determine any increase to the existing plant space and service riser requirements and incorporate the required accommodation into the overall planning of the development.

6.3.12 The Contractor shall undertake the coordination of all engineering services elements based on the design intent solutions to afford a complete working installation.

If during the installation coordination process the Contractor deems it necessary to deviate from the design intent documentation, this shall be brought to the attention of the Designer / NHSPS Project Manager for approval.

6.4 Regulations

6.4.1 The new installations shall comply with all relevant statutory instruments and regulations current at the date of tender (unless specifically stated otherwise in the specifications or on any drawings) and in particular with the following:

i) 18th Edition (current amendment) of the IEE Regulations for the Electrical Equipment of Buildings and all Guidance Notes
ii) Regulations under the Factories Acts
iii) Regulations under the Electricity Acts
iv) Memorandum of Guidance under the Electricity at Work Regulations 1989
v) The Gas Safety Regulations
vi) The Clean Air Act
vii) The Control of Pollution Act
viii) Any requirements of the local Electricity, Gas or Water undertakings including where applicable testing and stamping and relevant charges
ix) Any requirements of the Building Control Officer/Fire Prevention Officer
x) Health and Safety at Work etc Act
xi) Control of Substances Hazardous to Health (COSHH) Regulations
xii) Requirements of the Environmental Health Officer
xiii) Construction Design Management (CDM) Regulations

6.5 Agreement Certificate

6.5.1 Where no British Standard has been published but a British Board of Agreement Certificate is available for any particular item, then the item shall be in accordance with the provisions of the Agreement Certificate.

6.6 Services Energy Consumption

6.6.1 The engineering services installations shall be designed to maximise energy efficiency with due regard to available funding and any limitations of the existing local infrastructure (and in accordance with the sustainability strategy).

6.7 Integration of Building Services

6.7.1 The Engineering Services Installation developed for the building shall be fully co-ordinated and integrated at all stages of design development and installation in order to achieve the following objectives:

i) Creation of the correct environment within the building in terms of the temperature, fresh air, illumination levels, noise levels and other functional requirements.

ii) Ensure reliable operation of all plant and services with ease of maintenance to minimise plant downtime and disruption of the building function.

iii) Provide flexible operation and minimise primary energy consumption and maximise natural environmental gains and losses to the advantage of the building occupants.

iv) Provide systems which result in the efficient use of space allocated for the routing of services and which can be successfully incorporated within the building and which aesthetically will not detract from the character and function of the various spaces.

v) Facilitate testing and commissioning of all of the completed installations.

vi) Provide adequate numbers and sizes of readily demountable access panels to achieve (ii) and (iv).

6.7.2 Where existing live services are to be retained that pass through a contract boundary these shall be protected and maintained. No loss of service will be permitted and therefore temporary services shall be provided.

This element of works shall be identified with the design intent proposals by the Designer to enable the Contractor to take due account when tendering.

6.7.3 In the case of refurbishments, where existing engineering services items of equipment, such as luminaires are to be stripped out, the Contractor shall give NHSPS the opportunity to retrieve such items to utilise as spares within other parts of the estate / building.

6.8 Testing / Commissioning

6.8.1 All the new works provided shall be inspected, tested and commissioned in accordance with all relevant British Standard Specifications and Codes of Practice and the details given in the specification and/or as indicated on the drawings, to the entire satisfaction of the NHSPS Project Manager. The contractor shall employ an independent commissioning manager in line with the agreed sustainability strategy.

6.8.2 Engineering installations will be inspected and signed off by an Authorising Engineer in accordance with the HTM's. These include but may not be limited to: -

- Electrical installations
- Water installations
- Air installations
- Medical gas installations
- Lift installations
- Fire detection and protection installations

The contractor will be required to provide the Authorising Engineers, but NHSPS will advise on a project-by-project basis if these personnel are available within NHSPS and are not therefore required to be provided to the contractor.

6.9 Instruction / Information / Training to Users

6.9.1 The Users shall be instructed in the operation and maintenance of the installations by qualified personnel, who shall be fully conversant with the operations and maintenance procedures required for all items of plant and the composite systems, and where necessary specialist sub-contractors staff shall be made available to enable complete instructions to be given.

The Contractor should allow for undertaking a pre-completion training session for estates/facilities staff, and post completion training session for occupiers.

6.9.2 All installations shall be demonstrated in full working order together with the procedures to be adopted in the event of equipment or system malfunction and the manner in which equipment outputs or control setting can be adjusted.

6.9.3 A simple user guide (which should be produced in line with the requirements of BREEAM for Healthcare) shall be provided to each staff group on completion of the project including estates and facilities departments, and occupants of the new facility.

6.10 Operational and Maintenance Instruction Manuals (Note BIM Level 2 requirement)

6.10.1 Two copies of the complete series of manuals shall be provided at the completion date of the contract containing complete operational and maintenance instructions for the various installations. These manuals shall incorporate any comments made by the NHSPS Project Manager on their draft issue and shall be produced in the format required by NHSPS.

6.10.2 An electronic version of the files shall be issued on memory sticks (2 Nr) to the NHSPS Project Manager which shall contain all documents as included in the hard copied plus the MICAD formatted.dwg floor plans as noted earlier.

6.10.3 This information provided to NHSPS shall also include the BIM model and a full set of all contract drawings and as built drawings in unlocked editable AutoCAD format, provided on a memory stick to the NHSPS Project Manager within 15 working days of Practical Completion of the works.

6.10.4 NHSPS will add selected drawings onto an internal property database that will require the drawings to be provided to an NHSPS standard in terms of layering etc. NHSPS will advise layering requirements on a project-by-project basis.

6.10.5 As section 3.7, when design is carried out via BIM package (such as Autodesk Revit) the Contractor should ensure that .dwg Autocad plans can be generated from the digital model and structured as set out in section 9.3.

6.10.6 The Contractor should provide a brief training session to the NHSPS Project Manager and relevant colleagues in utilising the model for Facilities Management purposes and extracting information.

6.10.7 All main plant, equipment and systems shall have a minimum life expectancy as identified in CIBSE Guide B.

6.10.8 In addition to the standard information required in O&M manuals the following must also be included:-

- Site drainage schematics with all site drainage runs appropriately marked.
- Approved biodiversity net gain commitments as well as the maintenance requirements/manual. This includes maintenance manuals for any other nature-based solution e.g., green roofs/living walls or adaptation measures included within the project e.g., SUDs (Sustainable Urban Drainage System)
- Details of any new metering that has been installed (electricity/gas fiscal meters or sub-meters, and any heat meters).
- All BMS technical documentation and schematics must be provided of the installed system, showing heat zoning, time parameters etc.

- All electric meter schematics and numbers must be provided with a summary of which meters cover which areas of a building, ie Solar, EV chargers, etc.Sub meters must have been installed per floor of a building and meter numbers provided.

7.0 Mechanical Engineering Performance Specification

7.1 Scope of Works

7.1.1 The Mechanical Engineering Services Installations comprise the whole of the Design, Specification, Supply, Installation, Testing, Commissioning and Setting to Work of the services indicated below:

1) Low temperature heating,
2) Hot water services,
3) Internal cold water services,
4) External cold water services,
5) Ventilation,
6) Fuel gas,
7) Automatic controls and building management system,
8) Internal fire detection, suppression and protection,
9) Cooling medical gas,
10) Specialist equipment,
11) Above ground foul drainage system, and
12) Other services as recommended by the Contractor and agreed by the NHSPS Project Manager.

The above list shall be reviewed at the project outset with the NHSPS Project Manager to define the actual project scope for each individual project.

7.2 Mechanical manufacturers and materials

7.2.1 The Contractor shall produce a materials and manufacturers matrix at the outset of the project for agreement with NHSPS.

7.2.2 The matrix will be compiled to provide every opportunity to deliver a cost compliant solution.

7.2.3 A full NES+ (National Engineering Specification for healthcare) will be the basis for the specification of all materials and workmanship.

7.2.4 NES+ is the recognised standard for specifying engineering services and has been approved by the DH as a replacement to the Model Engineering Specification (MES). NES+ follows the common arrangement of work sections and complements the use of the NBS specification for building and structural works.

7.3 Heating System

7.3.1 Heating systems shall be designed to serve the following primary heating functions: -

- Offset the building fabric heat loss.
- Meet the heat load of any ventilation systems.
- Meet the internal environmental requirements.

Note: If any of the associated combustion plants (i.e. Generator/boiler/CHPs) are over 1MW heat input, they will need a permit before operational use.

7.3.2 The heating circuits shall be arranged as a number of separate zones appropriate to the differing functions and occupancy times of building areas, such that each can be operated under a time programme.

The complete system shall be controlled by timers and integrate zoning. Areas that are only occupied for 12 hours a day (or similar part day times) will have a timed control of the appropriate heating zone.

7.3.3 Heating pumps/boiler plant/no/zero carbon heating system shall be selected to permit capacity control of the system under varying load conditions whilst operating individual elements at high levels of efficiency. (Refer to Appendix B – Technical Specification for approved suppliers)

7.3.4 The plant capacity shall be such as to maintain two thirds output to satisfy maximum design capacity in the event of failure of one unit. One unit shall be sized to meet the full summer load of the building.

7.3.5 The system may be the pressurised or of an open vented type at the discretion of the Consultant Engineer. If a pressurised system is selected, all necessary safety interlocks must comply with Insurance Company requirements.

7.3.6 Heating circuits will be either constant or compensated, selected to suit the emitter types.

7.3.7 Where compensated heating circuits are provided to heat emitters. The flow temperature of the systems shall be adjusted to suit the external conditions, but the degree of compensation shall be limited to ensure that the output of heat emitters satisfies the space heat losses at all times.

7.3.8 Facilities shall also be provided to override the timed off sequence for any zone via a selector switch.

7.3.9 During the off period, the space temperature shall be maintained at not less than 10°C or the temperature at which condensation may occur, whichever is the higher.

7.3.10 Optimised start shall be provided for the heating in all zones.

7.3.11 Consideration should be given that all heater / radiator fittings should have LST covers or be designed to emit a low surface temperature to the required level. This will only apply to staff areas following a risk assessment that demonstrates their use. All exposed heating and hot water pipework shall be appropriately boxed with custom made boxings or Pendoc type boxings. To be discussed and agreed with the PM. Thermostatic valves are required to all heat emitters. LST radiators must be raised off the floor to allow easy cleaning under the unit.

7.3.12 Where “out of hours” facilities are included, areas not in use will incorporate a “night set-back” / isolation mode to reduce space temperature control requirements during these periods. The use of compensated circuits will be employed where this feature assists the efficiency of a particular system operation and energy performance of the system.

7.3.13 Resilience

The resilience strategy is to be developed with NHSPS and/or occupiers on a project-by-project basis. This will then be formally documented and signed off by the NHSPS, occupiers and FM teams as appropriate.

As a minimum the buildings plant will be sized such that each boiler/no/zero carbon heating technology can provide two thirds of the total load and that a single boiler can provide the entire summer load.

A minimum of two boilers will be provided to meet this configuration.

7.4 Hot and Cold Water Services (Refer to Appendix B – Technical Specification for approved suppliers)

7.4.1 The design of the Hot and Cold Water Services shall be in accordance with relevant current Design Guidance and current NHSPS Technical Guidance TG-03-Water, with particular attention being given to Water Turnover, water Temperatures and the safe storage of Water thereby minimising the risk of Legionella to patient areas. Design specification and scheme sign-off shall be undertaken jointly with the NHSPS commissioning party and the Authorising Engineer.
The water systems should be designed, managed and maintained to comply with:

- Health and Safety Executive - Approved Code of Practice and Guidance 2013 (L8) - The Control of Legionella bacteria in water systems
- HSG274 Parts 1, 2 and 3 – Legionnaires' disease
- the Building Regulations 2010 (and associated amendments)
- for systems provided with water from the public supply – for England and Wales, The Water Supply (Water Fittings) Regulations 1999
- for systems provided with water from private sources – The Private Water Supplies Regulations 2009
- BS EN 806 (Parts 1–5) Specifications for installations inside buildings conveying water for human consumption;
- BS 8558 Guide to the design, installation, testing and maintenance of services supplying water for domestic use within buildings and their curtilages;
- CIBSE Guide G Public Health and Plumbing Engineering.
- HTM 04-01: Safe water in healthcare premises Part A: Design, installation and commissioning
- HTM 04-01: Supplement Performance specification D 08: thermostatic mixing valves (healthcare premises)

7.4.2 Hot and cold water services shall distribute to all points of use in all areas of the new facility, including clinical accommodation, support accommodation, catering, and plantrooms.

7.4.3 The design of the water systems should identify and take into account the following factors:

- the source of the water must meet The Water Supply (Water Quality) Regulations 2000 or The Private Water Supplies Regulations 2009 and must be wholesome at draw off points;
- water components that may increase the risk of colonisation, e.g., blending valves, flexible hoses etc;
- the potential for stagnation leading to microbial growth where buildings are not to be fully occupied immediately or where systems are commissioned as occupation occurs, e.g., infrequently or intermittently used buildings.

7.4.4 It remains the responsibility of the contractor to ensure that during any period of non-occupation of the building and therefore normal use of the water system prior to completion and handover that a sufficient and evidenced risk mitigation regime is in place and carried out in line with HSG274 Part B Table 2.1 and if applicable, HTM-04 Part B Table 1.

7.4.5 The design should incorporate the following points:

- an adequate supply of hot and cold water available, particularly at periods of peak demand, while avoiding excessive storage. In buildings where stored water is not essential, consideration should be given to direct mains systems with local POU water heaters;
- all parts of the system including storage tanks, water heaters, pipework and components and associated equipment containing water are designed to avoid water stagnation by ensuring flow through all parts of the system. Low use outlets should be installed upstream of frequently used outlets to maintain frequent flow, e.g., an emergency shower installed upstream of a frequently used toilet.
- avoidance of temperatures in any water storage vessels, distributed water pipework and any associated equipment that support microbial growth, including legionella;
- single check valves are commonly used to prevent backflow of hot water to the cold feed. These valves should be rated for hot water use, as one side will be in contact with potentially

hot water. Where applicable, an anti-gravity loop should be installed in the supply pipework as a failsafe mechanism should the single check valve fail;

- design measures to improve energy efficiency targets and reduce water usage should be assessed at the design stage to ensure the control of legionella is not compromised.

7.4.6 Domestic water systems must not use materials that support microbial growth, such as those containing natural rubber, hemp, linseed oil-based jointing compounds and fibre washers. Similarly, any synthetic materials used should not adversely affect water quality by supporting microbial growth. Water fittings and components should be used that comply with the Water Regulations Advisory Scheme (WRAS) approval scheme which lists products that have been tested and comply with BS 6920.

7.4.7 It is important that there should be ease of access to all parts of the system, components and associated equipment for management and maintenance purposes, e.g., tanks, calorifiers, thermostatic mixing valves (TMVs), blending valves, circulation pumps etc. Isolation valves should be included in all locations to facilitate maintenance and the implementation of control measures. The pipework and any components should be easy to inspect so that the thermal insulation and temperature monitoring can be checked e.g., by hinged panels rather than screwed in panels.

7.4.8 As NHS premises are generally Healthcare environments, the Population Susceptibility Profile to Infection is such that certain processes may require specific water characteristics, therefore materials of an enhanced quality may be required. This will be especially pertinent in buildings classed as NHSPS Tier 1 and 2 buildings. The designers should take specific note of alerts and advice from the Department of Health.

7.4.9 The use of EPDM (Ethylene Propylene Diene Monomer) flexible braided rubber hoses shall be prohibited in the installation of new domestic water facilities within NHSPS premises. This applies to flexible hoses from mixed domestic water supplies as well as to separate hot and cold-water systems and feeds. This does not apply to primary heating circuits, sealed chilled water systems or shower hoses (between mixer and showerhead). If fixed pipework cannot be installed, where an installation has to move during operation or is subject to vibration.it is permissible as a last resort for WRAS approved non-EPDM flexible pipework such as PE (polyethylene), PEX (cross-linked polyethylene), LLDPE (linear low density polyethylene) and PVC C (post-chlorinated PVC) to be used.

7.4.10 For Cold water systems the general principles of design should be aimed at avoiding temperatures within the system that encourage the growth of microorganisms including legionella with the following taken into account: -

- Cold water storage tanks should be installed in compliance with The Water Supply (Water Fittings) Regulations 1999 (Refer to Appendix B – Technical Specification for approved suppliers)
- To prevent dirt and other potential nutrients getting in, they should have secure, tightly fitting lids. Insect and vermin screens should be fitted to protect any pipework open to the atmosphere, such as the overflow pipe and vent. Where screens are fitted, they should be installed so they do not hold water. To avoid stagnation, where multiple cold water storage tanks are fitted, they should be connected to ensure each tank fills uniformly and water is drawn off through each of the tanks. Access ports should be provided on cold water tanks for inlet valve maintenance, inspection and cleaning.
- Ensure that the volume of stored cold water within a Cold Water Storage Tank should be minimised and for NHSPS premises should not exceed 12 hours total onsite storage capacity.
- All pipe branches to individual outlets should be capable of delivering cold water at a temperature that is as within 3 degrees to the incoming water temperature within two minutes of running for mains fed systems or 3 degrees to the tank temperature within two minutes for tank fed systems.
- There should be a regular water flow throughout the system and all outlets to avoid stagnation. In cold water storage tanks this can be facilitated by locating inlet and outlet pipes on opposing sides of the tank at different heights.

- Thermal gain should be kept to a minimum by adequate lagging and separation of cold water services pipework and components from hot water services and heating systems; ensuring higher use outlets are installed at the end of each branch to improve flow; and considering, where appropriate, ventilation of void spaces and risers.
- Systems that encourage the movement of cold water in areas of the distribution system that are prone to stagnation and heat gain should be considered.
- All pipework and components carrying fluids other than water supplied by the water supplier and components shall be clearly labelled.
- System components and associated equipment which require maintenance are easily accessible. i.e., TMVs shall be either in the open or behind hinged access doors of sufficient size to allow for inspection and maintenance.
- Water fittings should only be chosen where they are compliant with The Water Supply (Water Fittings) Regulations 1999.
- In the case of non-metallic materials, this will also include conformity with BS 6920. The best method to ensure compliance is to select products from the Water Regulations Advisory Scheme Water Fittings and Materials Directory.

7.4.11 For Hot water systems, the general principles of design aim to avoid temperatures within the system that encourage the growth of legionella. Consideration should be given to the following:

- maintaining a supply temperature of at least 60 o C from the heat source and/or storage vessel (calorifier);
- the primary and any subordinate hot water circulating loop should be designed to give a return temperature to the calorifier from each loop of at least 55 o C.
- appropriate means for measuring temperature should be provided e.g., thermometer/immersion pockets fitted on the flow and return to the calorifier and in the base of the calorifier.
- all pipe branches to individual outlets should be insulated and sufficiently short to enable the hot water at each outlet to reach 55 o C within one minute of turning on the tap.
- the storage capacity and recovery rate of the calorifier should be selected to meet the normal daily fluctuations in hot water use without any significant drop in target supply temperature. The open vent pipe from the calorifier should be sufficiently raised above the water level and suitably sited in the water circuit to prevent hot water from being discharged in normal circumstances. The open vent should ideally discharge to atmosphere via a tundish providing a safe and visible warning of a fault condition.
- Pipework to be suitably insulated against excess heat loss.
- where more than one calorifier is used, they should be connected in parallel and deliver water at a temperature of at least 60 °C.
- to overcome localised failures in the distribution system, circulating pump design and the correct commissioning of balancing valves are key issues to ensure flow throughout all parts of the hot water system, particularly the hot water return legs. Balancing the hot water system flow and return circuits is critical to avoid long lengths of stagnant pipework that is likely to be at a lower temperature.
- Calorifiers should be designed to be compliant with HTM-04 Part A with an inspection Hatch is size permits and the calorifier drain valve located in an accessible position at the lowest point and as close as possible to the vessel, so that accumulated particulate matter can be safely drained. (Refer to Appendix B – Technical Specification for approved suppliers)
- all types of water heaters, including storage calorifiers, should be designed and installed so that they are safe to use and maintain, and able to be inspected internally, where possible.
- the terminating of the air vent over the cold-water storage tank is not allowed at NHSPS. The vent should be arranged to discharge over a separate tundish arrangement, with visible Type An air gap, sited at a level that takes account of the hydrostatic head of the system. The hot water storage vessel or water heater should be provided with a suitable safety valve of appropriate size and vacuum release arrangement.

7.4.12 Softened water shall be provided to satisfy the usage requirements of the domestic hot water system (where applicable – to be agreed with the NHSPS Project Manager in writing). The

equipment shall comprise bulk salt storage vessels and separate cold softened storage tanks on a basis of two at 50% and shall be located within plantrooms.

7.4.13 Storage of hot water will have n+1 storage calorifiers (3 No @ 50% duty each) sized to meet the daily needs of the accommodation. For energy monitoring proposes metering shall be provided to the heat generating equipment.

7.4.14 Heating and hot water plant shall be designed so they occupy the same area of the building.

7.4.15 Any expansion vessel fitted should be of a flow through type to minimise the risk of stagnation within the vessel bladder.

7.4.16 Adjustable showerheads are not to be utilised. – ref paragraph 10.61 in HTM 04-01 Part A.

7.4.17 Deadlegs - a length of pipe closed at one end through which no water passes - of any length are not acceptable within Healthcare facilities. The systems should be designed in such a way as to contain no deadlegs within the pipework or system.

7.4.18 Thermostatic mixing devices should only be installed where a risk assessment indicates their need. For guidance on applications and for a list of the types of mixing devices used, see Table 2 in HTM 04-01 Part A. The installation of TMVs or TMTs within any kitchen or staff only areas area should only be carried out if specifically requested by NHSPS.
Where full body immersion appliances are utilised, the designer will ensure that Type 3 D 08 specification Thermostatic Mixing Valves and/or Thermostatic Mixing Taps are used and shall be compliant with: -

- HTM 04-01
- BS7942:2011 -Thermostatic mixing valves for use in care establishments – requirements and test methods.
- Performance specification D 08: thermostatic mixing valves (healthcare premises) Health Technical Memorandum 04-01: supplement, 2017 Edition

7.4.19 The Designer shall determine whether the pressure of the incoming water supply to the building is adequate to serve mains fed outlets (including fire hydrants) and/or water storage tanks. Water pressure booster pumps shall be provided and/or new mains connections as necessary if the available mains water pressure is inadequate. The Contractor shall pay all fees, charges and the like associated therewith.

7.4.20 Due to the elevated Legionella control risks associated with dedicated grey water systems they will seldom be agreed however they shall be considered on a project-by-project basis.

7.5 Legionella Risk Management

7.5.1 The Contractor shall note the requirements of NHSPS Technical Guidance TG-03-Water and the Water Safety Plan and (where provided) and comply generally.

7.5.2 As part of the design process the Contractor is expected to engage with NHSPS Authorising Engineer to assess legionella risk and mitigate potential issues prior to construction.

7.5.3 Management of legionella risk as part of any NHSPS development is a high priority. The Contractor and design team shall assist NHSPS, the Authorising Engineer and the Regional Water Safety Group in development of the Water Safety Plan (where not already provided) throughout the development of the design.

7.5.4 An external legionella management company is employed by NHSPS to provide Water Risk Assessments for all water systems. As part of the design process the current Water Risk Assessment should be considered.

If the works involve significant modifications to an existing water system, therefore altering the water system or the use of the building in which the water system is installed. There has to be provision made within the contract for the commissioning of a new Water Risk Assessment, (utilising NHSPS's WRA provider).

7.5.5 The contractor and Authorising Engineer shall also be involved in the commissioning and completion process to ensure testing and sampling are carried out in accordance with ACOP L8, HSG 274, HTM 04-01: Safe water in healthcare premises Part A: Design, installation and commissioning and NHSPS Standard - TG-03-Water.

7.5.6 Some provisions within the NHSPS Technical Guidance, ***TG-03-Water***, exceed those of ACOP-L8 as it utilises applicable aspects of HTM. The Contractor shall ensure that they familiarise themselves, along with their design team, with this document and request clarity on any specific points as necessary as early as possible.

7.6 Ventilation

7.6.1 Ventilation is used extensively in all types of healthcare premises to provide a safe and comfortable environment for patients and staff and control odours. More specialised ventilation is provided to help reduce airborne infection risks in areas such as operating departments, critical care facilities, isolation rooms and primary patient treatment areas. The design of the buildings Ventilations system shall be in accordance with - *Health Technical Memorandum 03-01 Specialised ventilation for healthcare premises Part A: The concept, design, specification, installation and acceptance testing of healthcare ventilation systems.*

7.6.2 Adequate ventilation shall be provided throughout the building by either natural (preferred) or by mechanical means. With natural ventilation, it is almost impossible to maintain consistent flow rates and ensure that minimum ventilation rates will be achieved at all times. However, this variability is normally acceptable in non-clinical spaces such as office accommodation, staff areas, library/seminar rooms and dining rooms, and some clinical areas such as level 0 and 1 care spaces and waiting and consulting rooms where risk of airborne infections is likely to be low. Where it is essential to achieve a minimum ventilation rate at all times, mixed mode or mechanical methods will be needed.

7.6.3 Current healthcare building design philosophy suggests that windows are provided to allow light into and a view out of a healthcare building. Ventilation should be provided by purpose-made openings with appropriate consideration for thermal comfort and air quality. The airflow may need to be controlled by motorised dampers linked to temperature and/or occupancy sensors in the ventilated space.

7.6.4 Differing Healthcare departments / environments will require a degree of ventilation appropriate to their function, Design information and specified Air Change Rates (ac/h) for many of these departments / environments is given *Health Technical Memorandum 03-01 Specialised ventilation for healthcare premises Part A: The concept, design, specification, installation and acceptance testing of healthcare ventilation systems Appendix 2: Summary of design conditions.*

7.6.5 Treatment Rooms and Minor Operations Suites shall be provided with mechanical supply and extract ventilation to create a positive pressure environment.

7.6.6 A dirty extract ventilation system shall be provided extracting from all toilet areas and the Dirty Utility rooms. The extract fan shall consist of duty and standby motors with an auto changeover facility. Where central AHU's are required to serve a facility there should be a risk assessment carried out as to if the dirty extract should be incorporated into the larger central system to maximise heat recovery.

7.6.7 'Night Cooling' via automated ventilation louvres shall be considered as part of the overall ventilation strategy, as an integrated feature of the window design.

7.6.8 Air-handling units (AHUs) should be located in an accessible area secured from unauthorised entry. In the healthcare setting, because of the difficulty in gaining access for routine service and maintenance, mounting ventilation units of any type in ceiling voids is not permitted. Access to elements that require routine service such as filters, fans and all types of heat-transfer device should be via hinged doors.

7.6.9 Vibration isolators shall be provided to prevent transmission of vibration to the building structure or connecting services.

7.6.10 The designer should note that due to the recent Pandemic experience, central AHU recirculation of air may need to be bypassed, therefore the design should make provision of sufficient heating and cooling capacity to supply 100% fresh air.

7.7 Fire & Smoke Strategy

7.7.1 All ventilation systems and ductwork shall be provided in full accordance with the requirements of the signed off project Fire Strategy.

7.8 Ventilation Components

7.8.1 The ventilation plant shall be configured so that the temperature and cleanliness of the air systems is supplied to meet the relevant HTM's/HBN's and the requirements of the room data sheets.

7.8.2 To achieve the air quality, the air handling units shall be provided with filtration, BEMS controlled heating and cooling coils. (Refer to Appendix B – Technical standards for details of approved air conditioning and air handling unit suppliers)

7.8.3 All plant configurations shall be accordance with HTM 03-01 and HBN requirements.

7.8.4 Variable volume inverter drives will be used for all air handling plant. This will allow the systems to compensate for changes in filter condition and to allow running in setback mode, when appropriate.

7.8.5 All ventilation plant filters shall be replaced immediately before Completion or Practical Completion as applicable.

7.9 Resilience

7.9.1 Any plant serving minor procedures room shall incorporate run and standby motors with auto changeover. All air handling unit plant shall incorporate bypass arrangements on heat exchangers.

7.9.2 General ventilation plants shall be provided with a single plug fan and meter. The Contractor will liaise with the NHSPS Project Manager on a project-by-project basis to ascertain any requirement for provision of spare plug fans.

7.10 Energy efficiency

7.10.1 Very high efficiency heat recovery is an essential part in achieving the energy targets. Heat recovery devices shall be used on all ventilation plant to recover energy with a minimum efficiency of 70%.

7.11 Fuel Gas Installation Plant Room Installations and Components

7.11.1 The Fuel Gas Installation shall comply with The GSIUR 1998 and be fitted in accordance with the Institute of Gas Engineers and Managers suite of Approved Codes of Practice.

7.11.2 The design consultant shall ensure –

- that the Sizing of the primary meter is adequate for the proposed installation.
- For any gas pipework with an installation volume above 0.035 m^3 the pipe material shall be screwed or welded steel. Galvanised Pipework should be considered for external use.
- All gas pipework should be identified with Yellow Ochre paint - BS4800 08 C 35 and labelled with Gas Marker Tape.
- Any gas pipework that passes through a wall or floor of solid construction the pipework must be sleeved in line with the requirements of IGE/UP/2.
- An appropriate AECV shall be installed at the point of entry to the plantroom.
- As close as practicable to the AECV, an appropriate Gas Tightness Testing Point shall be installed.
- At the end of each gas pipework branch and appropriately sized valved purging point shall be installed and plugged.
- All final appliance connections shall be fitted with an isolation valve and a working pressure test point external to any appliance casing.
- All pipework branches shall have Branch Isolation Valves.

7.11.3 Reference should be made to the NHSPS preferred Asset document Technical Specification (TS-IAM-AST) Asset Standardisation for information regarding NHSPS's Preferred Equipment.

7.11.4 The designer should consider that where possible Frame or Wall mounted cascade boiler setups are preferred over floor standing appliances.

7.11.5 Consideration should be given to manufacturers whose appliances have been accredited to operate with a minimum of 20% Hydrogen blend Natural Gas.

7.11.6 Where the manufactures Flue kit is not suitable, Flues should be designed and installed by an accredited Flue Specialist.

7.11.7 If plant room ventilation is to be provided by mechanical means, interlocks shall be provided to prevent operation in the event of mechanical ventilation malfunction.

7.11.8 Condense conveying pipework and associated fittings must be of an appropriate material to prevent corrosion caused by the acidic nature of the condense water.
All condense water not discharging directly into vitreous clay or plastic foul drainage must be neutralised before termination.
Condense traps must be fitted to prevent the gaseous products of combustion escaping, they must be serviceable and contain a minimum of a 75mm water seal.

7.11.9 Plant room safety circuits must include: –

- Emergency Stop buttons at point of entry
- Thermal links above appliances
- Safety shut off valve fitted as close as practicable to the incoming gas pipework
- CH4, CO and Flood detection – Also compatibility of Hydrogen detection should be considered.
- An interlock with the buildings fire alarm system

7.11.10 System control panels must include as a minimum: –

- Hand auto/off function for all plant

- Run and fault Indication lights
- Lamp test function
- A control fuse status indicator

7.11.11 Consideration and provision should be given to interfacing the Boiler Control with the Building Management System

7.11.12 If the proposed building requires a new fuel gas supply, then it is the responsibility of the Contractor to allow for all costs for negotiating the availability of a supply with the area gas transporter and the provision of the new supply including primary meter, with an automatic reader function.
Any secondary Meter fitted must include a pulsed output facility.
The Contactor shall plan the delivery of new supplies at the earliest possible stage to avoid any delay to delivery.

7.11.13 The Gas safety shut off valve, safety circuit and the plant control panel, shall be interlocked with the building fire alarm system to shut down all plant and the gas supply in the event of activation. Facilities shall be provided to prevent the valve closing during normal testing of the fire alarm system.

7.11.14 The Contractor can propose other types of fuel supply options for the NHSPS Project Manager's consideration.

7.12 Building Management Systems (Refer to Appendix B – Technical Specification for approved suppliers)

7.12.1 It is important for NHSPS to be able to ensure the delivery of satisfactory working environments and, at the same time, manage the energy consumption and carbon footprint of its premises. BMS & Control Systems have an important part to play in achieving and maintaining this. BMS & Control Systems should be used to their full potential to minimize energy consumption, support maintenance activities and maximize the comfort and satisfaction of the building occupants.

7.12.2 Any main BMS upgrades should have a Teltonika RUT955 router installed (including cabling to BMS and mains power).

If the project is providing a Fixed IP address broadband line the router installed (including cabling to BMS and mains power)should be cabled to broadband socket, this IP address and password needs to be shared with Demma Services Ltd.

If the project decides that GSM signal should be used then an Aerial should be connected to router, be suitably located to receive signal and tested for signal strength by using a Signal Analyser.

If remote panels are not networked back to main panel, then each of the remote panels should also have a Teltonika RUT955 router installed as above.

There is no need to install a SIM card within any router installed as this will be completed by the NHSPS national hosting platform provider.

NHS PS have a BMS strategy with more details of our operational and technical required and this should be referred to and complied with by designers. A copy is held at the following link (external parties will need to request a copy of the documents from the NHS PS Project Manager:-

nhspropserv.sharepoint.com/sites/technicalservices/watermgt/Forms/AllItems.aspx?id=%2Fsites%2Ftechnicalservices%2Fwatermgt%2F12%2E Building Management System%2FNHS Property Services

BMS Strategy%2Epdf&parent=%2Fsites%2Ftechnicalservices%2Fwatermgt%2F12%2E Building Management System

7.12.3 The design of a NHSPS BMS system should incorporate the following points:

- the latest version of the SET file from Repository should be utilised.
- Intended strategy for the building and tenure of the site (e.g., initial & future use, occupier allocation, etc).
- Pattern of operation of the building (e.g., zoning, operating hours, etc).
- Details of intended change of space use (e.g., change from cellular offices to open plan)
- Optimum On and Off control of central plant.
- CO2 control of mechanical ventilation systems.
- Intended design life of accommodation and building services systems.
- The BMS should follow the NHSPS naming convention.
- Particular requirements for future change (e.g., outstation capacity).
- Particular requirements for system reliability (e.g., stand-by).
- Constraints (e.g., partial replacement of a system).
- Any special requirements for visible equipment (e.g., design or finish).
- Use of BMS within the overall maintenance strategy.
- Demonstration, training and handover/sign off procedures.
- Correct location of sensors to ensure correct operation.
- Details of all new equipment added during the project is to be supplied to NHSPS electronically using agreed NHSPS asset collection template.
- On completion the updated project back up file is to be supplied so it can be sent to the file Repository so the old one can be archived and the new one held for reference.

7.12.4 Individual NHSPS premises must have a local user/engineering interface but do not need their own BMS head end – there must be provision made to connect to an NHSPS cloud-based system.

7.12.5 Standard graphics should be provided on the BMS Operator Stations.

7.12.6 All upgraded or new install controls need to be BACnet OPEN protocol for connection to N4 platform, BMS standalone network connection via a 4G router to the cloud.

7.12.7 A complete self-contained control system shall be provided to automatically control, monitor and protect the whole of the mechanical engineering services installation within the proposed building and to accommodate elements of the retained existing building if existing systems are agreed to be replaced at a later date or before the end of this contract onsite.

7.12.8 The system shall comprise all necessary controllers, sensors, actuators, valves, control panels, software etc to provide a complete and working installation.

7.12.9 All alarm systems are to be addressable, and the system programmed to the final room name and numbering system as agreed with the NHSPS Project Manager for the wayfinding design and NOT to the original architectural room references which will not be used when the building becomes operational.

7.12.10 Individual control zones should be identified to allow effective control of comfort, minimise energy consumption and respond to the way in which the building is used when partially occupied in or out of normal working hours. Controls and function of multiple separate heating zones will be required. The final demand will be determined by the Consulting Engineer once the building is designed and the complete operating strategy defined and understood.

7.12.11 Energy Metering

An effective metering strategy is paramount in controlling energy consumption.

The scheme shall include a metering and sub-metering strategy which enables the monitoring of the building energy usage from its point of entry to the site, down to agreed internal zones.

This shall be achieved through a series of main and sub meters to monitor consumption of the prime services and zonal energy usage, including those of any 'concessions' within each facility.

The metering strategy shall comply fully with the requirements of the Building Regulations and TM39:2009 (or latest version).

All meters shall provide an output to the BEMS to enable central monitoring and trend logging. All metering shall have an accuracy of class 0.5 to IEC 61036.

The meters installed shall be suitable for automatic half hourly readings to be undertaken and integrated within the BMS. Separate building energy calculation software shall process the data, and present this in a fashion suitable for general and detailed reporting and interrogation. Should BMS not be proposed for this interface, separate arrangements shall be agreed with NHSPS and implemented.

The type of energy and utility meters proposed shall be agreed with the NHSPS PM.

7.13 Cooling

7.13.1 While all effort should be made to avoid the use of comfort cooling, in certain areas (particularly Consultant rooms) a maximum summertime temperature is not to exceed of 28ºC in accordance with HTM requirements. Provision shall be made to 'lop' peak summertime temperatures using energy efficient mechanical cooling techniques to maintain a comfortable environment for staff and patients or to ensure satisfactory operation of equipment - generally no air conditioning or mechanical comfort cooling provisions are to be made, unless it can be demonstrated that the comfort conditions required cannot be achieved by other design methods i.e. increased fabric insulation, increased thermal mass, reorientation of windows, solar shading, passive ventilation etc.

In other areas the building fabric, window size and orientation and passive ventilation shall all be employed to ensure maximum standards of patient and staff comfort without recourse to elaborate mechanical and electrical service systems.

7.13.2 It is the NHSPS preference in compliance with NHS Heat Wave Guidance, to cool (preferably by passive means but by mechanical means as necessary) all Waiting Areas/Treatment Rooms/Minor Operations Facilities. In addition to these areas NHSPS also consider the potential need to cool rooms including large meeting rooms, and large offices where high volumes of people and computer equipment may raise room temperatures.

7.13.3 Cooling / ventilation systems are to be provided as recommended by the Consultant Engineer and agreed by the NHSPS Project Manager.

7.13.4 External Conditions

Load calculations shall be based on a 30degC external ambient.

All heat rejection plants shall be sized on a minimum external ambient temperature of 35°C db 24°C wb.

7.13.5 IT equipment cooling

All areas housing IT equipment such as server and hub rooms will be served by dedicated cooling systems, with resilience provided to achieve N+1. IT cooling equipment to be linked to the BMS with remote alarm in the event of failure/rising temperatures in the LAN room(s).

7.14 Hydrofluorocarbon Gas Systems (Fgas)

7.14.1 The designer of any system utilising Hydrofluorocarbon gasses must consider the potential Environmental impact of the gasses and the subsequent Phase Down of HFCs. The Phase Down is designed to steadily reduce the global warming potential (GWP) of all gasses placed on the market in refrigeration, heat pumps and air conditioning.

7.14.2 Reference should be made to the NHSPS preferred Asset document Technical Specification (TS-IAM-AST) Asset Standardisation for information regarding NHSPS's Preferred Equipment.

7.15 Medical Gas (Refer to Appendix B – Technical Specification for approved suppliers)

7.15.1 It is envisaged that medical gasses may be installed within a scheme. If so, these shall be provided as recommended by HTM 02-01.

7.15.2 All terminal units for medical gases, medical and surgical air, and medical vacuum will be in accordance with BS EN 737 - 1, whereas terminal units for AGSS (if required) shall be in accordance with BS EN 737 - 2.

7.15.3 Methods of installation shall be to HTM 02 - 01 taking into account the need for ridged fixings, ease of access for maintenance, and minimisation of risk in the event of a gas leak. Fire code should also be consulted for guidance on the positioning of MGP isolation valves in in-patient areas.

7.15.4 Care must be taken to ensure adequate space for ease of use of medical equipment such as flow meters, vacuum control units etc.

7.15.5 Any required storage of medical gas, externally or internally, shall be strictly in accordance with HTM requirements. Particular note should be taken of industry information such as BOC's documents - ***Safety distances for compressed oxygen or inert gas cylinders/MCPs*** and ***Safety distances for liquid oxygen or nitrous oxide storage up to 2,000 litres net liquid capacity***.

7.16 Insulation of Services

7.16.1 All pipes and services shall be insulated as necessary and in particular:

- To avoid risk of frost and condensation
- To prevent heat loss from central heating and hot water pipes
- To prevent heat gain in cold water services (domestic cold water services shall not exceed 20 degrees C)
- To assist easy identification of a service and access to serviceable parts
- To avoid the promulgation of Legionella within the system.

7.16.2 All pipe work should be suitably insulated with preformed insulation clipped in position; thickness as detailed in relevant HTM document.

7.17 Above ground drainage

7.17.1 Above ground drainage shall be provided in accordance with BS EN 12056 to drain waste water from the building.

7.17.2 All vent pipework shall be arranged to terminate at roof level.

7.17.3 Cast iron or a suitable plastic alternative for main vertical stacks shall be provided. Plastic for low level branches to sanitary appliances and equipment shall be provided.

7.17.4 Where external exposed rainwater goods are necessary, they shall be selected to compliment the external finishes in agreement with the Architect.

7.18 Closed Water Systems

7.18.1 Where domestic water systems are providing make-up to closed water systems either via pressurisation units, or quick fill supplies, a suitable non return valve is to be installed as close as practicable to the point at which the supply line tees off from the domestic water system.

7.18.2 Where quick fill lines are installed, these should be fitted so that this supply can be disconnected from the closed water system when not required.

7.18.3 Suitable back flow requirements should be complied with in accordance with Water Supply (Water Fittings) Regulations 1999, where closed systems are installed to prevent contamination to the domestic water systems.

8.0 Electrical Engineering Performance Specification

8.1 Scope of Works

8.1.1 The Contract shall comprise the whole of the design, specification, supply, installation, testing, commissioning and setting to work of the new/modified Electrical Engineering Services Installation as indicated below:

- Provision of low voltage supply from Supply Utility where required,
- Provision of new LV switchgear,
- Main outgoing cables,
- Electrical sub main cabling and distribution boards, including earthing,
- Back-up power requirements),
- Isolated Power Supply (IPS),
- Internal lighting and controls,
- External lighting and controls,
- Services to exam couches,
- Emergency lighting,
- General purpose power installations,
- Fire alarm system alterations,
- Data communication,
- Call systems to include: patient call system, emergency call system, panic/attack system,
- Public address / background music system,
- Facilities for disabled,
- Telephone installation / alterations,
- Security systems and surveillance CCTV system,
- H&V control and plant wiring,
- Lightning protection system,
- Miscellaneous equipment installation, and
- Other services as recommended by the Designer / Contractor and agreed with the NHSPS Project Manager.

The above list is provided for the guidance of the Contractor and no omission from the list shall relieve the Contractor from his responsibility to provide the whole of the installations detailed in this specification and necessary for the proper functioning of the building as a healthcare facility.

8.2 Electricity Supply

8.2.1 The Designers primary objective shall be to deliver a design that is both safe for staff, patients and visitors and available when they need to use it.

8.2.2 HTM 06-01 provides guidance on electrical distribution within a healthcare building, addressing both of these issues and it must be the Designers / Contractors intention to be compliant where practical.

8.2.3 HTM 06-01 requires a risk based assessment of accommodation to categorise its sensitivity to power loss and define the type of distribution required. This is to be undertaken by the Electrical Safety Group (ESG), a group assembled by NHSPS for each project to manage the project's compliance with HTM 06-01.

8.2.4 It shall therefore be the Designers responsibility to engage with NHSPS to identify the ESG and enable design strategies to be authorised.

8.2.5 To assist NHSPS, the Designer shall undertake initial studies to define the Risk Category proposed for each space.

8.2.6 The Contractor shall include for all costs, negotiations and testing required by the Electricity Provider if any additional supply capacity is required.

8.2.7 The Designer is required to carry out initial discussions with the local supplier to inform the design proposals. The Contractor shall be responsible for liaising with the agreed supplier and all other organisations required in delivering the new supply. The Contractor shall also manage all requirements (in conjunction with the NHSPS Project Manager) in supply of consumer meters etc and shall plan the delivery of the new supplies at the earliest possible stage to avoid any delay to delivery.

8.2.8 The electrical supply shall terminate into the Supply Company's cut-out and metering unit and shall be provided with a main fuse switch of suitable rating for isolation, short circuit and over-current protection of the main distribution to the building services, along with a standby generator changeover switch and interlink connection point providing ability for future portable standby generator to be 'connected externally' giving standby power supply provision for the building.

8.2.9 All main services provided shall be adequately sized, including for trenches and ducts and connections for drainage, water, electricity and gas, and separate ducts for future Telecom and Cable services to the building.

8.2.10 The Designer / Contractor shall take due consideration of any Supply Company standards that need to be adhered to, to enable successful handover.

8.3 Main Switchgear

8.3.1 Design, supply and install new main switchgear to serve the whole of the new building in accordance with BS EN61439, IEC 439 and HTM 06-01.
Designers shall select the form of separation for switchgear based on the area covered and type of load connected to the outgoing circuits.
A Load / capacity survey must be carried out to confirm existing supply whilst providing sufficient contingency of 15% of supply before allocating additional loads – This calculation should also include the standby Generator / UPS capacity.
To ensure a degree of future Proofing, additional Switch Gear spare way capacity should also be included.

8.3.2 Each area or department within the new building shall have a separate distribution board and supply cable.

8.3.3 All LV switchgear should be located in dedicated switch rooms and risers and under no circumstances shall it be cited in rooms, clinical spaces or store rooms etc which would impact on the functional use of those spaces.

8.3.4 The distribution network shall be designed and arranged to facilitate the requirements of BS 7671 IEE Wiring Regulations with power factor correction equipment provided to achieve a minimum of 0.95 lagging, local to mechanical plant.

8.3.5 All main switchgear shall be fitted with surge protection devices. (Refer to Appendix B – Technical Specification for approved suppliers)

8.3.6 Electromagnetic Compatibility (EMC) shall be considered to meet the recommendations of the EMC Directive.

8.3.7 Metering of all plant shall be in accordance with CIBSE recommendations and to reflect Building Regulations Part L2, plus the requirements of the agreed sustainability strategy for monitoring of substantial energy uses where applicable to the project.

8.3.8 The Designer shall provide IPS and UPS electrical systems as necessitated by the requirements of the clinical spaces to be provided based on the risk analysis undertaken with the ESG.

8.4 Mains Distribution – Cabling

8.4.1 External and internal mains distribution shall be provided by main and sub-main cables from the main switchboard to final circuit distribution boards and control equipment concealed within accessible voids of the building structure.

8.4.2 The electrical system shall be designed to HTM 06-01 where new or replacement of existing.

8.4.3 Main and sub-main cables and all associated switchgear shall be sized to provide 25% spare capacity above the designed load to permit future expansion.

8.4.4 Sub-main cabling shall be carried out using multi-core insulated and sheathed LS & F cables concealed in the proposed building structure.

8.4.5 Sub circuit cabling shall be installed in galvanised trunking with galvanised conduit, wired in LSF singles. Sub-circuit wiring systems shall be concealed 6242B LSF multicore insulated and sheathed cable except in the treatment rooms where shielded wiring systems shall be used. Sub-circuit wiring within covered car park and plant rooms shall be LSF insulated single core cables enclosed in galvanised steel conduit.

8.4.6 NHSPS is committed to embrace modularisation and efficiency savings initiatives and as such is open to modular wiring proposals. These shall be put forward by the Designer / Contractor for approval of the ESG.

8.5 Standby generation (Refer to Appendix B – Technical Specification for approved suppliers)

8.5.1 Standby generation may be required as part of a scheme and should be discussed and agreed by the ESG and NHSPS Project Manager. The Designer shall ensure the generator is suitably sized and specified by the Consultant Engineer to run all essential services identified by the brief agreed with NHSPS. There shall be sufficient fuel stored onsite to supply the standby generator for a period of 72 Hours at 100% Load or a minimum of 500l - whatever is greater.

If Fuel tanks are to be installed the following will apply:-

- Double skinned fuel tanks and or adequately sized bunds around fuel/oil storage locations with a general chemical spill kit in place
- Information on fuel tank alarms and maintenance requirements (where applicable) Where a BMS is in place on site, alarms are to be connected back to the system to provide alerts on tank holding, use, low levels etc.

8.5.2 All new NHSPS developments are to be provided with an emergency generator plug in point provided in accordance with the agreed manufacturers matrix produced at project commencement.
Provision should be made for Standby Generator installations to incorporate Load Bank connection points.

8.5.3 Tertiary Power Supplies (TPS) shall be provided in the form of Uninterruptible Power Supplies (UPS) batteries to all areas defined by the clinical risk analysis.
The arrangement and size shall be agreed with the ESG but take into account the following: -

- Clinical risk of each area served and network strategy.
- Load analysis for areas served.
- Support of NHSPS IT / Telecommunication equipment.

8.6 Isolated Power Supply

8.6.1 The Designer shall specify that batteries are sized for end of use life expectancy.

8.6.2 Earth free isolated supplies (Isolated Power Supply – IPS) shall be defined by the clinical risk analysis.

8.6.3 Where provided, dedicated IPS distribution boards shall be provided complete with isolation transformers arranged on a Path A and B basis.

8.6.4 IPS supplies shall be supported via the UPS either locally or centrally.

8.7 Distribution Boards (Refer to Appendix B – Technical Specification for approved suppliers)

8.7.1 Final circuit distribution boards shall be either single phase or three phase MCB type distribution boards to BS 5486 and be IP3X protection or approved equivalent.

8.7.2 The number and disposition of general distribution boards shall be defined by the Designer once the LV infrastructure is understood and agreed with the ESG.

8.7.3 Refer also clause 8.4.3 for future expansion capacity requirements.

8.8 Socket Outlet and Small Power Installation (Refer to Appendix B – Technical Specification for approved suppliers)

8.8.1 Small power circuits shall be arranged to provide a minimum of 50% operation under a single circuit failure.

8.8.2 Where the HTM 06-01 risk category dictates these shall be on a Path A and B basis. The Designer shall provide small power outlets in accordance with the project Room Data Sheets (RDS). Where these differ from HTM 08-03, this should be identified on the design compliance statement.

8.8.3 Supply and install all conduits, trunking (including medical standard trunking where required), cables, 13 amp socket outlets, fused connection units, general power accessories and USB charging points etc, as required and all in accordance with the IEE Wiring Regulations. Note: HTM 06.01 currently recommends that fixed USB charging points within a 13amp socket should not be installed in healthcare premises.]

8.8.4 Supply and install all final connection facilities, flex outlets etc along with terminal wiring and connections to all fixed items of equipment for cooker, water heater etc facilities.

8.8.5 All circuits feeding socket outlets shall be installed as ring circuits. Power for any computer hub / Server Rooms shall be provided with a dedicated supply and earth bar.

8.8.6 Electrical services for plant supplies, ventilation equipment, shafts, ducts, roof void and similar areas shall be provided to suit the individual project. Power and control circuits shall be supplied and installed to all heating and ventilation equipment, including air handling units, pumps, fans, pressure and temperature sensors, calorifiers and similar equipment.

8.8.7 Include for final connections to equipment isolator/fused connection units which shall be Labelled with the name of the unit served.

8.8.8 All group 1 items of equipment shall be tested and demonstrated and on completion issue an Acceptance Certificate, signed by a competent person from the Contractor and countersigned by the Project Manager.

8.8.9 RCD Protection should be incorporated in line with the current BS7671 regulations.

8.8.10 Where switched outlets are to be provided these shall have outboard rockers.

Outlets in other areas shall generally be: -

- Rooms with bedhead / dado trunking to suit trunking finish
- IPS socket outlets – coloured red
- UPS socket outlets – coloured red
- Metal clad in plantrooms

8.8.11 Power requirement at each workstation (within consulting, treatment rooms, and other 'clinical' rooms including a computer workstation) shall be 3 nr dual power sockets, unless agreed otherwise in writing with the NHSPS Project Manager.

8.8.12 Data requirement at each workstation (within consulting, treatment rooms, and other 'clinical' rooms including a computer workstation) shall be 3 nr made up of the following:

- 1 nr dual data outlet
- 1 nr blanking plate (for future use)

Unless otherwise agreed with the NHSPS Project Manager.

8.8.13 Additional power sockets will be required adjacent to couch positions and worktop areas.

8.9 Containment

8.9.1 A mixture of containment systems shall be permitted in accordance with HTM 06-01, however NHSPS preference is as follows;

8.9.2 The installation shall be designed throughout the building with cable trays, trunking and conduit systems to allow future adaptation of the power/data/communications installation/security systems. Inaccessible areas, such as plasterboard ceilings, shall have interlinked containment systems and may require access hatches.

8.9.3 Three-compartmental dado trunking is to be provided for connection of small power, voice and data wiring to the full-length reception desk. Particular attention shall be given to stopping runs 150mm short of doors and walls if the trunking terminates at this point. Additionally, the trunking system shall be installed in such a way as to eliminate significant gaps behind, warping of corner pieces on obtuse angles etc.

8.9.4 A full scale management system using segregated dado trunking or similar will be required to all areas, covering telephone sockets, computer points, socket outlets, staff attack systems and cable wiring generally.

8.9.5 The Contractor will design and install cable tray as required and shall be arranged to provide segregation from electrical services.

8.9.6 Space will be left in the tray for future cables for further data and management systems (50% increased capacity).

8.9.7 The specific requirements in relation to data cabling should be considered (as set out in the standard NHSPS IT brief) covering cable lengths, separation and to ensure avoidance of magnetic interference between power and data cabling etc.

***Note**: The cabling routes for CAT6 shall be installed on a dedicated containment system and be segregated by at least 30 centimetres from all other electrical services. Where CAT6 and power cross paths then no less than 30 centimetre clearance is required to maintain a safe EMF zone.*

8.9.8 Bedhead trunking shall be designed and provided in accordance with HTM 08-03 and the BS EN standard for Medical Supply Units.

8.10 Electrical Manufacturers and Materials (Refer to Appendix B – Technical Specification for approved suppliers)

8.10.1 The Contractor shall produce a materials and manufacturers matrix at the outset of the project for agreement with NHSPS.

8.10.2 The matrix will be compiled to provide every opportunity to deliver a cost compliant solution. A full NES+ (National Engineering Specification for healthcare) will be the basis for the specification of all materials and workmanship.

8.10.3 NES+ is the recognised standard for specifying engineering services and has been approved by the DH as a replacement to the Model Engineering Specification (MES). NES+ follows the common arrangement of work sections and complements the use of the NBS specification for building and structural works.

8.11 Fire Alarm System (Refer to Appendix B – Technical Specification for approved suppliers)

8.11.1 If a new system is to be provided it shall be an open protocol automatic addressable fire alarm system to cover the whole of the proposed new building, to be L1 standard and in accordance with TS 06 Fire: Fire Alarm Systems. Any existing retained sections of building on the site are to be modified as agreed by with the NHSPS Project Manager to enable the two systems to be interlinked. In the majority of cases full L1 coverage of all buildings/areas shall be required.

Designers should comply with the following NHS PS guidance document: TS-06-FIRE - Fire Alarm Systems - Fire Alarm Specification.pdf - All Documents (sharepoint.com)

8.11.2 All cabling shall be of the ‘enhanced’ type.

8.11.3 All system interfaces should be identified, including security, lifts, motorised fire dampers and the like etc. The Designer / Contractor shall provide a suitable cause and effect schedule as part of the design strategy reflective of the stage of design.

8.11.4 A sprinkler system is generally not required, however for some building types this may be a requirement and the Designer / Contractor should discuss and agree this with the NHSPS Project Manager on a project-by-project basis.

8.11.5 The system is to identify separate zones which will be agreed with the NHSPS Project Manager. Zone identification drawings should be provided as part of the works.

8.11.6 Audible alarms shall be equipped with a volume control to reduce the maximum output by at least 15%. Care in location and intensity of sounders is required in each facility. Alarm sounders shall be integral to detectors on all new systems.

8.11.7 Visual alarms shall be installed in all areas adjacent to audible alarms (may be a combined audio/visual alarm unit), where audible alarms may be considered inappropriate. NHSPS prefer the use of 'spoken sound notifications'.

8.11.8 Zenon beacons shall be provided in all plant areas.

8.11.9 The fire alarm system shall be of the Analogue Addressable type. Wiring for the fire alarm system shall be red sheathed soft skin enhanced fire resisting cables such as Draka Fire Tuf Plus Enhanced (or other cables approved by the NHSPS Project Manager in writing). All fire alarm cabling should be mechanically secured with metal clips at centres in accordance with current guidelines.

8.11.10 A risk assessment shall be carried out by the Contractor and/or design team on ceiling and roof voids in accordance with HTM 05-03 Section 4.6 to determine the need for automatic detection within these areas.

8.11.11 The fire alarm installation should incorporate EMIZON monitoring system. The Contractor shall liaise directly with the NHSPS Project Manager on the exact requirements of the EMIZON system, including locations of components etc. The Emizon system (installed by Cormeton) requires a data outlet to be installed in an agreed location and dedicated IP address (which NHSPS shall arrange).

8.11.12 NOTE - The fire detection system is to be addressable and the system programmed to the final room name and numbering system as agreed with the NHSPS Project Manager for the wayfinding design and NOT to the original architectural room references which will not be used when the building becomes operational.

8.12 Lighting (Refer to Appendix B – Technical Specification for approved suppliers)

8.12.1 Wherever possible rooms and corridors shall receive natural lighting. The Designer shall provide daylight models during the design process to illustrate how effective the natural day-lighting strategy can be and how the design may be altered to improve its capacity. In the case of refurbishment schemes where natural daylight opportunities may be limited, this requirement is to be reviewed on a project-by-project basis.

8.12.2 Where internal lighting is to be provided, the Designer shall make full use of LED lighting opportunities and shall be designed in accordance with the Code for Interior Lighting published by the Chartered institution of Building Services Engineers and the recommendations of CIBSE lighting code LG 2 "Hospitals and Health Care Buildings".

8.12.3 The following shall also be provided:

- Luminaries suitable for the application, complete with diffusers where necessary,
- An attractive lit environment in the entrance/reception and public areas using a combination of down-lighters and wall mounted uplighters,

- Recessed or semi recessed luminaries wherever possible,
- Luminance levels will be in line with BS EN 12464-2:2007 specific to each room type.

8.12.4 Clinical areas shall have appropriate luminaries for the function. All examination lights are to be suitably located to allow them to be used to perform the required clinical procedures without casting shadows, hindering the procedure. Examination and minor procedures lamps are to be hard-wired with isolation spurs readily accessible to clinical staff and with minimal cable/flex overruns. Ceiling mounted exam/minor procedure lamps are to be suitably located and set at a height to aid flexible use and be reachable by all staff.

8.12.5 The following standard features shall apply to all luminaries where applicable: -

- Fused terminal blocks shall be provided to luminaries as detailed on the luminaire schedule.
- All light fittings other than those in plant rooms will be connected using plug in Klik Style Lighting Connectors. Where fittings are in a solid ceiling the connector will be installed to the nearest accessible point.
- Any recessed or semi-recessed luminaries which are installed within fire rated ceilings shall be fire rated. Fire boxes shall as a minimum be rated to a level equal to the fire resistance of the ceilings in which luminaries are installed.

All lamps shall be provided in accordance with the agreed manufacturers matrix produced at project commencement.

8.12.6 Whilst the conservation of energy must be a key element of the design strategy and lamp selection, the Designer must provide a lighting design which has a positive therapeutic effect on patients, staff and visitors.

Where lighting can be automated, such as stores, this shall be designed to serve as many areas as possible.

Other forms of lighting control such as daylight control should also be considered.

8.12.7 Maintaining a suitable light level over the scene being monitored by a CCTV camera is an important step to allowing the security system to perform to its best ability, with the minimum light level required, depending on the type of area being monitored.

The Designer shall therefore provide a solution that provides sufficient illumination where cameras are to be located, coordinated with the chosen security system.

8.13 External Lighting

8.13.1 Where external lighting is required in the scheme, the entrances and the building perimeter shall be illuminated by use of LED Luminaires (wall mounted or column mounted) to provide external lighting for safety and security purposes, subject to agreement with the local authority.

8.13.2 Any existing systems shall either be enhanced, replaced or left as installed where their performance is deemed to be satisfactory around the retained existing buildings.

8.13.3 Control of exterior lighting shall be automatic and timed (to be set as agreed with the NHSPS Project Manager) with manual override and in accordance with the agreed sustainability strategy.

8.13.4 External light levels shall be in accordance with current CIBSE Guide LG6 and in accordance with the agreed sustainability strategy.

8.13.5 Luminaires shall be provided with luminous efficiency and in accordance with the agreed sustainability strategy.

8.13.6 Designs shall be in accordance with ILE (Institute of Lighting Engineers) Guidance Notes for the Reduction of Obtrusive Light and in accordance with the agreed sustainability strategy.

8.14 Emergency Lighting (Refer to Appendix B – Technical Specification for approved suppliers)

8.14.1 The Designer shall design an emergency lighting system to comply with BS 5266 or extend any existing system to meet the relevant standards.

8.14.2 The emergency lighting shall incorporate any Building Control and Building Regulation requirements and be agreed with the Local Authority.

8.14.3 Self testing systems shall be considered on a project-by-project basis.

8.15 Installation of Cables for Computer Wiring

8.15.1 Note: The design team must engage with the nominated IT provider to verify the applicability of the general requirements given below on a scheme-by-scheme basis.

8.15.2 The following paragraphs outline the PCO infrastructure requirement; the preferred method of installation and guide notes for external cabling companies. The development shall include the provision for a network infrastructure suitable to support both data and Telecommunications.

8.15.3 The Contractor will supply and install Category 6a as minimum computer wire ways as appropriate, together with outlet plates, patch panels and rack enclosures. Cables shall be shielded twisted pair to assist in EMC issues. This will include provision of a fully wired network. All circuits are to be tested and certified as such. NHSPS will provide the incoming cabling and switches/active equipment. The Contractor shall provide cable ducts and draw wires to facilitate the incoming cabling. The extent of this requirement on refurbishment projects is to be reviewed on a project-by-project basis.

8.15.4 Fibre cables shall be OM4 as a minimum.

8.15.5 Cables to be installed within ceiling spaces shall be installed on cable trays / basket and conduit drops provided in wall partitions. The installation of containment must facilitate future voice and data installation of an additional 50% capacity.

8.15.6 The structured cabling must be terminated in an appropriately sized data cabinet, all housings required to support the installation shall be provided as part of the building M&E and upon handover will have all necessary certification provided within the O&M document. All test results shall be documented and verified with the cabling manufacturer.

8.15.7 All IT services e.g., servers, telecom's as well as telephone control equipment, alarms control equipment and the like shall be housed in a secure server/comm.'s room away from patient thoroughfares, water pipes, drainage and heat sources. The **NECS Infrastructure Standards Document** defines Comms Room specifications. A copy of this document is available via the NHSPS Project Manager.

8.15.8 All outlets are to be RJ45/CAT6a type mounted on deep back boxes. Particular attention is to be cable termination practices with proprietary I.D.C. Tools being utilised throughout.

8.15.9 All Cat6a cabling shall be installed as twin sockets (no single sockets shall be used). Cabling shall be installed on the basis of 3 Nr socket outlets per user and an additional socket per room,

in addition to those required for the networked patient call system outlined in Clause 4.1.18 or any more specialist areas. All outlets shall be to be tested to Cat6a specification and the results provided to the NHSPS PM.

***Note**: The cabling routes for CAT6a shall be installed on a dedicated containment system and be segregated by at least 30 centimetres from all other electrical services. Where CAT6a and power cross paths then no less than 30 centimetre clearance is required to maintain a safe EMF zone.*

8.15.10 The patch panel shall include multiples of 24/48 way connection units suitable for IP based network using the standard 10/100/1000 network. With 1U cable management panels between each patch panel. See attached **Standard Cabinet Layout** for placement of patch panels with any cabinet. Requirements for expansion space within each data cabinet are to be determined through discussion with the NHSPS Project Manager and NECS IT team.

8.15.11 Supplier recommendations are as follows (NHSPS is open to considering others):

- Data Cabinets – PRISM
- Network and VOIP Infrastructure – Cisco
- CAT6a – CONEX / Krone
- Magnetic Door Entry System – Paxton NET2

8.15.12 Any deviation from the above should be by Design Variation, and agreed per issue, per location.

8.15.13 Communications (Comm.'s) Room Installation Standards:

Environment:

- Every comm's room should have air conditioning provided on a N+1 basis and should be able to maintain 22 degrees in temperature and a humidity of 50%. Note: If heat outputs are not available the Contractor is to agree an anticipated level of heat output with the NHSPS Project Manager / IT team in design of temperature control installations.

- Where air conditioning is not available/deemed appropriate by agreement with ICT, the comm.'s room should have a minimum of continuous fan extraction, plus a fireproof vented door between the comm.'s room and access corridor.

- Each comm's room must have physical access security for door entry. Where a building uses magnetic swipe, biometric or key fob access then the comm.'s rooms should be added to the building door access system.

- Where the above is not installed in a building, the minimum should be either an electronic or manual push button keypad lock.

- Each cabinet requires a suitably rated power outlet from a minimum of two circuits to reflect actual equipment specified.

- Termination of data cabling and all required testing should be carried out by the Contractor to ensure that the complete installation meets the NECS IT standards.

- The Designer shall agree with the NHSPS Project Manager on the UPS strategy, i.e., local to equipment of from central supplies on a project-by-project basis.

- Gas suppression and leak detection requirements shall be agreed with NHSPS Project Manager and Digital & Data teams on a project-by-project basis.

Hardware:

- Each comm's room shall contain at least one appropriately sized comm's cabinet to house cable termination, servers and other infrastructure hardware. The preferred cabinet shall be sized according to the number of users and services on site.

- Cabinet location should allow for access to all four sides and must at least include 800mm clearance for both front and rear (see Appendix F showing comms room layout examples – these are minimum requirements).

- Each comm.'s cabinet should be marked with an "Alphabetical" Label, e.g. 'Cabinet A'. If there are locations on multiple floors within any building, the labelling should include the floor number also. E.g., Cabinet A on the Ground Floor would be Cabinet A0

- Within the comm.'s cabinet all incoming cable lengths should be bundled into groups per patch panel.

- Each bundle should be routed up from the floor up the rear of the comm.'s cab or dropped down through the top of the cabinet. There must be a coiled loop of at least 1 meter additional cabling to allow for future panel movement.

- Each cable end should be cable tided to the patch panel and terminated in line with industry and cable specification standards.

- Cabinet internal layout will be confirmed per site, but standard (from the top of the cabinet) is 1U space at the top of the cabinet, then 2 patch panels, 1U cable management, 2 patch panels, 1U cable management and so on. Active switches shall also be considered.

- Each data outlet should be marked in "Alphanumeric Order" (e.g., A0/001, A0/002 etc) at the customer end and numeric order (001, 002 etc) within the cabinet.

- The number and sizes of Comms rooms shall be consulted on and agreed in writing with NHSPS at the outset (if not already stipulated on the required SoA), allowing for future expansion.

8.16 Other IT/Comms systems

8.16.1 The design of the project shall adopt all current best practice and NHSE&I directives around Digitally Enabled SMART Hospitals.

8.16.2 Wi-Fi - NHSPS provide Wi-Fi networks where appropriate in new and newly refurbished premises. As such the Contractor shall be required to work with the NHSPS Project Manager and Digital & Data team to coordinate the required infrastructure for installation of Wi-Fi aerials, IT outlets and other associated components.

8.16.3 Phone Signal Boosters - During later stages of construction the Designer shall arrange for a mobile phone signal test to be carried out. Should the results of this survey show that the signal in much or all of the facility is poor a booster system may be installed - to be agreed with NHSPS Project Manager.

8.16.4 Fibre links between coms rooms and the like – The contractor shall establish the need for such and provide as necessary.

8.16.5 External IT links (including N3) - Any requirement for new connections from external providers to be established by the Designer through agreement with NHSPS requirements. All fees and charges associated with provision of such shall be borne by the contractor unless agreed otherwise in writing before appointment.

8.16.6 Early handover of IT rooms and the like is mandatory for NHSPS fit-out (where not by contractor) – the contractor shall work with NHSPS to provide early handover of IT rooms and the like to allow any NHSPS fitting-out of such ahead of Practical Completion.

8.17 Nurse Call/Patient Call/Staff Call/Staff Attack Systems

8.17.1 A digital IP addressable call system via a dedicated network shall be provided in accordance with the recommendations set out within HTM 08-03, RDS and agreements reached with the NHSPS PM on an individual project basis.

Systems should be addressable and adopt the latest in call system technology.

The call system shall comprise the following alarms:

i) Nurse call (patient to staff). Nurse presence and two-way speech facilities shall be agreed on a project-by-project basis,

ii) WC emergency pull cord system to each disabled WC (disabled distress),

iii) Medical Emergency (staff to staff),

iv) Dangerous Drugs Cupboard (controlled drugs cupboards)
iv) Next Patient Call. Either a visual of audible system shall be provided to enable remote calling of patients from the consulting / examination rooms.

v) Code Blue (cardiac) – These are a NHSPS brief item as defined in HTM 08-03. These shall only be provided where there is a high risk of cardiac arrest envisaged and shall be assessed on a project-by-project basis.

vi) Consider code pink, missing baby or infant from clinical custody.

vii) Panic/Staff Attack Alarm System. This can either for part of the nurse call system or an integral part of the security system.

viii) Over door lights, with both visual and audible indication.

ix) Main indicator panel (main reception) and strategically placed repeat panels,

8.17.2 A key feature of the call/attack systems is the 'follow me' system of ceiling mounted illuminated arrows which are designed to indicate the alarm activation point from any position within the building.

Note: For the avoidance of doubt there should be no need to refer to any panel when responding to an alarm call.

8.17.3 If the system comprises of multi departments then the system shall have the capability to enable all calls to be diverted to other panels / departments.

8.17.4 If piped medical gases are present then the local medical gas alarm panel shall be interfaced with the call system.

8.17.5 The provision of staff paging shall be agreed with the NHSPS PM on a project-by-project basis.

8.18 Telephone System

8.18.1 The development shall utilise the Data/Comm.'s structured cabling (Cat6a) Digital Voice communications shall be provided under the ICT VOIP Strategy.

8.18.2 All equipment (handsets and fax M/C's etc) will be provided by the Occupiers.

8.18.3 All telecommunication systems and active switches shall be approved by the appropriate IT Infrastructure team.

8.18.4 In addition, payphone outlets shall be provided to each reception / waiting area which shall be clearly visible so that they can be monitored by staff. These are to be provided independent to any central telephone system and are not to be linked to any ICT hardware. They can utilise the Data/Comm.'s structured cabling (Cat6a) and IT hub rooms/racks.

8.18.5 The telephone system shall be VOIP technology unless otherwise agreed in special dispensation (site peculiarity etc.). The installed solution shall, as a minimum, be capable of the following functions:

- Capable of supporting both analogue and digital extensions.
- Capable of being upgraded in future to take advantage of developing technologies.
- Minimal supported lifespan of 7 years.
- Support cordless telephony, PC integration and virtual extension.
- Provide as standard features – call forward, call queuing, conferencing, do not disturb, call barring, call waiting, group pick up, call distribution, call hunting, speed dial, music on hold, recorded announcement, multiple customer call centres.

8.18.6 All areas of telecommunications such as but not limited to: Fax lines, Alarm Lines, Lift Lines or other communications should be hosted from within the Server/comm.'s room in order to provide all VOIP and direct copper connections from a single location. In the event that the server/comm.'s equipment is compromised, these lines shall remain unaffected.

8.19 Lightning Protection System

8.19.1 Calculations shall be completed by the Designer to determine the requirement (or not) for this system. If required the Contractor shall provide for the supply, installation, protection and testing of all elements of the system to the satisfaction of the Designer.

8.19.2 Surge protection shall be provided on all main electrical switchboards.

8.20 Lifts (Refer to Appendix B – Technical Specification for approved suppliers)

8.20.1 The number, size and disposition of lifts will become apparent as the design progresses and the contractor shall provide a lift traffic analysis to support such in accordance with HTM 08-02. All lift and associated equipment shall be supplied, installed, tested and commissioned by the Contractor.

8.20.2 The lifts shall be "low energy" in accordance with the agreed sustainability strategy.

8.20.3 The lift manufacturer shall be required to fully commission the lift in accordance with the requirements of British Standards. All test results shall be recorded and included in the operation and maintenance manual.

8.20.4 The Contractor shall include for full maintenance during the 24 months defects liability period and include all necessary servicing and attendance. NHSPS would like to see a 24 month defect period, this being consistent with that adopted by ProCure22. If the contractor can offer a significant saving for a reduced period, perhaps 12 months, NHSPS would consider this on a project-by-project basis.

8.20.5 A contract for maintenance and servicing may be entered into by the occupier after expiry of the 24 months defects liability period on the basis that the lift has demonstrated trouble free performance. NHSPS would like to see a 24 month defect period, this being consistent with that adopted by ProCure22. If the contractor can offer a significant saving for a reduced period, perhaps 12 months, NHSPS would consider this on a project-by-project basis.

8.20.6 If clinical activity is undertaken on upper floors at least two lifts will be required to allow the building to function during breakdowns.

8.20.7 Where required programming/control of lifts via the access control system shall be provided (for example where an upper floor is a staff zone/staff access only).

8.20.8 Lifts shall be open protocol.

8.20.9 Fire evacuation lifts shall be provided as necessary to meet the fire strategy adopted, also taking account of any specific requirements of relevant patient groups, for example bariatric patients where applicable.

8.21 Security System Installation

8.21.1 All aspects of the security design shall be agreed with the NHSPS Project Manager, taking into consideration the principles and guidance of the Local Police plus the 'Secure by Design' initiative.

8.21.2 Options for a fully integrated security system shall be discussed and agreed with the NHSPS Project Manager on a project-by-project basis.

8.21.3 The Designer shall provide a set of dedicated security strategy drawings to demonstrate the proposals for agreement with NHSPS.

8.21.4 Intruder Detection (Refer to Appendix B – Technical Specification for approved suppliers)

The intruder alarm systems shall be installed to the relevant British Standards and be provided by an NSI approved intruder/security supplier. It shall be fully connected to the Fire Alarm System.

The buildings will be used for multi-function purposes and zoned operation is required. 24 hour battery backup is to be incorporated.

In order to give NHSPS, and its occupiers the greatest flexibility, the detectors are to be controlled on predefined locations on the Ground and First Floors (locations to be agreed during design development) on a project-by-project basis.

The system shall be provided using concealed wiring and infra-red movement detectors to cover each ground floor room and/or area having an external opening together with contacts to each external door position, and cover to all upper floor landings/corridors/stairs, complete with localised audio/siren system.

A control panel shall be positioned at designated single point of entry/exit, to be user-friendly and multi-zoned for different building areas/users.

The system shall be provided with delayed entry and 24 hour battery back-up facilities and have a link to a remote monitoring station provided via a unit that has a double sim option (one for resilience and not a fixed Redcare line or similar.

8.21.5 Access Control – [Refer to Technical standards - Appendix B for additional information]

The following door types as a minimum will require access control.

- Secure all staff areas/rooms from public zones
- Secure individual Departmental entrance doors within corridors (linked to hold open devices)
- Secure all Shared staff facilities such as changing rooms, locker rooms and staff rest areas where located off public circulation areas
- High risk High-risk areas of clinical practices such as mortuaries, maternity, pharmacy, Paediatrician units, Mental Health and Childrens services to be programmed separately as standalone systems.
- Secure the Multi user rooms sited off public circulation areas such as clean and dirty utilities, beverage bays, etc.
- Secure all external staff entrance doors and barriers
- Provided to and integrated with the main public entrance to the building where applicable, including a video entryphone system (unless stipulated by NHSPS as not being required)

Staff doors shall be provided with a keyless entry system (ideally by swipe card, but keypad or fob may be approved in exceptional circumstances).

Similar control systems to be provided internally to the lift, stair and circulation corridor doors to subdivide separate occupier's areas or patient and staff areas as required, all linked into the fire alarm system to release in the event of an alarm on a "fail safe" basis with manual override facilities.

The Designer shall allow for each area to be programmed separately or in conjunction with other zones. The arrangement will be agreed with the NHSPS Project Manager upon completion of the Contract.

The system shall have all features compatible with remote monitoring – via a Emizon alarm monitoring system, or approved equivalent.

The installation is to be completed by a NACOSS approved contractor and satisfy the latest ACOP for police response.

The contractor discuss and agree the number of access control fobs/cards with the NHS PS on a scheme by scheme basis.

8.21.6 CCTV

A close circuit television camera system shall be provided complete with internal and infra-red external cameras with concealed wiring to a zoned split colour screen, complete with digital recorder located in a suitable office. All DVR's must be secured under GDPR The spec should be a secure restricted location or caged/ boxed infrastructure.

Definitive location shall be agreed with the NHSPS Project Manager on a project-by-project basis.

Colour pan, tilt and zoom cameras shall be provided internally to cover all entrance areas and waiting areas. Externally, colour pan, tilt and zoom infra red cameras within vandal resistant housing shall be provided to cover all areas. The system shall be expandable for an additional 8 cameras if required. NHSPS is open to the use of non-real time, static and recorded systems (with suitable storage capacity) if proven to be more cost effective. The Contractor shall provide the cost of options for consideration.

Positions to areas shall be defined on a dedicated set of drawings, which may include, but not be limited to:

- High risk areas
- main waiting/sub-waiting areas
- main entrance
- car park entrance
- staff entrance
- reception areas
- publicly accessed corridors
- all external faces of the building

Camera types shall be suitable for operation in low levels of light.

The system shall include split screen monitors, on-site digital recording equipment capable of recording for 30 days, with the ability to record 'off-site'. The software shall be network compliant, work with the IT software strategy and have 25% latency. All cameras and other sensors shall be high quality 'generic' types rather than dedicated systems.

All equipment shall comply with current legislation.

CCTV signage shall be included in the overall package and be displayed as necessary.

Clinical CCTV monitoring if required will be identified on the project RDS.

8.22 Panic alarms

8.22.1 Fixed alarm buttons located in areas of high risk shall be provided.

8.22.2 An audible alarm shall be provided on activation with all alarms registering at a panel located in a suitable office. Definitive location to be agreed with the NHSPS Project Manager on a project-by-project basis.

8.23 Public Address system / Back Ground Music System

8.23.1 A public address system shall be provided either separately or as part of the fire alarm/voice alarm system to each reception area. Audio frequency induction loops for use with hearing aids are to be provided to the reception desk, waiting/sub-waiting areas.

8.23.2 One portable induction loop to be provided for each reception point.

8.23.3 NHSPS preferred PA system comprises Audix Systems 120w amplifier (with 6 inputs) Single desk, desktop microphones to each reception point, and RCS loudspeakers positioned to cover all waiting areas and sub-waiting areas with additional areas as agreed with the PM which may include areas of circulation space etc.

8.23.4 Intercoms shall be provided where indicated on the project RDS.

8.24 Induction loops

8.24.1 Audio frequency induction loops for use with hearing aids are to be provided to the reception desk, waiting/sub-waiting areas and any group rooms.

8.24.2 One portable induction loop to be provided for each reception point.

8.25 Earthing and Equi-potential bonding

8.25.1 Earthing systems shall be provided in line with the recommendations oh HTM 06-01.

8.25.2 In order to maximise safety for all Users of equipment subject to earth leakage i.e., personal computers and certain medical equipment, dual earth paths to all socket outlets shall be provided in accordance with BS 7671.

8.25.3 Where provided IPS earths shall be provided with a dedicated Earth Reference Bar (ERB) adjacent to the local distribution board.

8.25.4 All new metallic equipment and metal parts of other installations, including exposed structural steelwork, ceiling, grids, incoming gas and water services shall be bonded to earth in accordance with BS.7671.

8.26 External areas

8.26.1 All new main services provided shall be adequately sized, including for trenches and ducts and connections for drainage, water, electricity and gas, and separate voice/data.

8.26.2 The Contractor shall liaise directly with third parties as advised by NHSPS with regard to required duct types/locations etc. for telecoms, or media connections etc.

8.26.3 The contractor shall also ensure that all necessary approvals are obtained from all relevant statutory bodies and the like regarding any new supplies and connections required and to pay all fees and charges associated therewith.

8.26.4 Where car park barriers are required, all electrical services to them shall be routed below ground level in suitable ducts.

8.26.5 Any balcony type areas (internal or external and including atrium type spaces) shall be provided with suitable handrails, balustrades and the like to protect vulnerable people from the inherent fall risk associated with such, with no fixtures, fittings or the like close by and/or construction details that compromise such protection measures.

8.27 Entertainment systems

8.27.1 HTM 08-03 recommends that entertainment facilities enhance patient wellbeing and experience and identifies various systems to be considered:

- Television
- Internet services (Wi-Fi)
- Radio
- Telephone
- Healthcare Information

All of the above shall be agreed with the NHSPS Project Manager on a project-by-project basis.

8.28 General Electrical Accessories

8.28.1 Electrical accessories are to be flush mounted where possible incorporating white moulded plates from MK or similar approved manufacturer.

8.28.2 Note: the Contractor is to advise on any potential issues with Building Regulations in the installation on white plates.

9.0 Handover & Commissioning

9.1 Snagging

9.1.1 The Contractor shall, towards the end of the project, formulate and agree a strategy for snagging with the NHSPS Project Manager. The NHSPS Project Manager shall be directly responsible for carrying out snagging and overseeing rectification of highlighted items however they may wish to utilise external consultants to assist (particularly likely with regard to engineering services, and specialist installations such as fire stopping).

9.1.2 Engineering installations will be inspected and signed off by an Authorising Engineer in accordance with the HTM's. These include but may not be limited to: -

- Electrical installations
- Water installations
- Air installations
- Medical gas installations
- Lift installations
- Fire detection and protection installations - *Handover and acceptance of the System should be in accord the The NHSPS Technical Specification: TS 06 Fire: Fire Alarm Systems; 7.5 Handover and Closing Out p9, 10 &11*

The contractor will be required to provide the Authorising Engineers, but NHSPS will advise on a project-by-project basis if these personnel are available within NHSPS and are to be provided to the contractor.

9.1.3 The Contractor shall fully assess the new development when approaching completion and remedy any defects prior to inviting the NHSPS Project Manager and team to site to carry out snagging. This 'pre-snagging' by the contractor is essential on all schemes.

9.1.4 The scope of pre-snagging shall be agreed in advance with the NHSPS Project Manager and may consist of a sample of rooms covering different room types and locations within the development. It is to both the Contractors and NHSPS benefit to prepare a sample room as early as possible in the project to agree standards of installation and finish.

9.1.5 It is expected that any and all works to rectify defects are carried out within 21 days of Practical Completion.

9.1.6 The Contract shall comply with the Completion processes set out in the NHS PS document library.

9.2 General

9.2.1 Contractor to include for the provision of a joiner, painter, electrician, plumber during the occupier's moving in period.

9.2.2 This facility shall provide for the transition of the staff into the building and provide for the putting up of white boards, etc. as the need arises.

9.3 Property Drawing Database

9.3.1 On completion of all new developments NHSPS require a 'flattened' set of floor plans (based on the general arrangement plans) towards the end of the project once as built plans are ready for issue. These need to be issued in .dwg format and house three tabs per each floor plan.

1. General Arrangement
2. Furniture / Fittings
3. Fire Strategy

9.3.2 These plans should be flattened into the following layers to allow the system to read the information without overly complex layering:

1. Walls (both internal and external)
2. Doors
3. Windows
4. Furniture and Fittings
5. Sanitary
6. Room NIA (closed Polylines around each room interior)
7. Gross Area (closed polyline around building Gross Internal area)
8. Notes

9.4 Health and Safety File

9.4.1 The Health and Safety File shall be provided for each construction work project in digital format only and transferred to NHSPS external SharePoint system as designated by the NHSPS Project Manager.

9.4.2 The information within the document shall be consistent with the requirements as set out by the CDM Designer (including Principal Designer where appointed) in the Health & Safety File template.

9.4.3 A final draft Health & Safety File shall be provided at least four weeks prior to Practical Completion to allow comment by the NHSPS Project Manager.

9.5 Façade/Envelope Cleaning

9.5.1 All cladding and curtain walling will be designed to be safely cleaned and maintained via mobile access platforms or reach and wash systems. Provision will be made for access around the perimeter of the building for such equipment. Any and all detritus, staining or other such dust will be cleaned away from the building, hard landscaping etc and assurances given that drains have not been silted as a result.

9.6 Duct Cleaning

9.6.1 Ductwork needs to be sealed at all times during construction. If dust if found following inspection within ducts, prior to handover the Contractor shall clean all ductwork as required by the NHSPS Project Manager.

9.7 Spares

9.7.1 The following bespoke materials and quantities shall be provided, in addition to the M&E spares identified separately to the NHSPS Project Manager at Practical Completion: -

1. Vinyl flooring and carpet tiles – a minimum of 2 full boxes of each type (or 10m roll)

2. Paint, 15 litres of each emulsion colour, 5 litres for gloss
3. Ceiling tiles - a minimum of 2 full boxes of each type

Other item quantities by agreement.

9.8 Handover Checklist - REFER TO DOC LIBRARY

9.9 Completion, handover and making good defects procedures and processes

9.9.1 REFER TO DOC LIBRARY

9.10 Demised Plans / Drawing Requirements

9.10.1 If required (to be agreed in writing before appointment) the Contractor shall provide demised floor plans to reflect occupier lease areas agreed with the NHSPS Project Manager, along with accompanying schedule of room names and areas coded to occupier demise. The Contractor should also note that these may change throughout the life of the project and may require amendment from time to time.

9.10.2 If required (to be agreed in writing before appointment) the contractor shall also provide a set of Land Registry compliant 'red line' plans to attach to occupier leases. These will include floor plans and site plans (showing any dedicated parking)

9.11 Staff Training

9.11.1 As noted earlier the Contractor shall arrange training for both NHS Operations personnel and users of the building.

9.11.2 NHS Operations personnel training should include (but not be limited to):

- Fire alarms
- Security alarms and CCTV
- Access Control
- Plant room familiarisation
- Ventilation systems and controls
- IT Hub room familiarisation
- Lifts
- Electrical distribution
- Solar PV
- Generator
- Staff attack / nurse call
- AHU / extract
- BMS
- Medical Gases
- Drainage
- Car park control
- Roller shutters / automatic doors
- Reception features (PA systems etc)

User training should include (but not be limited to):

- Fire alarms
- Security alarms and CCTV
- Access Control
- Plant room familiarisation
- Ventilation systems and controls

- IT Hub room familiarisation
- Lifts
- Staff attack / nurse call
- Reception features (PA systems etc)

9.11.3 A basic guide to the systems in each room should be provided on laminated paper at completion. This should cover temperature control, window operation (including teleflex if appropriate), blind operation and lighting control.

APPENDIX A
Schedule of Accommodation Template

NHS Property Services

Typical Facility XX Schedule of Area

NHS Property Services

As Briefed Schedule of Accommodation

Issue Date DD/MM/YYYY

Rev	Date	Revision Notes	Name	Checked
01	DD/MM/YYYY	Revision description	XX	XX

NHS Property Services

NHS Property Services

Project Name:

Revision:

As Briefed Accommodation Schedule Summary

Level	Department Name: (examples shown)	Departmental total briefed area	As Drawn Gross internal floor area
Level 2	Roof Plant		
Level 1	Department B		
	Department C		
Level 0	Entrance & Shared Areas		
	Department A		
	Building Total	**0**	

*GIFA (Gross Internal Floor Area) - the area of a building measured to the internal face of the perimeter walls at each floor level.
GIFA DOES NOT INCLUDE: Perimeter wall thickness and external projections; external open-sided balconies, covered ways and fire escapes; canopies; voids over or under structural, raked or stepped floors; greenhouses, garden stores, fuel stores and the like in residential properties and open ground floors and the like.

As Briefed Schedule Sign off:	Name	Date
Amend roles/personnel as necessary		
Service Director		
Clinical Director		
Medical Director		
NHS Property Services Operations		

NHS Property Services

Project name:

As Briefed Accommodation Schedule Summary

Department:	Ground Floor - XXXX											
Room Number	**Room Name**	**Department**	**As Briefed Size Size m²**	**Nr of Rooms**	**Total Area m²**	**HBN Recommended Size m²**	**Nr of Rooms**	**Total Area m²**	**ProCure22 Size m²**	**As Drawn size m²**	**Nr of Rooms**	**Total Area m²**	**Comment**
0-DTA-01	Dirty Utility	Department A	12	1	12	12	1	12	12	0	1	0	
	Clean Utility	Department A	16	1	16	16	1	16	16	0	1	0	
	Kitchen	Department A	8	1	8	12	1	12	12	0	1	0	
	Single Person Office	Department A	9	1	9	9	1	9	9	0	1	0	
	Store	Department A	10	1	10	12	1	12	n/a	0	1	0	
	Staff Base	Department A	6	1	6	6	1	6	n/a	0	1	0	
	Treatment	Department A	18	1	18	18	1	18	n/a	0	1	0	
	Consult/Exam Room	Department A	16	1	16	16	1	16	12	0	1	0	
	Cleaner	Department A	6	1	6	6	1	6	n/a	0	1	0	
	Disposal	Department A	10	1	10	12	1	12	n/a	0	1	0	
	Ambulant Staff WC	Department A	3.5	1	3.5	3.5	1	3.5	n/a	0	1	0	
	IT	M&E	4	1	4	4	1	4	n/a	0	1	0	
	Total Nett		119	12	119	127	12	127	61	0	12	0	
	Plant @ 3%				4			4				0	As drawn not %
	Circulation at 30%				36			38				0	As drawn not %
	Planning Allowance @ 5%				6			6				0	As drawn not %
	Department Total (Rounded to 0dp)				**165**			**175**				**0**	

As Briefed Schedule Sign off:	**Name**	**Signature**	**Date**
Amend roles/personnel as necessary			
Service Director			
Clinical Director			
Medical Director			
NHS Property Services Operations			

APPENDIX B
(Not Used)

APPENDIX C
Standard Conditions (Preliminaries)

APPENDIX C

A. PRELIMINARIES/GENERAL CONDITIONS

CONTENTS

PRELIMINARIES
Fixed
£ p

A10 PROJECT PARTICULARS

The Project

01. To be confirmed.

02. The Works are programmed to commence in XXXX, and target completion in XXXX.

03. Employer

To be confirmed.

Contact: To be confirmed.
E-mail: To be confirmed.

Contract Administrator (CA)

04. To be confirmed.

Contact: To be confirmed.
E-mail: To be confirmed.

Principal Designer (CDM)

05. To be confirmed.

Contact: To be confirmed.
E-mail: To be confirmed.

Consulting Services Engineer

06. To be confirmed.

Contact: To be confirmed.
E-mail: To be confirmed.

Quantity Surveyor

07. To be confirmed.

To Collection £

A10 PROJECT PARTICULARS

PRELIMINARIES
Fixed
£ p

Contact: To be confirmed.
E-mail: To be confirmed.

To Collection £

A11 TENDER AND CONTRACT DOCUMENTS

Drawings

08. The drawings listed in Appendix XXXX shall be read in conjunction with this specification and will form the basis of the Contract Sum.

A12 THE SITE/EXISTING BUILDINGS

Site Particulars

09. The Contractor will be deemed to have visited and inspected the site before tendering which is situated at XXXX.

10. Arrangements to visit and inspect the site and buildings shall be made with the Project Manager during normal office hours.

11. The Contractor shall be deemed to have made due allowance here or in his prices for local conditions, the nature and accessibility of the site, the nature and extent of the operations and storage space for materials and waste handling, including all additional handling and transporting, due to site conditions and the nature of the ground. The Contractor shall allow for all costs associated with working within the Site Rules (a copy of the site rules can be found in Appendix XXXX).

Site investigation

12. A copy of the report on the site investigation is included as Appendix XXXX.

Existing mains/services

13. The locations of known existing services and drains running over and under the site are shown on the contract drawings . The works assume that existing site infrastructure capacities are adequate for the works.

A13 DESCRIPTION OF THE WORK

Generally

14. Refer to section A10 in the Project Particulars for a general description of the works.

Building Control

15. The Contractor is advised that he is to provide all information required by the Project Team for all necessary building control approvals. The project team will remain responsible for submitting and obtaining all approvals and meeting the cost of the applications.

PRELIMINARIES
Fixed
£ p

A20 THE CONTRACT

Form of Contract

16. The Form of Contract will be determined and agreed on a project by project basis.

17. The Contract will be executed as a deed.

Recitals

18. Amendments to Recitals, Contract Particulars, Conditions of Contract to be confirmed.

Contract Particulars

19. Amendments to Recitals, Contract Particulars, Conditions of Contract to be confirmed.

Conditions of Contract

20. Amendments to Recitals, Contract Particulars, Conditions of Contract to be confirmed.

Parent/Ultimate holding company guarantee

21. Where stated in the Contract Particulars as required, the Contractor shall obtain and deliver to the Employer a guarantee of his obligations hereunder duly executed by the Contractor's ultimate holding company. ASSUMED

To Collection £

Performance Bond

22. Where stated in the Contract Particulars as required, the Contractor shall allow for and shall indicate in the space provided within the Form of Tender, the amount of premium required for the arrangement of the Bond and shall also state the total sum for which the Bond might be arranged. ASSUMED

Collateral Warranties

23. The Contractor is required to provide Collateral Warranties as described below: -

- Any works package carrying a design obligation ASSUMED

		Time Related £	Time Related p	PRELIMINARIES Fixed £	PRELIMINARIES Fixed p
	A30 EMPLOYER'S REQUIREMENTS: TENDERING/SUB-CONTRACTING/SUPPLY				
	Fixed and time related costs				
24.	The Tenderer is provided with the opportunity to price Preliminaries fixed and time-related cost elements separately should he so wish.				
	Contractor's Proposals - CDM Regulations				
25.	In accordance with the requirements of the Construction (Design and Management) Regulations 2015 (the CDM Regulations), the Tenderer shall submit with his tender all necessary information to demonstrate that he has the skills, knowledge, experience and the organisational capability necessary to fulfil the role of principal contractor in a manner that secures the health and safety of any person affected by the project.				
	Tender requirements - Programmes, Reports, Schedules, etc.				
26.	The Tenderer shall prepare and submit the following information (including any variations in respect of alternative tenders) with his tender:-				
	(a) A detailed Method Statement describing the techniques, equipment, plant, access and protection the Contractor intends to use during the Contract.				
	(b) A design programme (co-ordinated with the construction programme) showing the dates or periods for the submission of the Contractor's Design Documents in relation to the Contractor's Designed Portion Works which shall include sub-contract design and identify dates by which orders are to be placed with sub-contractors, suppliers and statutory undertakers. The design programme shall indicate the dates by which information is required to enable procurement of sub-contracts or supplies for which a Provisional Sum has been included in the Employer's Requirements.				
	(c) A construction programme, based on the stated dates for possession and completion, which is sufficiently detailed to show the Contractor's sequence of working compatible with the Method Statement in (a) above. This programme shall include all major construction activities, the work of any Domestic Sub-Contractors and work resulting from the expenditure of Provisional Sums for defined work. Appropriate allowance shall be made for adverse weather conditions, holidays, etc.				

To Collection £ £

		Time Related £	p	PRELIMINARIES Fixed £	p
	(d) An Information Required Schedule to be subsequently agreed with the Contract Administrator prior to acceptance of this tender, setting out the Contractor's total itemised information requirements to complete the project and the date by which he requires each item. Such Schedule is to include the dates by which orders are to be placed with Domestic Sub-Contractors and Domestic Suppliers and is to allow for the progressive release of information related to the construction sequence. [The information and dates subsequently agreed with the Architect/Contract Administrator prior to acceptance of this tender will be incorporated in the contract Information Release Schedule.]				
	(e) CVs for key personnel who are to be employed on the Works.				
27.	The Tenderer shall in his programming and pricing of the Works make adequate allowance for dealing with the features contained in the pre-construction information and for preparing and implementing the construction phase plan in accordance with the CDM Regulations, together with the further development of the plan which may be required by the Contractor and which may reasonably be foreseen at the time of tender to enable compliance with the CDM Regulations and other relevant Statutory provisions relating to Health and Safety.				
	<u>Tender requirements - design information</u>				
28.	Design drawings and technical information to be included in the Contractor's Proposals which is to be sent to Design team for approval. Design drawings to be included in the Contractor's Proposals shall include:-				
	<u>Tender Sum Analysis</u>				
29.	The Tenderer shall submit with his tender an analysis of his tender (in the form attached at Section XXXX). If his tender is accepted the analysis will become the Contract Sum Analysis.				
30.	Costs relating to items which are not priced will be deemed to have been included elsewhere in the tender analysis.				
31.	The Contract Sum will not be adjusted for fluctuations in prices.				
32.	The Tenderer shall submit alternative tender(s) as detailed following the General Summary and in the Form of Tender.				

To Collection £ £

A30 EMPLOYER'S REQUIREMENTS: TENDERING/SUB-CONTRACTING/SUPPLY

		PRELIMINARIES	
Time Related		Fixed	
£	p	£	p

Tender requirements – personnel information

33. The Tenderer shall submit with his tender:-

(a) the names and CVs of senior management personnel (on and off-site) whom the Tenderer will appoint for this Contract, together with a site organisation chart;

(b) the names of designers and other consultants whom the Tenderer intends to employ for this Contract with details of similar work previously carried out by them; and

(c) the names of sub-contractors to whom the Tenderer intends to sub-let, identifying the scope of work for each.

Tendering procedure

34. Tendering procedure will be in accordance with the principles of the JCT Tendering Practice Note 2012. ASSUMED

35. No unauthorised alteration, addition or note entered in this Specification shall modify the printed text.

Landfill tax

36. The Contractor shall be deemed to have allowed in his prices for the tax chargeable on landfill disposal and no adjustment will be made if there is a change in this tax

Site visit

37. Before tendering the tenderer is to visit and inspect the site.

Provisional sums generally

38. Provisional Sums do not include for the cost of Contractor's Preliminaries and the Contractor will be deemed to have ascertained the nature and scope of work etc., to be carried out and to have made due allowance in programming, planning and pricing these Preliminaries.

To Collection £ | £

		Time Related £	Time Related p	PRELIMINARIES Fixed £	PRELIMINARIES Fixed p
	A31 EMPLOYER'S REQUIREMENTS: PROVISION, CONTENT AND USE OF DOCUMENTS				
	Specification				
39.	This Specification comprises Sections XXXX. If any page is missing or duplicated or if any words or figures are indistinct or ambiguous, the Contractor is requested to notify the Project Manager immediately.				
40.	Section XXXX of this Specification is generally arranged in accordance with The Common Arrangement of Work Sections (CAWS) published by the Building Project Information Committee.				
	Measurement Rules				
41.	The Measurement Rules are the RICS New Rules of Measurement NRM2, in the form published at the Base Date, unless otherwise stated in the Contract Documents.				
	Health and safety pre-construction information				
42.	A health and safety pre-construction information pack is included in the tender documentation in accordance with the CDM Regulations. INFO REQUIRED				
43.	The Contractor shall be deemed to have made due allowance in his prices and programme for complying with CDM regulations.				
	Definitions				
44.	The letters "BS" shall mean the British Standard Specification current at the Base Date.				
45.	The letters "CP" shall mean the British Standard Code of Practice current at the Base Date.				
46.	The term "statutory authorities" shall include local authorities and statutory undertakers.				
	Format of documents				
47.	Documents to be submitted to the Project Manager or to the Consultants are to be sent electronically in an acceptable format.				

To Collection £ £

	Time Related £	p	Fixed £	p

Additional copies of drawings

48. The Engineer/Contract Administrator will on request issue to the Contractor additional copies of the drawings to the two copies required by Contract clause 2. However a charge will be made by the Project Manager for so doing.

49. The Contractor shall be deemed to have allowed in his prices for making any further copies of new or revised drawings provided by the Architect/Contract Administrator which he requires for his own or his sub-contractors' or suppliers' use.

Discrepancies

50. Any discrepancy in or divergence between figured or calculated dimensions and scaled dimensions on any drawing issued to or prepared by the Contractor shall be reported immediately by the Contractor to the Engineer/Contract Administrator.

Design Submission Procedure

51. The Contractor's Design Documents shall be submitted to the Engineer/Contract Administrator in accordance with the Design Submission Procedure.

52. The Contractor shall be responsible for the adequate supervision and co-ordination of the design within the Contractor's Designed Portion including the proper integration and compatibility of the various elements with each other and with the design of the Works as a whole.

Sub-Contractors and Suppliers drawings

53. The Contractor shall obtain, check and note any discrepancies or divergences and submit to the Engineer/Contract Administrator all Sub-Contractors, Suppliers and statutory undertakers' drawings and other information as may be required.

54. The Contractor shall ensure that any necessary amendments are made in accordance with the comments of the Engineer/Contract Administrator and that the drawings are re-submitted unless otherwise advised.

55. Copies of shop drawings required for the execution of the Works shall be supplied by the Contractor at his own cost.

To Collection £ £

		PRELIMINARIES	
Time Related		Fixed	
£	p	£	p

56. Builder's work requirements shall be fully detailed with regard to the size, location and numbers of holes, chases, recesses, bases etc.

57. The Project Manager may require shop drawings to be submitted to him prior to the manufacture or execution of the work covered by the shop drawings. Such submission shall not restrict the responsibility of the Contractor under this Contract.

58. For the avoidance of doubt, provision of the foregoing information is to be made in such a manner as to allow sufficient time for the Engineer/Contract Administrator to check and if necessary amend his design without delaying the progress of the Works.

Capital Allowances

59. The Contractor will be required to provide information for the purposes of the Employer claiming Capital Allowances on machinery and plant expenditure. Initially on request he shall provide costs and additional details of relevant items within the agreed contract sum.

60. Subsequently on request he shall provide further details of variations and where necessary respond to capital Allowances queries until the Employer has reached agreement with the Inspector of Taxes.

61. The Contractor shall if so required provide interim assessments of expenditure on all qualifying items for the Employer's financial year and accounts.

62. The Employer's Tax Consultant will provide any necessary assistance to the Contractor in complying with the foregoing. The information provided by the Contractor will be treated as confidential and used only for the purpose of Capital Allowances.

Contractors Design

63. The Contractor is referred to the contract conditions detailing the requirements for Contractor Design.

64. The contractor is to complete the design generally.

To Collection £ £

	Time Related		PRELIMINARIES Fixed	
	£	p	£	p

A32 EMPLOYER'S REQUIREMENTS: MANAGEMENT OF THE WORKS

CDM Regulations

65. The Contractor shall undertake the role of principal contractor under the CDM Regulations.

66. The Contractor shall, before any work may be permitted to be commenced on site, prepare a construction phase plan which complies with the CDM Regulations and provide copies to the Employer, the CDM Co-ordinator and the Engineer/Contract Administrator.

Supervision and Co-ordination

67. The Contractor shall be responsible for the supervision and administration of all sub-contractors and statutory undertakers, including arranging and attending meetings and the progressing of any information or design work that may be necessary to enable them to comply with the master programme.

68. The Contractor shall be responsible for notifying and co-ordinating all statutory undertakers as and when he requires their services on the site. The co-ordination shall be deemed to include for providing the statutory undertakers with sufficient information regarding line, level, etc., to enable them to provide and lay mains, cables, etc., to suit the progress of the Works, irrespective of whether payments are made direct to the statutory undertakers by the Employer.

69. The Contractor shall be responsible for co-ordinating the sequencing and setting out of the work of sub-contractors on site, having particular regard to any conflicts which may arise as a consequence of the detailed interpretation of drawings by operatives on site.

70. The Contractor shall make regular visits to the works of all his sub-contractors to inspect the quality of the work and to check on progress and delivery in relation to the programme and he shall be deemed to have allowed for all costs in connection therewith.

71. The Contractor shall provide sub-contractors with all necessary drawings, dimensions and other information to enable their work to be correctly executed.

To Collection £ | £

	A32 EMPLOYER'S REQUIREMENTS: MANAGEMENT OF THE WORKS	Time Related £	p	PRELIMINARIES Fixed £	p
	Considerate Constructors Scheme				
72.	The Contractor shall allow in his prices or allow here for registering the site with the Considerate Constructors Scheme, PO Box 75, Ware, SG12 0YX (www.ccsscheme.org.uk)				
73.	The Contractor shall comply with the Code of Practice and the Terms of Reference for site managers published by the Scheme.				
74.	The Contractor shall allow in his prices or allow here for payment of any charges and tolls which may be incurred by him, or by his sub-contractors or suppliers, in respect of a road user charging scheme whether or not in force at the Base Date (Provisional Sums for work by sub-contractors include for amounts which may be tendered with regard to such charges, as described in Part A54 of these Preliminaries).				
	Notices and fees to statutory authorities etc.				
75.	The Contractor shall allow in his prices or allow here for payment of any other fees or charges (including any rates or taxes) to statutory authorities in respect of the Works. The amount of all such fees or charges shall be deemed to be included in the Contract Sum.				
	Site progress meetings				
76.	Site progress meetings will be held when required by the Engineer/Contract Administrator at monthly intervals. They shall be attended by representatives of the Contractor and the Consultants.				
	Programme				
77.	The Contractor shall within four weeks of appointment provide a construction programme in detail, in bar chart form, to the Engineer/Contract Administrator's satisfaction and provide copies of any supporting network analysis that he may produce. Critical paths shall be shown.				
78.	The construction programme shall be submitted to the Engineer/Contract Administrator for his comments and after these have been agreed and incorporated one copy of the final agreed programme shall be kept on site and all the necessary copies supplied for the use of the Engineer/Contract Administrator and other Consultants.				
	1/15				
	To Collection £		£		

		Time Related £	p	Fixed £	p
79.	The master programmes shall be based on, but amplify as necessary, the information contained in the design programme and construction programme in the Contractor’s Proposals. Such master programmes shall establish the sequence of all activities in the design and construction of the Works incorporating the requirements of all sub-contractors, statutory authorities and others engaged direct by the Employer whose work is dependent upon or has a bearing upon the progress of the Works including durations for ordering and delivery of major construction materials and durations for drawing preparation, manufacture and delivery of materials relating to sub-contractors and statutory authorities.				
80.	The Contractor shall, in consultation with the Architect/Contract Administrator, indicate on his master programme the latest dates by which he requires final information to enable procurement of sub-contracts or supplies for which a Provisional Sum has been included in the Employer's Requirements, and the latest dates by which he requires comments (if any) by the Architect/Contract Administrator on samples and mock-ups.				
81.	The master programmes shall be submitted to the Architect/Contract Administrator for his comments and after these have been agreed and incorporated one copy of each programme shall be kept on site and 2 copies provided to the Architect/Contract Administrator.				
82.	The Contractor shall monitor progress by "marking-up", at not more than monthly intervals, the site copy of the master programmes to indicate the actual progress of all activities shown thereon. If any circumstances arise which may affect the progress of the Works the Contractor shall put forward proposals or take other action as appropriate to minimise any delay and to recover any lost time.				
	<u>Reports, Schedules, etc.</u>				
83.	The Contractor shall prepare and submit the following information at least three working days before the site progress meeting:-				
	To Collection £		£		

		PRELIMINARIES Time Related £	p	PRELIMINARIES Fixed £	p
	(a) Progress Report which shall include a detailed report on the progress of procurement, warranties,[CDP design, planning conditions, building control requirements,] waste management and construction with a record of health & safety, weather and a record showing the number and description of tradesmen, labourers and supervisors, and the number, type and capacity of all plant, excluding hand tools, employed on the Works, the report shall include statements with regard to the discharge of his duties as Principal Contractor,				
	(b) Marked-up programme showing actual progress and 'time now' line,				
	(c) Updated construction programmes, for comparison with the master programme(s), where the Contractor elects to vary the sequence of work on site, and				
	(d) Information Release Schedule marked up to show progress of the information release				
	(e) Progress photographs.				
84.	One copy of each Report, Programme and Schedule prepared by the Contractor shall be kept on site and all the necessary copies for the use of the Engineer/Contract Administrator and other Consultants supplied to the Engineer/Contract Administrator.				
85.	Reports, Programmes and Schedules shall be prepared, monitored and maintained by suitably qualified persons who are to retain close contact with the site until contract completion.				
	<u>Cash flow forecast</u>				
86.	Not later than one month after commencement on site and thereafter at three-monthly intervals the Contractor shall prepare and provide to the Quantity Surveyor a cumulative monthly cash flow forecast for the duration of the Contract, showing separately Preliminaries and other works.				
	<u>Progress photographs</u>				
87.	The Contractor shall arrange and provide at the direction of the Project Manager, for 4 Nr. digital colour progress photographs to be taken at 4 weekly intervals. Properly labelled images are to be provided to the Project Manager prior to each site progress meeting.				

To Collection £ £

		Time Related £	p	PRELIMINARIES Fixed £	p
	Value Added Tax				
88.	The project involves elements of work which may qualify for relief from VAT at either a reduced rate or the zero-rate. Where applicable the client will issue a certificate claiming VAT relief and will provide any necessary substantiation. The Contractor shall ensure the correct VAT treatment is applied to all goods and services provided. The Employer may at his discretion appoint a tax consultant to ensure that the relevant legislation is complied with and the Contractor shall co-operate with him and provide all reasonable assistance and information.				
	Variations				
89.	The Contractor shall give to the Project Manager, within fourteen days of becoming aware, a written notice specifying all items which, in the opinion of the Contractor, constitute a Variation otherwise than pursuant to an instruction by the Project Manager/Contract Administrator.				
	Certificates and Payments				
90.	The Contractor shall provide to the Quantity Surveyor an Interim Application for payment in accordance with the Contract which shall include a detailed statement based on the priced document of the approximate value of the work executed and of unfixed materials stored on site.				
91.	At such time the Contractor shall disclose whether any materials or goods are subject to any reservation of title inconsistent with the unconditional passing of property to the Contractor. NHS Property Services does not currently envisage paying for materials stored off site. Any request for such must be submitted with tender returns for consideration as part of other tender review process.				
	Daywork vouchers				
92.	The Contractor shall inform the Engineer/Contract Administrator prior to the commencement of any works for which he intends to submit Daywork vouchers.				
93.	Before Daywork vouchers are delivered to the Engineer/Contract Administrator for verification, each voucher shall be referenced to the instruction under which the work is authorised and signed by the Contractor's person-in-charge.				

To Collection £ £

		Time Related £	p	PRELIMINARIES Fixed £	p
	A33 EMPLOYER'S REQUIREMENTS: QUALITY STANDARDS/CONTROL				
	Standards of materials and work				
94.	Where approval of products or materials is specified, the Contractor shall submit samples or other evidence of suitability and should not confirm orders or use materials until approval has been obtained. Approved samples shall be retained on site as directed by the Engineer/Contract Administrator for comparison with products and materials used in the Works and the Contractor shall remove them when no longer required by the Engineer/Contract Administrator.				
95.	The Contractor shall obtain approval of stated characteristics before proceeding with the appropriate work and remove samples which are not part of the finished works when no longer required by the Project Manager.				
96.	Where and to the extent that products, materials and work are specified to be approved or the Engineer/Contract Administrator instructs or requires that they are to be approved, the same must be supplied and executed to comply with all other requirements and, in respect of the stated or implied characteristics, either to the approval of the Engineer/Contract Administrator or to match a sample approved by the Engineer/Contract Administrator as a standard for the purpose.				
97.	Where and to the extent that materials, goods and workmanship are not fully specified they shall be suitable for the purposes of the Works, stated in or reasonably to be inferred from the Contract Documents and in accordance with good building practice, including the relevant provisions of current BS documents.				
98.	Materials where described to be obtained from a particular manufacturer, shall be used or fixed strictly in accordance with that manufacturer's printed instructions.				
99.	All materials used in the Works shall be new, unless otherwise specified, carefully selected and of the best merchantable quality. The Contractor shall supply written evidence of sources of supply of any materials to be used in the Works when requested by the Engineer/Contract Administrator.				
100.	Materials and work shall comply with the regulations of statutory authorities.				

To Collection £ £

	A33 EMPLOYER'S REQUIREMENTS: QUALITY STANDARDS/CONTROL	Time Related £	p	PRELIMINARIES Fixed £	p
101.	The Contractor warrants to the Employer that he will not use materials in the Works other than in accordance with the guidelines contained in the publication 'Good practice in the selection of construction materials' (British Council of Offices) current at the date of the Building Contract.				
	Product Guarantees				
102.	The Contractor shall obtain for the benefit of the Employer, product guarantees or the like where these are available from manufacturers, suppliers or sub-contractors.				
	Supervision and inspection				
103.	The Employer, the Engineer/Contract Administrator and their representatives shall at all reasonable times have access to the Works and to the workshops or other places of the Contractor where work is being prepared for this Contract. The Contractor shall by a term in the sub-contract secure a similar right of access to the workshops or other places of sub-contractors where work is being prepared for this Contract.				
104.	Inspection or any other action by the Engineer/Contract Administrator must not be taken as approval of samples, materials, goods or work unless the Engineer/Contract Administrator so confirms in writing.				
105.	The Contractor shall submit to the Engineer/Contract Administrator, at a reasonable time prior to Practical Completion, a programme for presenting sections of the Works for final inspection.				
	Cleaning the Works				
106.	Maintain a clean site during the course of the works.				
107.	Clean the Works internally and externally and hand over the whole of the Works in a clean condition to the approval of the Engineer/Contract Administrator.				
108.	At completion of the Works the Contractor is to leave the site free from all debris and rubbish.				
	To Collection £		£		

		Time Related £	p	PRELIMINARIES Fixed £	p
	A34 EMPLOYER'S REQUIREMENTS: SECURITY/SAFETY/PROTECTION				
	Safety, health and welfare				
109.	The Contractor shall comply with all current safety, health and welfare legislation, all current approved Codes of Practice issued by the Health and Safety Commission and all current guidance issued by the Health and Safety Executive.				
110.	The Contractor shall make specific site rules dealing with the wearing of head protection, consumption of drugs or alcohol, smoking and general housekeeping discipline on site.				
111.	All NHS Property Services projects are smoke free. This includes building and site areas and this shall apply to all Contractors working on the site.				
112.	The Contractor shall prepare an overall emergency plan for the site which shall include details of how fires will be dealt with throughout the construction phase.				
	Fire safety				
113.	The Contractor shall comply with the Code of Practice entitled Fire Prevention on Construction Sites published by the Fire Protection Association. He shall appoint a Site Fire Safety Co-ordinator.				
	Prevention of nuisance				
114.	The Contractor shall at all times take all reasonable steps to prevent any public or private nuisance (including, without limitation, any such nuisance caused by noxious fumes, noisy working operations or the deposit of any material or debris on the public highway) or other interference with the rights of any adjoining or neighbouring landowner, tenant or occupier or any statutory undertaker arising out of the carrying out of the Works and shall assist the Employer in defending any action or proceedings which may be instituted in relation thereto.				
115.	The Contractor shall be responsible for and shall indemnify the Employer from and against any and all expenses, liabilities, losses, claims and proceedings whatsoever resulting from any such nuisance or interference.				

To Collection £ £

	A34 EMPLOYER'S REQUIREMENTS: SECURITY/SAFETY/PROTECTION	Time Related £	p	PRELIMINARIES Fixed £	p
116.	The Contractor shall be deemed to have allowed in his prices for complying with the requirements of local authorities and the Health and Safety Executive with regard to control of noise, vibration, pollution and all other statutory obligations.				
117.	The Contractor's particular attention is drawn to the rights of restrictive action which exist by virtue of Sections 60, 61 and 68 of the Control of Pollution Act 1974 and he shall comply with any notices, conditions or limitations that may be imposed on him or on the Employer by any local authority under the said Act.				
118.	The Contractor shall make all applications and obtain all such consents as are required under the said Act.				
119.	Without prejudice to his duty to comply with the Control of Pollution Act 1974, the Contractor shall allow for complying with BS 5228 "Code of Practice for Noise and Vibration Control on Construction and Open Sites" including the recommendations on community relations, planning and supervision.				
120.	The Contractor shall inform the Project Manager/Contract Administrator in writing of any contravention of the said Acts or British Standard within three days of such. The Project Manager/Contract Administrator shall have power thereupon or upon the said contravention coming to his notice to issue such instructions as he may think fit to abate, avoid or halt any further contravention and the Contractor shall comply with such instructions at his own cost.				
121.	If the Contractor shall be guilty of any offence under the said Acts or British Standard, he shall himself pay all fines imposed by the court by which he has been convicted and shall not be entitled to be indemnified by the Employer in respect of any such fines.				
122.	The Contractor shall not be entitled to reimbursement by the Employer of any costs, damages, loss or expense to which the Contractor has been or may be put, which have been occasioned or caused by compliance with any such notice, consent, limit, condition or instruction as aforementioned. The Contractor shall not be entitled to any extension of time for delays caused by such compliance.				
123.	The use of explosives will not be permitted unless expressly agreed with the Project Manager/Contract Administrator.				

To Collection £ £

	A34 EMPLOYER'S REQUIREMENTS: SECURITY/SAFETY/PROTECTION	Time Related £	p	PRELIMINARIES Fixed £	p
124.	All plant, tools and vehicles shall be fitted with effective silencers of a type recommended by the manufacturers of the plant, tools and vehicles.				
	<u>Adjoining and adjacent property</u>				
125.	The Contractor's attention is drawn to the fact that adjoining and adjacent properties are in constant use by the Employer and adjoining owners and occupiers.				
126.	The Contractor is so to arrange and carry out the Works and take adequate precautions so as to cause no interference or interruption to the use of the adjoining and adjacent properties including roads, footpaths and other access thereto by the Employer, adjoining and adjacent owners and occupiers and the public and he shall conform to all instructions or directions given by the Architect/Contract Administrator in these matters.				
127.	Should any works be required on or from any adjoining property, the necessary permission from the Architect/Contract Administrator must first be obtained by the Contractor.				
128.	Should it be necessary for any plant, machinery or equipment to project or operate over adjoining or adjacent property or rights-of-way the Contractor shall obtain the permission of the adjoining or adjacent owner or occupier and obtain legal licence as necessary. The Contractor shall indemnify the Employer against any claim or action for damages arising from the use of any plant, machinery or equipment. The Contractor shall ensure that the security of the adjoining or adjacent properties shall not in any way be impaired due to any building operation executed under the Contract Works.				
129.	The Contractor should note that condition surveys have been carried out of the adjoining or adjacent properties and schedules of condition prepared and agreed between the Employer and the adjoining or adjacent owners/occupiers. Copies of these documents are available for inspection upon request.				
	<u>Maintenance of existing buildings, etc.</u>				
130.	Protect and uphold the existing structures on the site and the adjoining and/or adjacent structures to the site during the period of this Contract.				

To Collection £ £

	A34 EMPLOYER'S REQUIREMENTS: SECURITY/SAFETY/PROTECTION	Time Related £	p	PRELIMINARIES Fixed £	p
131.	The Contractor shall make good at his own expense any damage to the existing structures on the site and the adjoining or adjacent structures to the site caused by the carrying out of the Works.				
	Maintenance of roads, footpaths, etc.				
132.	Uphold and maintain public and private roads, bridges, footpaths, rights-of-way etc., and keep the approaches to the site and the roads adjoining the site clear of mud and other debris.				
133.	The Contractor shall make good at his own expense and to the satisfaction of the Engineer/Contract Administrator any damage to roads, bridges, footpaths, rights-of-way, etc., (including services, drains and sewers) caused by the carrying out of the Works.				
	Maintenance of services				
134.	Protect, uphold and maintain public and private water, gas and other mains or power services, drains and sewers and give all necessary notices to the statutory authorities.				
135.	The Contractor shall make good at his own expense and to the satisfaction of the Architect/Contract Administrator any damage to public and private water, gas and other mains or power services, drains and sewers caused by the carrying out of the Works, provided such damage is due to any negligence, omission or default of the Contractor (or his sub-contractors).				
	Asbestos based materials				
136.	The Contractor shall allow for cost and programme implications of the removal of all known asbestos within their tender.				
137.	If during the course of the Contract the Contractor uncovers asbestos based materials, he shall on no account allow his staff or workmen to disturb or remove such material but shall immediately give notice to the proper authorities as required by law. A firm specialising and experienced in such work to remove the asbestos from the site and dispose of it will be employed direct by the Employer.				
138.	The Contractor shall provide such attendance and facilities and take such precautions as are required by the specialist firm and by statute.				
	1/24				
	To Collection £		£		

	A34 EMPLOYER'S REQUIREMENTS: SECURITY/SAFETY/PROTECTION	Time Related £	Time Related p	PRELIMINARIES Fixed £	PRELIMINARIES Fixed p
139.	The cost of any additional removal of unknown asbestos will be reimbursed to the Contractor as an extra payment under the Contract.				
	<u>Security, etc.</u>				
140.	Safeguard the Works, materials and plant against damage, theft and illegal disposal of waste, including all necessary watching and lighting for the security of the Works and the protection of the public and the Employer.				
141.	The Contractor shall ensure that its site security arrangements are, for the purposes of site waste management, sufficient to prevent illegal disposal of waste from the site and shall indemnify the Employer from and against any and all expenses, liabilities, losses, claims and proceedings whatsoever resulting from any such illegal disposal of waste.				
	<u>Disposal of waste from site</u>				
142.	With regard to the disposal of waste from the site the Contractor shall comply with current legislation including the Environmental Protection Act 1990 and The Landfill Regulations 2002 as amended.				
143.	The Contractor shall notify the site in accordance with the Hazardous Waste Regulations.				
144.	The Contractor shall remove all rubbish and debris and keep the Works clean and tidy throughout the Contract period.				
	<u>Protection of work</u>				
145.	Provide protective casings and coverings as the highest standard of protection is required. Everything which is liable to damage shall be properly protected and cased up as necessary. Accept responsibility for any damage to the Works including the work of any sub-contractor or statutory undertaker and to the Works of others directly engaged by the Employer however caused and pay all costs and expenses in taking down and re-executing or otherwise making good or replacing to the satisfaction of the Engineer/Contract Administrator.				
146.	Anticipate the arrival of and protect all work from damage by adverse weather conditions. Accept responsibility for all work damaged or soiled by weather including the work of any Sub-Contractor and the work of others directly engaged by the Employer and pay all costs and expenses in taking down and re-executing or otherwise making good or replacing to the satisfaction of the Project Manager.				
	1/25				
	To Collection £		£		

		PRELIMINARIES	
	A34 EMPLOYER'S REQUIREMENTS: SECURITY/SAFETY/PROTECTION	Time Related	Fixed
		£ p	£ p
147.	The Contractor shall maintain, whenever practicable, continuity of working and productivity during adverse weather.		

To Collection £ £

A35 EMPLOYER'S REQUIREMENTS: SPECIFIC LIMITATIONS ON METHOD/SEQUENCE/TIMING/ USE OF SITE

Permission for Development

148. In carrying out the Works, the Contractor shall, insofar as is appropriate, conform to the Conditions set out in the Permission for Development dated ?? (Appendix ??). ARE THERE ANY PLANNING/BUILDING REGULATIONS CERTIFICATIONS REQUIRED FOR THIS PROJECT?

Sequence of construction

149. Except as otherwise described in the Contract Documents the sequence of construction will be at the Contractor's discretion.

Restrictions on Access

150. Refer the site working rules included as Appendix XXX.

151. The Contractor is to comply with traffic and other regulations with regard access to and from the site and is deemed to have allowed for the same in his prices.

Restrictions on use of the site

152. The Contractor is to confine his operations to the area of the site, or such other areas as the Project Manager/Contract Administrator may specifically direct.

153. The proposed siting of all spoil heaps, temporary roads, tracks, paths, etc., on the site shall be to the approval of the Engineer/Contract Administrator.

154. The Contractor shall not use the site for any purpose other than that of carrying out the Works.

Workpeople confined to site

155. The Contractor shall confine all workpeople (including Domestic Sub-Contractors' and statutory undertakers' workpeople) to the site of the Works.

Limitation of working hours

156. The Contractor shall be deemed to have allowed for strict observance of any restrictions on working hours (including delivery times) imposed by any statutory or other authority.

To Collection £ £

	A35 EMPLOYER'S REQUIREMENTS: SPECIFIC LIMITATIONS ON METHOD/SEQUENCE/TIMING/ USE OF SITE	Time Related £	p	PRELIMINARIES Fixed £	p
157.	Whenever it is proposed to work overtime in addition to normal working hours in the building trade, the Contractor must give the Engineer/Contract Administrator one week's notice, specifying times and types and locations of work to be undertaken. Any concealed work executed during overtime for which notice has not been given may be required to be opened up for inspection and reinstated at the Contractor's expense.				
158.	The Contractor is to note the following restrictions on working hours which shall be strictly observed and may only be varied by prior written permission of the Project Manager/Contract Administrator:- ASSUMED (a) No working on Sunday or Bank Holidays. (b) No working before 0800 hours on Monday to Saturday (inclusive). (c) No working after 1800 hours on Monday to Friday (inclusive). (d) No working after 1300 hours on each Saturday.				
159.	The following works will only be permitted to be carried out within the existing healthcare centre between the hours of 07.00 and 20.00 hours on Saturday and Sundays 1) Demolitions of block walls and the like (the use of percussion hammers will not be permitted at any time). 2) Forming openings in concrete, masonry walls and the like for doors, pipes etc 3) Cutting or drilling holes (including diamond sawing and diamond drilling) generally through concrete, masonry and the like 4) Removal of waste and debris to skips 5) Concrete pumping 6) Major distribution of bulk materials within the healthcare centre 7) Erection and dismantling of temporary dust screens and the like				

To Collection £ £

	Time Related		Fixed	
	£	p	£	p

Restricted deliveries

160. Provide for complying with any restrictions imposed by the Police with regard to plant deliveries or removals, material deliveries or waste removals outside the working hours listed above; including provision for any consequential extra costs, and obtaining the necessary permissions from the Local Authority and the Engineer/Contract Administrator.

Publicity

161. No information concerning this Contract may be released by the Contractor to anyone else, except to such persons and to such extent as may be necessary for the performance of the Contract, without the prior consent and approval of the Employer.

To Collection £ | | £ |

		Time Related £	Time Related p	PRELIMINARIES Fixed £	PRELIMINARIES Fixed p
	A36 EMPLOYER'S REQUIREMENTS: FACILITIES/TEMPORARY WORKS/SERVICES				
	Temporary buildings				
162.	Provide, maintain, (including taking down and re-erecting from time to time as necessary), clear away and make good the following temporary buildings for the duration of the Works on site:- To be confirmed.				
163.	The Contractor is to obtain the Project Manager's written approval to the proposed position of temporary buildings and storage areas for materials.				
	Temporary fences, hoardings, fans and gantries				
164.	Provide, maintain (including taking down and re-erecting from time to time as necessary), clear away and make good all temporary fencing, hoardings, fans, planked footways, guard-rails, gantries and the like as may be necessary for protecting the public and the adjoining or adjacent properties to the site and owners/ occupiers, for meeting the requirements of any local or other authority and for the proper execution of the Works.				
165.	The hoarding and access gates shall comprise of external quality plywood panels with skirtings and cappings and all necessary framing and supports and shall be painted on both sides with an oil-based paint in White. Signage board and statutory signage to be provided by the Contractor.				
166.	The Contractor shall be deemed to have allowed for maintaining the hoarding in good condition, for maintenance of lighting, for alterations and adaptations necessitated by the carrying out of the Works, for repainting from time to time and for taking down and clearing away when no longer required.				
	Temporary screens				
167.	Provide, maintain (including taking down and re-erecting from time to time as necessary), clear away and make good all necessary temporary screens, etc., for the proper execution of the Works.				
	Name board				
168.	Provide, maintain and clear away a name board to display the title of this Contract and the names of the Employer, the Consultants and the Contractor (including his sub-contractors and suppliers). No other advertisements or trade signs will be permitted on the site.				

To Collection £ £

		PRELIMINARIES			
		Time Related		Fixed	
		£	p	£	p
169.	The details and position of the name board shall be agreed with the Engineer/Contract Administrator.				
	Supervision and inspection				
170.	The Contractor shall provide facilities and necessary equipment for inspection of the Works by the Consultants and Clerk of Works at all times prior to the issue of the "Certificate of Completion of Making Good Defects".				
	Safety, health and welfare				
171.	The Contractor shall provide protective clothing including safety helmets to BS EN 397 for use by the Engineer/Contract Administrator and the Employer and their representatives whilst on site.				
172.	The Contractor shall provide facilities and necessary equipment for inspection of the Works by the Consultants and Clerk of Works.				
173.	The Contractor shall provide suitable safety, health and welfare measures and amenities to comply with the current Statutory Regulations.				
	Temperature and humidity				
174.	The Contractor shall maintain an even temperature and humidity in the building and is to submit his scheme for so doing for the approval of the Project Manager. All drying shrinkage, warping, splitting etc., shall be prevented by such a scheme and the Contractor will be responsible for making good any damage by his failing to comply with this requirement.				
175.	The Contractor will not be permitted to use the permanent heating/air conditioning system for maintaining the temperature and humidity of the Works.				
176.	The Contractor shall allow for all costs in connection with drying and controlling the humidity of the Works.				
	Lifts installation				
177.	The Contractor will not be permitted to use the permanent lifts installation for his own use.				

To Collection £ £

	Time Related £	p	Fixed £	p

Lighting and power for the Works

178. Provide adequate lighting to hoardings, etc.

179. The Contractor shall provide all necessary electricity, gas, oil, medical gases, lubricants and chemicals etc., required for the execution of the works including testing and commissioning. The Contractor shall allow for paying all costs of connections, consumption and for making temporary arrangements for storing and distribution about the site or elsewhere as applicable and clearing away on completion. The use of such fuels shall be in accordance with the Contractor's Environmental Policies on energy conservation.

180. The Contractor will, on application, be allowed to connect to the Healthcare Centre's own electricity, gas, oil and medical gases supplies for the execution of the works including testing and commissioning. Provided sufficient capacity exists in the Healthcare Centre's supplies to meet the Contractors maximum demand. Where the Contractor takes supplies from the Healthcare Centre he shall allow, in addition to the above requirements, for the installation of all necessary meters including flow meters on medium temperature water and chilled water pipes where appropriate and pay the Healthcare Centre for the cost of all supplies consumed.

181. Where electricity, gas, oil, or medical gases have been supplied from the Healthcare Centre's supplies, the Healthcare Centre will issue invoices to the Contractor for the supplies consumed on a quarterly basis. The Contractor will be required to pay these invoices direct to the Healthcare Centre within 28 days of the date of the invoice. The electricity, gas, oil and medical gases will be charged at the rates prevailing at the time of consumption.

182. The Healthcare Centre will provide specifications for the metres to be provided and will require certificates confirming calibration prior to installations.

183. Internal surfaces during finishing work and for inspection are to be lit to an illumination level not less than that provided by the permanent installation.

To Collection £ | £

		PRELIMINARIES Time Related £	p	Fixed £	p
184.	The Contractor will not be permitted to use the permanent lighting and power installation for his own use other than for testing and commissioning of services installations.				
	Water for the Works				
185.	Where water has been supplied from the Healthcare Centre's suppliers, the Healthcare Centre will issue invoices to the contractor for water consumed on a quarterly basis. The Contractor will be required to pay these invoices direct to the Healthcare Centre within 28 days of the date of the invoice. The water consumed will be charged for at the rate prevailing at the time of consumption.				
186.	Where medium temperature hot water or chilled water is supplied for the testing and commissioning of the works the Contractor will be charged at an appropriate rate based upon the flow meter measurements. This rate will be equivalent to the amount of electricity, gas or oil used in the generation of the hot or chilled water. The cost of which will be added to the quarterly invoices.				
187.	The Healthcare Centre will provide a specification for the meters to be provided and will require certificates confirming calibration prior to installation.				
	Temporary works generally				
188.	The Contractor shall allow for all necessary temporary works, maintaining, adapting, clearing away and making good.				
189.	Calculations and details in connection with temporary works shall be submitted to the Architect/Contract Administrator for comment and the Contractor shall allow reasonable time from the date of receipt by the Architect/Contract Administrator of such details for this.				

To Collection £ £

	Time Related		PRELIMINARIES Fixed	
	£	p	£	p

A37 EMPLOYER'S REQUIREMENTS: OPERATION/MAINTENANCE OF THE FINISHED BUILDING

Generally

190. The Principal Contractor shall collate and provide information to the Principal Designer for inclusion in the Health and Safety File.

191. The information for the Health and Safety File is to be available in sufficient time to enable the Principal Designer to compile the document for handing to the Employer at Practical Completion.

192. The information for the Health and Safety File is to be available in sufficient time to enable the CDM Co-ordinator to compile the document for handing to the Employer at Practical Completion.

193. The Contractor is to provide 3 hard copies and 1 electronic copy of the Health and Safety file which is to include the Building Regulations Approval Certificates, fire officer certificates and valid certificates from statutory undertakers confirming that the various installations have been tested and meet their requirements.

194. Completion of the works will not be certified until all such relevant information is included to the satisfaction of the Principal Designer and Project Manager.

Building Manual

195. The Contractor shall provide, prior to practical completion, Contractor’s Design Documents showing or describing the Contractor’s Designed Portion as built and concerning its maintenance and operation.

Completion and making good defects generally

196. Completion and handover processes are set out in Appendix XXXX. The Contractor shall have allowed all costs associated with complying with such.

To Collection £ | £

		PRELIMINARIES Time Related £	p	PRELIMINARIES Fixed £	p
	A40-A44 CONTRACTORS GENERAL COST ITEMS				
	Generally				
197.	The Employer's Preliminaries/General Conditions requirements are set out in the preceding Parts. The Contractor is deemed to have allowed in Parts A40 to A44 (which follow) for his general costs which are not priced elsewhere.				
198.	The headings and lists of items are given for the Contractor's convenience of pricing and are not intended to be exhaustive.				

To Collection £ £

		PRELIMINARIES	
	A40 CONTRACTOR'S GENERAL COST ITEMS: MANAGEMENT AND STAFF	Time Related £ p	Fixed £ p
	A40 CONTRACTOR'S GENERAL COST ITEMS: MANAGEMENT AND STAFF		
	Management and staff		
199.	Management and staff (including management, trades supervision, engineering, programming and production, quantity surveying support staff and the like).		

To Collection £ £

		Time Related		Fixed	
		£	p	£	p

A41 CONTRACTOR'S GENERAL COST ITEMS: SITE ACCOMMODATION

Generally: For details of site accommodation required or made available by the Employer see Part A36.

Site accommodation

200. Site accommodation (including offices, laboratories, cabins, stores, compounds, canteens, sanitary facilities and the like).

To Collection £ | £

	A42 CONTRACTOR'S GENERAL COST ITEMS: SERVICES AND FACILITIES	Time Related £	p	PRELIMINARIES Fixed £	p
	A42 CONTRACTOR'S GENERAL COST ITEMS: SERVICES AND FACILITIES				
	Generally: For details of services and facilities required or made available by the Employer see Part A36 or as noted below.				
	Services and facilities				
201.	Power				
202.	Lighting				
203.	Fuels				
204.	Water				
205.	Telephones and fax				
206.	Administration				
207.	Safety, health and welfare				
208.	Storage of materials				
209.	Rubbish disposal (see A34)				
210.	Cleaning (see A33)				
211.	Drying out				
212.	Protection of work in all sections (see A34)				
213.	Security (see A34)				
214.	Maintain public and private roads				
215.	Small plant and tools				
216.	General attendance on sub-contractors and statutory undertakers which shall be deemed to include the use of the Contractor's temporary roads, pavings and paths, standing scaffolding, standing power operated hoisting plant, the provision of temporary lighting and water supplies, clearing away rubbish, provision of space for the sub-contractor's own offices and for the storage of his plant and materials, the use of mess rooms, sanitary accommodation and welfare facilities.				
217.	Additional services and facilities: The Contractor is to insert below further cost items as may be required.				
	1/38				
	To Collection £		£		

		Time Related		PRELIMINARIES Fixed	
		£	p	£	p
	A43 CONTRACTOR'S GENERAL COST ITEMS: MECHANICAL PLANT				
	Generally: For details of restrictions on mechanical plant see Part A34 and for details of mechanical plant made available by the Employer see Part A36.				
	Mechanical plant				
218.	Cranes				
219.	Hoists				
220.	Personnel transport				
221.	Transport				
222.	Earthmoving plant				
223.	Concrete plant				
224.	Piling plant				
225.	Paving and surfacing plant				
226.	Additional mechanical plant items: The Contractor is to insert below further cost items as may be required:-				
	To Collection £		£		

		Time Related £	p	PRELIMINARIES Fixed £	p
	<u>A44 CONTRACTOR'S GENERAL COST ITEMS: TEMPORARY WORKS</u>				
	Generally: For details of temporary works required or made available by the Employer see Part A36.				
	<u>Temporary works</u>				
227.	Temporary roads				
228.	Temporary walkways				
229.	Access scaffolding				
230.	Support scaffolding and propping				
231.	Hoardings, fans, fencing, etc.				
232.	Hardstanding				
233.	Traffic regulations				
234.	Additional temporary work items: The Contractor is to insert further cost items as may be required:-				
	To Collection £		£		

		Time Related £	p	PRELIMINARIES Fixed £	p

A50 WORK/PRODUCTS BY/ON BEHALF OF THE EMPLOYER

Persons employed direct

235. The following works are not included in this Contract and will be executed by the Employer or persons employed or engaged by the Employer contemporaneously with this Contract:-

- To be confirmed.

Materials provided by the Employer

236. The following materials will be provided by or on behalf of the Employer:-

- To be confirmed - ASSUMED NONE

To Collection £ £

		Time Related £	Time Related p	PRELIMINARIES Fixed £	PRELIMINARIES Fixed p
	A53 WORK BY STATUTORY AUTHORITIES				
	Work to be executed by local authorities and statutory undertakers				
237.	Provisional Sums have been included in Section XXXX for works to be executed by local authorities and statutory undertakers.				
238.	Provisional Sums for work by statutory authorities do not include for the cost of Contractor's Preliminaries and the Contractor will be deemed to have ascertained the nature and scope of work etc., to be carried out by the statutory authorities and to have made due allowance in programming, planning and pricing these Preliminaries. Provision is made after each Provisional Sum for pricing profit and special attendance.				
239.	The Contractor is to provide statutory authorities with all necessary dimensions and other information to enable their work to be correctly executed.				
240.	Statutory authorities will be required to provide their own office and storage accommodation and pay any rates legally demandable.				

To Collection £ £

	Time Related		PRELIMINARIES Fixed	
	£	p	£	p

A54 PROVISIONAL WORK

Provisional Sums generally

241. For Provisional Sums generally - see Section XXXX.

242. Where provisional sums are given for Defined Work the Contractor will be deemed to have made due allowance in programming, planning and pricing Preliminaries.

243. Provision is made after each Provisional Sum for tenderers to price for profit and special attendance. Sums included by the Contractor for attendance will only be adjusted for a significant change in the scope of the work.

244. Sub-contractors will be required to provide their own office and storage accommodation and pay any rates legally demandable.

245. Provisional Sums do not include for the cost of any bond, guarantee or the like which the Contractor may require to be provided by a sub-contractor. For the avoidance of doubt the Contractor is deemed to have made any necessary allowance in his prices.

246. Provisional Sums for work by sub-contractors include for amounts which may be tendered by a sub-contractor with regard to payment of charges or tolls in respect of a road user charging scheme.

To Collection £ £

		Time Related £	p	PRELIMINARIES Fixed £	p

A55 DAYWORK

Provisional Sums for daywork

247. For Provisional Sums for daywork - See Section XXXX.

To Collection £ £

COLLECTION

			PRELIMINARIES	
		Time Related		Fixed
		£ p	£	p
	COLLECTION			
	Page 1/1			
	Page 1/2			
	Page 1/3			
	Page 1/4			
	Page 1/5			
	Page 1/6			
	Page 1/7			
	Page 1/8			
	Page 1/9			
	Page 1/10			
	Page 1/11			
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	Page 1/21			
	Page 1/22			
	Page 1/23			
	Page 1/24			
	Page 1/25			
	Page 1/26			
1/45	Continued £	£		

COLLECTION

		PRELIMINARIES			
		Time Related		Fixed	
		£	p	£	p
	Continued:				
	Page 1/27				
	Page 1/28				
	Page 1/29				
	Page 1/30				
	Page 1/31				
	Page 1/32				
	Page 1/33				
	Page 1/34				
	Page 1/35				
	Page 1/36				
	Page 1/37				
	Page 1/38				
	Page 1/39				
	Page 1/40				
	Page 1/41				
	Page 1/42				
	Page 1/43				
	Page 1/44				
	Page 1/45				
1/46	Continued £		£		

COLLECTION		Time Related £	p	PRELIMINARIES Fixed £	p
	Continued:				
	Page 1/46				
	Page 1/47				
	Page 1/48				
	Page 1/49				
	Time Related £				
	Fixed		£		
	Add Total of Time Related Carried Down from First Column Above		£		
SECTION NR. 1 - PRELIMINARIES					
	To General Summary		£		

APPENDIX D
Matrix of Equipment Provision and Responsibility

5 FIXTURES FURNITURE AND EQUIPMENT

Ref	Description	Column A		Column B		Column C		Column D	
		By Developer/Contractor		By NHS Property Services		By CCG (or other)		By occupying GP practice	
		Supply and Fix (Group 1) or and Fix Only where stated (Group 2)		Supply Only (Group 2) or Supply and Install/Position (Groups 3 and 4)		Supply Only (Group 2) or Supply and Install/Position (Groups 3 and 4)		Supply Only (Group 2) or Supply and Install/Position (Groups 3 and 4)	
		A	Notes	B	Notes	C	Notes	C	Notes
1	Telephone system/console	No		No		No		Yes	
2	Telephone/data cabling category 5/6 including patch panel	Yes		No		No		No	
3	Automatic /powered entrance door(s) double glazed sliding	Yes		No		No		No	
4	Security fencing if essential	Yes		No		No		No	
5	Security shutters to ground floor if essential	Yes		No		No		No	
6	Window Blinds	Yes		No		No		No	
7	Examination lamps	Yes	Fixed lamps (supply and fix)	No		No		Yes	Mobile lamps
8	Wiring to examination lamps	Yes		No		No		No	
9	Notice boards	Yes		No		No		No	
10	Internal directional signs	Yes		No		No		No	
11	Internal doctors name signs	Yes		No		No		No	
12	Main external surgery sign at car park entrance or on building	Yes		No		No		No	
13	Illuminated sign fixed to building	Yes		No		No		No	
14	External security lighting if essential	Yes		No		No		No	
15	Intruder alarm system with zoning capabilities	Yes		No		No		No	
16	'Redcare' provisions	No		No		No		Yes	
17	Separate independent panic button system + CDC alarm	Yes		No		No		No	
18	Patient call system , visual + audible	Yes		No		No		No	
19	Roller shutter between reception and records	Yes		No		No		No	
20	Curtain tracks around doctors couches	Yes		No		No		No	
21	Curtains around doctors couches	No	See tracks item above	No		No		Yes	See tracks item above
22	Records storage	No		No		No		Yes	
23	Doctors couches	No		No		No		Yes	
24	Waiting room loose seating	No		No		No		Yes	
25	Waiting room fixed seating	Yes		No		No		No	
26	Fire proof letter box if essential	Yes		No		No		No	
27	Fire fighting equipment to meet fire officers requirements	No		No		No		Yes	
28	Security Locks to external doors	Yes		No		No		No	
29	Restrictions stays to all ground floor windows	Yes		No		No		No	
30	Lockable windows	Yes		No		No		No	
31	Reception counter to meet security requirements and DDA	Yes		No		No		No	
32	Panic button to disabled wc	Yes		No		No		No	
33	Soft landscaping	Yes		No		No		No	
34	Shelving to consultant rooms	Yes		No		No		No	
35	Low surface temperature radiators in all public areas	Yes		No		No		No	

Ref	Description	Column A		Column B		Column C		Column D	
		By Developer/Contractor		By NHS Property Services		By CCG (or other)		By occupying GP practice	
		Supply and Fix (Group 1) or and Fix Only where stated (Group 2)		Supply Only (Group 2) or Supply and Install/Position (Groups 3 and 4)		Supply Only (Group 2) or Supply and Install/Position (Groups 3 and 4)		Supply Only (Group 2) or Supply and Install/Position (Groups 3 and 4)	
		A	Notes	B	Notes	C	Notes	C	Notes
36	Grilles to first floor windows if essential	Yes		No		No		No	
37	Work surfaces within reception area as required by staff	Yes		No		No		No	
38	Re-location costs	No		No		No		Yes	
39	Baby change provisions	Yes		No		No		No	
40	General shelving	Yes		No		No		No	
41	Electric instant shower / cubicle	Yes		No		No		No	
42	Simple security gate to car park if essential	Yes		No		No		No	
43	Lockable swing barrier to car park with padlock	Yes		No		No		No	
44	External lighting to car park	Yes		No		No		No	
45	Car park marking	Yes		No		No		No	
46	Public telephone in surgery	Yes	Fix only and wiring	No		No		Yes	Supply
47	TV/Video in reception	Yes	Fix only and wiring	No		No		Yes	Supply
48	Wiring to public telephone	Yes		No		No		Yes	Connection charges
49	Wiring to TV/Video	Yes		No		No		No	
50	Childs play area equipment	No		No		No		Yes	
51	Statutory signage	Yes		No		No		No	
52	Close circuit television/wiring (external & internal) if essential	Yes		No		No		No	
53	Toilet roll holders	Yes		No		No		No	
54	Paper towel holders	Yes		No		No		No	
55	Fitted furniture to consulting rooms incl locks to cupboards	Yes		No		No		No	
56	Comfort cooling / air conditioning	Yes		No		No		No	
57	Ceiling fixed examination lamp for treatment rooms	Yes		No		No		No	
58	Computer installation / networking	Yes		No		No		No	
59	Unfixed furniture generally	No		No		No		Yes	
60	Essential supply and extract system to internal rooms	Yes		No		No		No	
61	Doctors professional fees	Yes	If required for design	No		No		Yes	Own advice costs
62	Drs solicitors/accountants cost	Yes	If required for design	No		No		Yes	Own advice costs
63	Clinical handwash basin in CRs, Treatment room, clean & dirty utility and examination room and slop hopper to DU Treatment & dirty utility rooms to have an additional clinical sink and drainer	Yes		No		No		No	
64	Elbow lever taps to clinical hand wash basins	Yes		No		No		No	
65	Security glazing windows (i.e laminate where essential)	Yes		No		No		No	
66	Grilles to protect staff behind reception counter	Yes		No		No		No	
67	Security provisions to rainwater downpipes	Yes		No		No		No	
68	Electric hand driers to WCs	Yes		No		No		No	
69	Electric independent water heater / lphw system to consulting rooms	Yes		No		No		No	
70	Letter boxes to consulting rooms	Yes		No		No		No	
71	Bicycle locking facility	Yes		No		No		No	
72	Coloured surface or paint to differentiate between patient and doctors parking plus signed DDA spaces	Yes		No		No		No	
73	Induction loop for the hard of hearing	Yes		No		No		No	

Ref	Description	Column A		Column B		Column C		Column D	
		By Developer/Contractor		By NHS Property Services		By CCG (or other)		By occupying GP practice	
		Supply and Fix (Group 1) or and Fix Only where stated (Group 2)		Supply Only (Group 2) or Supply and Install/Position (Groups 3 and 4)		Supply Only (Group 2) or Supply and Install/Position (Groups 3 and 4)		Supply Only (Group 2) or Supply and Install/Position (Groups 3 and 4)	
		A	Notes	B	Notes	C	Notes	C	Notes
74	Lockable cupboard in dispensary	Yes		No		No		No	
75	Fire alarm system	Yes		No		No		No	
76	Lockable posts to car park entrance	Yes		No		No		No	
77	Lockable bin containment	Yes		No		No		No	
78	External shed/tool store within rear secure area	Yes		No		No		No	
79	External tap for gardening	Yes		No		No		No	
80	Internal DDA compliant digital or card proximity reader security door locks	Yes		No		No		No	
81	Mirrors to WCs	Yes		No		No		No	
82	Switch to operate front electric doors from reception	Yes		No		No		No	
83	Intercom system connected to the front door and reception	Yes		No		No		No	
84	Front door bell	Yes		No		No		No	
85	Carpet floor finish plus non-slip vinyl where appropriate with coved skirtings	Yes		No		No		No	
86	Safety floor to play area	Yes		No		No		No	
87	Measures within mechanical installation to protect against legionnaires	Yes		No		No		No	
88	Lightning protection	Yes		No		No		No	
89	Water standby holding tanks	Yes		No		No		No	
90	Blackout blinds	Yes		No		No		No	
91	Work in connection with the section 106 agreement	Yes		No		No		No	
92	Medical equipment i.e defibrillators etc	Yes	Wiring if required	No		No		Yes	
93	White goods i.e. microwaves, fridges, cookers etc	Yes		No		No		No	
94	Pigeon holes for records	Yes		No		No		No	
95	Office equipment	No		No		No		Yes	
96	Retaining walls	Yes		No		No		No	
97	Filling basements/cellars etc	Yes		No		No		No	
98	Demolition of existing buildings	Yes		No		No		No	
99	Removal of asbestos	Yes		No		No		No	
100	Removal of contaminated spoil to licensed tip	Yes		No		No		No	
101	Abnormal foundations e.g. piling	Yes		No		No		No	
102	Special planning requirements	Yes		No		No		No	
103	Soap dispensers and the like	Yes	Fix only	No		No		Yes	Supply only
104	Alcohol rub dispensers and the like	Yes	Fix only	No		No		Yes	Supply only
105	Clocks	Yes		No		No		No	

APPENDIX E
Those consulted to date and comments now incorporated

THOSE CONSULTED TO DATE AND COMMENTS NOW INCORPORATED

NHSPS

Junior Moka – Partner - Property Development
Adrian Powell - Director of Investment and Development Management
Mark Lloyd - Principal Construction Manager
Christopher Newns - Development Management Consultant
Jim Goatley - Head of Technical Services
Sarah Gill - Construction Support Lead
Bina Featherstone - Head of Evaluation and Analytics
Sarah Delaney - National Health & Safety Lead
Dan Hutley - National Health & Safety Lead
Simon Knott - Principal Operations Compliance Manager
Paul Jones - Principal Construction Manager
Peter Todd - Principal Construction Manager
Iain Smith – Head of Construction
Charles Siddons – Operations Director
Tim Godfrey - National Health & Safety Lead
Kevin Maginnis Principal Technical Services Manager (V12 MEP update)
Katie Proctor - National Health & Safety Lead
Esther Ukala - Environmental Compliance Manager
Nick McDonald Smith - Principal Energy & Environment Programme Manager

NHS England

Fiona Daly – NHSI - National Sustainability and EFM Workforce Lead
Joanne Dolby – NHSI - Estates and Facilities Management: Senior Policy Strategy Lead – Capital/Commercial
Michael Bellas – NHSI – Policy Lead

Department of Health

Adrian Smallwood
Claire Hewitt - Commercial Strategy Senior Manager

NHS ENGLAND

Phil Smith - Senior Estates Advisor
Robert Gregory - Head of Project Appraisal Unit
Jo Fox - NHS England - Senior Programme Lead - ETTF
Jon Murphy - Senior Finance Lead
John McLoughlin - Senior Finance Lead - Financial Accounting and Services

VALUATION OFFICE AGENCY

Simon C Gomersall
Andy J Baxendale

COMMUNITY HEALTH PARTNERSHIPS

Simon Waters - Programme Manager Developments
Eugene Prinsloo - Developments Director

EXTERNAL CONSULTANTS

Architecture
IBI Group - Graham Harris - Studio Principal

MEP Engineering – Sections redrafted by NHSPS generally

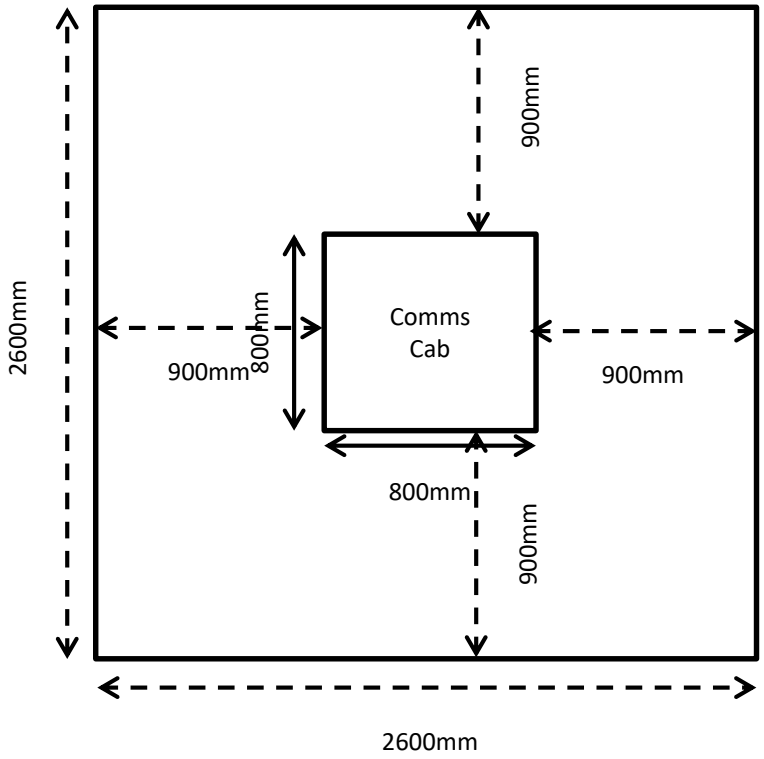
Structural Engineering
CRE8 Structures – Jason Guneratne

Costs and sustainability
Bob Heald – G&T
Joe Gul – G&T
Richard Francis – G&T

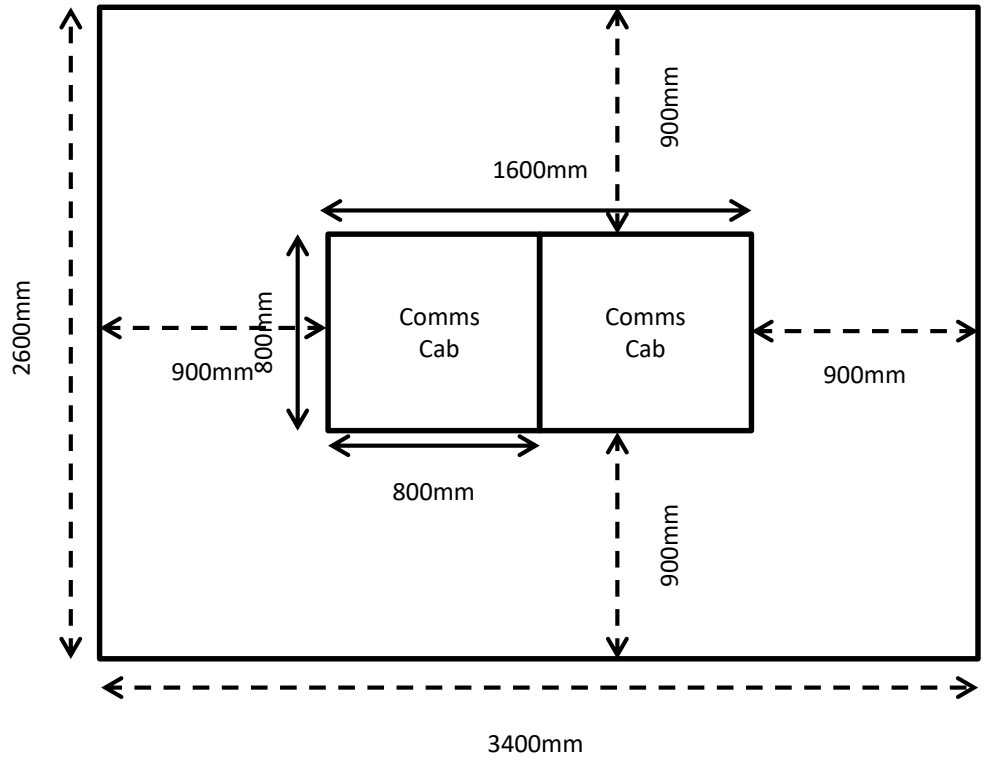
Contractor/Developer
Kier Construction

APPENDIX F
Comms Room Layout Examples

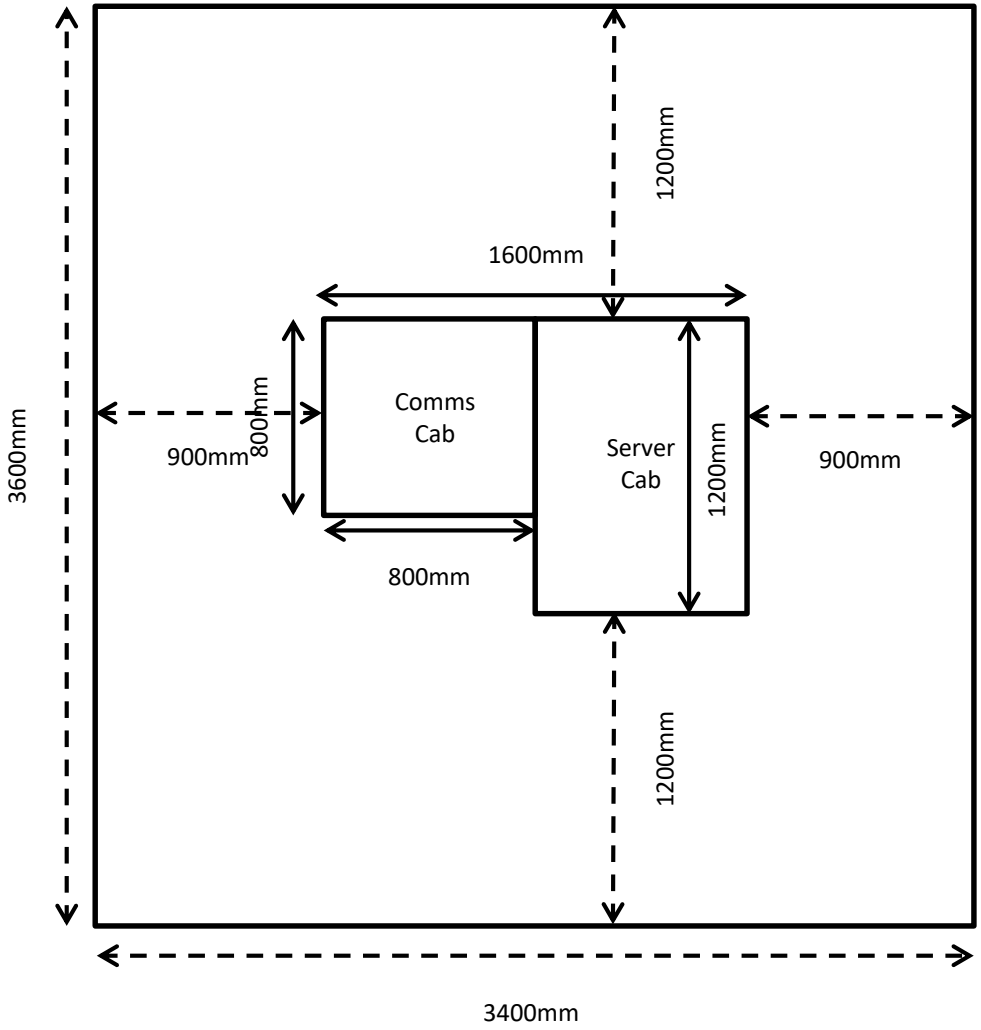
Comms Room Layout Example with 1 Comms Cab
min. 2600mm x 2600mm therefore 7m2



Comms Room Layout Example with 2 Comms Cabs
min. 2600mm x 3400mm therefore 9m2



Comms Room Layout Example with 1 Comms Cab & 1 Server Cab min. 3600mm x 3400mm therefore 12.5m2



APPENDIX G
Open / Bookable Space Requirements

NHS PROPERTY SERVICES

SESSIONAL/OPEN SPACE

Room	
Office	NHS Open Space office space provides non-clinical space in which to undertake administative tasks. Office rooms are bookable for a minimum of one hour.
Meeting Room	Cost effective and flexible meetings rooms for your organisation. Facilities and room capacity varies so please check before booking. Meeting rooms are bookable for a minimum of one hour.
Group Room	Group rooms are ideal for baby groups, group therapy or fitness classes, providing a variety of spaces to suit your needs. Please check the capacity of the room before booking. Group rooms are bookable for a minimum of one hour.
Counselling / Interview Room	NHS Open Space counselling and interview rooms provide informal, non-clinical environments. Counselling and interview rooms are bookable for a minimum of one hour.
Consulting Room	Our consulting rooms provide healthcare professionals with clinical space to undertake a variety of consultations. Consulting rooms are bookable on a sessional basis.
Examination Room	Examination rooms provide an infection controlled environment to undertake a variety of examinsations. There are typically two examination room types that provide either single side access or all-round access to couches. Examination rooms are bookable on a sessional basis.
Treatment Room	Treatment rooms offer a flexible, multi-use clinical room complete with air change facilities. Treatment rooms are bookable on a sessional basis.
Minor Operations Suite	Minor Operation Suites provide preparation, treatment and recovery facilities. Facilities vary from site to site. Minor Operation Suites are bookable on a sessional basis.

NHS PROPERTY SERVICES

SESSIONAL/OPEN SPACE - ROOM REQUIREMENTS

Clinical Rooms

Minor Operation Suite	
[Insert level, i.e. Ground, First] floor	M
Air changing	M
Examination lamp	M
Sink and tap	M
Vinyl flooring	M
Panic alarm	M
Bin	M
Hand gel dispenser	M
Soap dispenser	M
Paper towel dispenser	M
Linked rooms [detail as applicable]	O
WiFi	O

Treatment Room	
[Insert level, i.e. Ground, First] floor	M
Air changing	M
Couch: all round access to couch or similar	M
Consultant chair	M
Desk	M
Patient chairs x2	M
Curtain rail	M
Examination lamp	M
Sink and tap	M
Vinyl flooring	M
Bin	M
Hand gel dispenser	M
Soap dispenser	M
Paper towel dispenser	M
Panic alarm	O
Disabled access	O
WiFi	O

Examination Room	
[Insert level, i.e. Ground, First] floor	M
Couch: single-sided access or similar OR Couch: all round access or similar [delete as applicable]	M
Consultant chair	M
Desk	M
Patient chairs x2	M
Curtain rail	M
Examination lamp	M
Sink and tap	M
Vinyl flooring	M
Bin	M
Hand gel dispenser	M
Soap dispenser	M
Paper towel dispenser	M
Panic alarm	O
Disabled access	O
WiFi	O

Consulting Room	
[Insert level, i.e. Ground, First] floor	M
Consultants chair	M
Desk	M
Patient chairs x2	M
Sink and tap	M
Vinyl flooring	M
Bin	M
Hand gel dispenser	M
Soap dispenser	M
Paper towel dispenser	M
Panic alarm	O
Disabled access	O
WiFi	O

Non-Clinical Rooms

Counselling Room	
[Insert level, i.e. Ground, First] floor	M
Room capacity: [insert no. i.e. 4]	M
Chairs / sofa x[insert no. i.e. 2]	M
Table [if more than one insert: x(no. i.e. 2)]	M
Panic alarm	M
Carpet/Vinyl flooring [delete as appropriate]	M
Clock	M
Bin	M
Disabled access	O
WiFi	O

Group Room	
[Insert level, i.e. Ground, First] floor	M
Room capacity: [insert no. i.e. 4]	M
Chairs x[insert no. i.e. 2]	M
Table [if more than one insert: x(no. i.e.	M
Sink & tap	M
Vinyl flooring	M
Bin	M
Paper towel dispenser	M
Hand gel	M
Soap dispenser	M
Disabled access	O
WiFi	O

Meeting Room	
[Insert level, i.e. Ground, First] floor	M
Room capacity: [insert no. i.e. 4]	M
Chairs x(suitable for room capacity)	M
Table [if more than one insert: x(no. i.e. 2)]	M
Projector / TV / Flip Chart [delete as appropriate]	O
WiFi	O
Carpet/Vinyl flooring [delete as appropriate]	M
Bin	M
Multiple layouts (require prior notice)	O
Refreshments (available on request)	O
Disabled access	O

Office	
[Insert level, i.e. Ground, First] floor	M
Room capacity: [insert no. i.e. 4]	M
Desk [if more than one insert: x(no. i.e. 2)]	M
Chairs [if more than one insert: x(no. i.e. 2)]	M
WiFi	O
Carpet/Vinyl flooring [delete as appropriate]	M
Bin	M
Disabled access	O

M = Mandatory
O = Optional

Open space doc.xlsx

APPENDIX H
Shell and Core Outline Specification

CONTENTS

1. DOCUMENT ISSUE HISTORY

VERSION NR	MAIN ISSUE DESCRIPTION	DATE	BY WHOM
1	Initial document	28/021/20	Gardiner & Theobald LLP

2. DOCUMENT REVISION RECORD

VERSION NR	MAIN ISSUE DESCRIPTION	DATE	BY WHOM

3. INTRODUCTION

3.1. Scope

.1 This outline Specification describes the Shell and Core for schemes undertaken by a third party developer but where NHSPS will enter into a Head Lease.

.2 This document describes the general level and quality of design and specification for the development.

.3 NHSPS shall be responsible for carrying out the Interior fit-out works to the respective areas of the Centre.

3.2. Layout

.1 All space planning will be done by NHSPS's design team. The area for the health is therefore to be left as open as possible and shall not be compromised by structural columns unless agreed otherwise with NHSPS in writing.

3.3. General Description

.1 The health facility is likely to be a mixed use building comprising of primary care services (GP practices), outpatients, therapies, diagnostics and a number of services focussed on wellbeing.

3.4. General Description Specification, Workmanship and Materials

.1 The works shall be designed in accordance with statutes, by-laws and regulations relevant at the time of design and construction or as amended by agreement with the relevant statutory bodies. For health buildings delivered by the NHS, the published Department of Health's Health Technical Memorandum and Health Building Notes must be acknowledged and adhered to so the developer shall be cognisant of these conditions so that the subsequent NHS facility is not compromised in any way by the shell and core provided. The latest documents shall apply at the time of appointment.

.2 The building shall be assessed under a single Building Regulations Part L 2013 calculation (and as required under any superseding legislation) which shall then form part of the fit out requirements of each part of the building.

3.5. Environmental Performance

.1 NHSPS would like to see a new approach to sustainability, focussing on development of efficient, ultra-low energy and flexible facilities. Construction and operation practices should help NHSPS achieve buildings that are good for the environment and the people within them. What NHSPS builds and uses should reflect its mission of providing the best health-promoting environments while using natural resources efficiently and effectively.

.2 No one certification or framework is likely to satisfy the numerous needs of NHSPS, but for simplicity and continuity we would expect to achieve performance consistent with BREEAM "Excellent" (new build) and "Very Good" (existing build), while embodying new best practices contained in frameworks such as the WELL Building Standard. Our overall goal is not to attain a design

certification level but rather to promote and maintain efficient, flexible, ultra-low energy and healthy facilities over time.

The developer shall propose a best practice approach to this in its tender for consideration.

In doing so the following shall be considered:-

1. Reflect best practice and current thinking in sustainability, demonstrated by such guidance issued by the NHS Sustainability Development Unit and the like. Information on the Sustainability Development Unit can be found at www.sdu.nhs.uk.
2. HSPS will be issuing its Sustainable Development Management Plan (SDMP). In addition to the sustainability requirements of NHSPS the Contractor shall also be aware that Commissioning organisations should also issue an SDMP or equivalent. These requirements shall be identified by the NHSPS PM and agreed with the Contractor at pre-design or design stage. The Contractor shall take account of the Sustainable Development Strategy 2014-2020 which sets out the key drivers for the move towards more sustainable healthcare provision, together with any other locally generated strategy documents issued.
3. Sub-metering of energy users and for each tenant's demise and/or department/wing/section will be installed to allow energy use to be monitored effectively. Energy-efficient plant and equipment should be specified. This will include sub-metering for heating and cooling networks. The Contractor shall illustrate a sub-metering strategy based on demised plans for approval by the Project Manager. Metering should be used to inform pro-active, preventative energy-efficient maintenance.
4. Water efficiency measures should be incorporated including sub-meters, leak detection and, where relevant, Sustainable Urban Drainage Systems (SUDS).
5. Site ecology should be examined prior to development to mitigate the ecological impact of the development and enhance site biodiversity where practicable.
6. Sustainable travel should be promoted by incorporating safe, secure and suitable facilities for bicycles and cyclists, safe cycle and pedestrian routes and providing appropriate facilities to enable travel information to be presented.
7. Sustainable travel considerations should also make provision for appropriate staff changing, shower and storage facilities.
8. A healthy travel plan should be developed in consultation with building users and developed in conjunction with the Project Manager.
9. The contractor shall meet any Local Authority planning stipulated sustainability targets and requirements, especially in relation to Section 106 requirements
10. The developer should consider a range of options to promote renewable energy, minimise waste and otherwise use natural resources as efficiently as possible. Options to consider and address include: onsite generation; renewables, electric vehicle charging; recycling facilities; and smart building features (controls, lighting, sensors, etc.)
11. The contractor will consider the principles of health and wellbeing and work with others to provide a strategy that uses design, materials and systems that enable good air quality, natural light, comfortable conditions (thermal, acoustic, etc) that are conducive to a good patient and staff experience. For guidance on health and wellbeing criteria, the WELL Building Standard can provide elements of good practice.

3.6. Security and Secured by Design

.1 The Developer shall in the discharge of its design obligation apply all relevant guidance contained in the "Secured by Design" scheme documentation. In addition the Developer shall liaise with all relevant parties, including the NHSPS Health and Safety lead and proposed tenant (where applicable) via the Project Manager on specific areas of design including locking requirements, CCTV, security alarms, component specification and perimeter fencing etc.

.2 All appropriate measures shall be incorporated to assure the security and safety of patients, staff and visitors and their property within the Premises and its immediate vicinity. The Premises must also include adequate provision for safeguarding the security of equipment, patients' records, drugs, etc.

.3 The project shall be certified as having been Secured by Design

.4 The design and specification of Facilities shall be carried out in consultation with the local Police Architectural Liaison Officer/Crime Prevention Officer and the stakeholders' safety representatives.

3.7. Life Span of Building Elements

.1 The major elements of the Building shall have varied minimum life spans as follows:

- Structure 60 years
- Cladding 30 years
- Mechanical Services 30 years
- Electrical Services 30 years

3.8. Accessibility Strategy

.1 The building design shall meet but ideally exceed the compliance required using relevant Building Regulations; The Equality Act 2010 and best practice current at the date of the agreement. In the assessment of designs, particular attention will be given to the provision for disabled people, including people with impaired hearing (e.g. induction loops) and vision (e.g. effective use of colour, texture and lights, etc).

.2 The design shall ensure that equal access is given to all areas of the building and shall provide good access for everyday and emergency situations, avoiding the need for stairs and ramps.

.3 All routes, including escape routes and assembly points shall be clearly and properly illuminated (in accordance with regulations/guidance) and where practicable access from car parks should link to the general footpath provided. Use of both private and public transport is to be provided must be available for all, irrespective of physical ability and way finding and signage which is clear and an integral part of the design solution and part of the fire strategy documentation and Building Control approval process.

.4 Entry and exit positions must be well illuminated (in accordance with regulations/guidance and should open onto public areas to maximise security.

.5 Elements for consideration (not exhaustive):

- Provision of 'Changing Places' bathroom (likely to be considered for larger facilities – NHSPS to stipulate if required)

- Provision of family WC / changing facilities
- Entrance door thresholds
- Range of waiting room seating to suit accessible requirements
- Audible and visual call systems and alarm systems
- Induction loops (including portable units and fixed units at reception desks)
- Car park design (location and number of accessible bays and appropriate access paths to the building entrances and fire escapes) (subject also to planning constraints and requirements and the agreed sustainability strategy)
- Consideration of the increase in use of mobility scooters and how these are to be managed/accommodated generally
- Main approach to building (appropriate levels, signage etc.)
- Need for patient hoists (fixed or mobile) (the structure shall allow for such to be fitted)
- Consideration of specific patient group needs such as dementia

.6 NHSPS will set out any requirement for the provision of bariatric facilities on a project by project basis.

.7 Consideration should be given at the Entrance to the building to ways of minimising the ingress of dirt and water.

.8 The Developer should provide a range of options for barrier matting at the main entrance and seek PM approval. In design of the building entrance access for the disabled must be considered a high priority with no raised thresholds, spacious entrance lobbies and clear signage etc.

.9 As tenants operational hours will vary the facility must allow for access to tenant demises whilst others remain locked/armed

3.9. Activity Levels (and out of hours access)

.1 The Developer shall take account of the following:

- The different occupants of the building are likely to operate different hours of service with each of the tenant demises needing to be secured individually outside of their own operating hours. Each occupant must have the ability to enter their own demise without disarming other areas of the building wherever possible. Circulation and access routes must also be considered carefully to avoid unnecessary access through demised areas i.e. location of shared staff rooms, IT hub rooms etc.
- In respect of the above, provision should be made in the design for all Departments/Service Areas to be individually controlled in respect of security and zoned for lighting, heating, ventilation etc. Where appropriate zoning of the fire alarm system may also reflect this separation of services.
- It is possible that the proposed facility may in the future operate up to 24 hours per day, 7 days per week, 365 days of the year. This intensity of use may not be required at the outset of the buildings operation but future proofing access and alarm systems etc. is required to accommodate future changes in operational hours etc. If this requirement prevents any consideration as to the use of thermal mass for night time cooling, this shall be discussed with the NHSPS PM.

- There is a necessity to monitor and meter/sub-meter all energy sources and usage throughout the building on a service by service and user basis, linked electronically back to the proposed new BMS for logging and billing. This will is also likely to be advantageous under the agreed sustainability strategy. There are specific NHSPS requirements for BMS systems which should be discussed directly with the NHSPS Estates Team via the PM (refer to section 8.0 for further details). Should BMS not be proposed for this interface separate arrangements shall be agreed with NHSPS and adopted.

3.10. Means of Escape and Escape Strategy

.1 The development shall satisfy the relevant parts of Part B of the Building Regulations and BS 5588 Part 6 Fire precautions (and any superseding legislation as relevant) in the design, construction and use of buildings: Code of practice for places of assembly.

.2 The strategy will be designed in accordance with the relevant Fire Code HTM 05-02 Department of Health Guidance. This requires that where the floor plate is in excess of 1,000 square metres an evacuation lift will need to be installed with a dedicated power supply.

.3 Means of escape from the upper levels shall be provided by protected escape stairs to meet travel distance limitations. Means of escape from the basement shall also be provided by protected escape stairs.

.4 In order to minimise stair widths and meet travel distances, the central circulation stair from the basement to ground level shall also be used for escape.

3.11. Deliveries

.1 Adequate provision for access, manoeuvring and safe off-loading shall be made. Separate external transportation routes should be identified and clearly marked for service vehicles as opposed to general site vehicular or pedestrian movements.

.2 Consideration shall be given to the movement of service vehicles including refuse and delivery vehicles as well as emergency services.

.3 The developer shall work with NHSPS to determine the type of vehicles required to access the site and ensure that the required access provisions are included within the design.

.4 A separate staff entrance, which avoids the need to pass through public spaces is generally required and should be provided as part of the scheme. This should be discussed with the users and the scheme PM and documented as part of the building access strategy.

3.12. Mobile Diagnostic Facilities

.1 Provision for mobile diagnostics facilities should be made as part of the overall design as required by NHSPS and as established on a project by project basis. This may include MRI, Breast Screening, Ultrasound services.

.2 The relevant HBN/HTM documentation should be utilised in planning these areas which will require a suitable hard-standing, logical link with the building layout in terms of patient journey and sub-waiting etc.

.3 The necessary service connections are also required and particular attention should be noted on the

proximity to surrounding services and any impact these may have on the medical equipment or adjustments to layouts to enable mobile diagnostics facilities.

.4 These mobile facilities and provision of the necessary infrastructure form an important part of a scheme and should be considered from the outset of design work.

.5 Particular points for consideration are:

- The requirement for a hard-standing to site the mobile equipment
- An access strategy and swept path analysis proving that all necessary trailers/portable appliances can access the site safely and without significant operational impact
- External plug in points and service requirements are provided/satisfied.
- Conflict with other electrical services which may cause interference to the medical equipment.

.6 NHSPS have standardised 'plug-in' arrangements to accommodate a range of portable appliances and their service requirements. Details can be provided via the NHSPS PM.

3.13. Parking

.1 Separate easily identifiable designated parking should be provided at the facility for the following:

- Doctors/Clinicians Spaces (for on call clinicians only)
- Disabled Persons Spaces
- Parent and Child Spaces (where possible)
- Ambulance Space and associated turning area - ground to be marked
- Electrical vehicle recharging points (where applicable)
- Patient Transfer Service vehicles (where applicable)
- Motorcycle parking bays
- Cycle storage (public and staff)
- Vehicle drop off facility
- MRI/diagnostic vehicles bays where required
- Service vehicle delivery and waiting areas
- Staff and patient parking shall be segregated unless agreed otherwise in writing
- Use of barriers, access control and payment systems shall be considered on a project by project basis

.2 Provision for secure and weather protected bicycle storage is to be accommodated within the site with adjacency to the main building entrance (in accordance with any specific requirements of the agreed sustainability strategy).

.3 Though the design of car parking should be as efficient as possible in terms of provision of parking spaces, the ease of manoeuvring around the car park and parking vehicles should be considered. The Contractor should note the NHSPS parking policy (copy obtainable from the PM) in design of parking areas.

.4 The design of any parking areas should address the requirements of Secure by Design and also comply with Park Mark. The contractor shall pay all fees and charges associated with such.

.5 The design and capacity of any parking areas shall comply with any planning stipulations, implications and the like and shall also be in accordance with the agreed sustainability strategy.

3.14. Waste Disposal

.1 Storage areas shall be sufficient and secure with some facilities for waste segregation and recycling in line with NHSPS (and our partners) Waste Management Policies. The location shall be discrete and away from patient/user sight and access. Unless advised otherwise by NHSPS this shall be provided near the rear door and of minimum dimensions of 3500 x 3000 x 2400mm high.

.2 The Developer shall liaise directly with the NHSPS waste manager to ensure type, size and location of the waste compound are appropriate. The Waste Manager shall also provide guidance on requirements for internal bins, recycling, disposal routes and the requirement for any disposal 'holds' internally or externally.

.3 External bin stores shall be located away from the building to avoid any potential spread of fire. They should be lockable and have a roof or 'lid'

.4 The approach to waste management needs to be co-ordinated with the agreed sustainability strategy.

.5 Wash down facilities shall be provided to all refuse stores and the like, including associated below ground drainage installations, gullies and the like.

3.15. Centre Policies

.1 All NHSPS premises operate a no smoking policy. This will apply to all areas of the proposed building and grounds. Site specific policies will be developed by the NHSPS managed user groups and implemented as appropriate within the completed facility.

.2 The Developer shall allow for assisting in preparation of these operational documents where appropriate and where technical input is required - for example with regard to access control, and car park management etc.

.3 Operational policies of this facility will include access control, opening hours, security, fire plans, fire strategy, car park management etc. all of which will be developed under the management of the PM with specialist input from the Contractor.

4. MAIN BUILDING WORKS SPECIFICATION

4.1. Substructure

.1 The Developer shall design and construct suitable sub-structures and foundations and the like etc. for the building and its intended uses.

4.2. Structural Frame

.1 The Developer shall design and construct suitable structural frame solution and the like etc. for the

building and its intended uses, taking account of:-

- Service zones
- Ceiling heights
- Grid spacing
- Soft structural zones for future risers and plant
- Hard structural zones for future on-floor plant
- Vibration
- Loading requirements
- Flat slab soffit

.2 The development shall be split over no more than 2 floors (layout to be agreed with NHSPS) with scope for residential apartments above it (where applicable).

.3 A minimum of 3075mm is to be provided from top of structural slab to underside of the slab on the ground floor and a minimum of 3325mm on the first floor from top of slab to underside of slab.

.4 The requirements of HTM08-01 Department of Health Guidance Note in terms of acoustic and vibration performance must be considered and met in the design of the structure for the possible clinical use of the intended facility, now or in the future to ensure that the subsequent fit-out will achieve the requirements of HTM08-01.

4.3. Fire Protection

.1 Where Building Regulations require it, adequate measures will be taken to provide the necessary fire protection to beams, columns, ceilings etc.

4.4. Underground Drainage

.1 The developer will provide all necessary drainage connections from the health facility to the main sewer, in coordination with design team acting on behalf of the Tenant. Internal manholes will not be permitted.

4.5. Loading Criteria

.1 The floor slabs are to be generally designed to accommodate the following live loads (kN/m²):

Floors generally	3.5 KN/m²
X-Ray Rooms and other specialist digital imaging rooms and the like (where applicable)	To be confirmed
Records storage	3.5 KN/m²

Plant areas	7.5 KN/m²(with specific allowances for items of designated plant, tanks etc. where these exceed the above allowance)

4.6. Wind Loadings

.1 The wind loads on the building have been calculated in accordance with the "Standard Method" detailed in Section 2 of BS 6399: Part 2. This considers the geographic location, local topography and building geometry.

4.7. Stairs

.1 The stairs shall be of either precast or reinforced concrete standardised stair units and half landings.

.2 Any public stairs to have suitably enhanced finishes, including glass and stainless steel balustrades.

4.8. Lightning Protection

.1 The whole building will be provided with a lightning protection system in accordance with BS EN 62305-1: 2011; Protection against Lightning" and BS 7671 "IET Wiring Regulations".

.2 This will also include mains and sub-mains surge protection to protect sensitive equipment installed throughout the building.

.3 At this stage, it is proposed that the support steelwork and structural steel frame shall be utilised as part of the lightning conductor system, with electro-mechanical continuity assumed from the support steel work to foundation slab reinforcing.

.4 Final connection to earth would be provided via earth rods, within lockable polymer inspection housings, connected to the base of designated steel columns via PVC sheathed lightning protection tape. Testing of the system would be via the inspection housings.

.5 The lightning protection system is to be discrete with no visible surface mounted conductors down the side of the building. All conductors are to be concealed within the building walls.

.6 Cross bonding of metalwork, plant, containment, aerials etc particularly at roof level shall be provided.

.7 Lift shaft steelwork shall be cross bonded to the lightning protection system at high and low level.

.8 An overall resistance reading to earth of less than 10 ohms shall be proposed.

4.9. Energy Efficiency, Renewable & low Carbon Technology

.1 The developer will provide a shell which will enable the NHS fitted unit to meet at least a BREEAM excellent rating including a minimum EPRnc score of 0.54 in the areas of energy efficiency.

.2 This may include and the developer will allow for (at his cost) appropriate connections to Combined Heat and Power, Roof level Photo Voltaic Panels, ground source heat pumps and/or such other means of reaching the above energy efficiency score as required.

.3 The developer will provide evidence of the building energy calculation using the simplified

.4 The Developer will organise, host and attend a series of workshops to review the agreed sustainability strategy assessment criteria to ensure that NHSPS exploit every possible opportunity to

achieve the agreed sustainability strategy energy rating throughout the design development and construction stages, achieved within the overall project budget. Adopting energy efficient solutions will be a fundamental requirement of the project.

.5 The Developer will ensure optimum energy minimising features are incorporated into the building wherever appropriate.

.6 The Developer shall develop an energy and sustainability strategy and design that delivers compliance with the following;

- Building Regulations Part L – project compliance with the Building Regulations Part L is a statutory requirement with Part L2A for new build. The Developer shall confirm the requirements with the Building Control officer at an early stage.
- Planning Requirements – The local council may have energy target requirements over and above those of the Building Regulations Part L. The Developer shall ascertain the Local Authority requirements with the Planners at an early stage and implement into the design strategies accordingly.
- The Developer shall develop the base building design to deliver a low energy solution prior to the design of the engineering services system and selection of plant.
- The selection of plant with high operational efficiencies contributes a very large part in driving down energy use. The efficiencies set out in Building Regulations and associated documents shall be met as a minimum.

7. Below is list of engineering services measures that shall be considered in the design solutions where part of the Developer base build, driving energy down to the project target. This list is not exhaustive and shall be reviewed on a project by project basis.

- Ventilation system heat recovery – Minimum 70%
- Specific fan powers shall be 1.8W/l/s
- Variable speed drives on all motors.
- High efficiency motors to IE4 minimum.
- Low loss pipework system design.
- Low velocity ductwork design to also minimise noise.
- Optimum use of automated building energy management systems.
- Fully Zoned engineering services systems and controls.
- Night time setback on heating systems in 12 hour areas.
- PIR flushing of toilets/ urinals and/or waterless urinals.
- PIR lighting control to areas such as toilets and stores.
- Daylight sensors in offices.
- Rooms to have multiple lighting circuits to enable part switching.
- Power Factor better than 0.96.
- Electrical Harmonic filtration.
- Weather compensated heating circuits.
- Optimum start/stop control.

- Thermostatic devices (TRV's) on all heat emitters.
- Domestic water services pipework to be a minimum 25 mm thickness and have insulation thermal conductivity of no greater than 0.025W.mK to reduce HWS losses.
- High efficiency lamp sources such as LED to achieve minimum 65 luminaire lumens per circuit watt

4.10. Air Permeability

.1 Design air permeability – 4 cum/h mtrsq @50Pa

4.11. Thermal Bridging

.1 Calculated using Accredited Construction Details where applicable.

5. EXTERNAL ENVELOPE

The Developer shall design and construct a suitable external envelope and the like etc. for the building and its intended uses.

5.1. Cladding

.1 The design of the cladding system is required to provide good thermal control while permitting high levels of daylight, to minimise the energy requirements of heating, cooling and lighting. U values:- External wall 0.14 W/sq mtr deg C.

5.2. Roof

.1 The roof slab shall be of either reinforced or post tensioned concrete construction including single layer polymer membrane, insulation and vapour control barrier and mansafe safety system.

5.3. External Doors

.1 Main entrance doors and staff entrance doors to be glass polyester powder coated double leaf automated revolving or sliding (to be agreed with NHSPS) aluminium to 60 micron, commercial quality, with automatic operation to the front entrance fitted with double glazed laminated glass units. Polyester powder coated aluminium is to be installed to BS6262 and compliant with Secured by Design. This requirement may be varied on a project by project basis should existing building and/or planning conditions stipulate otherwise.

.2 Automatic doors are to be controlled by infrared detection with local isolation required for out-of-hours usage if necessary and be fitted with double weather- stripping, complete with threshold. The doors should have a fail open device in the event of fire alarm or failure. All automatic doors shall be fitted with suitable safety barriers, systems and the like to safeguard all using the building.

.3 All single and double leaf doors within the external cladding shall be metal or solid core timber doors with hardwood frame system and ironmongery including cut outs for security readers to be installed by others.

.4 As the layout of healthcare facilities will generally place a reception point near to the main entrance (and possible waiting room seating) the design, configuration and operation of the main entrance doors should look to minimise draughts to staff and patients.

.5 Locking shall as a minimum meet the requirements of BS 3621:1998. Multi-point locking to be fitted where possible.

.6 The doors shall be provided with security hinges and where appropriate concealed panic bars to provide multi point locking and fitted by proprietary door manufacturer. Operation and key suiting to suit door use. Minimum 10 year guarantee is to be provided.

.7 Where the doors also act as a staff entrance, the ironmongery shall be appropriate for the dual use and be fitted with security controlled access system/card reader to enable keyless entry during normal working hours.

.8 A separate staff entrance shall be provided to avoid health centre staff having to use the main entrance. Staff entrances should be of the same standards and specification as the main entrance doors, however they shall not be automatic and may not contain any glazed section.

.9 Where required on plant room doors, ventilation grilles will only be permitted if factory installed as part of an integral feature, grilles fitted afterward are not permitted.

.10 External doors shall be equipped with access control and CCTV monitoring of such where stipulated.

5.4. Windows (all the below criteria shall apply unless agreed otherwise by NHSPS in writing)

.1 Windows shall comply with HNB's and HTM's, with restricted openings and supporting natural ventilation, unless agreed otherwise with NHSPS in writing.

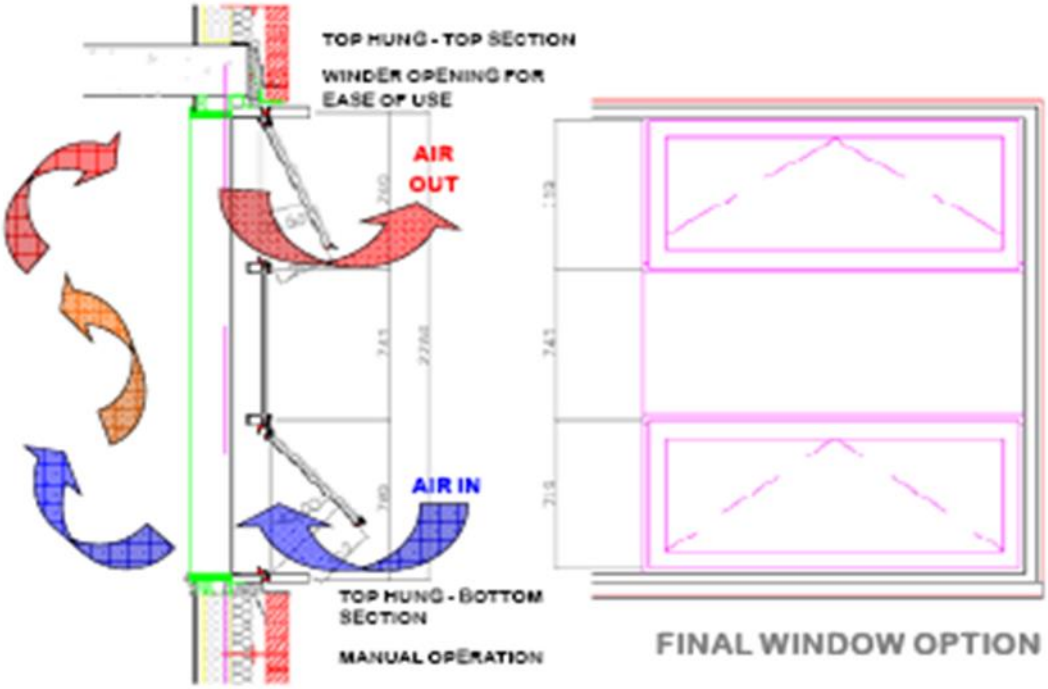
.2 Opening lights, when required, shall have an approved opening mechanism fitted with key controlled restricted friction hinges and espagnolette locking. Restrictors shall limit openings to a 100mm CLEAR maximum opening (in conformity with HTM's) for day to day operation (on 'reachable' openings only) with override to facilitate external cleaning. Window locks to be provided to all openable windows. Openable lights shall be capable of being locked in the open position for night time cooling. Any opening not proposed to be restricted will be risk assessed and agreed with NHSPS in writing.

.3 Openable lights shall be on friction stay hinges to achieve an open gap to the top of the opening sash to aid airflow. The opening sash should appear to "drop" when open. The clear openable gap shall be defined by the measurement of the "clear gap" and not simply from the front of frame to the inside of sash – this measurement is usually less than the clear opening permitted and due consideration needs to be given to external obstructions such as projecting sills or frame overhangs etc. to maximise clear vent area.

.4 All external doors and windows shall be thermally broken to prevent cold spots and all frames shall be effectively draft and acoustically sealed when closed.

.5 Window frames are preferred to be of a low maintenance PPC Aluminium, all to be finished to a 60 micron level. NHSPS corporate preference is for grey frames but the actual colour selection is to be agreed with the Project Manager on a project by project basis.

.6 High and low level opening lights should be provided to encourage airflow through the room.



.7 Windows shall be provided to Clinical rooms, Waiting rooms, and designated Waiting and Sub-waiting areas, Offices and Staff/Administration areas, together with the staircase, in accordance with details first approved by NHSPS, to provide a glazed area of not less than 10% of the floor area of the room thereby lit and an openable area of not less than 5% of each room area (unless specifically not required due to the room's function or due to site and/or planning restrictions or security issues or the like, or as amended by Building Regulation requirements).

.8 Provision shall be made for acoustic baffles where required where confidentiality is to be observed.

.9 Double glazed with hard low E coating: frame factor of 0.8, g value of 0.4 and u value of 1.4 W/sqm deg C

.10 Where window films are required for glare control and/or privacy the contractor shall arrange for suggested types and arrangements of materials to be supplied to the PM for consideration / discussion. Film is however generally not preferred over obscured glazing.

6. INTERNAL DOORS (WHERE PROVIDED AS PART OF DEVELOPER'S BASE BUILD)

.1 Doors shall be of solid core construction. The surface finish of all doors and the reception counters shall be Oak (or other agreed) veneer other than Treatment Suites/Minor Operations Suites/High Clinical Content Rooms where a chemical resistant scrub down laminate finish is required to the clinical side. In public areas a high quality finish is required of consistent appearance throughout. NHSPS is open to discussion around the use of laminate faced doors in lieu of oak veneer doors, subject to a convincing case being made, both economically and on a comparable quality and life cycle cost basis.

.2 Doors to Consulting, Treatment, Interview and Examination rooms are to have acoustic seals to head and jambs to achieve a close fit and are to have drop down acoustic seals rebated into the bottom of the door to reduce the passage of sound (the full life cycle costing impact and in-use maintenance etc of such shall be established and discussed with NHSPS on a scheme by scheme basis ahead of adoption).

.3 In accordance with HTM 08-01 double doors to be 30dB and single doorsets to be 35dB.

.4 Lever handles, lock cases, locks, cylinders, roses, push plates, pull handles and thumb turns etc. shall be provided where necessary. Ironmongery to be 25mm diameter brushed stainless steel.

.5 Kick plates, door stops shall be required to all doors. Note: Healthcare facilities require larger kickplate depths than standard installations. 400mm depth is required for NHSPS projects.

.6 Fully adjustable door closers shall be required to all FR doors and may be required elsewhere depending on user requirements - all to be agreed with PM.

.7 Patient toilets will require a locking device with an external quick release facility for use by staff in the case of an emergency and outward opening over ride. Attention is drawn to the latest Part M guidance

.8 In addition to room designation/wayfinding signage on the doors themselves all internal doors are to be fitted with a room identification tag to the upper RH corner. The PM shall advise on this numbering system as part of agreeing the signage schedules. Doors also require a sign as shown in section 3.19 and any required FR identifiers 'FD30' / 'FD60' etc.

.9 The Developer shall provide all statutory signage generally.

.10 Doors generally:-

- Doors are to be suitable for easy use by disabled persons. Care should be taken to ensure orientation of doors particularly in toilet cores and access routes favors ease of use by wheelchair users.
- Doors within or across areas of general circulation shall be provided with high and low level vision panels with clear safety glazing, to permit inter-visibility as required by statute. Glazing to be secured within hardwood beads secured with countersunk fixings.
- Doors providing general staff access between patient accessible areas and staff areas shall be operated by an access control system to avoid the reliance on keys.
- Doors serving common circulation routes to be fitted with hold open devices where necessary. In all instances, the hold open devices shall be linked to the fire alarm system.
- Fire doors to be provided and constructed in accordance with relevant Firecode requirements (and Building Regulations BS. 476), complete with intumescent fire and smoke seals; and fully marked up using the TRADA ‘Q-Mark’ system (or similar) - coloured door jamb inserts to indicate fire door type.
- Ironmongery shall be selected to provide the required colour contrast to the proposed door finish / colour as required under the Building Regulations.
- Ironmongery generally shall be from approved healthcare ironmongery approved suppliers and of quality solid stainless steel.
- Lever handles to be 25mm diameter minimum on sprung concealed fixed roses; with heavy sprung profile 72 mm c/cs sash lock. Associated items (pull handles, push plates, kick plates, etc) to match.
- Kick plates and push plates shall be provided on the 'common areas' side of all doors, and additionally on both faces of doors to WCs and doors across staircases or corridors.

- All doors opening back onto an adjacent wall or against equipment/fittings shall be provided with door mounted rubber door stops.
- WCs shall be provided with large easy action snibs, with indicators and provision for unlocking. Hat and coat hooks with door stop buffers shall be provided.
- All doors excluding stores and cupboards (others may be specified as part of agreed fire strategy) shall be fitted with adjustable overhead closers offering low resistance to opening and, where applicable, delayed action closing. Self-closers are to be provided to all fire doors.
- Doors shall address and cater for the likelihood of children being in the buildings in accordance with best practice, for example with the use of finger guard devices and the like. This shall apply to all public areas, with an extra over cost quoted for it to apply throughout the facility.

7. INTERNAL FINISHES

7.1. Floors

.1 Screed or power float concrete floor of sufficient quality to receive sheet vinyl and carpet. Upper floor u value between practice and heated apartment areas 0.13W/sqmtr deg C

.2 Step free access shall be provided up to the healthcare facility and throughout internally.

7.2. Walls

.1 Plasterboard/dry lining/exposed blockwork common party walls (between practice and unheated space) u value 0.19 W/sq mtr deg C.

7.3. Skirtings

.1 None

7.4. Doors

.1 None

8. PASSENGER/TROLLEY/PLATFORM LIFTS

.1 A minimum total of two passenger lifts will be provided by the developer (fire rated for escape purposes – see 3.8.2) (final number required to be confirmed by NHSPS)

.2 A platform lift will also be installed by the developer for the transportation of goods and clinical waste.

.3 The passenger and trolley lifts shall be of the machine room less hydraulic type.

.4 Lifts shall be provided in accordance with the specific brief provided by the NHS and be in full accordance with all current and relevant British and European Standards, including BS/EN 81/1 and BS/EN 81/2abd BREEAM.

.5 Lift car in internal finishes to be confirmed by the developer. The option for hanging heavy duty drapes shall be allowed for in order to prevent damage to surface finishes within the lift car when handling large goods.

.6 The passenger lifts will also be in line with the requirements of the Equality Act 2010 BS8300 Design of Buildings and their Approaches to Meet the Needs of Disabled People, EN 81-70 and Part M of the Building Regulations.

.7 A telecommunications link will be provided for remote monitoring of the lift installation by an approved Alarm Receiving Centre (ARC).

9. STAIRCASES

1. Floors: Precast or concrete standardised stair units with half landings.
2. Walls: Emulsion paint to dry lined substrate fixed back to concrete or blockwork or masonry paint to blockwork or concrete.
3. Soffits: Exposed concrete stair soffits.
4. Doors: Fire rated solid core doors with a hardwood frame and paint finish, fitted with ironmongery.
5. Fittings: Statutory and directional signage as required by the Building Regulations.

10. ENGINEERING DESIGN STANDARDS (WHERE PROVIDED AS PART OF DEVELOPER'S BASE BUILD)

10.1. Standards

.1 The following standards, current at the time, shall be utilised by the Developer to inform the design proposals.

1. .British and European Standards
2. .NHS Publications including HBN's and HTM's
3. .Building Regulations
4. .CIBSE Guides, Commissioning Coder, Application Manuals and Technical Memoranda

.2 A considerable amount of information available to the Developer is contained in Health Technical Memoranda (HTM) which provide specification and design guidance on building components for healthcare buildings which are not adequately covered by British Standards.

.3 The design shall be compliant with the above standards, although it is recognised there are areas where the guides are not aligned or do not match current best practice.

.4 In addition, in terms of refurbishment projects, there may be reliance on some existing services which may be non-compliant due to their age.

.5 In these instances, a design compliance statement schedule is to be provided, developed and discussed with the NHSPS key stakeholders for sign-off at every design gateway.

.6 The extent of primary MEP distribution and plant to be provided under te base-build shall be agreed in writing with NHSPS.

10.2. General Guidance

.1 The Developer shall follow a structured design process in line with RIBA Stages as defined in BSRIA Guide BG6.

.2 The purpose of this section of the specification is to give an indication of the required quality of installations and to provide details of specific client requirements where applicable. This shall also include all new incoming services and any necessary works to off-site infrastructure. It sets out the design requirements and standards of any new Engineering Services Installations. Guidance is also given as to the overall design philosophy of the various engineering services installations.

.3 Notwithstanding any guidance contained in the specification, the Developer shall be responsible for formulating and developing the design of the various systems to provide complete installations which satisfy all aspects of the design requirements and standards. It shall be noted that existing systems will continue to be the responsibility of NHSPS though the Designer is responsible for ensuring any interface with these systems is adequate.

.4 The Developer shall produce a suite of specifications utilising the NES Department of Health approved version software package, or approved equivalent. This shall be utilised as it is a direct replacement of the archived NHS Model Engineering Specification.

.5 The Developer shall explore varied additional avenues to achieve alternative technologies and techniques for energy efficiency and ecological construction as these are not well referenced at present in the HTM's and HBN's.

.6 Soft landings was introduced into the industry to deliver operationally ready buildings that perform to expectations, reducing costs and operational issues. The Designer shall adopt a soft landings approach from the outset to develop working practices and designs such that they are sustainable, maintainable and appropriate for the life cycle of the building.

10.3. Engineering installations and plant provided by Developer

.1 Any centrally provided Mechanical, Electrical and/or Public Health engineering installations or plant shall be fully HBN and HTM compliant and not compromise the possible clinical use of the intended facility, now or in the future.

.2 Provide all above and below ground drainage installations, including drainage stacks, risers and the like to enable the fit-out works, including connections as necessary to all toilets and sanitary fittings through the future clinical areas.

11. PLANT ROOMS, RISERS AND SERVICE CORRIDORS

.1 The Contractor shall allow for whatever plant space is necessary in respect of the engineering design for this building. Sufficient space shall be allowed for maintenance access and due consideration of the replacement of all parts must be demonstrated however particular care should be taken to ensure that plant rooms are not oversized.

.2 This will be reviewed at the design stage by the CDM-C with the appropriate design consultant and the Contractor, along with a nominated engineer from NHSPS to assess access and safety.

.3 The design needs to encompass any specific areas for third party installations i.e. for independent installations by a pharmacy, private dental surgery etc.

.4 Size, location, layout and access to plant areas is a key element of the design and the NHSPS Operational Estates team will require early input into this.

.5 Floors: Exposed concrete finish.

.6 Walls / Columns: Exposed blockwork or concrete.

.7 Soffits: Exposed concrete.

.8 Doors: Fire rated solid core doors, single and double leaf, with a hardwood frame and paint finish, fitted with ironmongery. Powder coated steel doorsets and frames where instructed by NHSPS.

.9 Fittings: Statutory and directional signage as required by Building Control Officer.

.10 A number of additional openings will be required within the first floor slab to allow the routing of ventilation services. Active ventilation louvres shall be required within the ground floor façade.

.11 Provide bunds where required.

.12 All plant and switchgear to be sized with a minimum of 25% spare capacity.

.13 All plant rooms and risers to include 25% additional space for expansion.

12. ANCILLARY ROOMS (E.G. STORE ROOMS, WASTE ROOMS ETC)

.1 Floors: Exposed concrete finish.

.2 Walls / Columns: Exposed blockwork or concrete.

.3 Soffits: Exposed concrete.

.4 Doors: Fire rated solid core doors, single and double leaf, with a hardwood frame and paint finish, fitted with ironmongery.

13. UTILITIES

13.1. Electrics

.1 The developer will provide a new 3 phase low voltage metered power supply as preliminary indicated on the drawings.

.2 The NHS will order the energy meter with their preferred energy supplier.

.3 The preliminary maximum demand assessment for the health facility has been estimated at 340kVA. (Please note this includes assumed loads associated with Ultrasound and X-ray specialist equipment loads).

13.2. Water

.1 Mains water will be provided via a [50mm] diameter MDPE pipe. The supply will enter the premises in the plant room and be fitted with a meter stop cock and check valve in accordance with the WRAS regulations in suitable location for extending to serve the medical practice.

The supply shall be capable of delivering a minimum of 1.6 l/s at 1.5 bar

13.3. Gas

.1 Mains gas will be provided supply pipe to the ground floor boiler room. The supply will enter the premises in the plant room and be fitted with meter, gas governor and isolation valve

The supply shall be capable of delivering 30 cum/hr at low pressure

14. EXTERNAL WORKS

.1 All external works, both on and off site shall be provided, including stopping up, junctions and accesses, service roads, pavements, car parking, drainage, lighting, fencing, and hard and soft landscaping as required by the nature of each project. Note the use of internal manholes will not be permitted under any circumstances. The Developer shall be responsible for any Section 278 Highways works, including all crossovers and shall pay all fees, charges and the like in connection therewith.

.2 All elements of external work shall be designed to approval of both the local planning authority and Secured by Design lead.

.3 The external site is to be hard and soft landscaped to maximise patient enjoyment; views from the facility, ease of site navigation and the maximisation of parking locations. Small and large scale planting will be required and external signage provision. External landscaping paving, planting and parking shall be designed to meet the requirements of the Planning Approval. The scheme proposed should be aesthetically pleasing but easily maintainable and should pre-empt accidental damage to reduce future maintenance and repair costs.

.4 An external night and dusk lighting scheme will be required with due consideration given to the close proximity of neighbouring dwellings.

.5 An external night and dusk lighting scheme will be required with due consideration given to the close proximity of neighbouring dwellings.

.6 External garden areas, internal courtyards and roof gardens shall be considered as part of the scheme and may feature seating, planters, and lighting (subject to the adopted sustainability strategy/BRE light pollution requirements). Consideration shall be given to the use of internal planting.

.7 Planting should be specified in view of keeping maintenance to an absolute minimum and specifications should be agreed with the Operational Maintenance team, via the NHSPS PM, in advance. Consideration shall be given to the re-use of existing plants and shrubs removed from the existing site during site clearance for integration into the proposed landscaping scheme.

.8 The Contractor shall include for maintenance and replacement of any plant failures for a period of 24 months from Practical Completion including watering as necessary. An extended maintenance programme shall be prepared and issued to the PM prior to completion.

.9 The primary access to all sections of roof shall be by internal staircase. Landscaping and access around the building should be designed to permit access to all elevations from access equipment without the need to apply for road closures or seek licences from any third party or adjacent occupier/owner.

.10 Landscaping should be designed in order to enhance drainage from the site rather than impede it.

.11 The Developer shall establish whether any new mains connections are required in respect of water, fire mains, power, gas, IT, telecoms and the like and shall pay all fees, charges and the like associated therewith, including the provision of all necessary substations, external generator plant and the like as required.

15. EXTERNAL SIGNAGE

.1 A complete signage scheme both internally in the building and externally on the site will be required. All directional signage should be in accordance with NHS Way Finding guidance.

.2 Signage shall provide the client with information in line with general NHS guidelines and NHSPS identity guide (available from the NHSPS Project Manager).

.3 The Developer will be required to liaise with the Highways Management Section of the relevant Local Authority to develop an offsite road signage proposal to direct users and visitors to the facility as part of the contract.

.4 The main building sign should be 'halo lit' and the necessary cabling needs to be incorporated to allow this.

.5 Signs to consist of individual 3D lettering in stainless steel (unless agreed otherwise) (all text to be agreed).

.6 Signage proposals to be issued to the planning authority either as part of an initial planning application, or as part of a condition discharge, to ensure all proposals are acceptable to the relevant Local Authority.

.7 The contractor shall analyse the building shape, size and orientation advising on the most appropriate locations and sizes for building signage. The recommendations should take into account views from surrounding areas in order to maximise prominence of the signage.

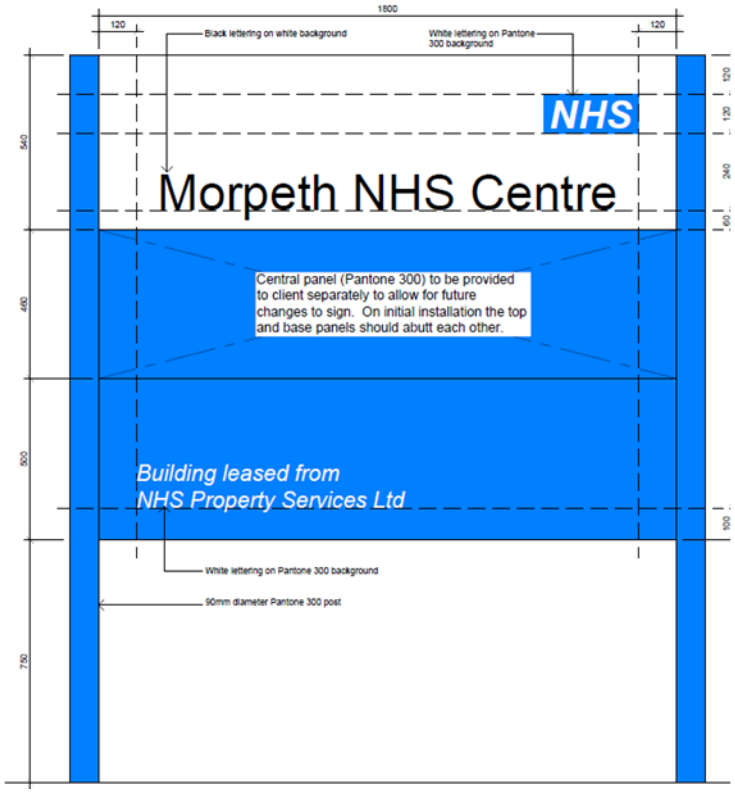
.8 Within the curtilage of the site NHSPS require standard corporate signage to be displayed.

.9 A '2 post' sign as shown below may be required near to the main site entrance. Further signage (in the same style) may also be required near to the main entrance of the building and may include details of occupants (where the building is multi- occupancy) etc. This requirement may vary from project to project and shall be assessed for relevance on specific project locations.

.10 Standard graphics for NHSPS and partner organisations are available via the NHSPS PM for insertion into signage designs where required.

.11 Further external signage required may include the following

- Notice of CCTV recordings
- No smoking
- Opening times
- Fire notices (including assembly points)
- Speed restriction
- Directional signs
- Accessible parking
- Parent and child parking
- Electro-bay parking
- Car park use liability signage (wording to be advised by PM)



16. DRAWINGS – DETAIL TO BE AGREED BETWEEN THE PARTIES

.1 The Developer will co-operate with the NHS on design development of the unit to ensure the location, orientation, natural light, footprint, layout, dedicated staff and patient car-parking provision for and general design of the unit enables the NHS to fit out and provide fit for purpose health care facilities from the unit and comply with all relevant obligations as published by the Department of Health or other government/statutory bodies.

.2 Separate staff entrances will be provided unless agreed otherwise with NHSPS in writing.

17. HANDOVER AND COMMISSIONING

.1 The Developer shall, towards the end of the project, formulate and agree a strategy for snagging with the NHSPS PM. The PM shall be directly responsible for carrying out snagging and overseeing rectification of highlighted items however they may wish to utilise external consultants to assist (particularly likely with regard to engineering services and specialist installations such as fire stopping).

.2 Where provided as part of the Developer's base build engineering installations will be inspected and signed off by an Authorising Engineer in accordance with the HTM's. These include but may not be limited to:-

- Electrical installations
- Water installations
- Air installations
- Medical gas installations
- Lift installations
- Fire detection and protection installations

.3 The Developer will be required to provide the Authorising Engineers but NHPS will advise on a project by project basis if these personnel are available within NHSPS and are to be provided to the contractor.

.4 The Contractor shall fully assess the new development when approaching completion and remedy any defects prior to inviting the NHSPS PM and team to site to carry out snagging. This 'pre-snagging' by the contractor is essential on all schemes.

.5 The scope of pre-snagging shall be agreed in advance with the NHSPS PM and may consist of a sample of rooms covering different room types and locations within the development. It is to both the Contractors and NHSPS benefit to prepare a sample room as early as possible in the project to agree standards of installation and finish

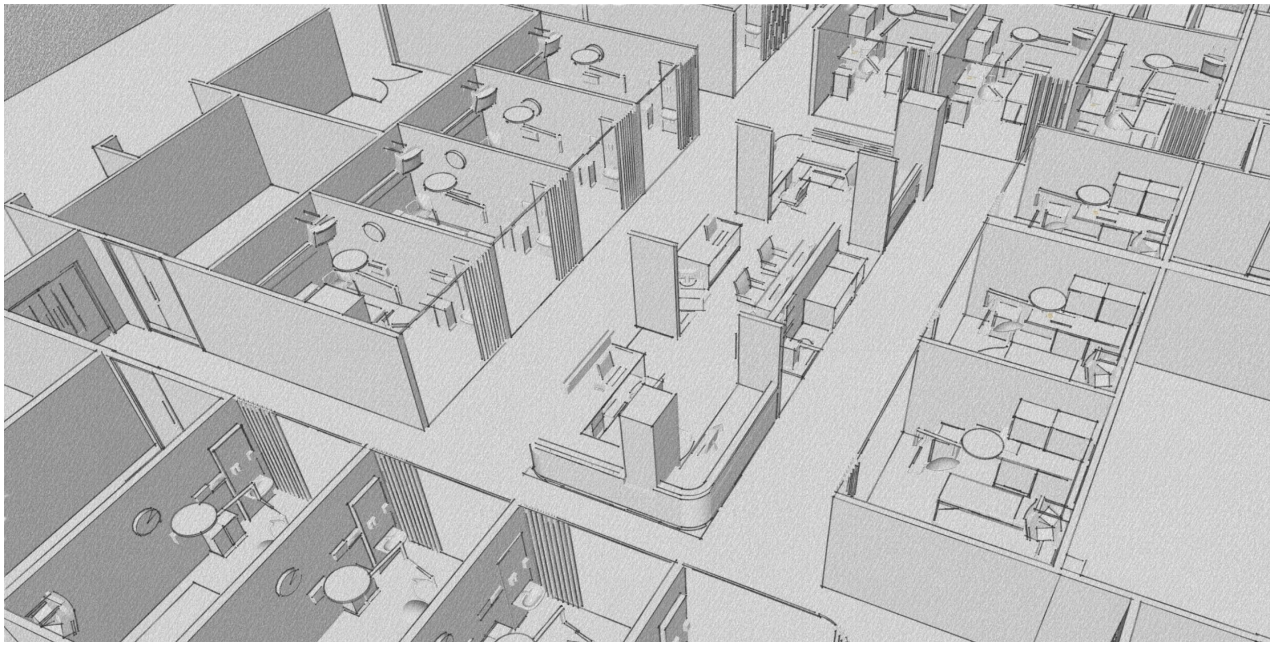
.6 It is expected that any and all works to rectify defects are carried out within 21 days of Practical Completion.

.7 The Developer shall comply with the Completion, Handover and Defects processes as set out in Appendix B to the main NHS PS Primary Care/Community Care Health Premises Standard Specification and Design Requirements document (available on request).

APPENDIX I
Room Data Sheets

NHS PROPERTY SERVICES

GENERIC HUB



IBI GROUP

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ROOM DATA SHEETS

NHSPS GENERIC HUB

Status
FOR INFORMATION

	30/01/2020	13/02/2020
	DATE OF 1ST ISSUE	**REVISION DATE**

Drawing Number
IBI - GEN - RD - 400 - 000

Revision
02

NOTES
1 Please note information on the M&E page is produced by TB+A and not the responsibilty of IBI Group.

Read in conjunction with the above	Current Revisions

Inc the following Sub Departments:	HBN 11-01-02 Generic Hub

Key to Transfer / Existing Options	**T** Transfer **F** Future **E** Existing (keep/relocate)
Key to Equipment Group Codes	**1** Contractor supply, has fix/service requirements **2** Specialist supply, has fix/service requirements **3** Not fixed, has size implication **4** Not fixed, no size implication

02	2020-02-13	Four rooms added as agreed during Feb 05 2020 meeting: Staff Rest, Staff Shower, Disabled WC & WC
01	2020-01-31	1st Issue for Discussion

REV	Date	Revision Notes

ALL REVISIONS

Project: 124476 NHSPS - Generic Hub

Filter:

Code	Description	Area (m²)	Date
C0235-16	Consulting/Examination Room: Single-Sided Couch Access	16.00	31 Jan 2020
C0237-18	Consulting/Examination Room: Double-Sided Couch Access	18.00	31 Jan 2020
C0522-12	Phlebotomy Room	12.00	31 Jan 2020
C1023	Ophthalmic Test Room	12.00	31 Jan 2020
D0201-10	Staff Rest Room: 10 Staff - with small lockers and beverage prep area	20.00	11 Feb 2020
E0136	Image Control / Reporting Room	7.00	31 Jan 2020
E0176	Imaging Room: General X-Ray	24.00	31 Jan 2020
E0181	Imaging Room: Mammography	16.00	31 Jan 2020
J0232-09	Reception: 2 Person	10.00	31 Jan 2020
J1255-10	Waiting Area: 10 Places (including 1 wheelchair place)	15.00	31 Jan 2020
L1308	Near Patient Testing Room	8.00	31 Jan 2020
M0251	Office: 1 Person	8.00	31 Jan 2020
M0724	Interview Room: 4 Places (including 1 wheelchair place)	8.00	31 Jan 2020
R0902-12	Decontamination Room: Dirty Dental instruments	12.00	31 Jan 2020
S0028-10	Counselling Room With Beverage Bay: Family or 4-10 People	18.00	31 Jan 2020
T0538-12	Clean Utility Room: Without Controlled Drugs Cupboard	12.00	31 Jan 2020
V0922-05	WC: Independent Wheelchair User	5.80	11 Feb 2020
V1010-05	WC: Ambulant User	3.40	11 Feb 2020
V1321-05	Staff Shower Room: Ambulant User	3.60	11 Feb 2020
X0113-16	Physio Therapy Room	16.00	31 Jan 2020
X0145-22	Treatment room: Double-Sided Couch access with Controlled Drug Cupboard	22.00	31 Jan 2020
X0273-16	Dental Treatment Room	16.00	31 Jan 2020
Y0431-12	Dirty Utility Room	12.00	31 Jan 2020
Y1510-06	Cleaners Room	6.00	31 Jan 2020

Project:	124476	NHSPS - Generic Hub	
Department:			
Room:	C0235-16	Consulting/Examination Room: Single-Sided Couch Access	
Room Number:		**Revision Date:**	31/01/2020

Activities:	1) Consultations may take place. 2) Sterile supplies and consumables are stored on a trolley. 3) User may undress and dress in privacy. 4) Electronic patient records (EPRs) may be accessed and updated. 5) Clinical hand washing. 6) Discussions and interviews may take place. 7) Patient may arrive on foot or in a wheelchair. 8) Call systems may be used.			
Personnel:	1 x patient. 1-2 x staff. 1 x other (escort).			
Planning Relationships:				
Space Data:	**Area (m²):**	16.00	**Height (mm):**	2700
	Area Range: 12sqm - 16sqm			

Notes:

This room includes a 2-section couch, alternatively, it may accommodate a 3-section couch or specialist couch.
The call repeat lamp is situated over the door outside the room.

The following items are shown on the room layout but are optional:
- patient/staff call (although expected where a patient will be left unattended);
- room in use switch and indicator.

The following items may be provided:
- a small printer;
- a small lockable drawer;
- dimming switch.

Workstations have been placed in Consult/ exam rooms at 900mmm. Local policy may prefer a desk up to 1200mm to facilitate working practice.

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Separate data and voice outlets may be used where structure cabling solutions are not available.

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	C0235-16	Consulting/Examination Room: Single-Sided Couch Access
Room Number:		**Revision Date:** 31/01/2020

TEMPERATURE AND VENTILATION	**Requirements**	**Notes**
Permissible Space Temperature Range(dry bulb) (degC):	28	
Heating Design Temperature (dry bulb)(degC):	21	
Minimum Air Changes (AC/hr):	4	or 10L/S/Person
Ventilation Type:	S/E/N	
Pressure Relative to Adjoining Space:	Bal	
Supply Air: Final Filter Class	G4	
Permissible Relative Humidity Range (%):	Uncontrolled	
General Notes:		

LIGHTING		
Type Of Control:	N	
Daytime General Service Illuminance (Lux):	500	WP
Daytime Specific Service Illuminance (Lux):	-	
Night-time General Service Illuminance (Lux):	-	
Night-time Specific Service Illuminance (Lux):	-	
Local Task Illuminance (Lux):	1000	Bed level (provided by the mobile examination lamp)
Colour Rendering Required:	Y	
Colour Rendering Required Characteristics (Ra):	80	
Unified Glare Rating Limit (UGRL):	19	
Emergency Escape Route Lighting Required:	Y	In accordance with BS 5266 and Health Technical Memorandums
Standby Lighting Grade - General Lighting:	B	
Standby Lighting Grade - Local Lighting:		
General Notes:	Refer to SLL Lighting Guide 2 for more detailed guidance	

RISK		
Clinical Risk Category:		
Non-clinical Business Continuity Risk Category:		
General Notes:		

NOISE		
Noise Intrusion (dB) 1hr day:	40	
Noise Intrusion (dB) 1hr night:	-	
Noise Intrusion (dB) f night:	-	
Maximum Internal Noise from M&E Services (NR):	35	Total noise of MEP services under normal operation across the range 63Hz to 4kHz inclusive.
Room Sound-insulation Parameters - Privacy:	Confidential	Reference to Table 3 of the Department of Health 'Acoustics: Technical design manual 4032:0.6:England'.
Room Sound-insulation Parameters - Noise Generation:	Typical	
Noise Sensitivity:	Medium	
Sound-insulation Rating (dB D nT,w):		
General Notes:		

SAFETY/FIRE		
Maximum Surface Temperature (DegC):	43	
Domestic Hot Water Discharge Temperature (DegC):	41	
Maximum Cold Water Discharge Temperature (DegC):	<20	
General Notes:		
Type of Automatic Fire Detection:	Smoke	
General Notes:		

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	C0235-16	Consulting/Examination Room: Single-Sided Couch Access
Room Number:		**Revision Date:** 31/01/2020

Walls:	Wall finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Wall finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Floor:	Floor finishes to comply with Performance Requirements in HBN 00-10 Part A:Flooring (2013) Floor finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part A:Flooring.
Ceiling:	Ceiling finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Ceiling finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Doorsets:	Configuration, glazing, fire rating, security, etc. to be determined by Project Team. HTM 58 (Mar-2005) Refer to HBN 00-04 (May-2007) for effective clear door widths. 1 doorset: 1 x personnel, wheelchair & equipment access (1000mm) Requirement for hinge protection when areas used by children
Windows:	Desirable - Project Option Clear glass with solar and privacy control Designation to be validated against current documentation (HTM 55 archived).
Internal Glazing:	Not required
Hatch:	Not required
Notes:	All finishes selected must have an appropriate risk assessment to accompany the design decision. Infection Control must be consulted as described in Performance Requirements for Building Elements Used in Healthcare Facilities 8941:0.6 England.

Project: 124476 NHSPS - Generic Hub
Department:
Room: C0235-16 Consulting/Examination Room: Single-Sided Couch Access
Room Number: **Revision Date:** 31/01/2020

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.		1
1		1	CAL003	PUSH BUTTON, patient/staff call (help) with socket for patient hand-held unit		1
1		1	CAL007	PULL/PUSH BUTTON, staff emergency call, reset and integral/adjacent indicator lamp		1
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
3		3	HOO019	HOOK, single, small, wall mounted		1
1		1	LIG058	LUMINAIRE, examination, wall, adjustable, 1000 lux		1
1		1	LIG073	ILLUMINATED SIGN, 'Room in use'		1
1		1	OUT005	SOCKET outlet, switched, 13 amp, single		1
3		3	OUT010	SOCKET outlet, switched, 13 amp, twin		1
1		1	OUT049	CONNECTION UNIT, switched, 13 amp, flex outlet		1
2		2	OUT131	SOCKET outlet data/voice, double.		1
3		3	OUT910	SOCKET outlet, switched, 13 amp, twin plus 2 USB outlets		1
1		1	SWC025	SWITCH, light		1
1		1	SWC076	SWITCH, 'Room in use' illuminated sign.		1
1		1	TAP892	TAP, bib, 2x8 mm thermostatic mixer, automatic action, sensor operated, non-touch,		1
1		1	TRA174	TRACK, curtain, one sided, 3500L		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing.		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	DIS438	DISPENSER, disposable gloves set of 3 and disposable apron, wall mounted		2
1		1	CHA301	CHAIR, swivel, height adjustable, high back, with arms, wipeable, 5 star base, on castors		3
2		2	CHA318	CHAIR, upright, with arms, upholstered, stacking, wipeable		3
1		1	COM033	COMPUTER KEYBOARD		3
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
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

Project: 124476 NHSPS - Generic Hub
Department:
Room: C0235-16 Consulting/Examination Room: Single-Sided Couch Access
Room Number: **Revision Date:** 31/01/2020

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	TAB177	TABLE, 720H 900W 700D		3

Project:	124476	NHSPS - Generic Hub	
Department:			
Room:	C0237-18	Consulting/Examination Room: Double-Sided Couch Access	
Room Number:		**Revision Date:**	31/01/2020

Activities:	1) Consultations may take place. 2) Sterile supplies and consumables are stored on a trolley. 3) User may undress and dress in privacy. 4) Electronic patient records (EPRs) may be accessed and updated. 5) Clinical hand washing. 6) Discussions and interviews may take place. 7) Carrying out examinations and assessment of patient. 8) Patient may arrive on foot or in a wheelchair. 9) Examinations of the patient may be carried out from one or both sides of the couch. 10) Minimally invasive clinical procedures may be undertaken from one or both sides of the couch. 11) Call systems may be used.			
Personnel:	1 x patient. 1-2 x staff. 1 x other (escort).			
Planning Relationships:				
Space Data:	**Area (m²):**	18.00	**Height (mm):**	2700
	Area Range: 16-18 sqm.			

Notes:

This room includes a 3-section couch, alternatively, it may accommodate a 2-section couch or specialist couch.

The call repeat lamp is situated over the door outside the room.

The following items are shown on the room layout but are optional:
- patient/staff call (although expected where a patient will be left unattended);
- room in use switch and indicator.

The following items may be provided:
- a small printer;
- a small lockable drawer;
- dimming switch.

Piped medical gases may be required for some clinical specialties.

Workstations have been placed in Consult/ exam rooms at 900mmm. Local policy may prefer a desk up to 1200mm to facilitate working practice.

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Separate data and voice outlets may be used where structure cabling solutions are not available.

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	C0237-18	Consulting/Examination Room: Double-Sided Couch Access
Room Number:		**Revision Date:** 31/01/2020

TEMPERATURE AND VENTILATION	**Requirements**	**Notes**
Permissible Space Temperature Range(dry bulb) (degC):	28	
Heating Design Temperature (dry bulb)(degC):	21	
Minimum Air Changes (AC/hr):	4	or 10L/S/Person
Ventilation Type:	S/E/N	
Pressure Relative to Adjoining Space:	Bal	
Supply Air: Final Filter Class	G4	
Permissible Relative Humidity Range (%):	Uncontrolled	
General Notes:		

LIGHTING		
Type Of Control:	N	
Daytime General Service Illuminance (Lux):	500	WP
Daytime Specific Service Illuminance (Lux):	-	
Night-time General Service Illuminance (Lux):	-	
Night-time Specific Service Illuminance (Lux):	-	
Local Task Illuminance (Lux):	1000	Bed level (provided by the mobile examination lamp)
Colour Rendering Required:	Y	
Colour Rendering Required Characteristics (Ra):	80	
Unified Glare Rating Limit (UGRL):	19	
Emergency Escape Route Lighting Required:	Y	In accordance with BS 5266 and Health Technical Memorandums
Standby Lighting Grade - General Lighting:	B	
Standby Lighting Grade - Local Lighting:		
General Notes:	Refer to SLL Lighting Guide 2 for more detailed guidance	

RISK		
Clinical Risk Category:		
Non-clinical Business Continuity Risk Category:		
General Notes:		

NOISE		
Noise Intrusion (dB) 1hr day:	40	
Noise Intrusion (dB) 1hr night:	-	
Noise Intrusion (dB) f night:	-	
Maximum Internal Noise from M&E Services (NR):	35	Total noise of MEP services under normal operation across the range 63Hz to 4kHz inclusive.
Room Sound-insulation Parameters - Privacy:	Confidential	Reference to Table 3 of the Department of Health 'Acoustics: Technical design manual 4032:0.6:England'.
Room Sound-insulation Parameters - Noise Generation:	Typical	
Noise Sensitivity:	Medium	
Sound-insulation Rating (dB D nT,w):		
General Notes:		

SAFETY/FIRE		
Maximum Surface Temperature (DegC):	43	
Domestic Hot Water Discharge Temperature (DegC):	41	
Maximum Cold Water Discharge Temperature (DegC):	<20	
General Notes:		
Type of Automatic Fire Detection:	Smoke	
General Notes:		

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	C0237-18	Consulting/Examination Room: Double-Sided Couch Access
Room Number:		**Revision Date:** 31/01/2020

Walls:	Wall finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Wall finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Floor:	Floor finishes to comply with Performance Requirements in HBN 00-10 Part A:Flooring (2013) Floor finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part A:Flooring.
Ceiling:	Ceiling finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Ceiling finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Doorsets:	Configuration, glazing, fire rating, security, etc. to be determined by Project Team. HTM 58 (Mar-2005) Refer to HBN 00-04 (May-2007) for effective clear door widths. 1 doorset: 1 x personnel, wheelchair & equipment access (1000mm) Requirement for hinge protection when areas used by children
Windows:	Desirable - Project Option Clear glass with solar and privacy control Designation to be validated against current documentation (HTM 55 archived).
Internal Glazing:	Not required
Hatch:	Not required
Notes:	All finishes selected must have an appropriate risk assessment to accompany the design decision. Infection Control must be consulted as described in Performance Requirements for Building Elements Used in Healthcare Facilities 8941:0.6 England.

Project: 124476 NHSPS - Generic Hub
Department:
Room: C0237-18 Consulting/Examination Room: Double-Sided Couch Access
Room Number: **Revision Date:** 31/01/2020

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.		1
1		1	CAL003	PUSH BUTTON, patient/staff call (help) with socket for patient hand-held unit		1
1		1	CAL007	PULL/PUSH BUTTON, staff emergency call, reset and integral/adjacent indicator lamp		1
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
5		5	HOO019	HOOK, single, small, wall mounted		1
1		1	LIG053	LUMINAIRE, examination, ceiling, adjustable, 1000 lux		1
1		1	LIG073	ILLUMINATED SIGN, 'Room in use'		1
1		1	OUT005	SOCKET outlet, switched, 13 amp, single		1
3		3	OUT010	SOCKET outlet, switched, 13 amp, twin		1
1		1	OUT049	CONNECTION UNIT, switched, 13 amp, flex outlet		1
2		2	OUT131	SOCKET outlet data/voice, double.		1
3		3	OUT910	SOCKET outlet, switched, 13 amp, twin plus 2 USB outlets		1
1		1	SWC025	SWITCH, light		1
1		1	SWC076	SWITCH, 'Room in use' illuminated sign.		1
1		1	TAP892	TAP, bib, 2x8 mm thermostatic mixer, automatic action, sensor operated, non-touch,		1
1		1	TRA183	TRACK, curtain, two sided, 2600W 2800D		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing.		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	DIS438	DISPENSER, disposable gloves set of 3 and disposable apron, wall mounted		2
1		1	CHA301	CHAIR, swivel, height adjustable, high back, with arms, wipeable, 5 star base, on castors		3
1		1	CHA317	CHAIR, upright, upholstered, stacking, wipeable		3
2		2	CHA318	CHAIR, upright, with arms, upholstered, stacking, wipeable		3
1		1	COM033	COMPUTER KEYBOARD		3
1		1	COM049	COMPUTER MONITOR, 17"; TFT, digital flat panel display, high-resolution screens, 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

Project: 124476 NHSPS - Generic Hub
Department:
Room: C0237-18 Consulting/Examination Room: Double-Sided Couch Access
Room Number: **Revision Date:** 31/01/2020

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
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	TAB177	TABLE, 720H 900W 700D		3

Project:	124476	NHSPS - Generic Hub	
Department:			
Room:	C0522-12	Phlebotomy Room	
Room Number:		**Revision Date:**	31/01/2020

Activities:	1) Sterile supplies and consumables are stored on a trolley. 2) Electronic patient records (EPRs) may be accessed and updated. 3) Clinical hand washing. 4) Patient may undress/dress in privacy. 5) Phlebotomist will take blood sample/s from patient while patient is seated on phlebotomy chair 6) Hanging outdoor clothing. 7) Dispensing disposable aprons. 8) Dispensing disposable gloves. 9) Holding SHARPS in a container. 10) Sending specimens and orders through a pneumatic tube system. 11) Patient may be ambulant with/without walking aids, in a wheelchair or requiring assistance.			
Personnel:	1x Patient 1-2x Staff 1x Other (escort)			
Planning Relationships:				
Space Data:	**Area (m²):**	12.00	**Height (mm):**	2700
	Area Range: 12-16 sqm. Allow additional 8 sqm. per phlebotomy chair / cubicle for larger patient group.			

Notes:

The call repeat lamp is situated over the door outside the room.

The following items are shown on the room layout but are optional:
- patient/staff call (although expected where a patient will be left unattended);
- room in use switch and indicator;
- clinical workstation;
- location of the privacy curtain (may be at door entrance, as shown, or between couch and clinical workstation, see HBN 00-03).

Room/cubicle should be within easy access of an examination couch should the patient need to recover.

When multiple patients use the room at the same time, please add wipeable mobile screen or curtain for patient privacy.

Workstations have been placed in at 900mmm. Local policy may prefer a worktop up to 1200mm to facilitate working practice.

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Separate data and voice outlets may be used where structure cabling solutions are not available.

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	C0522-12	Phlebotomy Room
Room Number:		**Revision Date:** 31/01/2020

TEMPERATURE AND VENTILATION	**Requirements**	**Notes**
Permissible Space Temperature Range(dry bulb) (degC):	21 - 28	
Heating Design Temperature (dry bulb)(degC):	21	
Minimum Air Changes (AC/hr):	6	
Ventilation Type:	S/E/N	
Pressure Relative to Adjoining Space:	Bal or -ve	
Supply Air: Final Filter Class	G4	
Permissible Relative Humidity Range (%):	Uncontrolled	
General Notes:		
LIGHTING		
Type Of Control:	S/V	
Daytime General Service Illuminance (Lux):	300	
Daytime Specific Service Illuminance (Lux):	-	
Night-time General Service Illuminance (Lux):	-	
Night-time Specific Service Illuminance (Lux):	-	
Local Task Illuminance (Lux):	1000	
Colour Rendering Required:	Y	
Colour Rendering Required Characteristics (Ra):	90	
Unified Glare Rating Limit (UGRL):	19	
Emergency Escape Route Lighting Required:	Y	In accordance with BS 5266 and Health Technical Memorandums
Standby Lighting Grade - General Lighting:	A	
Standby Lighting Grade - Local Lighting:	A	
General Notes:		
RISK		
Clinical Risk Category:		
Non-clinical Business Continuity Risk Category:		
General Notes:		
NOISE		
Noise Intrusion (dB) 1hr day:	40	
Noise Intrusion (dB) 1hr night:	-	
Noise Intrusion (dB) f night:	-	
Maximum Internal Noise from M&E Services (NR):	35	Total noise of MEP services under normal operation across the range 63Hz to 4kHz inclusive.
Room Sound-insulation Parameters - Privacy:	Confidential	Reference to Table 3 of the Department of Health 'Acoustics: Technical design manual 4032:0.6:England'.
Room Sound-insulation Parameters - Noise Generation:	Typical	
Noise Sensitivity:	Medium	
Sound-insulation Rating (dB D nT,w):		
General Notes:		
SAFETY/FIRE		
Maximum Surface Temperature (DegC):	43	
Domestic Hot Water Discharge Temperature (DegC):	41	
Maximum Cold Water Discharge Temperature (DegC):	<20	
General Notes:		
Type of Automatic Fire Detection:	Smoke	
General Notes:		

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	C0522-12	Phlebotomy Room
Room Number:		**Revision Date:** 31/01/2020

Walls:	Wall finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Wall finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Floor:	Floor finishes to comply with Performance Requirements in HBN 00-10 Part A:Flooring (2013) Floor finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part A:Flooring.
Ceiling:	Ceiling finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Ceiling finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Doorsets:	Configuration, glazing, fire rating, security, etc. to be determined by Project Team. HTM 58 (Mar-2005) Refer to HBN 00-04 (May-2007) for effective clear door widths. 1 doorset: 1 x personnel, wheelchair & equipment access (1000mm) Requirement for hinge protection when areas used by children
Windows:	Non-essential - Project Option Clear glass with solar and privacy control Designation to be validated against current documentation (HTM 55 archived).
Internal Glazing:	Not required
Hatch:	Not required
Notes:	All finishes selected must have an appropriate risk assessment to accompany the design decision. Infection Control must be consulted as described in Performance Requirements for Building Elements Used in Healthcare Facilities 8941:0.6 England.

Project: 124476 NHSPS - Generic Hub
Department:
Room: C0522-12 Phlebotomy Room
Room Number: **Revision Date:** 31/01/2020

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.		1
1		1	CAL003	PUSH BUTTON, patient/staff call (help) with socket for patient hand-held unit		1
1		1	CAL007	PULL/PUSH BUTTON, staff emergency call, reset and integral/adjacent indicator lamp		1
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
5		5	HOO019	HOOK, single, small, wall mounted		1
1		1	LIG053	LUMINAIRE, examination, ceiling, adjustable, 1000 lux		1
1		1	LIG073	ILLUMINATED SIGN, 'Room in use'		1
1		1	OUT005	SOCKET outlet, switched, 13 amp, single		1
2		2	OUT010	SOCKET outlet, switched, 13 amp, twin		1
1		1	OUT049	CONNECTION UNIT, switched, 13 amp, flex outlet		1
2		2	OUT131	SOCKET outlet data/voice, double.		1
3		3	OUT910	SOCKET outlet, switched, 13 amp, twin plus 2 USB outlets		1
1		1	SMW069	WORKTOP, clinical, for 400 facing modular storage cabinets, 900W 700D		1
1		1	SWC025	SWITCH, light		1
1		1	SWC076	SWITCH, 'Room in use' illuminated sign.		1
1		1	TAP892	TAP, bib, 2x8 mm thermostatic mixer, automatic action, sensor operated, non-touch,		1
1		1	TRA147	TRACK, curtain, door, C-shape		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing.		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	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	CHA317	CHAIR, upright, upholstered, stacking, wipeable		3
1		1	CHA356	CHAIR, venepuncture, wipeable.		3
1		1	COM033	COMPUTER KEYBOARD		3
1		1	COM049	COMPUTER MONITOR, 17"; TFT, digital flat panel display, high-resolution screens, desk top		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

Project: 124476 NHSPS - Generic Hub
Department:
Room: C0522-12 Phlebotomy Room
Room Number:
Revision Date: 31/01/2020

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
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	STO004	STOOL, height adjustable, swivel, mobile		3
1		1	TRO267	TROLLEY, phlebotomist's, 985H 495W 460D		3

Project:	124476	NHSPS - Generic Hub	
Department:			
Room:	C1023	Ophthalmic Test Room	
Room Number:		**Revision Date:**	31/01/2020

Activities:	1) Interviewing and consultation. 2) Assessment for error of refraction when test type is situated behind the patient and viewed by patient in a mirror sited 3 metres in front. 3) Examine the eye by means of a slit lamp. 4) Clinical hand washing. 5) Electronic patient records (EPRs) may be accessed and updated. 6) Computer workstation(s) may be used. 7) Telephone(s) may be used. 8) A working supply of stationery is held. 9) Patient to undergo optometry examination, (low vision assessment).			
Personnel:	1 x Patient 1 x Staff 1 x Other (escort)			
Planning Relationships:	Within ophthalmic clinic.			
Space Data:	**Area (m²):**	12.00	**Height (mm):**	2700

Notes:

This room will accommodate: Vision Testing, Low Vision Assessment and Ophthalmic Technical Consultation and can be used by Ophthalmology Consultants or Nurses, Orthoptists or Optometrists depending on the Project and local policy.

Separate data and voice outlets may be used where structure cabling solutions are not available.

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	C1023	Ophthalmic Test Room
Room Number:		**Revision Date:** 31/01/2020

TEMPERATURE AND VENTILATION	**Requirements**	**Notes**
Permissible Space Temperature Range(dry bulb) (degC):	21 - 28	
Heating Design Temperature (dry bulb)(degC):	21	
Minimum Air Changes (AC/hr):	4	or 10L/S/Person
Ventilation Type:	S/E/N	
Pressure Relative to Adjoining Space:	Bal	
Supply Air: Final Filter Class	G4	
Permissible Relative Humidity Range (%):	Uncontrolled	
General Notes:		

LIGHTING		
Type Of Control:	N	
Daytime General Service Illuminance (Lux):	300	WP
Daytime Specific Service Illuminance (Lux):	-	
Night-time General Service Illuminance (Lux):	-	
Night-time Specific Service Illuminance (Lux):	-	
Local Task Illuminance (Lux):	1000	
Colour Rendering Required:	Y	
Colour Rendering Required Characteristics (Ra):	80	
Unified Glare Rating Limit (UGRL):	19	
Emergency Escape Route Lighting Required:	Y	In accordance with BS 5266 and Health Technical Memorandums
Standby Lighting Grade - General Lighting:	B	
Standby Lighting Grade - Local Lighting:		
General Notes:	6500K Colour Temperature - Refer to SLL Lighting Guide 2 for more detailed guidance	

RISK		
Clinical Risk Category:		
Non-clinical Business Continuity Risk Category:		
General Notes:		

NOISE		
Noise Intrusion (dB) 1hr day:	40	
Noise Intrusion (dB) 1hr night:	-	
Noise Intrusion (dB) f night:	-	
Maximum Internal Noise from M&E Services (NR):	35	Total noise of MEP services under normal operation across the range 63Hz to 4kHz inclusive.
Room Sound-insulation Parameters - Privacy:	Confidential	Reference to Table 3 of the Department of Health 'Acoustics: Technical design manual 4032:0.6:England'.
Room Sound-insulation Parameters - Noise Generation:	Typical	
Noise Sensitivity:	Medium	
Sound-insulation Rating (dB D nT,w):		
General Notes:		

SAFETY/FIRE		
Maximum Surface Temperature (DegC):	43	
Domestic Hot Water Discharge Temperature (DegC):	41	
Maximum Cold Water Discharge Temperature (DegC):	<20	
General Notes:		
Type of Automatic Fire Detection:	Smoke	
General Notes:		

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	C1023	Ophthalmic Test Room
Room Number:		**Revision Date:** 31/01/2020

Walls:	Wall finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Wall finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Floor:	Floor finishes to comply with Performance Requirements in HBN 00-10 Part A:Flooring (2013) Floor finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part A:Flooring.
Ceiling:	Ceiling finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Ceiling finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Doorsets:	Configuration, glazing, fire rating, security, etc. to be determined by Project Team. HTM 58 (Mar-2005) Refer to HBN 00-04 (May-2007) for effective clear door widths. 1 doorset: 1 x personnel, wheelchair & equipment access (1000mm) Requirement for hinge protection when areas used by children
Windows:	Non-essential - Project Option Clear glass with solar and privacy control. Blackout Designation to be validated against current documentation (HTM 55 archived).
Internal Glazing:	Not required
Hatch:	Not required
Notes:	All finishes selected must have an appropriate risk assessment to accompany the design decision. Infection Control must be consulted as described in Performance Requirements for Building Elements Used in Healthcare Facilities 8941:0.6 England.

Project: 124476 NHSPS - Generic Hub
Department:
Room: C1023 Ophthalmic Test Room
Room Number: **Revision Date:** 31/01/2020

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.		1
1		1	CAL007	PULL/PUSH BUTTON, staff emergency call, reset and integral/adjacent indicator lamp		1
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
1		1	CHA372	CHAIR, treatment, reclining, height adjustable, wipeable.		1
3		3	HOO019	HOOK, single, small, wall mounted		1
1		1	MIR031	MIRROR, optical glass, 700H 400W		1
1		1	OUT005	SOCKET outlet, switched, 13 amp, single		1
1		1	OUT010	SOCKET outlet, switched, 13 amp, twin		1
4		4	OUT049	CONNECTION UNIT, switched, 13 amp, flex outlet		1
2		2	OUT131	SOCKET outlet data/voice, double.		1
2		2	OUT910	SOCKET outlet, switched, 13 amp, twin plus 2 USB outlets		1
1		1	SMW072	WORKTOP, clinical, for 400 facing modular storage cabinets, 1200W 700D		1
1		1	SWC025	SWITCH, light		1
1		1	SWC034	SWITCH, dimmer, modulating		1
1		1	TAP892	TAP, bib, 2x8 mm thermostatic mixer, automatic action, sensor operated, non-touch,		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing.		1
1		1	DIA030	DIAGNOSTIC SET, ophthalmoscope/Auris cope with handle, 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	TES004	TEST Snellen, with controls, wall mounted		2
1		1	CAS011	CASE, trial lens, for use with electric ophthalmoscope		3
1		1	CHA302	CHAIR, swivel, height adjustable, medium back, wipeable, 5 star base, on castors		3
1		1	CHA304	CHAIR, swivel, height adjustable, medium back, wipeable, 5 star base, on glides		3
1		1	CHA317	CHAIR, upright, upholstered, stacking, wipeable		3
1		1	COM033	COMPUTER KEYBOARD		3
1		1	COM049	COMPUTER MONITOR, 17"; TFT, digital flat panel display, high-resolution screens, desk top		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	OPH015	TEST Log MAR visual acuity chart		3
1		1	OPH026	SLIT LAMP, with accessories and height adjustable stand		3

Project:	124476	NHSPS - Generic Hub	
Department:			
Room:	D0201-10	Staff Rest Room: 10 Staff - with small lockers and beverage prep area	
Room Number:		**Revision Date:**	10/02/2020

Activities:	1) Rest and relaxation or sleeping. 2) Patient, relative or staff may be reading. 3) Preparing beverages and snacks. 4) Holding/ storing food in refrigerator. 5) Consuming beverages, meals and snacks. 6) Holding crockery and cutlery. 7) Washing up of crockery and cutlery. 8) Staff notices, information and/or messages may be displayed. 9) Informal staff discussions. 10) Handbags or valuables are kept in a secure place. 11) Hand washing.			
Personnel:	10 x Staff			
Planning Relationships:	Part of staff accommodation. Away from main patient treatment and traffic area.			
Space Data:	**Area (m²):**	20.00	**Height (mm):**	2400

Notes: Separate data and voice outlets may be used where structure cabling solutions are not available.

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	D0201-10	Staff Rest Room: 10 Staff - with small lockers and beverage prep area
Room Number:		**Revision Date:** 11/02/2020

TEMPERATURE AND VENTILATION	**Requirements**	**Notes**
Permissible Space Temperature Range(dry bulb) (degC):	28	
Heating Design Temperature (dry bulb)(degC):	22	
Minimum Air Changes (AC/hr):	4	or 10L/S/Person
Ventilation Type:	S/E/N	
Pressure Relative to Adjoining Space:	Bal	
Supply Air: Final Filter Class	G4	
Permissible Relative Humidity Range (%):	Uncontrolled	
General Notes:		

LIGHTING		
Type Of Control:	S/V/EM	
Daytime General Service Illuminance (Lux):	50	Floor
Daytime Specific Service Illuminance (Lux):	200	On tables
Night-time General Service Illuminance (Lux):		
Night-time Specific Service Illuminance (Lux):		
Local Task Illuminance (Lux):	300	At servery counter
Colour Rendering Required:	Y	
Colour Rendering Required Characteristics (Ra):	90	
Unified Glare Rating Limit (UGRL):	22	
Emergency Escape Route Lighting Required:	Y	In accordance with BS 5266 and Health Technical Memorandums
Standby Lighting Grade - General Lighting:	B	
Standby Lighting Grade - Local Lighting:		
General Notes:	Refer to SLL Lighting Guide 2 for more detailed guidance	

RISK		
Clinical Risk Category:		
Non-clinical Business Continuity Risk Category:		
General Notes:		

NOISE		
Noise Intrusion (dB) 1hr day:	50	
Noise Intrusion (dB) 1hr night:	-	
Noise Intrusion (dB) f night:	-	
Maximum Internal Noise from M&E Services (NR):	40	Total noise of MEP services under normal operation across the range 63Hz to 4kHz inclusive.
Room Sound-insulation Parameters - Privacy:	Moderate	Reference to Table 3 of the Department of Health 'Acoustics: Technical design manual 4032:0.6:England'.
Room Sound-insulation Parameters - Noise Generation:	High	
Noise Sensitivity:	Medium	
Sound-insulation Rating (dB D nT,w):		
General Notes:		

SAFETY/FIRE		
Maximum Surface Temperature (DegC):	82	
Domestic Hot Water Discharge Temperature (DegC):	41/>55	
Maximum Cold Water Discharge Temperature (DegC):	<20	
General Notes:		
Type of Automatic Fire Detection:	Smoke	
General Notes:		

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	D0201-10	Staff Rest Room: 10 Staff - with small lockers and beverage prep area
Room Number:		**Revision Date:** 10/02/2020

Walls:	Wall finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Wall finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Floor:	Floor finishes to comply with Performance Requirements in HBN 00-10 Part A:Flooring (2013) Floor finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part A:Flooring.
Ceiling:	Ceiling finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Ceiling finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Doorsets:	Configuration, glazing, fire rating, security, etc. to be determined by Project Team. HTM 58 (Mar-2005) Refer to HBN 00-04 (May-2007) for effective clear door widths. 1 doorset: 1 x personnel, wheelchair & equipment access (1000mm) In Mental Health accommodation doorsets, including ironmongery, should comply with the requirements set out in "Adult acute mental health units – Planning and design manual Version:0.4:England"
Windows:	Desirable - Project Option Clear glass with solar and privacy control Designation to be validated against current documentation (HTM 55 archived) In Mental Health accommodation windows and glazing should comply with the requirements set out in "Adult acute mental health units – Planning and design manual Version:0.4:England".
Internal Glazing:	Not required
Hatch:	Not required
Notes:	All finishes selected must have an appropriate risk assessment to accompany the design decision. Infection Control must be consulted as described in Performance Requirements for Building Elements Used in Healthcare Facilities 8941:0.6 England.

Project: 124476 NHSPS - Generic Hub
Department:
Room: D0201-10 Staff Rest Room: 10 Staff - with small lockers and beverage prep area
Room Number: **Revision Date:** 11/02/2020

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	OUT005	SOCKET outlet, switched, 13 amp, single		1
3		3	OUT006	SOCKET outlet unswitched 13amp single; wall mounted (to pair with OUT052)		1
2		2	OUT010	SOCKET outlet, switched, 13 amp, twin		1
3		3	OUT052	CONNECTION UNIT, switched, 13 amp		1
1		1	OUT131	SOCKET outlet data/voice, double.		1
1		1	OUT301	OUTLET, cold water for equipment		1
2		2	OUT315	OUTLET, drinking water for equipment		1
3		3	OUT910	SOCKET outlet, switched, 13 amp, twin plus 2 USB outlets		1
1		1	SHE934	SHELF UNIT, adjustable, 4 shelves, 300D, length to suit room		1
1		1	SIN910	SINK; inset stainless steel single bowl with drainer, tap hole and tap hole cover; Domestic; approx. 1000W 500D		1
1		1	SMC923	CABINET, base, modular storage, under sink; door handed as layout with adjustable shelf; 850H 600W		1
1		1	SMC925	CABINET, base, modular storage, door handed as layout with adjustable shelf, 1 drawer; 850H 600W		1
1		1	SMC926	CABINET, base, modular storage, 3 drawers; 850H 600W		1
3		3	SMC975	CABINET, upper, modular storage, door handed as layout with adjustable shelf; 550H 600W		1
1		1	SWC025	SWITCH, light		1
1		1	TAP910	TAP; single lever mixer; Domestic		1
1		1	TAP920	TAP; pillar, drinking water.		1
2		2	WAS103	WASTE, unslotted recessed grated, metal, 1.1/2 in, with plug and chain		1
2		2	WAS108	TRAP, bottle, 1.1/2 in, plastic resealing.		1
1		1	WAT903	WATER BOILER, 3.0 Litre, electric, wall mounted		1
1		1	WKT965	WORKTOP; 650D; Length As Drawn		1
1		1	BOA013	BOARD, display/notice, wall mounted, 900H 1200W		2
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS024	DISPENSER, soap, wall mounted		2
1		1	WAS070	DISHWASHER; Domestic; 850H 600W 625D		2
6		6	CHA305	CHAIR, easy, low back, upholstered, wipeable		3
4		4	CHA318	CHAIR, upright, with arms, upholstered, stacking, wipeable		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	LOC008	LOCKER; 2 compartments, 1800H 300W 450D		3
2		2	LOC014	LOCKER; 4 compartments, 1800H 300W 450D		3
1		1	OVE015	OVEN, microwave, super heavy duty, 1850watt, capacity 26 litres, stainless steel, 370H 465W 615D		3
1		1	REF920	REFRIGERATOR/FREEZER; Domestic; 1850H 600W 650D		3
2		2	TAB056	TABLE, occasional, round, 415H 610mm dia.		3

Project:	124476	NHSPS - Generic Hub	
Department:			
Room:	E0136	Image Control / Reporting Room	
Room Number:		**Revision Date:**	31/01/2020

Activities:	1) Stored data and/or images may be archived, retrieved or distributed. 2) Test reports may be prepared. 3) Electronic patient records (EPRs) may be accessed and updated. 4) Staff notices, information and/or messages may be displayed. 5) Telephone(s) may be used.			
Personnel:	2 x staff. 1 x other.			
Planning Relationships:				
Space Data:	**Area (m²):**	7.00	**Height (mm):**	2400

Notes: This room is similar to M0326-01

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	E0136	Image Control / Reporting Room
Room Number:		**Revision Date:** 31/01/2020

TEMPERATURE AND VENTILATION	**Requirements**	**Notes**
Permissible Space Temperature Range(dry bulb) (degC):	21 - 28	
Heating Design Temperature (dry bulb)(degC):	21	
Minimum Air Changes (AC/hr):	4	or 10L/S/Person
Ventilation Type:	S/E/N	
Pressure Relative to Adjoining Space:	Bal or -ve	
Supply Air: Final Filter Class	G4	
Permissible Relative Humidity Range (%):		
General Notes:		

LIGHTING		
Type Of Control:	S/N	
Daytime General Service Illuminance (Lux):	300	Over workstations
Daytime Specific Service Illuminance (Lux):	-	
Night-time General Service Illuminance (Lux):	-	
Night-time Specific Service Illuminance (Lux):	-	
Local Task Illuminance (Lux):	-	
Colour Rendering Required:	Y	
Colour Rendering Required Characteristics (Ra):	80	
Unified Glare Rating Limit (UGRL):	19	
Emergency Escape Route Lighting Required:	Y	In accordance with BS 5266 and Health Technical Memorandums
Standby Lighting Grade - General Lighting:	B	
Standby Lighting Grade - Local Lighting:		
General Notes:	Refer to CIBSE Lighting Guide LG3 for areas with VDT's	

RISK		
Clinical Risk Category:		
Non-clinical Business Continuity Risk Category:		
General Notes:		

NOISE		
Noise Intrusion (dB) 1hr day:	45	
Noise Intrusion (dB) 1hr night:	-	
Noise Intrusion (dB) f night:	-	
Maximum Internal Noise from M&E Services (NR):	35	Total noise of MEP services under normal operation across the range 63Hz to 4kHz inclusive.
Room Sound-insulation Parameters - Privacy:	Moderate	Reference to Table 3 of the Department of Health 'Acoustics: Technical design manual 4032:0.6:England'.
Room Sound-insulation Parameters - Noise Generation:	Typical	
Noise Sensitivity:	Medium	
Sound-insulation Rating (dB D nT,w):		
General Notes:		

SAFETY/FIRE		
Maximum Surface Temperature (DegC):	82	
Domestic Hot Water Discharge Temperature (DegC):	60	
Maximum Cold Water Discharge Temperature (DegC):	<20	
General Notes:		
Type of Automatic Fire Detection:	Smoke	
General Notes:		

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	E0136	Image Control / Reporting Room
Room Number:		**Revision Date:** 31/01/2020

Walls:	Wall finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Wall finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Floor:	Floor finishes to comply with Performance Requirements in HBN 00-10 Part A:Flooring (2013) Floor finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part A:Flooring.
Ceiling:	Ceiling finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Ceiling finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Doorsets:	Configuration, glazing, fire rating, security, etc. to be determined by Project Team. HTM 58 (Mar-2005) Refer to HBN 00-04 (May-2007) for effective clear door widths. 1 doorset: 1 x personnel, wheelchair & equipment access (1000mm)
Windows:	Desirable - Project Option Clear glass with solar and privacy control Designation to be validated against current documentation (HTM 55 archived).
Internal Glazing:	Non-essential - Project Option Designation to be validated against current documentation. HTM 57 (Mar-2005)
Hatch:	Not required
Notes:	All finishes selected must have an appropriate risk assessment to accompany the design decision. Infection Control must be consulted as described in Performance Requirements for Building Elements Used in Healthcare Facilities 8941:0.6 England.

Project: 124476 NHSPS - Generic Hub
Department:
Room: E0136 Image Control / Reporting Room
Room Number: **Revision Date:** 31/01/2020

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
3		3	HOO019	HOOK, single, small, wall mounted		1
1		1	OUT005	SOCKET outlet, switched, 13 amp, single		1
2		2	OUT010	SOCKET outlet, switched, 13 amp, twin		1
4		4	OUT131	SOCKET outlet data/voice, double.		1
2		2	OUT910	SOCKET outlet, switched, 13 amp, twin plus 2 USB outlets		1
1		1	SWC034	SWITCH, dimmer, modulating		1
2		2	WRT065	WORKTOP, non-clinical, 1500W 700D		1
1		1	BOA013	BOARD, display/notice, wall mounted, 900H 1200W		2
1		1	CAB027	CABINET, filing, 2 drawer, 710H 800W 470D		3
2		2	CHA301	CHAIR, swivel, height adjustable, high back, with arms, wipeable, 5 star base, on castors		3
1		1	CHA317	CHAIR, upright, upholstered, stacking, wipeable		3
2		2	COM033	COMPUTER KEYBOARD		3
2		2	COM049	COMPUTER MONITOR, 17"; TFT, digital flat panel display, high-resolution screens, desk top		3

Project:	124476	NHSPS - Generic Hub	
Department:			
Room:	E0176	Imaging Room: General X-Ray	
Room Number:		**Revision Date:**	31/01/2020

Activities:	1) Patient is positioned or repositioned for examination. 2) Radiation protection equipment will be used. 3) Imaging x-ray examination of patient. 4) Oxygen and vacuum services may be used for resuscitation. 5) Small items of equipment and sundries are stored. 6) Positioning aids e.g. wedges pillows and other immobilisation devices are stored. 7) Clinical wash-hand basin may be used. 8) Patient may arrive on foot in a wheelchair or on a trolley			
Personnel:	1 x patient. Up to 2 x staff. 1 x other/attendant.			
Planning Relationships:	Adjacent to viewing/reporting area. Direct access from changing cubicles - optional.			
Space Data:	**Area (m²):**	24.00	**Height (mm):**	3100

Notes:

The layout provides an indication of the spatial and equipment requirements for a generic digital X-ray room providing ambulant/wheelchair access only.
It is vital that users of this information obtain project specific/manufacturers' information as soon as possible in any development process and/or clearly define their own specific functional/technical requirements.

Radiation protection requirements are subject to RPA advice.

The call repeat lamp is situated over the door outside the room.
The "radiation in use" warning lamp should be installed at eye level outside the entrance(s) to the room.

The following items are shown on the room layout but are optional:
- door to viewing/reporting area, may also be open or no access provided depending on local policy/location.
- medical oxygen and vacuum outlets.
- repeat lamp (repeat for what - if call - is call optional)

The bulky stand may be connected to the vertical system for the imaging table subject to manufacturers' details.

A resuscitation trolley or pack should be located conveniently within the area for use in the event of emergency

Separate data and voice outlets may be used where structure cabling solutions are not available.

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	E0176	Imaging Room: General X-Ray
Room Number:		**Revision Date:** 31/01/2020

TEMPERATURE AND VENTILATION	**Requirements**	**Notes**
Permissible Space Temperature Range(dry bulb) (degC):	21 - 25	
Heating Design Temperature (dry bulb)(degC):	21	
Minimum Air Changes (AC/hr):	6	
Ventilation Type:	S/E	
Pressure Relative to Adjoining Space:	Bal	
Supply Air: Final Filter Class	F7	
Permissible Relative Humidity Range (%):		
General Notes:		

LIGHTING		
Type Of Control:	V/Sp	
Daytime General Service Illuminance (Lux):	300	at 1m AFFL. 2 Way switching of lights at door and by control desk (control desk may be in a separate room)
Daytime Specific Service Illuminance (Lux):	-	
Night-time General Service Illuminance (Lux):	-	
Night-time Specific Service Illuminance (Lux):	-	
Local Task Illuminance (Lux):	-	
Colour Rendering Required:	Y	
Colour Rendering Required Characteristics (Ra):	80	
Unified Glare Rating Limit (UGRL):	19	
Emergency Escape Route Lighting Required:	Y	In accordance with BS 5266 and Health Technical Memorandums
Standby Lighting Grade - General Lighting:	B	
Standby Lighting Grade - Local Lighting:		
General Notes:	Refer to SLL Lighting Guide 2 for more detailed guidance	

RISK		
Clinical Risk Category:		
Non-clinical Business Continuity Risk Category:		
General Notes:		

NOISE		
Noise Intrusion (dB) 1hr day:	40	
Noise Intrusion (dB) 1hr night:	-	
Noise Intrusion (dB) f night:	-	
Maximum Internal Noise from M&E Services (NR):	35	Total noise of MEP services under normal operation across the range 63Hz to 4kHz inclusive.
Room Sound-insulation Parameters - Privacy:	Confidential	Reference to Table 3 of the Department of Health 'Acoustics: Technical design manual 4032:0.6:England'.
Room Sound-insulation Parameters - Noise Generation:	Typical	
Noise Sensitivity:	Medium	
Sound-insulation Rating (dB D nT,w):		
General Notes:		

SAFETY/FIRE		
Maximum Surface Temperature (DegC):	43	
Domestic Hot Water Discharge Temperature (DegC):	41	
Maximum Cold Water Discharge Temperature (DegC):	<20	
General Notes:		
Type of Automatic Fire Detection:	Smoke	Non-ionising for rooms with x-ray machines
General Notes:		

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	E0176	Imaging Room: General X-Ray
Room Number:		**Revision Date:** 31/01/2020

Walls:	Wall finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Wall finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Floor:	Floor finishes to comply with Performance Requirements in HBN 00-10 Part A:Flooring (2013) Floor finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part A:Flooring.
Ceiling:	Ceiling finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Ceiling finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Doorsets:	Configuration, glazing, fire rating, security, etc. to be determined by Project Team. HTM 58 (Mar-2005) Refer to HBN 00-04 (May-2007) for effective clear door widths. 2 sets of doors - radiation protection: 1 x personnel, wheelchair & equipment access (1000mm); 1 x personnel, trolley, wheelchair & equipment access (1500mm) Requirement for hinge protection when areas used by children
Windows:	Not required - windows not desirable
Internal Glazing:	Not required
Hatch:	Not required
Notes:	All finishes selected must have an appropriate risk assessment to accompany the design decision. Infection Control must be consulted as described in Performance Requirements for Building Elements Used in Healthcare Facilities 8941:0.6 England.

Project: 124476 NHSPS - Generic Hub
Department:
Room: E0176 Imaging Room: General X-Ray
Room Number: **Revision Date:** 31/01/2020

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.		1
2		2	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
2		2	HOO019	HOOK, single, small, wall mounted		1
2		2	LIG071	ILLUMINATED SIGN 'RADIATION ON', wall mounted		1
1		1	OUT005	SOCKET outlet, switched, 13 amp, single		1
5		5	OUT010	SOCKET outlet, switched, 13 amp, twin		1
1		1	OUT049	CONNECTION UNIT, switched, 13 amp, flex outlet		1
1		1	OUT079	OUTLET isolator, equipment manufacturer's specification		1
5		5	OUT131	SOCKET outlet data/voice, double.		1
1		1	OUT470	OUTLET, oxygen, medical.		1
1		1	OUT475	OUTLET, vacuum, medical		1
5		5	OUT910	SOCKET outlet, switched, 13 amp, twin plus 2 USB outlets		1
3		3	SMC013	CABINET, base, modular storage, for 400 facing inserts, with door, on plinth, 900H		1
3		3	SMC023	CABINET, upper, modular storage, for 400 facing inserts, with door, 750H		1
1		1	SMW053	WORKTOP, clinical, for 3 x 400 facing modular storage cabinets, 1365W 700D		1
1		1	SWC025	SWITCH, light		1
1		1	SWC034	SWITCH, dimmer, modulating		1
1		1	SWC062	EMERGENCY STOP switch button, wall mounted		1
1		1	TAP892	TAP, bib, 2x8 mm thermostatic mixer, automatic action, sensor operated, non-touch,		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing.		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	BRA003	BRACKET, holder, suction unit.		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	DIS438	DISPENSER, disposable gloves set of 3 and disposable apron, wall mounted		2
1		1	SCR063	SCREEN shielding, radiation proof		2
1		1	XRA041	X-RAY TABLE - digital		2
1		1	XRA043	X-RAY UNIT (tube), with ceiling suspensions track - digital		2
1		1	XRA045	X-RAY CHEST stand - digital		2
1		1	XRA048	X-RAY CONTROL CONSOLE - digital		2

Project: 124476 NHSPS - Generic Hub
Department:
Room: E0176 Imaging Room: General X-Ray
Room Number: **Revision Date:** 31/01/2020

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	XRA049	X-RAY GENERATOR CABINET		2
2		2	CHA317	CHAIR, upright, upholstered, stacking, wipeable		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	HOL020	HOLDER, sharps box, up to 7 litre capacity, rail/trolley hang or wall mounted, 170H 125W 100D		3
1		1	RAC197	RACK, x-ray lead apron, 6 swivel arms, mobile		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

Project:	124476	NHSPS - Generic Hub	
Department:			
Room:	E0181	Imaging Room: Mammography	
Room Number:		**Revision Date:**	31/01/2020

Activities:	1) Mammography examination. 2) Small items of equipment and sundries are stored. 3) Radiation protection equipment will be used. 4) Clinical hand washing. 5) Patient may be ambulant with/without walking aids, in a wheelchair or requiring assistance. 6) Patient may undress/dress in privacy. 7) Computer workstation(s) may be used. 8) Electronic patient records (EPRs) may be accessed and updated. 9) Medical hand sanitizer may be used.			
Personnel:	1 x Patient 1 x Staff			
Planning Relationships:	Close to consulting/examination room.			
Space Data:	**Area (m²):**	16.00	**Height (mm):**	2700

Notes:

Medical oxygen & vacuum outlets - project team option.

Lamp indicator Radiation Warning at eye level at outside entrance.

Separate data and voice outlets may be used where structure cabling solutions are not available.

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	E0181	Imaging Room: Mammography
Room Number:		**Revision Date:** 31/01/2020

TEMPERATURE AND VENTILATION	**Requirements**	**Notes**
Permissible Space Temperature Range(dry bulb) (degC):	21 - 25	
Heating Design Temperature (dry bulb)(degC):	21	
Minimum Air Changes (AC/hr):	6	
Ventilation Type:	S/E	
Pressure Relative to Adjoining Space:	Bal	
Supply Air: Final Filter Class	F7	
Permissible Relative Humidity Range (%):		
General Notes:		
LIGHTING		
Type Of Control:	V/Sp	
Daytime General Service Illuminance (Lux):	300	at 1m AFFL. 2 Way switching of lights at door and by control desk (control desk may be in a separate room)
Daytime Specific Service Illuminance (Lux):	-	
Night-time General Service Illuminance (Lux):	-	
Night-time Specific Service Illuminance (Lux):	-	
Local Task Illuminance (Lux):	-	
Colour Rendering Required:	Y	
Colour Rendering Required Characteristics (Ra):	80	
Unified Glare Rating Limit (UGRL):	19	
Emergency Escape Route Lighting Required:	Y	In accordance with BS 5266 and Health Technical Memorandums
Standby Lighting Grade - General Lighting:	B	
Standby Lighting Grade - Local Lighting:		
General Notes:		
RISK		
Clinical Risk Category:		
Non-clinical Business Continuity Risk Category:		
General Notes:		
NOISE		
Noise Intrusion (dB) 1hr day:	40	
Noise Intrusion (dB) 1hr night:	-	
Noise Intrusion (dB) f night:	-	
Maximum Internal Noise from M&E Services (NR):	35	Total noise of MEP services under normal operation across the range 63Hz to 4kHz inclusive.
Room Sound-insulation Parameters - Privacy:	Confidential	Reference to Table 3 of the Department of Health 'Acoustics: Technical design manual 4032:0.6:England'.
Room Sound-insulation Parameters - Noise Generation:	Typical	
Noise Sensitivity:	Medium	
Sound-insulation Rating (dB D nT,w):		
General Notes:		
SAFETY/FIRE		
Maximum Surface Temperature (DegC):	43	
Domestic Hot Water Discharge Temperature (DegC):	41	
Maximum Cold Water Discharge Temperature (DegC):	<20	
General Notes:		
Type of Automatic Fire Detection:	Smoke	Non-ionising for rooms with x-ray machines
General Notes:		

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	E0181	Imaging Room: Mammography
Room Number:		**Revision Date:** 31/01/2020

Walls:	Wall finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Wall finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Floor:	Floor finishes to comply with Performance Requirements in HBN 00-10 Part A:Flooring (2013) Floor finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part A:Flooring.
Ceiling:	Ceiling finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Ceiling finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Doorsets:	Configuration, glazing, fire rating, security, etc. to be determined by Project Team. HTM 58 (Mar-2005) Refer to HBN 00-04 (May-2007) for effective clear door widths. 1 doorset - radiation protection: 1 x personnel, trolley, wheelchair & equipment access (1500mm)
Windows:	Not required - windows not desirable
Internal Glazing:	Not required
Hatch:	Not required
Notes:	All finishes selected must have an appropriate risk assessment to accompany the design decision. Infection Control must be consulted as described in Performance Requirements for Building Elements Used in Healthcare Facilities 8941:0.6 England.

Project: 124476 NHSPS - Generic Hub
Department:
Room: E0181 Imaging Room: Mammography
Room Number: **Revision Date:** 31/01/2020

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.		1
1		1	CAL007	PULL/PUSH BUTTON, staff emergency call, reset and integral/adjacent indicator lamp		1
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
1		1	LIG071	ILLUMINATED SIGN 'RADIATION ON', wall mounted		1
1		1	OUT005	SOCKET outlet, switched, 13 amp, single		1
2		2	OUT010	SOCKET outlet, switched, 13 amp, twin		1
1		1	OUT049	CONNECTION UNIT, switched, 13 amp, flex outlet		1
1		1	OUT131	SOCKET outlet data/voice, double.		1
2		2	OUT910	SOCKET outlet, switched, 13 amp, twin plus 2 USB outlets		1
1		1	SMW072	WORKTOP, clinical, for 400 facing modular storage cabinets, 1200W 700D		1
1		1	SWC025	SWITCH, light		1
1		1	SWC034	SWITCH, dimmer, modulating		1
1		1	SWC062	EMERGENCY STOP switch button, wall mounted		1
1		1	TAP892	TAP, bib, 2x8 mm thermostatic mixer, automatic action, sensor operated, non-touch,		1
1		1	TRA172	TRACK, curtain, one sided, 3800L		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing.		1
1		1	BOA012	BOARD, display/notice, wall mounted, 900H 600W		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	CHA304	CHAIR, swivel, height adjustable, medium back, wipeable, 5 star base, on glides		3
1		1	CHA317	CHAIR, upright, upholstered, stacking, wipeable		3
1		1	COM033	COMPUTER KEYBOARD		3
1		1	COM049	COMPUTER MONITOR, 17"; TFT, digital flat panel display, high-resolution screens, desk top		3
1		1	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	IMG047	IMAGER DIGITAL MAMMOGRAPHY UNIT, floor mounted with rotation of swivel arm, floor mounted		3
1		1	IMG048	IMAGER CONTROL CONSOLE and RADIATION PROTECTION SCREEN with GENERATOR for mammography unit (part of IMG047)		3
1		1	IMG109	IMAGING CHAIR, with arms, tilt, on castors		3
1		1	RAC197	RACK, x-ray lead apron, 6 swivel arms, mobile		3

Project:	124476	NHSPS - Generic Hub	
Department:			
Room:	J0232-09	Reception: 2 Person	
Room Number:		**Revision Date:**	31/01/2020

Activities:	1) Reception and registration of patients. 2) Maintaining appointments and attendance register. 3) Computer workstation(s) may be used. 4) Dealing with enquiries. 5) Telephone(s) may be used. 6) Controlling access to clinical or work area. 7) Staff notices, information and/or messages may be displayed.			
Personnel:	2 x staff. 2 x patients/visitors.			
Planning Relationships:	Close to, with clear view of, entrance and waiting area. Close to self-registration point when provided. Close to clinical or work area(s). Easy access to records store when paper records are still used. Access to a "safe haven" area.			
Space Data:	**Area (m²):**	10.00	**Height (mm):**	2400
	2400 mm is the anticipated minimum ceiling height. This should be sized to suit surrounding area/design. 5 sqm. per person			

Notes:

Design notes:

See HBN 00-03 Clinical and clinical support spaces

The reception desk should be accessible to all users and provide security for staff.

Desk/counter to be open rather than enclosed.

In facilities for children and young people it should be child friendly.

Design solution notes:

Component list notes:

The following items may be provided:
a printer;
a "controlled entry" system;
a "next patient" call system;

Separate data and voice outlets may be used where structure cabling solutions are not available.

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	J0232-09	Reception: 2 Person
Room Number:		**Revision Date:** 31/01/2020

TEMPERATURE AND VENTILATION	**Requirements**	**Notes**
Permissible Space Temperature Range(dry bulb) (degC):	21 - 28	
Heating Design Temperature (dry bulb)(degC):	21	
Minimum Air Changes (AC/hr):	4	or 10L/S/Person
Ventilation Type:	S/E/N	
Pressure Relative to Adjoining Space:	Bal	
Supply Air: Final Filter Class	G4	
Permissible Relative Humidity Range (%):	Uncontrolled	
General Notes:		

LIGHTING		
Type Of Control:	S/N	
Daytime General Service Illuminance (Lux):	300	
Daytime Specific Service Illuminance (Lux):	-	
Night-time General Service Illuminance (Lux):	-	
Night-time Specific Service Illuminance (Lux):	-	
Local Task Illuminance (Lux):	500	Over desk task area
Colour Rendering Required:	Y	
Colour Rendering Required Characteristics (Ra):	80	
Unified Glare Rating Limit (UGRL):	19	
Emergency Escape Route Lighting Required:	Y	In accordance with BS 5266 and Health Technical Memorandums
Standby Lighting Grade - General Lighting:	B	
Standby Lighting Grade - Local Lighting:		
General Notes:	Refer to SLL Lighting Guide 2 for more detailed guidance	

RISK		
Clinical Risk Category:		
Non-clinical Business Continuity Risk Category:		
General Notes:	Security Alarm under reception desk	

NOISE		
Noise Intrusion (dB) 1hr day:	58	
Noise Intrusion (dB) 1hr night:	-	
Noise Intrusion (dB) f night:	-	
Maximum Internal Noise from M&E Services (NR):	35	Total noise of MEP services under normal operation across the range 63Hz to 4kHz inclusive.
Room Sound-insulation Parameters - Privacy:	Not Private	Reference to Table 3 of the Department of Health 'Acoustics: Technical design manual 4032:0.6:England'.
Room Sound-insulation Parameters - Noise Generation:	Typical	
Noise Sensitivity:	Not	
Sound-insulation Rating (dB D nT,w):		
General Notes:		

SAFETY/FIRE		
Maximum Surface Temperature (DegC):	43	
Domestic Hot Water Discharge Temperature (DegC):	41	
Maximum Cold Water Discharge Temperature (DegC):	<20	
General Notes:		
Type of Automatic Fire Detection:	Smoke	L1 in accordance with HTM
General Notes:	L1	

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	J0232-09	Reception: 2 Person
Room Number:		**Revision Date:** 31/01/2020

Walls:	Wall finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Wall finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Floor:	Floor finishes to comply with Performance Requirements in HBN 00-10 Part A:Flooring (2013) Floor finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part A:Flooring.
Ceiling:	Ceiling finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Ceiling finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Doorsets:	Configuration, glazing, fire rating, security, etc. to be determined by Project Team. Refer to HBN 00 04 (2013) for effective clear door widths. 1 doorset: 1 x personnel, wheelchair & equipment access (1000mm)
Windows:	Not required
Internal Glazing:	Not required
Hatch:	Not required
Notes:	All finishes selected must have an appropriate risk assessment to accompany the design decision. Infection Control must be consulted as described in HBN 00-10.

Project: 124476 NHSPS - Generic Hub
Department:
Room: J0232-09 Reception: 2 Person
Room Number: **Revision Date:** 31/01/2020

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	ALA001	PUSH BUTTON, security alarm		1
1		1	COU087	COUNTER RECEPTION, console top,		1
1		1	OUT005	SOCKET outlet, switched, 13 amp, single		1
2		2	OUT010	SOCKET outlet, switched, 13 amp, twin		1
2		2	OUT131	SOCKET outlet data/voice, double.		1
2		2	OUT910	SOCKET outlet, switched, 13 amp, twin plus 2 USB outlets		1
1		1	PAN063	PANEL, indicator		1
1		1	SWC025	SWITCH, light		1
2		2	CHA301	CHAIR, swivel, height adjustable, high back, with arms, wipeable, 5 star base, on castors		3
2		2	COM033	COMPUTER KEYBOARD		3
2		2	COM049	COMPUTER MONITOR, 17"; TFT, digital flat panel display, high-resolution screens, desk top		3
1		1	DRA056	DRAWER UNIT, 2 drawers, lockable, on castors, 600H 410W 600D		3

Project:	124476	NHSPS - Generic Hub	
Department:			
Room:	J1255-10	Waiting Area: 10 Places (including 1 wheelchair place)	
Room Number:		**Revision Date:**	31/01/2020

Activities:	1) Patients, relatives and escorts wait to be seen.			
Personnel:	10 x persons, including 1 x wheelchair user.			
Planning Relationships:	Close to clinical or work area. Close to WC facilities. Associated with child play area (when provided).			
Space Data:	**Area (m²):**	15.00	**Height (mm):**	2400
	2400 mm is the anticipated minimum ceiling height. This should be sized to suit surrounding area/design.			

Notes:

Design notes:

Method for calling patients into clinical rooms to be decided locally.

Design solution notes:

Component list notes:

Mental Health patient use of space:

Where there is a significant risk of assault or self harm all furniture and fittings are required to be robust, anti ligature, prevent opportunities for concealment and meet infection control requirements while being therapeutic and domestic in style. The risk management advisor should determine the level of requirements for each room to ensure that appropriate safe access is provided for service users and staff.

Type of seating to be suitable for patient profile.

The following items may be provided:
an enclosed noticeboard;
background music and other entertainment facilities;
television and internet access.

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	J1255-10	Waiting Area: 10 Places (including 1 wheelchair place)
Room Number:		**Revision Date:** 31/01/2020

TEMPERATURE AND VENTILATION	**Requirements**	**Notes**
Permissible Space Temperature Range(dry bulb) (degC):	21 - 28	
Heating Design Temperature (dry bulb)(degC):	21	
Minimum Air Changes (AC/hr):	4	or 10L/S/Person
Ventilation Type:	S/E/N	
Pressure Relative to Adjoining Space:	Bal or -ve	
Supply Air: Final Filter Class	G4	
Permissible Relative Humidity Range (%):	Uncontrolled	
General Notes:		

LIGHTING		
Type Of Control:	S/N	
Daytime General Service Illuminance (Lux):	200	
Daytime Specific Service Illuminance (Lux):	-	
Night-time General Service Illuminance (Lux):	-	
Night-time Specific Service Illuminance (Lux):	-	
Local Task Illuminance (Lux):	-	
Colour Rendering Required:	Y	
Colour Rendering Required Characteristics (Ra):	80	
Unified Glare Rating Limit (UGRL):	-	
Emergency Escape Route Lighting Required:	Y	In accordance with BS 5266 and Health Technical Memorandums
Standby Lighting Grade - General Lighting:	B	
Standby Lighting Grade - Local Lighting:		-
General Notes:	Refer to SLL Lighting Guide 2 for more detailed guidance	

RISK		
Clinical Risk Category:		
Non-clinical Business Continuity Risk Category:		
General Notes:		

NOISE		
Noise Intrusion (dB) 1hr day:	66	
Noise Intrusion (dB) 1hr night:	-	
Noise Intrusion (dB) f night:	-	
Maximum Internal Noise from M&E Services (NR):	40	Total noise of MEP services under normal operation across the range 63Hz to 4kHz inclusive.
Room Sound-insulation Parameters - Privacy:	Not Private	Reference to Table 3 of the Department of Health 'Acoustics: Technical design manual 4032:0.6:England'.
Room Sound-insulation Parameters - Noise Generation:	Typical	
Noise Sensitivity:	Not	
Sound-insulation Rating (dB D nT,w):		
General Notes:		

SAFETY/FIRE		
Maximum Surface Temperature (DegC):	43	
Domestic Hot Water Discharge Temperature (DegC):	41	
Maximum Cold Water Discharge Temperature (DegC):	<20	
General Notes:		
Type of Automatic Fire Detection:	Smoke	L1 in accordance with HTM
General Notes:	L1	

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	J1255-10	Waiting Area: 10 Places (including 1 wheelchair place)
Room Number:		**Revision Date:** 31/01/2020

Walls:	Wall finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Wall finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Floor:	Floor finishes to comply with Performance Requirements in HBN 00-10 Part A:Flooring (2013) Floor finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part A:Flooring.
Ceiling:	Ceiling finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Ceiling finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Doorsets:	Not required - open to circulation area or part of another space
Windows:	Non-essential Project Option Clear glass with solar control. Designation to be validated against current documentation (HBN 00 10 Part D: Windows and associated hardware (2013)). In Mental Health accommodation windows and glazing should comply with the requirements set out in HBN 03 01.
Internal Glazing:	Not required
Hatch:	Not required
Notes:	All finishes selected must have an appropriate risk assessment to accompany the design decision. Infection Control must be consulted as described in HBN 00-10.

Project: 124476 NHSPS - Generic Hub
Department:
Room: J1255-10 Waiting Area: 10 Places (including 1 wheelchair place)
Room Number: **Revision Date:** 31/01/2020

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	OUT005	SOCKET outlet, switched, 13 amp, single		1
1		1	OUT010	SOCKET outlet, switched, 13 amp, twin		1
1		1	SWC025	SWITCH, light		1
2		2	CHA367	UNIT CHAIR, 1 seater, with arms, upholstered, wipeable		3
1		1	CHA369	UNIT CHAIR, 3 seaters, with arms, upholstered, wipeable		3
2		2	CHA379	UNIT CHAIR/SETTEE, 2 seaters, easy, with arms, fully upholstered, wipeable.		3
2		2	TAB053	TABLE, occasional, square, 415H 610W 610D		3

Project:	124476	NHSPS - Generic Hub	
Department:			
Room:	L1308	Near Patient Testing Room	
Room Number:		**Revision Date:**	31/01/2020

Activities:	1) Electronic patient records (EPRs) may be accessed and updated. 2) Clinical wash-hand basin may be used. 3) Patient records may be reviewed and recorded. 4) Performing electrolyte analysis. 5) Performing blood gas analysis. 6) Performing glucose analysis. 7) Computer workstation(s) may be used. 8) Displaying information. 9) Printer may be used.			
Personnel:	2 x staff. Intermittent use.			
Planning Relationships:	This room is based on the use of an outward opening entrance door, where an entrance door is not provided, the entrance must be within a secure staff area.			
Space Data:	**Area (m²):**	8.00	**Height (mm):**	2700

Notes:

Type of analyser provided to suit range of tests to be undertaken.

The following items are shown on the room layout but are optional:
- door to room;
- a specimen fridge;
- a sink and demineralised water supply.

The following items may be provided:
- a pneumatic tube to/from pathology.

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Separate data and voice outlets may be used where structure cabling solutions are not available.

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	L1308	Near Patient Testing Room
Room Number:		**Revision Date:** 31/01/2020

TEMPERATURE AND VENTILATION	**Requirements**	**Notes**
Permissible Space Temperature Range(dry bulb) (degC):	21 - 28	
Heating Design Temperature (dry bulb)(degC):	21	
Minimum Air Changes (AC/hr):	4	or 10L/S/Person
Ventilation Type:	S/E	
Pressure Relative to Adjoining Space:	Bal or -ve	
Supply Air: Final Filter Class	F7	
Permissible Relative Humidity Range (%):	Uncontrolled	
General Notes:		

LIGHTING		
Type Of Control:	S/N	
Daytime General Service Illuminance (Lux):	300	
Daytime Specific Service Illuminance (Lux):	-	
Night-time General Service Illuminance (Lux):	-	
Night-time Specific Service Illuminance (Lux):	-	
Local Task Illuminance (Lux):	-	
Colour Rendering Required:	Y	
Colour Rendering Required Characteristics (Ra):	90	
Unified Glare Rating Limit (UGRL):	19	
Emergency Escape Route Lighting Required:	Y	In accordance with BS 5266 and Health Technical Memorandums
Standby Lighting Grade - General Lighting:	B	
Standby Lighting Grade - Local Lighting:		-
General Notes:		

RISK		
Clinical Risk Category:		
Non-clinical Business Continuity Risk Category:		
General Notes:		

NOISE		
Noise Intrusion (dB) 1hr day:	40	
Noise Intrusion (dB) 1hr night:	-	
Noise Intrusion (dB) f night:	-	
Maximum Internal Noise from M&E Services (NR):	35	Total noise of MEP services under normal operation across the range 63Hz to 4kHz inclusive.
Room Sound-insulation Parameters - Privacy:	Confidential	Reference to Table 3 of the Department of Health 'Acoustics: Technical design manual 4032:0.6:England'.
Room Sound-insulation Parameters - Noise Generation:	Typical	
Noise Sensitivity:	Medium	
Sound-insulation Rating (dB D nT,w):		
General Notes:		

SAFETY/FIRE		
Maximum Surface Temperature (DegC):	43	
Domestic Hot Water Discharge Temperature (DegC):	41	
Maximum Cold Water Discharge Temperature (DegC):	<20	
General Notes:		
Type of Automatic Fire Detection:	Smoke	
General Notes:		

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	L1308	Near Patient Testing Room
Room Number:		**Revision Date:** 31/01/2020

Walls:	Wall finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Wall finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Floor:	Floor finishes to comply with Performance Requirements in HBN 00-10 Part A:Flooring (2013) Floor finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part A:Flooring.
Ceiling:	Ceiling finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Ceiling finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Doorsets:	Configuration, glazing, fire rating, security, etc. to be determined by Project Team. HTM 58 (Mar-2005) Refer to HBN 00-04 (May-2007) for effective clear door widths. Not applicable or 1 doorset: 1 x personnel & equipment access (1000mm)
Windows:	Not required
Internal Glazing:	Not required
Hatch:	Not required
Notes:	All finishes selected must have an appropriate risk assessment to accompany the design decision. Infection Control must be consulted as described in Performance Requirements for Building Elements Used in Healthcare Facilities 8941:0.6 England.

Project: 124476 NHSPS - Generic Hub
Department:
Room: L1308 Near Patient Testing Room
Room Number: **Revision Date:** 31/01/2020

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.		1
1		1	HOO019	HOOK, single, small, wall mounted		1
1		1	LWB080	WORKBENCH laboratory, C-frame, freestanding, 920H 2000W 750D.		1
1		1	LWS190	WORKTOP, with right hand sink bowl (sink size 200x450x365), 920H 3000W 750D.		1
1		1	OUT002	OUTLET cable, 13 amp		1
1		1	OUT005	SOCKET outlet, switched, 13 amp, single		1
2		2	OUT010	SOCKET outlet, switched, 13 amp, twin		1
1		1	OUT049	CONNECTION UNIT, switched, 13 amp, flex outlet		1
1		1	OUT052	CONNECTION UNIT, switched, 13 amp		1
4		4	OUT131	SOCKET outlet data/voice, double.		1
1		1	OUT910	SOCKET outlet, switched, 13 amp, twin plus 2 USB outlets		1
2		2	SMC023	CABINET, upper, modular storage, for 400 facing inserts, with door, 750H		1
1		1	SWC025	SWITCH, light		1
2		2	TAP022	TAP, laboratory, cold water		1
2		2	TAP023	TAP, laboratory, hot water		1
1		1	TAP892	TAP, bib, 2x8 mm thermostatic mixer, automatic action, sensor operated, non-touch,		1
1		1	WAS103	WASTE, unslotted recessed grated, metal, 1.1/2 in, with plug and chain		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing.		1
1		1	WAS108	TRAP, bottle, 1.1/2 in, plastic resealing.		1
1		1	BOA012	BOARD, display/notice, wall mounted, 900H 600W		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	DIS030	DISPENSER, soap, disposable single cartridge, lever action, wall mounted		2
1		1	ANA052	ANALYSER, blood gas with electrolytes, 550H 700W 530D		3
1		1	CHA303	CHAIR, swivel, height adjustable 540-790, tilting back, adjustable footrest, wipeable, 5 star base, on castors/glides		3
1		1	COM033	COMPUTER KEYBOARD		3
1		1	COM049	COMPUTER MONITOR, 17"; TFT, digital flat panel display, high-resolution screens, desk top		3
1		1	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	REF060	REFRIGERATOR, reagents, capacity 110 litre, external temperature gauge, automatic defrost, under bench, 850H 500W 590D		3

Project: 124476 NHSPS - Generic Hub
Department:
Room: L1308 Near Patient Testing Room
Room Number:
Revision Date: 31/01/2020

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	SMT001	TROLLEY, modular storage, single open frame, including handle, with up to 5 sets of runners for 600 facing inserts, 850H 730W 450D		3

Project:	124476	NHSPS - Generic Hub	
Department:			
Room:	M0251	Office: 1 Person	
Room Number:		**Revision Date:**	31/01/2020

Activities:	1) Clinical administration. 2) Computer workstation(s) may be used. 3) Telephone(s) may be used. 4) Discussions and interviews may take place. 5) Files and records are stored. 6) Hanging outdoor clothing. 7) Secure holding/storing of clothing and personal belongings. 8) Printer may be used. 9) Electronic patient records (EPRs) may be accessed and updated. 10) Staff notices, information and/or messages may be displayed. 11) Dealing with enquiries. 12) Information on computers may be accessed.			
Personnel:	1 x staff Up to x 2 others.			
Planning Relationships:				
Space Data:	**Area (m²):**	8.00	**Height (mm):**	2400
	8 sqm single + 5 sqm per extra person per room			

Notes:

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

The following items may be provided;
- shelving;
- printer.

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 - recommended if the room is used for viewing digital images.

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Separate data and voice outlets may be used where structure cabling solutions are not available.

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	M0251	Office: 1 Person
Room Number:		**Revision Date:** 31/01/2020

TEMPERATURE AND VENTILATION	**Requirements**	**Notes**
Permissible Space Temperature Range(dry bulb) (degC):	21 - 28	
Heating Design Temperature (dry bulb)(degC):	21	
Minimum Air Changes (AC/hr):	4	or 10L/S/Person
Ventilation Type:	S/E/N	
Pressure Relative to Adjoining Space:	Bal	
Supply Air: Final Filter Class	G4	
Permissible Relative Humidity Range (%):		
General Notes:		

LIGHTING		
Type Of Control:	S/N	
Daytime General Service Illuminance (Lux):	300	Over workstations
Daytime Specific Service Illuminance (Lux):	-	
Night-time General Service Illuminance (Lux):	-	
Night-time Specific Service Illuminance (Lux):	-	
Local Task Illuminance (Lux):	-	
Colour Rendering Required:	Y	
Colour Rendering Required Characteristics (Ra):	80	
Unified Glare Rating Limit (UGRL):	19	
Emergency Escape Route Lighting Required:	Y	In accordance with BS 5266 and Health Technical Memorandums
Standby Lighting Grade - General Lighting:	B	
Standby Lighting Grade - Local Lighting:		-
General Notes:	Refer to CIBSE Lighting Guide LG3 for areas with VDT's	

RISK		
Clinical Risk Category:		
Non-clinical Business Continuity Risk Category:		
General Notes:		

NOISE		
Noise Intrusion (dB) 1hr day:	40	
Noise Intrusion (dB) 1hr night:	-	
Noise Intrusion (dB) f night:	-	
Maximum Internal Noise from M&E Services (NR):	35	Total noise of MEP services under normal operation across the range 63Hz to 4kHz inclusive.
Room Sound-insulation Parameters - Privacy:	Private	Reference to Table 3 of the Department of Health 'Acoustics: Technical design manual 4032:0.6:England'.
Room Sound-insulation Parameters - Noise Generation:	Typical	
Noise Sensitivity:	Medium	
Sound-insulation Rating (dB D nT,w):		
General Notes:		

SAFETY/FIRE		
Maximum Surface Temperature (DegC):	82	
Domestic Hot Water Discharge Temperature (DegC):	60	
Maximum Cold Water Discharge Temperature (DegC):	<20	
General Notes:		
Type of Automatic Fire Detection:	Smoke	
General Notes:		

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	M0251	Office: 1 Person
Room Number:		**Revision Date:** 31/01/2020

Walls:	Wall finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Wall finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Floor:	Floor finishes to comply with Performance Requirements in HBN 00-10 Part A:Flooring (2013) Floor finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part A:Flooring.
Ceiling:	Ceiling finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Ceiling finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Doorsets:	Configuration, glazing, fire rating, security, etc. to be determined by Project Team. HTM 58 (Mar-2005) Refer to HBN 00-04 (May-2007) for effective clear door widths. 1 doorset: 1 x personnel, wheelchair & equipment access (1000mm)
Windows:	Desirable - Project Option Clear glass with solar and privacy control Designation to be validated against current documentation (HTM 55 archived).
Internal Glazing:	Non-essential - Project Option Designation to be validated against current documentation. HTM 57 (Mar-2005)
Hatch:	Not required
Notes:	All finishes selected must have an appropriate risk assessment to accompany the design decision. Infection Control must be consulted as described in Performance Requirements for Building Elements Used in Healthcare Facilities 8941:0.6 England.

Project: 124476 NHSPS - Generic Hub
Department:
Room: M0251 Office: 1 Person
Room Number: **Revision Date:** 31/01/2020

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
3		3	HOO019	HOOK, single, small, wall mounted		1
1		1	LIG138	LUMINAIRE, indicating controlled drugs cupboard repeat		1
1		1	OUT005	SOCKET outlet, switched, 13 amp, single		1
1		1	OUT010	SOCKET outlet, switched, 13 amp, twin		1
2		2	OUT131	SOCKET outlet data/voice, double.		1
1		1	OUT910	SOCKET outlet, switched, 13 amp, twin plus 2 USB outlets		1
1		1	SWC025	SWITCH, light		1
1		1	BOA013	BOARD, display/notice, wall mounted, 900H 1200W		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	COM033	COMPUTER KEYBOARD		3
1		1	COM049	COMPUTER MONITOR, 17"; TFT, digital flat panel display, high-resolution screens, desk top		3
1		1	DES026	DESK UNIT, cantilever, cable management, adjustable legs, modesty panel, 1400W 700D		3
1		1	DRA056	DRAWER UNIT, 2 drawers, lockable, on castors, 600H 410W 600D		3
1		1	DRA057	DRAWER UNIT, 3 drawers, lockable, on castors, desk height 715H 430W 600D		3

Project:	124476	NHSPS - Generic Hub	
Department:			
Room:	M0724	Interview Room: 4 Places (including 1 wheelchair place)	
Room Number:		**Revision Date:**	31/01/2020

Activities:	1) Discussions and interviews may take place. 2) Telephone(s) may be used. 3) Laptop computer(s) may be used. 4) Call systems may be used.			
Personnel:	Up to 4 x persons.			
Planning Relationships:				
Space Data:	**Area (m²):**	8.00	**Height (mm):**	2400
	Area Range: 8-12 sqm.			

Notes:

The call repeat lamp is situated over the door outside the room.

The following items are shown on the room layout but are optional:
- staff emergency call (not required if the room is for staff use only);
- telephone (should not be provided in rooms intended as quiet spaces);
- room in use switch and indicator.

The following items may be provided:
- a clinical wash-hand basin and gel dispenser to allow for clinical use of the room;

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Separate data and voice outlets may be used where structure cabling solutions are not available.

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	M0724	Interview Room: 4 Places (including 1 wheelchair place)
Room Number:		**Revision Date:** 31/01/2020

TEMPERATURE AND VENTILATION	**Requirements**	**Notes**
Permissible Space Temperature Range(dry bulb) (degC):	21 - 28	
Heating Design Temperature (dry bulb)(degC):	21	
Minimum Air Changes (AC/hr):	4	or 10L/S/Person
Ventilation Type:	S/E/N	
Pressure Relative to Adjoining Space:	Bal	
Supply Air: Final Filter Class	G4	
Permissible Relative Humidity Range (%):		
General Notes:		

LIGHTING		
Type Of Control:	N	
Daytime General Service Illuminance (Lux):	300	
Daytime Specific Service Illuminance (Lux):	-	
Night-time General Service Illuminance (Lux):	-	
Night-time Specific Service Illuminance (Lux):	-	
Local Task Illuminance (Lux):	-	
Colour Rendering Required:	Y	
Colour Rendering Required Characteristics (Ra):	80	
Unified Glare Rating Limit (UGRL):	19	
Emergency Escape Route Lighting Required:	Y	In accordance with BS 5266 and Health Technical Memorandums
Standby Lighting Grade - General Lighting:	B	
Standby Lighting Grade - Local Lighting:		-
General Notes:		

RISK		
Clinical Risk Category:		
Non-clinical Business Continuity Risk Category:		
General Notes:		

NOISE		
Noise Intrusion (dB) 1hr day:	40	
Noise Intrusion (dB) 1hr night:	-	
Noise Intrusion (dB) f night:	-	
Maximum Internal Noise from M&E Services (NR):	35	Total noise of MEP services under normal operation across the range 63Hz to 4kHz inclusive.
Room Sound-insulation Parameters - Privacy:	Confidential	Reference to Table 3 of the Department of Health 'Acoustics: Technical design manual 4032:0.6:England'.
Room Sound-insulation Parameters - Noise Generation:	Typical	
Noise Sensitivity:	Medium	
Sound-insulation Rating (dB D nT,w):		
General Notes:		

SAFETY/FIRE		
Maximum Surface Temperature (DegC):	43	
Domestic Hot Water Discharge Temperature (DegC):	43	
Maximum Cold Water Discharge Temperature (DegC):	<20	
General Notes:		
Type of Automatic Fire Detection:	Smoke	
General Notes:		

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	M0724	Interview Room: 4 Places (including 1 wheelchair place)
Room Number:		**Revision Date:** 31/01/2020

Walls:	Wall finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Wall finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Floor:	Floor finishes to comply with Performance Requirements in HBN 00-10 Part A:Flooring (2013) Floor finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part A:Flooring.
Ceiling:	Ceiling finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Ceiling finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Doorsets:	Configuration, glazing, fire rating, security, etc. to be determined by Project Team. HTM 58 (Mar-2005) Refer to HBN 00-04 (May-2007) for effective clear door widths. 1 doorset: 1 x personnel, wheelchair & equipment access (1000mm)
Windows:	Non-essential - Project Option Clear glass with solar and privacy control Designation to be validated against current documentation (HTM 55 archived).
Internal Glazing:	Not required
Hatch:	Not required
Notes:	All finishes selected must have an appropriate risk assessment to accompany the design decision. Infection Control must be consulted as described in Performance Requirements for Building Elements Used in Healthcare Facilities 8941:0.6 England.

Project: 124476 NHSPS - Generic Hub
Department:
Room: M0724 Interview Room: 4 Places (including 1 wheelchair place)
Room Number: **Revision Date:** 31/01/2020

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	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
4		4	HOO019	HOOK, single, small, wall mounted		1
1		1	LIG073	ILLUMINATED SIGN, 'Room in use'		1
1		1	OUT005	SOCKET outlet, switched, 13 amp, single		1
1		1	OUT131	SOCKET outlet data/voice, double.		1
1		1	OUT910	SOCKET outlet, switched, 13 amp, twin plus 2 USB outlets		1
1		1	SWC025	SWITCH, light		1
1		1	SWC076	SWITCH, 'Room in use' illuminated sign.		1
3		3	CHA305	CHAIR, easy, low back, upholstered, wipeable		3
1		1	TAB053	TABLE, occasional, square, 415H 610W 610D		3

Project:	124476	NHSPS - Generic Hub	
Department:			
Room:	R0902-12	Decontamination Room: Dirty Dental instruments	
Room Number:		**Revision Date:**	31/01/2020

Activities:	1) Soiled instruments may be cleansed, disinfected and sterilised 2) Sterilizer is loaded/unloaded. 3) Loading of medical devices into ultrasonic. 4) Cleaning endoscopes. 5) Automatic washing, disinfecting and sterilizing endoscopes. 6) Holding supplies of endoscope processing chemicals. 7) Sterilizing instruments and equipment. 8) Instruments or equipment are washed by hand. 9) Clinical wash-hand basin may be used. 10) Dispensing disposable aprons. 11) Dispensing disposable gloves.			
Personnel:	Up to 2 staff.			
Planning Relationships:	Adjacent to decontamination suite clean instruments room			
Space Data:	**Area (m²):**	12.00	**Height (mm):**	2400

Notes:

Reference should be made to HTM 01-01 and HTM 01-05 Decontamination in primary care dental practices, figure 3 although it is believed that this room is suitable for other similar decontamination purposes.

The room includes stainless steel worktops, where cleaning agents are used that may damage stainless steel a solid core surface is recommended, subject to manufactures and infection control recommendations.

Consideration must be given to COSHH requirements, appropriate PPE and any necessary storage of cleaning supplies.

The following items are shown on the room layout but are optional:
- Ultrasonic cleaner. When not provided wash and rinse sinks should be located nearer to each other to avoid manual handling risks.

The following items may be provided:
- COSHH cupboard for cleaning supplies.

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	R0902-12	Decontamination Room: Dirty Dental instruments
Room Number:		**Revision Date:** 31/01/2020

TEMPERATURE AND VENTILATION	**Requirements**	**Notes**
Permissible Space Temperature Range(dry bulb) (degC):	21 - 28	
Heating Design Temperature (dry bulb)(degC):	21	
Minimum Air Changes (AC/hr):	10	
Ventilation Type:	S/E	
Pressure Relative to Adjoining Space:	-ve	
Supply Air: Final Filter Class	F9	
Permissible Relative Humidity Range (%):		
General Notes:		

LIGHTING		
Type Of Control:	N	
Daytime General Service Illuminance (Lux):	500	
Daytime Specific Service Illuminance (Lux):	-	
Night-time General Service Illuminance (Lux):	-	
Night-time Specific Service Illuminance (Lux):	-	
Local Task Illuminance (Lux):	-	
Colour Rendering Required:	Y	
Colour Rendering Required Characteristics (Ra):	80	
Unified Glare Rating Limit (UGRL):	22	
Emergency Escape Route Lighting Required:	Y	In accordance with BS 5266 and Health Technical Memorandums
Standby Lighting Grade - General Lighting:	B	
Standby Lighting Grade - Local Lighting:		-
General Notes:		

RISK		
Clinical Risk Category:		
Non-clinical Business Continuity Risk Category:		
General Notes:		

NOISE		
Noise Intrusion (dB) 1hr day:	45	
Noise Intrusion (dB) 1hr night:	-	
Noise Intrusion (dB) f night:	-	
Maximum Internal Noise from M&E Services (NR):	40	Total noise of MEP services under normal operation across the range 63Hz to 4kHz inclusive.
Room Sound-insulation Parameters - Privacy:	Moderate	Reference to Table 3 of the Department of Health 'Acoustics: Technical design manual 4032:0.6:England'.
Room Sound-insulation Parameters - Noise Generation:	Typical	
Noise Sensitivity:	Medium	
Sound-insulation Rating (dB D nT,w):		
General Notes:		

SAFETY/FIRE		
Maximum Surface Temperature (DegC):	82	
Domestic Hot Water Discharge Temperature (DegC):	41	
Maximum Cold Water Discharge Temperature (DegC):	<20	
General Notes:		
Type of Automatic Fire Detection:	Smoke	
General Notes:		

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	R0902-12	Decontamination Room: Dirty Dental instruments
Room Number:		**Revision Date:** 31/01/2020

Walls:	Wall finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Wall finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Floor:	Floor finishes to comply with Performance Requirements in HBN 00-10 Part A:Flooring (2013) Floor finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part A:Flooring.
Ceiling:	Ceiling finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Ceiling finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Doorsets:	Configuration, glazing, fire rating, security, etc. to be determined by Project Team. HTM 58 (Mar-2005) Refer to HBN 00-04 (May-2007) for effective clear door widths. 1 doorset: 1 x personnel & equipment access (1000mm)
Windows:	Desirable - Project Option Clear glass with solar control, sealed Designation to be validated against current documentation (HTM 55 archived).
Internal Glazing:	Not required
Hatch:	Not required
Notes:	All finishes selected must have an appropriate risk assessment to accompany the design decision. Infection Control must be consulted as described in Performance Requirements for Building Elements Used in Healthcare Facilities 8941:0.6 England.

Project: 124476 NHSPS - Generic Hub
Department:
Room: R0902-12 Decontamination Room: Dirty Dental instruments
Room Number: **Revision Date:** 31/01/2020

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.		1
1		1	OUT005	SOCKET outlet, switched, 13 amp, single		1
1		1	OUT049	CONNECTION UNIT, switched, 13 amp, flex outlet		1
1		1	OUT059	CONNECTION UNIT switched 13amp, flex, indicator light		1
2		2	OUT079	OUTLET isolator, equipment manufacturer's specification		1
1		1	OUT131	SOCKET outlet data/voice, double.		1
1		1	OUT910	SOCKET outlet, switched, 13 amp, twin plus 2 USB outlets		1
1		1	STE033	REPROCESSOR, endoscope, pass through		1
1		1	STE035	STERILIZER built-in, pass-through autoclave, small load		1
1		1	SWC025	SWITCH, light		1
2		2	TAP809	TAP, bib, lever, hospital pattern, pair hot and cold, 1/2 in.		1
1		1	TAP892	TAP, bib, 2x8 mm thermostatic mixer, automatic action, sensor operated, non-touch,		1
2		2	WAS102	WASTE, unslotted flush-grated, metal, 1.1/2 in.		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing.		1
2		2	WAS108	TRAP, bottle, 1.1/2 in, plastic resealing.		1
1		1	WKT527	WORKTOP, plain, stainless steel, with 2 sink bowls & drainer, 3000W 700D		1
1		1	BOT001	BOTTLE, eye irrigation, emergency, with internal application, fix panel		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	DIS437	DISPENSER, disposable mask, wall mounted		2
1		1	DIS438	DISPENSER, disposable gloves set of 3 and disposable apron, wall mounted		2
1		1	SCN001	SCANNER: Bar-code		2
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
2		2	TRO131	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 450W 450D		3
1		1	ULT006	ULTRASONIC CLEANER, bench top, (tank size 150x495x280mm), Includes basket and stainless steel lid, heated, 280H 535W 355D		3

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	S0028-10	Counselling Room With Beverage Bay: Family or 4-10 People
Room Number:		**Revision Date:** 31/01/2020

Activities:	1) Distressed relatives to wait in privacy. 2) Confidential and informal discussions and advising relatives. 3) Comforting relatives/carers. 4) People preparing beverages, meals and snacks. 5) Occasional consumption of beverages. 6) Telephone(s) may be used.			
Personnel:	1 x Staff Up to 7 others, including wheelchair person.			
Planning Relationships:	Close to patient areas. Close to staff work areas. Sanitary facilities en-suite/or conveniently located - project option.			
Space Data:	**Area (m²):**	18.00	**Height (mm):**	2400
	Area Range: 12-18 sqm.			
Notes:	Separate data and voice outlets may be used where structure cabling solutions are not available.			

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	S0028-10	Counselling Room With Beverage Bay: Family or 4-10 People
Room Number:		**Revision Date:** 31/01/2020

TEMPERATURE AND VENTILATION	**Requirements**	**Notes**
Permissible Space Temperature Range(dry bulb) (degC):	21 - 28	
Heating Design Temperature (dry bulb)(degC):	21	
Minimum Air Changes (AC/hr):	4	or 10L/S/Person
Ventilation Type:	S/E	
Pressure Relative to Adjoining Space:	Bal or -ve	
Supply Air: Final Filter Class	G4	
Permissible Relative Humidity Range (%):		
General Notes:		
LIGHTING		
Type Of Control:	N	
Daytime General Service Illuminance (Lux):	300	
Daytime Specific Service Illuminance (Lux):	-	
Night-time General Service Illuminance (Lux):	-	
Night-time Specific Service Illuminance (Lux):	-	
Local Task Illuminance (Lux):	-	
Colour Rendering Required:	Y	
Colour Rendering Required Characteristics (Ra):	80	
Unified Glare Rating Limit (UGRL):	22	
Emergency Escape Route Lighting Required:	Y	In accordance with BS 5266 and Health Technical Memorandums
Standby Lighting Grade - General Lighting:	B	
Standby Lighting Grade - Local Lighting:		
General Notes:		
RISK		
Clinical Risk Category:		
Non-clinical Business Continuity Risk Category:		
General Notes:		
NOISE		
Noise Intrusion (dB) 1hr day:	40	
Noise Intrusion (dB) 1hr night:	-	
Noise Intrusion (dB) f night:	-	
Maximum Internal Noise from M&E Services (NR):	35	Total noise of MEP services under normal operation across the range 63Hz to 4kHz inclusive.
Room Sound-insulation Parameters - Privacy:	Confidential	Reference to Table 3 of the Department of Health 'Acoustics: Technical design manual 4032:0.6:England'.
Room Sound-insulation Parameters - Noise Generation:	High	
Noise Sensitivity:	Medium	
Sound-insulation Rating (dB D nT,w):		
General Notes:		
SAFETY/FIRE		
Maximum Surface Temperature (DegC):	43	
Domestic Hot Water Discharge Temperature (DegC):	41	
Maximum Cold Water Discharge Temperature (DegC):	<20	
General Notes:		
Type of Automatic Fire Detection:	Smoke	
General Notes:		

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	S0028-10	Counselling Room With Beverage Bay: Family or 4-10 People
Room Number:		**Revision Date:** 31/01/2020

Walls:	Wall finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Wall finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Floor:	Floor finishes to comply with Performance Requirements in HBN 00-10 Part A:Flooring (2013) Floor finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part A:Flooring.
Ceiling:	Ceiling finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Ceiling finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Doorsets:	Configuration, glazing, fire rating, security, etc. to be determined by Project Team. HTM 58 (Mar-2005) Refer to HBN 00-04 (May-2007) for effective clear door widths. 2 sets of doors: 2 x personnel, wheelchair & equipment access (1000mm)
Windows:	Desirable - Project Option Clear glass with solar and privacy control. Designation to be validated against current documentation (HTM 55 archived).
Internal Glazing:	Non-essential - Project Option Designation to be validated against current documentation. HTM 57 (Mar-2005)
Hatch:	Not required
Notes:	All finishes selected must have an appropriate risk assessment to accompany the design decision. Infection Control must be consulted as described in Performance Requirements for Building Elements Used in Healthcare Facilities 8941:0.6 England.

Project: 124476 NHSPS - Generic Hub
Department:
Room: S0028-10 Counselling Room With Beverage Bay: Family or 4-10 People
Room Number: **Revision Date:** 31/01/2020

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	CAT003	MINI KITCHEN (combined unit) with refrigerator, sink top, wall cabinet, cupboard and drawers, laminate backboard, 1970H 1200W 600D		1
4		4	HOO019	HOOK, single, small, wall mounted		1
1		1	OUT005	SOCKET outlet, switched, 13 amp, single		1
2		2	OUT010	SOCKET outlet, switched, 13 amp, twin		1
2		2	OUT052	CONNECTION UNIT, switched, 13 amp		1
1		1	OUT131	SOCKET outlet data/voice, double.		1
2		2	OUT910	SOCKET outlet, switched, 13 amp, twin plus 2 USB outlets		1
1		1	SMC073	CABINET, upper, modular storage, for 600 facing inserts, with door, 750H		1
1		1	SWC025	SWITCH, light		1
1		1	WAT003	WATER BOILER, 2.5 litre, electric, wall mounted		1
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
2		2	CHA378	UNIT CHAIR, easy, with arms, fully upholstered, wipeable,		3
1		1	CHA379	UNIT CHAIR/SETTEE, 2 seaters, easy, with arms, fully upholstered, wipeable.		3
1		1	CHA380	UNIT CHAIR/SETTEE, 3 seaters, easy, with arms, fully upholstered, wipeable.		3
1		1	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
2		2	TAB053	TABLE, occasional, square, 415H 610W 610D		3

Project:	124476	NHSPS - Generic Hub	
Department:			
Room:	T0538-12	Clean Utility Room: Without Controlled Drugs Cupboard	
Room Number:		**Revision Date:**	31/01/2020

Activities:	1) Dressing/instrument trolleys are held and prepared. 2) Sterile supplies and consumables are held. 3) Non-controlled medicines and pharmaceuticals are stored securely. 4) Provision of refrigerated storage. 5) Flammable medicines are stored. 6) Supplies trolleys are held/stored. 7) Clinical wash-hand basin may be used. 8) Bar coded items may be tracked. 9) Trolleys for clinical procedures are prepared and laid up. 10) Sterile packs, lotions and drugs may be prepared for immediate use. 11) Medication is prepared for administration. 12) Contrast media, I.V. injections and other sterile procedures may be prepared. 13) Computer workstation(s) may be used. 14) Telephone(s) may be used. 15) Infusion fluids are stored.			
Personnel:	2 x staff.			
Planning Relationships:	Close to clinical area, particularly treatment rooms.			
Space Data:	**Area (m²):**	12.00	**Height (mm):**	2400
	Area Range: 8-12 sqm.			

Notes:

See BS 2881 for requirements for medicines storage. This room does not include controlled drugs cupboards.

The following items may be provided:
- a barcode reader and charger.

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Separate data and voice outlets may be used where structure cabling solutions are not available.

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	T0538-12	Clean Utility Room: Without Controlled Drugs Cupboard
Room Number:		**Revision Date:** 31/01/2020

TEMPERATURE AND VENTILATION	**Requirements**	**Notes**
Permissible Space Temperature Range(dry bulb) (degC):	21 - 25	If strong drugs in cupboards
Heating Design Temperature (dry bulb)(degC):	21	
Minimum Air Changes (AC/hr):	6	
Ventilation Type:	S	
Pressure Relative to Adjoining Space:	+ve	
Supply Air: Final Filter Class	G4	
Permissible Relative Humidity Range (%):		
General Notes:		

LIGHTING		
Type Of Control:	N	
Daytime General Service Illuminance (Lux):	200	
Daytime Specific Service Illuminance (Lux):	-	
Night-time General Service Illuminance (Lux):	-	
Night-time Specific Service Illuminance (Lux):	-	
Local Task Illuminance (Lux):		
Colour Rendering Required:	Y	
Colour Rendering Required Characteristics (Ra):	80	
Unified Glare Rating Limit (UGRL):	19	
Emergency Escape Route Lighting Required:	Y	In accordance with BS 5266 and Health Technical Memorandums
Standby Lighting Grade - General Lighting:	B	
Standby Lighting Grade - Local Lighting:		-
General Notes:	Refer to SLL Lighting Guide 2 for guidance	

RISK		
Clinical Risk Category:		
Non-clinical Business Continuity Risk Category:		
General Notes:		

NOISE		
Noise Intrusion (dB) 1hr day:	50	
Noise Intrusion (dB) 1hr night:	-	
Noise Intrusion (dB) f night:	-	
Maximum Internal Noise from M&E Services (NR):	40	Total noise of MEP services under normal operation across the range 63Hz to 4kHz inclusive.
Room Sound-insulation Parameters - Privacy:	Not Private	Reference to Table 3 of the Department of Health 'Acoustics: Technical design manual 4032:0.6:England'.
Room Sound-insulation Parameters - Noise Generation:	Low	
Noise Sensitivity:	Not	
Sound-insulation Rating (dB D nT,w):		
General Notes:		

SAFETY/FIRE		
Maximum Surface Temperature (DegC):	82	
Domestic Hot Water Discharge Temperature (DegC):	41/>55	
Maximum Cold Water Discharge Temperature (DegC):	<20	
General Notes:		
Type of Automatic Fire Detection:	Smoke	
General Notes:		

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	T0538-12	Clean Utility Room: Without Controlled Drugs Cupboard
Room Number:		**Revision Date:** 31/01/2020

Walls:	Wall finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Wall finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Floor:	Floor finishes to comply with Performance Requirements in HBN 00-10 Part A:Flooring (2013) Floor finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part A:Flooring.
Ceiling:	Ceiling finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Ceiling finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Doorsets:	Configuration, glazing, fire rating, security, etc. to be determined by Project Team. HTM 58 (Mar-2005) Refer to HBN 00-04 (May-2007) for effective clear door widths. 1 doorset: 1 x personnel & equipment access (1000mm)
Windows:	Non-essential - Project Option Obscured glass with solar control, security control as necessary, see BS2881 Designation to be validated against current documentation (HTM 55 archived).
Internal Glazing:	Not required
Hatch:	Not required
Notes:	All finishes selected must have an appropriate risk assessment to accompany the design decision. Infection Control must be consulted as described in Performance Requirements for Building Elements Used in Healthcare Facilities 8941:0.6 England.

Project: 124476 NHSPS - Generic Hub
Department:
Room: T0538-12 Clean Utility Room: Without Controlled Drugs Cupboard
Room Number: **Revision Date:** 31/01/2020

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.		1
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
1		1	OUT002	OUTLET cable, 13 amp		1
1		1	OUT005	SOCKET outlet, switched, 13 amp, single		1
1		1	OUT010	SOCKET outlet, switched, 13 amp, twin		1
1		1	OUT049	CONNECTION UNIT, switched, 13 amp, flex outlet		1
1		1	OUT052	CONNECTION UNIT, switched, 13 amp		1
2		2	OUT131	SOCKET outlet data/voice, double.		1
1		1	OUT910	SOCKET outlet, switched, 13 amp, twin plus 2 USB outlets		1
3		3	SMC001	CABINET, tall, modular storage, for 400 facing inserts, open, on plinth, 2100H		1
2		2	SMC013	CABINET, base, modular storage, for 400 facing inserts, with door, on plinth, 900H		1
4		4	SMC023	CABINET, upper, modular storage, for 400 facing inserts, with door, 750H		1
1		1	SMW081	WORKTOP, clinical, for 400 facing modular storage cabinets, 2100W 700D		1
1		1	SWC025	SWITCH, light		1
1		1	TAP892	TAP, bib, 2x8 mm thermostatic mixer, automatic action, sensor operated, non-touch,		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing.		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	DIS438	DISPENSER, disposable gloves set of 3 and disposable apron, wall mounted		2
1		1	CUP550	CUPBOARD, flammable material, metal, adjustable spillage tray and sump, lockable, 712H 355W 305D		3
2		2	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	REF059	REFRIGERATOR, medical (drug/vaccine), capacity 160 litre, external temperature gauge, automatic defrost, lockable, under bench, 850H 550W 620D		3

Project:	124476	NHSPS - Generic Hub	
Department:			
Room:	V0922-05	WC: Independent Wheelchair User	
Room Number:		**Revision Date:**	10/02/2020

Activities:	1) Independent wheelchair accessible toilet and adjacent hand-rinse basin may be used. 2) Call systems may be used.			
Personnel:	1 x person. Intermittent use.			
Planning Relationships:				
Space Data:	**Area (m²):**	5.80	**Height (mm):**	2400

Notes:

Design notes:

See HBN 00-02 Sanitary spaces; Area reflect BS8300 and Part M requirement.

Design solution notes:

The call repeat lamp is situated over the door outside the room.

Component list notes:

The following items are shown on the drawing but are optional:
- sanitary towels disposal bin is only required in female WCs
- foldable baby change table may be fitted in disabled WC when no separate facility is provided.
- vending machine is optional

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	V0922-05	WC: Independent Wheelchair User
Room Number:		**Revision Date:** 10/02/2020

TEMPERATURE AND VENTILATION	**Requirements**	**Notes**
Permissible Space Temperature Range(dry bulb) (degC):	N/A	
Heating Design Temperature (dry bulb)(degC):	21	
Minimum Air Changes (AC/hr):	6	
Ventilation Type:	E	
Pressure Relative to Adjoining Space:	-ve	
Supply Air: Final Filter Class	-	
Permissible Relative Humidity Range (%):	Uncontrolled	
General Notes:		

LIGHTING		
Type Of Control:	N	
Daytime General Service Illuminance (Lux):	200	
Daytime Specific Service Illuminance (Lux):		
Night-time General Service Illuminance (Lux):		
Night-time Specific Service Illuminance (Lux):		
Local Task Illuminance (Lux):		
Colour Rendering Required:	Y	
Colour Rendering Required Characteristics (Ra):	80	
Unified Glare Rating Limit (UGRL):	22	
Emergency Escape Route Lighting Required:	Y	In accordance with BS 5266 and Health Technical Memorandums
Standby Lighting Grade - General Lighting:	B	
Standby Lighting Grade - Local Lighting:		
General Notes:		

RISK		
Clinical Risk Category:		
Non-clinical Business Continuity Risk Category:		
General Notes:		

NOISE		
Noise Intrusion (dB) 1hr day:	55	
Noise Intrusion (dB) 1hr night:	-	
Noise Intrusion (dB) f night:	-	
Maximum Internal Noise from M&E Services (NR):	45	Total noise of MEP services under normal operation across the range 63Hz to 4kHz inclusive.
Room Sound-insulation Parameters - Privacy:	Moderate	Reference to Table 3 of the Department of Health 'Acoustics: Technical design manual 4032:0.6:England'.
Room Sound-insulation Parameters - Noise Generation:	Typical	
Noise Sensitivity:	Not	
Sound-insulation Rating (dB D nT,w):		
General Notes:		

SAFETY/FIRE		
Maximum Surface Temperature (DegC):	43	
Domestic Hot Water Discharge Temperature (DegC):	41	
Maximum Cold Water Discharge Temperature (DegC):	<20	
General Notes:		
Type of Automatic Fire Detection:		L1 in accordance with HTM
General Notes: L1		

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	V0922-05	WC: Independent Wheelchair User
Room Number:		**Revision Date:** 10/02/2020

Walls:	Wall finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Wall finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Floor:	Floor finishes to comply with Performance Requirements in HBN 00-10 Part A:Flooring (2013) Floor finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part A:Flooring.
Ceiling:	Ceiling finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Ceiling finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Doorsets:	Configuration, glazing, fire rating, security, etc. to be determined by Project Team. Refer to HBN 00 04 (2013) for effective clear door widths. 1 doorset: 1 x personnel, wheelchair & equipment access (1000mm) Requirement for hinge protection when areas used by children
Windows:	Not required
Internal Glazing:	Not required
Hatch:	Not required
Notes:	All finishes selected must have an appropriate risk assessment to accompany the design decision. Infection Control must be consulted as described in HBN 00-10.

Project: 124476 NHSPS - Generic Hub
Department:
Room: V0922-05 WC: Independent Wheelchair User
Room Number: **Revision Date:** 10/02/2020

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	BAC002	BACKREST, WC/toilet, padded, wall mounted		1
1		1	BAS105	BASIN, small, general pattern, vitreous china, 1 tap right hand hole, no overflow, bottom outlet, 400W 300D		1
1		1	CAL006	PULL CORD, patient/staff call (help) with reassurance lamp		1
1		1	CAL007	PULL/PUSH BUTTON, staff emergency call, reset and integral/adjacent indicator lamp		1
2		2	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		1
2		2	HOO019	HOOK, single, small, wall mounted		1
1		1	MIR026	MIRROR, unbreakable, wall mounted, 1300H 500W		1
3		3	RAI048	RAIL, grab, vertical, wall mounted, 600mm		1
1		1	RAI159	RAIL, grab, horizontal, with supports, wall mounted, 600mm		1
1		1	RAI161	RAIL, grab, horizontal, wall or door mounted, 600mm		1
1		1	RAI172	RAIL, grab, hinged, wall mounted, 650mm		1
1		1	SWC014	SWITCH 5amp ac single pole, 1 way, ceiling pull cord		1
1		1	TAP289	TAP, monobloc, pillar mixer, integral thermostatic, short lever.		1
1		1	WAS100	WASTE, unslotted flush-grated, metal, 1.1/4 in. .		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing.		1
1		1	WCH005	WC/toilet pan with seat, 700 mm projection, hospital pattern, rimless pan, vitreous china.		1
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS015	DISPENSER, toilet paper, dispense individual sheets, wall mounted		2
1		1	DIS024	DISPENSER, soap, wall mounted		2
1		1	SHE100	SHELF, raised edge, non-breakable, 600W 200D		2
1		1	SHE102	SHELF, raised edge, non-breakable, 200W 150D		2
1		1	VEN003	VENDING MACHINE, sanitary towel with coin slot		2
1		1	BIN028	BIN, disposal, sealed, operated with one hand, nominal 420H 155W 490D		3
1		1	HOL003	HOLDER, sack, small, freestanding		3

Project:	124476	NHSPS - Generic Hub	
Department:			
Room:	V1010-05	WC: Ambulant User	
Room Number:		**Revision Date:**	10/02/2020

Activities:	1) Toilet may be used by ambulant person. 2) Hand-rinse basin may be used.			
Personnel:	1 x staff. Intermittent use.			
Planning Relationships:				
Space Data:	**Area (m²):**	3.40	**Height (mm):**	2400

Notes:

Design notes:

See HBN 00-02 Sanitary spaces; Area amended to reflect guidance.

Design solution notes:

Component list notes:

The following items are shown on the drawing but are optional:
- sanitary towels disposal bin is only required in female WCs
- the shelf next to the basin.

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	V1010-05	WC: Ambulant User
Room Number:		**Revision Date:** 10/02/2020

TEMPERATURE AND VENTILATION	**Requirements**	**Notes**
Permissible Space Temperature Range(dry bulb) (degC):	N/A	
Heating Design Temperature (dry bulb)(degC):	21	
Minimum Air Changes (AC/hr):	6	
Ventilation Type:	E	
Pressure Relative to Adjoining Space:	-ve	
Supply Air: Final Filter Class	-	
Permissible Relative Humidity Range (%):	Uncontrolled	
General Notes:		

LIGHTING		
Type Of Control:	N	
Daytime General Service Illuminance (Lux):	200	
Daytime Specific Service Illuminance (Lux):		
Night-time General Service Illuminance (Lux):		
Night-time Specific Service Illuminance (Lux):		
Local Task Illuminance (Lux):		
Colour Rendering Required:	Y	
Colour Rendering Required Characteristics (Ra):	80	
Unified Glare Rating Limit (UGRL):	22	
Emergency Escape Route Lighting Required:	Y	In accordance with BS 5266 and Health Technical Memorandums
Standby Lighting Grade - General Lighting:	B	
Standby Lighting Grade - Local Lighting:		
General Notes:		

RISK		
Clinical Risk Category:		
Non-clinical Business Continuity Risk Category:		
General Notes:		

NOISE		
Noise Intrusion (dB) 1hr day:	55	
Noise Intrusion (dB) 1hr night:	-	
Noise Intrusion (dB) f night:	-	
Maximum Internal Noise from M&E Services (NR):	45	Total noise of MEP services under normal operation across the range 63Hz to 4kHz inclusive.
Room Sound-insulation Parameters - Privacy:	Moderate	Reference to Table 3 of the Department of Health 'Acoustics: Technical design manual 4032:0.6:England'.
Room Sound-insulation Parameters - Noise Generation:	Typical	
Noise Sensitivity:	Not	
Sound-insulation Rating (dB D nT,w):		
General Notes:		

SAFETY/FIRE		
Maximum Surface Temperature (DegC):	43	
Domestic Hot Water Discharge Temperature (DegC):	41	
Maximum Cold Water Discharge Temperature (DegC):	<20	
General Notes:		
Type of Automatic Fire Detection:		L1 in accordance with HTM
General Notes: L1		

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	V1010-05	WC: Ambulant User
Room Number:		**Revision Date:** 10/02/2020

Walls:	Wall finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Wall finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Floor:	Floor finishes to comply with Performance Requirements in HBN 00-10 Part A:Flooring (2013) Floor finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part A:Flooring.
Ceiling:	Ceiling finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Ceiling finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Doorsets:	Configuration, glazing, fire rating, security, etc. to be determined by Project Team. Refer to HBN 00 04 (2013) for effective clear door widths. 1 doorset: 1 x personnel access (900mm) Requirement for hinge protection when areas used by children
Windows:	Not required
Internal Glazing:	Not required
Hatch:	Not required
Notes:	All finishes selected must have an appropriate risk assessment to accompany the design decision. Infection Control must be consulted as described in HBN 00-10.

Project: 124476 NHSPS - Generic Hub
Department:
Room: V1010-05 WC: Ambulant User
Room Number: **Revision Date:** 10/02/2020

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	BAS105	BASIN, small, general pattern, vitreous china, 1 tap right hand hole, no overflow, bottom outlet, 400W 300D		1
1		1	CIS005	CISTERN WC/toilet, concealed, reversible. To suit WC		1
1		1	HOO019	HOOK, single, small, wall mounted		1
1		1	SWC014	SWITCH 5amp ac single pole, 1 way, ceiling pull cord		1
1		1	TAP289	TAP, monobloc, pillar mixer, integral thermostatic, short lever.		1
1		1	WAS100	WASTE, unslotted flush-grated, metal, 1.1/4 in. .		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing.		1
1		1	WCH001	WC/toilet pan with seat, 520-550 projection, hospital pattern, rimless pan, vitreous china.		1
1		1	DIS013	DISPENSER, paper towel, wall mounted		2
1		1	DIS024	DISPENSER, soap, wall mounted		2
1		1	HOL016	HOLDER, toilet roll, multi, large		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	HOL004	HOLDER, sack, with lid foot operated, small, freestanding		3

Project:	124476	NHSPS - Generic Hub	
Department:			
Room:	V1321-05	Staff Shower Room: Ambulant User	
Room Number:		**Revision Date:**	10/02/2020

Activities:	1) Shower may be used by ambulant person. 2) User may undress and dress in privacy. 3) Hanging outdoor clothing. 4) Hanging clothes and towels.			
Personnel:	1 x person. Intermittent use.			
Planning Relationships:	Associated with staff changing area and toilet areas.			
Space Data:	**Area (m²):**	3.60	**Height (mm):**	2400

Notes:

Design notes:

See HBN 00-02 Sanitary spaces

Space is only suitable for staff or visitor use and not recommended for patient use.

Design solution notes:

Component list notes:

The following items may be provided:
- inward opening door;
- full length mirror.

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	V1321-05	Staff Shower Room: Ambulant User
Room Number:		**Revision Date:** 10/02/2020

TEMPERATURE AND VENTILATION	**Requirements**	**Notes**
Permissible Space Temperature Range(dry bulb) (degC):	N/A	
Heating Design Temperature (dry bulb)(degC):	22	
Minimum Air Changes (AC/hr):	6	
Ventilation Type:	E	
Pressure Relative to Adjoining Space:	-ve	
Supply Air: Final Filter Class	G3 CIBSE	
Permissible Relative Humidity Range (%):	Uncontrolled	
General Notes:		
LIGHTING		
Type Of Control:	N	
Daytime General Service Illuminance (Lux):	100-150	
Daytime Specific Service Illuminance (Lux):		
Night-time General Service Illuminance (Lux):		
Night-time Specific Service Illuminance (Lux):		
Local Task Illuminance (Lux):		
Colour Rendering Required:	Y	
Colour Rendering Required Characteristics (Ra):	80	
Unified Glare Rating Limit (UGRL):	22	
Emergency Escape Route Lighting Required:	Y	In accordance with BS 5266 and Health Technical Memorandums
Standby Lighting Grade - General Lighting:	B	
Standby Lighting Grade - Local Lighting:		
General Notes:		
RISK		
Clinical Risk Category:		
Non-clinical Business Continuity Risk Category:		
General Notes:		
NOISE		
Noise Intrusion (dB) 1hr day:	55	
Noise Intrusion (dB) 1hr night:	-	
Noise Intrusion (dB) f night:	-	
Maximum Internal Noise from M&E Services (NR):	45	Total noise of MEP services under normal operation across the range 63Hz to 4kHz inclusive.
Room Sound-insulation Parameters - Privacy:	Moderate	Reference to Table 3 of the Department of Health 'Acoustics: Technical design manual 4032:0.6:England'.
Room Sound-insulation Parameters - Noise Generation:	Typical	
Noise Sensitivity:	Not	
Sound-insulation Rating (dB D nT,w):		
General Notes:		
SAFETY/FIRE		
Maximum Surface Temperature (DegC):	43	
Domestic Hot Water Discharge Temperature (DegC):	41	
Maximum Cold Water Discharge Temperature (DegC):	<20	
General Notes:		
Type of Automatic Fire Detection:		L1 in accordance with HTM
General Notes: L1		

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	V1321-05	Staff Shower Room: Ambulant User
Room Number:		**Revision Date:** 10/02/2020

Walls:	Wall finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Wall finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Floor:	Floor finishes to comply with Performance Requirements in HBN 00-10 Part A:Flooring (2013) Floor finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part A:Flooring.
Ceiling:	Ceiling finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Ceiling finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Doorsets:	Configuration, glazing, fire rating, security, etc. to be determined by Project Team. Refer to HBN 00 04 (2013) for effective clear door widths. 1 doorset: 1 x personnel access (900mm) Requirement for hinge protection when areas used by children
Windows:	Not required
Internal Glazing:	Not required
Hatch:	Not required
Notes:	All finishes selected must have an appropriate risk assessment to accompany the design decision. Infection Control must be consulted as described in HBN 00-10.

Project: 124476 NHSPS - Generic Hub
Department:
Room: V1321-05 Staff Shower Room: Ambulant User
Room Number: **Revision Date:** 10/02/2020

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	DIS200	DISH, soap, wall mounted		1
3		3	HOO019	HOOK, single, small, wall mounted		1
1		1	LIG063	LUMINAIRE, single fluorescent lamp, wall, 8 watt, 300 mm		1
1		1	MIR004	MIRROR, wall mounted, 1600H 400W		1
1		1	OUT025	SOCKET outlet, shaver		1
1		1	RAI260	RAIL for shower curtain, 1000mm		1
1		1	SEA024	SEAT, tip-up, wall mounted, 400 W 400D		1
1		1	SHO009	SHOWER TRAY ceramic slip resistant base, with drainage outlet, 800W 800D		1
1		1	SHO018	SHOWER, valve, thermostatic mixer (associated with SHO020).		1
1		1	SHO020	SHOWER, adjustable shower head hand spray (associated with SHO018).		1
1		1	SWC014	SWITCH 5amp ac single pole, 1 way, ceiling pull cord		1
1		1	WAS100	WASTE, unslotted flush-grated, metal, 1.1/4 in. .		1
1		1	SHE101	SHELF, raised edge, non-breakable, 300W 150D		2

Project:	124476	NHSPS - Generic Hub	
Department:			
Room:	X0113-16	Physio Therapy Room	
Room Number:		**Revision Date:**	31/01/2020

Activities:	1) Patient may be ambulant with/without walking aids, in a wheelchair or requiring assistance. 2) Patient may undress/dress in privacy. 3) Patient receiving treatment on chair, traction table, plinth or couch. 4) Application of dressings 5) Emergency resuscitation may take place. 6) Clinical hand washing.			
Personnel:	1-2 Staff & 1 patient.			
Planning Relationships:	Adjacent to cubicles.			
Space Data:	**Area (m²):**	16.00	**Height (mm):**	2700
	Larger than typical 12 sqm.			

Notes: Treatment of conditions requiring discreet privacy, to be carried out by 1-2 physiotherapists.

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	X0113-16	Physio Therapy Room
Room Number:		**Revision Date:** 31/01/2020

TEMPERATURE AND VENTILATION	**Requirements**	**Notes**
Permissible Space Temperature Range(dry bulb) (degC):	25	
Heating Design Temperature (dry bulb)(degC):	21	
Minimum Air Changes (AC/hr):	10	
Ventilation Type:	S/E	
Pressure Relative to Adjoining Space:	BAL	
Supply Air: Final Filter Class	F7	
Permissible Relative Humidity Range (%):	Uncontrolled	
General Notes:		
LIGHTING		
Type Of Control:	S/V	
Daytime General Service Illuminance (Lux):	200	
Daytime Specific Service Illuminance (Lux):	-	
Night-time General Service Illuminance (Lux):	-	
Night-time Specific Service Illuminance (Lux):	-	
Local Task Illuminance (Lux):	-	
Colour Rendering Required:	Y	
Colour Rendering Required Characteristics (Ra):	80	
Unified Glare Rating Limit (UGRL):	19	
Emergency Escape Route Lighting Required:	Y	In accordance with BS 5266 and Health Technical Memorandums
Standby Lighting Grade - General Lighting:		-
Standby Lighting Grade - Local Lighting:		-
General Notes:		
RISK		
Clinical Risk Category:		
Non-clinical Business Continuity Risk Category:		
General Notes:		
NOISE		
Noise Intrusion (dB) 1hr day:	40	
Noise Intrusion (dB) 1hr night:	-	
Noise Intrusion (dB) f night:	-	
Maximum Internal Noise from M&E Services (NR):	35	Total noise of MEP services under normal operation across the range 63Hz to 4kHz inclusive.
Room Sound-insulation Parameters - Privacy:	Confidential	Reference to Table 3 of the Department of Health 'Acoustics: Technical design manual 4032:0.6:England'.
Room Sound-insulation Parameters - Noise Generation:	Typical	
Noise Sensitivity:	Medium	
Sound-insulation Rating (dB D nT,w):		
General Notes:		
SAFETY/FIRE		
Maximum Surface Temperature (DegC):	43	
Domestic Hot Water Discharge Temperature (DegC):	41	
Maximum Cold Water Discharge Temperature (DegC):	<20	
General Notes:		
Type of Automatic Fire Detection:	Smoke	
General Notes:		

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	X0113-16	Physio Therapy Room
Room Number:		**Revision Date:** 31/01/2020

Walls:	Wall finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Wall finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Floor:	Floor finishes to comply with Performance Requirements in HBN 00-10 Part A:Flooring (2013) Floor finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part A:Flooring.
Ceiling:	Ceiling finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Ceiling finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Doorsets:	Configuration, glazing, fire rating, security, etc. to be determined by Project Team. HTM 58 (Mar-2005) Refer to HBN 00-04 (May-2007) for effective clear door widths. 1 doorset: 1 x personnel, wheelchair & equipment access (1000mm) Requirement for hinge protection when areas used by children
Windows:	Desirable - Project Option Clear glass, openable, privacy control Designation to be validated against current documentation (HTM 55 archived).
Internal Glazing:	Not required
Hatch:	Not required
Notes:	All finishes selected must have an appropriate risk assessment to accompany the design decision. Infection Control must be consulted as described in Performance Requirements for Building Elements Used in Healthcare Facilities 8941:0.6 England.

Project: 124476 NHSPS - Generic Hub
Department:
Room: X0113-16 Physio Therapy Room
Room Number: **Revision Date:** 31/01/2020

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.		1
1		1	CAL003	PUSH BUTTON, patient/staff call (help) with socket for patient hand-held unit		1
1		1	CAL012	RESET UNIT, with repeat lamp, patient/staff call		1
3		3	HOO019	HOOK, single, small, wall mounted		1
1		1	MIR003	MIRROR, wall mounted, 1000H 300W		1
1		1	OUT005	SOCKET outlet, switched, 13 amp, single		1
1		1	OUT010	SOCKET outlet, switched, 13 amp, twin		1
1		1	OUT049	CONNECTION UNIT, switched, 13 amp, flex outlet		1
1		1	OUT453	OUTLET, 4 kPa compressed air, medical		1
1		1	OUT470	OUTLET, oxygen, medical.		1
1		1	OUT475	OUTLET, vacuum, medical		1
1		1	OUT910	SOCKET outlet, switched, 13 amp, twin plus 2 USB outlets		1
1		1	SHE201	SHELF, 600W 300D		1
1		1	STF200	STORAGE UNIT, mid, shelf, 150H 300W 150D		1
1		1	STF274	STORAGE UNIT, upper, cupboard, 2 door, 1 shelf, 550H 600W 300D		1
1		1	SWC025	SWITCH, light		1
1		1	TAP892	TAP, bib, 2x8 mm thermostatic mixer, automatic action, sensor operated, non-touch,		1
1		1	TRA140	TRACK, curtain, door, two sided, 1000L 1100W		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing.		1
1		1	BRA003	BRACKET, holder, suction unit.		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	CHA317	CHAIR, upright, upholstered, stacking, wipeable		3
1		1	CHA323	CHAIR, upright, wood, wipeable.		3
1		1	COU007	COUCH, examination/treatment, (2 section), with paper roll holder, variable height, retractable wheels		3
1		1	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3
1		1	STO001	STOOL, height adjustable - gas lift, 450H 355 dia.		3
1		1	TAB063	TABLE arm exercise, 710H 610W 300D		3
1		1	TRO131	TROLLEY, dressing/instrument, stainless steel, buffered, 870H 450W 450D		3

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	X0145-22	Treatment room: Double-Sided Couch access with Controlled Drug Cupboard
Room Number:		**Revision Date:** 31/01/2020

Activities:	1) Carrying out invasive clinical procedures from both sides of the couch. 2) User may undress and dress in privacy. 3) Trays/packs for clinical procedures are prepared. 4) Clinical wash-hand basin may be used. 5) Electronic patient records (EPRs) may be accessed and updated. 6) Sterile supplies and consumables are held/stored on a trolley. 7) Monitoring/diagnostic or therapeutic equipment may be used. 8) Use of mobile diagnostic and therapeutic equipment. 9) Patient may arrive on foot in a wheelchair or on a trolley 10) Preparation for clinical procedures is undertaken. 11) Dressing/instrument trolleys are held and prepared. 12) Sterile packs, lotions and drugs may be prepared for immediate use. 13) Piped medical gases, vacuum and associated equipment may be used. 14) Call systems may be used.			
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):**	22.00	**Height (mm):**	2700
	Area Range: 16-22 sqm.			

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 call repeat lamp 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.

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Separate data and voice outlets may be used where structure cabling solutions are not available.

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	X0145-22	Treatment room: Double-Sided Couch access with Controlled Drug Cupboard
Room Number:		**Revision Date:** 31/01/2020

TEMPERATURE AND VENTILATION	**Requirements**	**Notes**
Permissible Space Temperature Range(dry bulb) (degC):	21 - 25	
Heating Design Temperature (dry bulb)(degC):	21	
Minimum Air Changes (AC/hr):	10	
Ventilation Type:	S/E	
Pressure Relative to Adjoining Space:	+ve	
Supply Air: Final Filter Class	F7	
Permissible Relative Humidity Range (%):	Uncontrolled	
General Notes:		
LIGHTING		
Type Of Control:	S/V	
Daytime General Service Illuminance (Lux):	500	
Daytime Specific Service Illuminance (Lux):	-	
Night-time General Service Illuminance (Lux):	-	
Night-time Specific Service Illuminance (Lux):	-	
Local Task Illuminance (Lux):	1000	
Colour Rendering Required:	Y	
Colour Rendering Required Characteristics (Ra):	80/90	Ra 90 required for examination/treatment
Unified Glare Rating Limit (UGRL):	19	
Emergency Escape Route Lighting Required:	Y	In accordance with BS 5266 and Health Technical Memorandums
Standby Lighting Grade - General Lighting:	B	
Standby Lighting Grade - Local Lighting:		-
General Notes:		
RISK		
Clinical Risk Category:		
Non-clinical Business Continuity Risk Category:		
General Notes:		
NOISE		
Noise Intrusion (dB) 1hr day:	40	
Noise Intrusion (dB) 1hr night:	-	
Noise Intrusion (dB) f night:	-	
Maximum Internal Noise from M&E Services (NR):	35	Total noise of MEP services under normal operation across the range 63Hz to 4kHz inclusive.
Room Sound-insulation Parameters - Privacy:	Confidential	Reference to Table 3 of the Department of Health 'Acoustics: Technical design manual 4032:0.6:England'.
Room Sound-insulation Parameters - Noise Generation:	Typical	
Noise Sensitivity:	Medium	
Sound-insulation Rating (dB D nT,w):		
General Notes:		
SAFETY/FIRE		
Maximum Surface Temperature (DegC):	43	
Domestic Hot Water Discharge Temperature (DegC):	41	
Maximum Cold Water Discharge Temperature (DegC):	<20	
General Notes:		
Type of Automatic Fire Detection:	Smoke	
General Notes:		

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	X0145-22	Treatment room: Double-Sided Couch access with Controlled Drug Cupboard
Room Number:		**Revision Date:** 31/01/2020

Walls:	Wall finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Wall finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Floor:	Floor finishes to comply with Performance Requirements in HBN 00-10 Part A:Flooring (2013) Floor finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part A:Flooring.
Ceiling:	Ceiling finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Ceiling finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Doorsets:	Configuration, glazing, fire rating, security, etc. to be determined by Project Team. HTM 58 (Mar-2005) Refer to HBN 00-04 (May-2007) for effective clear door widths. 1 doorset: 1 x personnel, trolley, wheelchair & equipment access (1500mm) Requirement for hinge protection when areas used by children
Windows:	Desirable - Project Option Clear glass, openable, privacy control Designation to be validated against current documentation (HTM 55 archived).
Internal Glazing:	Not required
Hatch:	Not required
Notes:	All finishes selected must have an appropriate risk assessment to accompany the design decision. Infection Control must be consulted as described in Performance Requirements for Building Elements Used in Healthcare Facilities 8941:0.6 England.

Project: 124476 NHSPS - Generic Hub
Department:
Room: X0145-22 Treatment room: Double-Sided Couch access with Controlled Drug Cupboard
Room Number: **Revision Date:** 31/01/2020

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.		1
1		1	CAL003	PUSH BUTTON, patient/staff call (help) with socket for patient hand-held unit		1
1		1	CAL007	PULL/PUSH BUTTON, staff emergency call, reset and integral/adjacent indicator lamp		1
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
2		2	HOO019	HOOK, single, small, wall mounted		1
1		1	LIG053	LUMINAIRE, examination, ceiling, adjustable, 1000 lux		1
1		1	LIG073	ILLUMINATED SIGN, 'Room in use'		1
1		1	OUT005	SOCKET outlet, switched, 13 amp, single		1
6		6	OUT010	SOCKET outlet, switched, 13 amp, twin		1
1		1	OUT049	CONNECTION UNIT, switched, 13 amp, flex outlet		1
1		1	OUT050	OUTLET, controlled drugs cupboard		1
4		4	OUT131	SOCKET outlet data/voice, double.		1
1		1	OUT453	OUTLET, 4 kPa compressed air, medical		1
1		1	OUT470	OUTLET, oxygen, medical.		1
1		1	OUT475	OUTLET, vacuum, medical		1
5		5	OUT910	SOCKET outlet, switched, 13 amp, twin plus 2 USB outlets		1
1		1	SMW069	WORKTOP, clinical, for 400 facing modular storage cabinets, 900W 700D		1
1		1	STF290	STORAGE UNIT, upper, cupboard, controlled drugs, 1 door, lockable, with warning light, 550H 600W 300D		1
1		1	SWC025	SWITCH, light		1
1		1	SWC034	SWITCH, dimmer, modulating		1
1		1	SWC076	SWITCH, 'Room in use' illuminated sign.		1
1		1	TAP892	TAP, bib, 2x8 mm thermostatic mixer, automatic action, sensor operated, non-touch,		1
1		1	TRA172	TRACK, curtain, one sided, 3800L		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing.		1
1		1	BRA003	BRACKET, holder, suction unit.		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	CHA304	CHAIR, swivel, height adjustable, medium back, wipeable, 5 star base, on glides		3
1		1	CHA317	CHAIR, upright, upholstered, stacking, wipeable		3

Project: 124476 NHSPS - Generic Hub
Department:
Room: X0145-22 Treatment room: Double-Sided Couch access with Controlled Drug Cupboard
Room Number: **Revision Date:** 31/01/2020

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
1		1	COM033	COMPUTER KEYBOARD		3
1		1	COM049	COMPUTER MONITOR, 17"; TFT, digital flat panel display, high-resolution screens, 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

Project:	124476	NHSPS - Generic Hub	
Department:			
Room:	X0273-16	Dental Treatment Room	
Room Number:		**Revision Date:**	31/01/2020

Activities:	1) Dental procedures for all dental specialties (e.g. restorative, orthodontic, oral surgery, maxfax etc) may be carried out by a practitioner. 2) Dental procedures for all dental specialties (e.g. restorative, orthodontic, oral surgery, maxfax etc) may be carried out by a practitioner. 3) Imaging x-ray equipment may be used. 4) Diagnostic images are viewed on monitor. 5) Electronic patient records (EPRs) may be accessed and updated. 6) Preparation of moulds/casts 7) Clinical wash-hand basin may be used.			
Personnel:	1 x patient. 2 x staff. 2 x others (escorts).			
Planning Relationships:	Adjacent to recovery room.			
Space Data:	**Area (m²):**	16.00	**Height (mm):**	2700
	Room area reduced from 20 sqm.			
Notes:	This room includes a dental chair with attached cuspidor, separate dental light and mobile dental unit. Specific equipment requirements and arrangements for treating people in wheelchairs should be determined locally. The call repeat lamp is situated over the door outside the room. An X-ray control panel is required for the intra-oral X-ray machine. It has not been shown on the room layout as its location is subject to specialist advice. Separate data and voice outlets may be used where structure cabling solutions are not available.			

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	X0273-16	Dental Treatment Room
Room Number:		**Revision Date:** 31/01/2020

TEMPERATURE AND VENTILATION	**Requirements**	**Notes**
Permissible Space Temperature Range(dry bulb) (degC):	25	
Heating Design Temperature (dry bulb)(degC):	21	
Minimum Air Changes (AC/hr):	10	or 20L/S/Person
Ventilation Type:	S/E	
Pressure Relative to Adjoining Space:	+ve	
Supply Air: Final Filter Class	F7	
Permissible Relative Humidity Range (%):	Uncontrolled	
General Notes:		

LIGHTING		
Type Of Control:	S/V	
Daytime General Service Illuminance (Lux):	500	
Daytime Specific Service Illuminance (Lux):	-	
Night-time General Service Illuminance (Lux):	-	
Night-time Specific Service Illuminance (Lux):	-	
Local Task Illuminance (Lux):	8000-20000	
Colour Rendering Required:	Y	
Colour Rendering Required Characteristics (Ra):	90	
Unified Glare Rating Limit (UGRL):	19	
Emergency Escape Route Lighting Required:	Y	In accordance with BS 5266 and Health Technical Memorandums
Standby Lighting Grade - General Lighting:	A	
Standby Lighting Grade - Local Lighting:		-
General Notes:		

RISK		
Clinical Risk Category:		
Non-clinical Business Continuity Risk Category:		
General Notes:		

NOISE		
Noise Intrusion (dB) 1hr day:	40	
Noise Intrusion (dB) 1hr night:	-	
Noise Intrusion (dB) f night:	-	
Maximum Internal Noise from M&E Services (NR):	35	Total noise of MEP services under normal operation across the range 63Hz to 4kHz inclusive.
Room Sound-insulation Parameters - Privacy:	Confidential	Reference to Table 3 of the Department of Health 'Acoustics: Technical design manual 4032:0.6:England'.
Room Sound-insulation Parameters - Noise Generation:	Typical	
Noise Sensitivity:	Medium	
Sound-insulation Rating (dB D nT,w):		
General Notes:		

SAFETY/FIRE		
Maximum Surface Temperature (DegC):	43	
Domestic Hot Water Discharge Temperature (DegC):	41	
Maximum Cold Water Discharge Temperature (DegC):	<20	
General Notes:		
Type of Automatic Fire Detection:	Smoke	
General Notes:		

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	X0273-16	Dental Treatment Room
Room Number:		**Revision Date:** 31/01/2020

Walls:	Wall finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Wall finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Floor:	Floor finishes to comply with Performance Requirements in HBN 00-10 Part A:Flooring (2013) Floor finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part A:Flooring.
Ceiling:	Ceiling finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Ceiling finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Doorsets:	Configuration, glazing, fire rating, security, etc. to be determined by Project Team. HTM 58 (Mar-2005) Refer to HBN 00-04 (May-2007) for effective clear door widths. 1 doorset: 1 x personnel, trolley, wheelchair & equipment access (1500mm) Requirement for hinge protection when areas used by children
Windows:	Non-essential - Project Option Clear glass with solar and privacy control Designation to be validated against current documentation (HTM 55 archived).
Internal Glazing:	Not required
Hatch:	Not required
Notes:	All finishes selected must have an appropriate risk assessment to accompany the design decision. Infection Control must be consulted as described in Performance Requirements for Building Elements Used in Healthcare Facilities 8941:0.6 England.

Project: 124476 NHSPS - Generic Hub
Department:
Room: X0273-16 Dental Treatment Room
Room Number: **Revision Date:** 31/01/2020

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.		1
3		3	CAB160	CABINET, dental, 1 door, under bench, on plinth, (internal fittings-project option), 890H 500W 450D		1
1		1	CAB166	CABINET, dental, 1 door, wash basin, on plinth, 890H 500W 450D		1
1		1	CAL007	PULL/PUSH BUTTON, staff emergency call, reset and integral/adjacent indicator lamp		1
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
1		1	CHA340	CHAIR, dental, with multi-services, fully adjustable, electrically operated, floor mounted, wipeable.		1
3		3	HOO019	HOOK, single, small, wall mounted		1
1		1	IMG002	MONITOR medical display 18"; digital image viewer, wall mounted		1
1		1	LIG013	LUMINAIRE dental adjustable, ceiling mounted		1
1		1	LIG071	ILLUMINATED SIGN 'RADIATION ON', wall mounted		1
2		2	OUT005	SOCKET outlet, switched, 13 amp, single		1
3		3	OUT010	SOCKET outlet, switched, 13 amp, twin		1
2		2	OUT049	CONNECTION UNIT, switched, 13 amp, flex outlet		1
4		4	OUT131	SOCKET outlet data/voice, double.		1
2		2	OUT456	OUTLET, air, dental		1
1		1	OUT470	OUTLET, oxygen, medical.		1
1		1	OUT473	OUTLET, vacuum, dental		1
2		2	OUT910	SOCKET outlet, switched, 13 amp, twin plus 2 USB outlets		1
2		2	SWC025	SWITCH, light		1
1		1	SWC034	SWITCH, dimmer, modulating		1
1		1	TAP289	TAP, monobloc, pillar mixer, integral thermostatic, short lever.		1
1		1	TAP892	TAP, bib, 2x8 mm thermostatic mixer, automatic action, sensor operated, non-touch,		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing.		1
1		1	WOR711	WORKTOP, with left of centre inset sink bowl, 30H 2000W 500D		1
1		1	WOR721	WORKTOP, 30H 1600W 500D		1
1		1	WOR730	WORKTOP, 30H 2450W 500D		1
1		1	BRA003	BRACKET, holder, suction unit.		2
1		1	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
2		2	DIS438	DISPENSER, disposable gloves set of 3 and disposable apron, wall mounted		2
1		1	MIC038	MICROSCOPE dental		2

Project: 124476 NHSPS - Generic Hub
Department:
Room: X0273-16 Dental Treatment Room
Room Number: **Revision Date:** 31/01/2020

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
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	COM033	COMPUTER KEYBOARD		3
1		1	COM046	COMPUTER MONITOR, 15"; TFT, digital flat panel display, desk top		3
1		1	DEN012	DENTAL UNIT, with multi-services terminal, mobile		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	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
2		2	STO024	STOOL, dental, with back support, mobile		3
1		1	TAB008	TABLE, 710H 1200W 600D		3

Project:	124476	NHSPS - Generic Hub		
Department:				
Room:	Y0431-12	Dirty Utility Room		
Room Number:			**Revision Date:**	31/01/2020

Activities:	1) Disposal of liquid waste. 2) Holding SHARPS in a container. 3) Items requiring disposal or reprocessing may be held/stored. 4) Clinical wash-hand basin may be used. 5) Urine specimens may be tested. 6) Clinical waste may be disposed 7) Disposal of waste and contaminated materials. 8) Disposal of used protective clothing. 9) Disposal of non-clinical waste.			
Personnel:	2 x staff. Intermittent use.			
Planning Relationships:	Close to clinical area, particularly treatment rooms.			
Space Data:	**Area (m²):**	12.00	**Height (mm):**	2700
	Area Range: 6-12 sqm.			

Notes:

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	Y0431-12	Dirty Utility Room
Room Number:		**Revision Date:** 31/01/2020

TEMPERATURE AND VENTILATION	**Requirements**	**Notes**
Permissible Space Temperature Range(dry bulb) (degC):	-	No Upper Limit
Heating Design Temperature (dry bulb)(degC):	18	
Minimum Air Changes (AC/hr):	6	
Ventilation Type:	E	
Pressure Relative to Adjoining Space:	-ve	
Supply Air: Final Filter Class		
Permissible Relative Humidity Range (%):	Uncontrolled	
General Notes:		

LIGHTING		
Type Of Control:	N/S	
Daytime General Service Illuminance (Lux):	200	
Daytime Specific Service Illuminance (Lux):	-	
Night-time General Service Illuminance (Lux):	-	
Night-time Specific Service Illuminance (Lux):	-	
Local Task Illuminance (Lux):	-	
Colour Rendering Required:	Y	
Colour Rendering Required Characteristics (Ra):	80	
Unified Glare Rating Limit (UGRL):	22	
Emergency Escape Route Lighting Required:	Y	In accordance with BS 5266 and Health Technical Memorandums
Standby Lighting Grade - General Lighting:	B	
Standby Lighting Grade - Local Lighting:		-
General Notes:	Refer to SLL Lighting Guide 2 for more detailed guidance	

RISK		
Clinical Risk Category:		
Non-clinical Business Continuity Risk Category:		
General Notes:		

NOISE		
Noise Intrusion (dB) 1hr day:	50	
Noise Intrusion (dB) 1hr night:	-	
Noise Intrusion (dB) f night:	-	
Maximum Internal Noise from M&E Services (NR):	40	Total noise of MEP services under normal operation across the range 63Hz to 4kHz inclusive.
Room Sound-insulation Parameters - Privacy:	Not Private	Reference to Table 3 of the Department of Health 'Acoustics: Technical design manual 4032:0.6:England'.
Room Sound-insulation Parameters - Noise Generation:	High	
Noise Sensitivity:	Not	
Sound-insulation Rating (dB D nT,w):		
General Notes:		

SAFETY/FIRE		
Maximum Surface Temperature (DegC):	82	
Domestic Hot Water Discharge Temperature (DegC):	41/>55	
Maximum Cold Water Discharge Temperature (DegC):	<20	
General Notes:		
Type of Automatic Fire Detection:	Smoke	
General Notes:		

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	Y0431-12	Dirty Utility Room
Room Number:		**Revision Date:** 31/01/2020

Walls:	Wall finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Wall finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Floor:	Floor finishes to comply with Performance Requirements in HBN 00-10 Part A:Flooring (2013) Floor finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part A:Flooring.
Ceiling:	Ceiling finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Ceiling finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Doorsets:	Configuration, glazing, fire rating, security, etc. to be determined by Project Team. HTM 58 (Mar-2005) Refer to HBN 00-04 (May-2007) for effective clear door widths. 1 doorset: 1 x personnel & equipment access (1000mm)
Windows:	Non-essential - Project Option Clear glass with solar and privacy control Designation to be validated against current documentation (HTM 55 archived).
Internal Glazing:	Not required
Hatch:	Not required
Notes:	All finishes selected must have an appropriate risk assessment to accompany the design decision. Infection Control must be consulted as described in Performance Requirements for Building Elements Used in Healthcare Facilities 8941:0.6 England.

Project: 124476 NHSPS - Generic Hub
Department:
Room: Y0431-12 Dirty Utility Room
Room Number: **Revision Date:** 31/01/2020

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.		1
1		1	CAL034	LAMP, repeat call, patient/staff or staff emergency or cardiac call		1
1		1	DSU006	DISPOSAL UNIT, plain top, right hand drainer, with sink and hopper with flushing rim, 110mm outlet, no tap holes no overflow, back inlet, stainless steel, 1600W 600D.		1
1		1	OUT005	SOCKET outlet, switched, 13 amp, single		1
1		1	OUT010	SOCKET outlet, switched, 13 amp, twin		1
1		1	OUT049	CONNECTION UNIT, switched, 13 amp, flex outlet		1
1		1	OUT910	SOCKET outlet, switched, 13 amp, twin plus 2 USB outlets		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	SMW052	WORKTOP, clinical, for 2 x 400 facing modular storage cabinets, 910W 700D		1
1		1	SWC025	SWITCH, light		1
1		1	TAP809	TAP, bib, lever, hospital pattern, pair hot and cold, 1/2 in.		1
1		1	TAP892	TAP, bib, 2x8 mm thermostatic mixer, automatic action, sensor operated, non-touch,		1
1		1	WAS102	WASTE, unslotted flush-grated, metal, 1.1/2 in.		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing.		1
1		1	WAS108	TRAP, bottle, 1.1/2 in, plastic resealing.		1
1		1	DIS007	DISPENSER, paper towel roll, 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
1		1	DIS438	DISPENSER, disposable gloves set of 3 and disposable apron, wall mounted		2
4		4	HOL006	HOLDER, sack, with lid foot operated, medium, freestanding, 875H 430W 385D		3

Project:	124476	NHSPS - Generic Hub	
Department:			
Room:	Y1510-06	Cleaners Room	
Room Number:		**Revision Date:**	31/01/2020

Activities:	1) Disposal of liquid waste. 2) Filling and emptying cleaning equipment and containers. 3) Holding/storing cleaning equipment. 4) Cleaning equipment may be parked and/or stored. 5) Hand-rinse basin may be used. 6) Sink may be used. 7) Janitorial unit may be used.			
Personnel:	2 x staff. Intermittent use.			
Planning Relationships:	Close to/within areas served.			
Space Data:	**Area (m²):**	6.00	**Height (mm):**	2400
	If large equipment is stored elsewhere, the size of this room can be reduced. This room area reduced from 8 sqm.			

Notes:

Design notes:

See HBN 00-03 Clinical and clinical support spaces

This room represents a typical traditional cleaners' room with space for storing a vacuum cleaner, scrubbing/polishing machine (for hard floors) and mop and bucket (stored on the cleaners' trolley).

Design solution notes:

It includes a combined bucket sink and hand-rinse basin (janitorial unit) and separate sink.

Component list notes:

The following items are shown on the room layout but are optional:
- small cube lockers.

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	Y1510-06	Cleaners Room
Room Number:		**Revision Date:** 31/01/2020

TEMPERATURE AND VENTILATION	**Requirements**	**Notes**
Permissible Space Temperature Range(dry bulb) (degC):	-	No Upper Limit
Heating Design Temperature (dry bulb)(degC):	16	
Minimum Air Changes (AC/hr):	6	
Ventilation Type:	E	
Pressure Relative to Adjoining Space:	-ve	
Supply Air: Final Filter Class	-	
Permissible Relative Humidity Range (%):	Uncontrolled	
General Notes:		

LIGHTING		
Type Of Control:	N	
Daytime General Service Illuminance (Lux):	200	
Daytime Specific Service Illuminance (Lux):	-	
Night-time General Service Illuminance (Lux):	-	
Night-time Specific Service Illuminance (Lux):	-	
Local Task Illuminance (Lux):	-	
Colour Rendering Required:	Y	
Colour Rendering Required Characteristics (Ra):	22	
Unified Glare Rating Limit (UGRL):	80	
Emergency Escape Route Lighting Required:	Y	In accordance with BS 5266 and Health Technical Memorandums
Standby Lighting Grade - General Lighting:		-
Standby Lighting Grade - Local Lighting:		-
General Notes:		

RISK		
Clinical Risk Category:		
Non-clinical Business Continuity Risk Category:		
General Notes:		

NOISE		
Noise Intrusion (dB) 1hr day:	50	
Noise Intrusion (dB) 1hr night:	-	
Noise Intrusion (dB) f night:	-	
Maximum Internal Noise from M&E Services (NR):	45	Total noise of MEP services under normal operation across the range 63Hz to 4kHz inclusive.
Room Sound-insulation Parameters - Privacy:	Not Private	Reference to Table 3 of the Department of Health 'Acoustics: Technical design manual 4032:0.6:England'.
Room Sound-insulation Parameters - Noise Generation:	Typical	
Noise Sensitivity:	Not	
Sound-insulation Rating (dB D nT,w):		
General Notes:		

SAFETY/FIRE		
Maximum Surface Temperature (DegC):	82	
Domestic Hot Water Discharge Temperature (DegC):	41/>55	
Maximum Cold Water Discharge Temperature (DegC):	<20	
General Notes:		
Type of Automatic Fire Detection:	Heat	L1 in accordance with HTM
General Notes: L1		

Project:	124476	NHSPS - Generic Hub
Department:		
Room:	Y1510-06	Cleaners Room
Room Number:		**Revision Date:** 31/01/2020

Walls:	Wall finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Wall finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Floor:	Floor finishes to comply with Performance Requirements in HBN 00-10 Part A:Flooring (2013) Floor finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part A:Flooring.
Ceiling:	Ceiling finishes to comply with Performance Requirements in HBN 00-10 Part B:Walls and Ceilings (2013) Ceiling finishes to be selected using the "Selection process for finishes" and "Types of finish by room space" included in HBN 00-10 Part B:Walls and Ceilings.
Doorsets:	Configuration, glazing, fire rating, security, etc. to be determined by Project Team. Refer to HBN 00 04 (2013) for effective clear door widths. 1 doorset: 1 x personnel & equipment access (1500mm)
Windows:	Not required
Internal Glazing:	Not required
Hatch:	Not required
Notes:	All finishes selected must have an appropriate risk assessment to accompany the design decision. Infection Control must be consulted as described in HBN 00-10.

Project: 124476 NHSPS - Generic Hub
Department:
Room: Y1510-06 Cleaners Room
Room Number:
Revision Date: 31/01/2020

Quantity			Code	Description	Alt. Code	Grp
New	Trans	Total				
2		2	HOO020	HOOK, single, large, wall mounted		1
1		1	OUT005	SOCKET outlet, switched, 13 amp, single		1
2		2	SHE231	SHELF, 1500W 300D		1
1		1	SIN013	SINK and BASIN combination Janitorial unit, hinged bucket grating to sink and monobloc mixer tap with swivel nozzle, stainless steel, 900H 500W 600D.		1
1		1	SNU012	SINK UNIT, single bowl with right hand drainer, no tap holes, 1200W 600D		1
1		1	SWC025	SWITCH, light		1
1		1	TAP809	TAP, bib, lever, hospital pattern, pair hot and cold, 1/2 in.		1
1		1	WAS100	WASTE, unslotted flush-grated, metal, 1.1/4 in. .		1
1		1	WAS102	WASTE, unslotted flush-grated, metal, 1.1/2 in.		1
1		1	WAS103	WASTE, unslotted recessed grated, metal, 1.1/2 in, with plug and chain		1
1		1	WAS107	TRAP, bottle, 1.1/4 in, plastic resealing.		1
2		2	WAS108	TRAP, bottle, 1.1/2 in, plastic resealing.		1
1		1	CLI017	CLIP, spring, 32mm dia. 3, mounted on a wooden batten, 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	LOC012	LOCKER, wall mounted, 340H 300W 300D		2
1		1	CLE008	SCRUBBING/POLISHING MACHINE, single brush, 110v machine		3
1		1	CLE018	CLEANER VACUUM, dry suction, tub, with accessories, filtered air exhaust		3
6		6	CON061	CONE, warning, 'wet floor'		3
1		1	HOL014	HOLDER, sack, with lid foot operated, large, capacity 120 litre, mobile		3
1		1	LAD002	LADDER, 3 tread, platform type 750mm height, folding		3
1		1	TRO068	TROLLEY, cleaners, mop bucket, 3 shelves tray and waste sack holder, 980H 1170W 550D		3

Appendix J
Moderns Methods of Construction Guidance

Appendix J – Modern Methods of Construction.

In recent years, the UK Government, including the Department of Health and Social Care, have demonstrated a strong commitment to Modern Methods of Construction (MMC). This support is reflected in several key policy documents and initiatives:

- The Construction Playbook, issued by the Cabinet Office, establishes a "presumption in favour" of offsite construction across government departments.
- DHSC interim guidance directs NHS England and NHS Improvement to "assume that all schemes start out as MMC".
- Business case checklists for NHS capital projects now include MMC-related requirements at various stages (SOC, OBC and FBC).
- The New Hospital Programme prioritises MMC to deliver healthcare facilities more efficiently and sustainably.

These policies align with broader government objectives to improve construction productivity, reduce carbon emissions, and accelerate the delivery of critical infrastructure. Notably, the Construction Playbook mandates that contracting authorities "*develop an organisational strategy for the promotion and implementation of MMC, running through their portfolios and down to individual projects*".

In line with the above all new build schemes over 500m2 will **Implement a Consistent MMC Assessment:** Each project should measure the adoption of MMC using NHS MMC Toolkit at each gateway stage.

A threshold of 70% MMC is required for all new projects over 500m2

MMC adoption will be measured using the MMC construction assessment toolkit attached. Design teams should develop a scheme specific MMC strategy during the early planning stages of the scheme, this strategy should detail how the requirement to deliver the 70% will be achieved. On design and build schemes the requirement to meet this target must be built into the employers requirements and tested via the selection process.

Link to assessment toolkit (please request from your NHS PS project Lead):

PRN00952ii-nhs-modern-methods-of-con

Appendix K
Usage matrix

PRIMARY CARE/COMMUNITY HEALTH PREMISES SCHEDULE OF STANDARDS AND MINIMUM DESIGN REQUIREMENTS

USAGE MATRIX

This brief represents NHS Property Services (NHSPS) design requirements for the development, or redevelopment, of Primary Care/Community Health Premises in England. It sets out broad project management principles; building, mechanical and electrical engineering parameters and guidance for project handover. It is intended to be used as a brief for projects let under any procurement route, be it traditional (using a design team led approach and then tendering to a contractor), ProCure22, or as part of a development agreement (whereby for example a developer has undertaken to provide a health facility as part of and within an overall development). This brief therefore sets out NHSPS's minimum requirements for such schemes, for either a design team to design to and/or a developer/contractor to deliver, with the ultimate responsibility for meeting such requirements being defined finally in any contractual arrangement.

Route to delivery	New build			Fit out of a developer provided shell			Refurbishment		
	How this document might be used	Other basic information to be provided by NHS Property Services	Other basic information to be developed by appointed NHS Property Services design team, Design and Build Contractor's design team, ProCure22 PSCP's design team or Developer's design team	How this document might be used	Other basic information to be provided by NHS Property Services	Other basic information to be developed by appointed NHS Property Services design team, Design and Build Contractor's design team, ProCure22 PSCP's design team or Developer's design team	How this document might be used	Other basic information to be provided by NHS Property Services	Other basic information to be developed by appointed NHS Property Services design team, Design and Build Contractor's design team, ProCure22 PSCP's design team or Developer's design team
Traditional (using a design team led approach and then tendering to a contractor to deliver it)	To be used as a brief for tendering design teams and then to set NHSPS minimum requirements for the design to be developed from that point	Schedule of accommodation required Any site and planning specific requirements and for example aspirations as to the façade and its appearance and the extent of external works Details of the boundaries of responsibilities for Groups 1, 2 and 3 equipment and information about any Group 2 or other supplied specialist medical equipment MRI, xray, dentistry and the like etc) to be installed and/or accommodated by the contractor (new or transferred) Details of any non health aspects of the project	All other information to be worked up by NHSPS and/or the appointed design team including drawings and detailed materials and workmanship specification The NHS Property Services appointed design team to work up to RIBA Stage 4b design information and then beyond as necessary to deliver the project	To be used as a brief for tendering design teams and then to set NHSPS minimum requirements for the design to be developed from that point	Schedule of accommodation required Details of the boundaries of responsibilities for Groups 1, 2 and 3 equipment and information about any Group 2 or other supplied specialist medical equipment MRI, xray, dentistry and the like etc) to be installed and/or accommodated by the contractor (new or transferred)	All other information to be worked up by NHSPS and/or the appointed design team including drawings and detailed materials and workmanship specification The NHS Property Services appointed design team to work up to RIBA Stage 4b design information and then beyond as necessary to deliver the project	To be used as a brief for tendering design teams and then to set NHSPS minimum requirements for the design to be developed from that point	Schedule of accommodation required Any site and planning specific requirements and for example aspirations as to the façade and its appearance (if applicable) and the extent of external works Details of the boundaries of responsibilities for Groups 1, 2 and 3 equipment and information about any Group 2 or other supplied specialist medical equipment MRI, xray, dentistry and the like etc) to be installed and/or accommodated by the contractor (new or transferred)	All other information to be worked up by NHSPS and/or the appointed design team including drawings and detailed materials and workmanship specification The NHS Property Services appointed design team to work up to RIBA Stage 4b design information and then beyond as necessary to deliver the project
Design and build (arriving at an initial design concept and then tendering to a contractor to complete the design and deliver it)	To be used as a brief for tendering design teams and then to set NHSPS minimum requirements for the design to be developed from that point	Schedule of accommodation required Any site and planning specific requirements and for example aspirations as to the façade and its appearance and the extent of external works Scheme design to RIBA Stage 3, or further if the project requires, worked up by the NHS Property Services appointed design team Details of the boundaries of responsibilities for Groups 1, 2 and 3 equipment and information about any Group 2 or other supplied specialist medical equipment MRI, xray, dentistry and the like etc) to be installed and/or accommodated by the contractor (new or transferred) Details of any non health aspects of the project	All other information to be worked up by NHSPS and/or the appointed design team and then the design and build contractor including drawings and detailed materials and workmanship specification The design and build contractor's design team to work up to RIBA Stage 4b design information and then beyond as necessary to deliver the project	To be used as a brief for tendering design teams and then to set NHSPS minimum requirements for the design to be developed from that point	Schedule of accommodation required Scheme design to RIBA Stage 3, or further if the project requires, worked up by the NHS Property Services appointed design team Details of the boundaries of responsibilities for Groups 1, 2 and 3 equipment and information about any Group 2 or other supplied specialist medical equipment MRI, xray, dentistry and the like etc) to be installed and/or accommodated by the contractor (new or transferred)	All other information to be worked up by NHSPS and/or the appointed design team and then the design and build contractor including drawings and detailed materials and workmanship specification The design and build contractor's design team to work up to RIBA Stage 4b design information and then beyond as necessary to deliver the project	To be used as a brief for tendering design teams and then to set NHSPS minimum requirements for the design to be developed from that point	Schedule of accommodation required Any site and planning specific requirements and for example aspirations as to the façade and its appearance (if applicable) and the extent of external works Scheme design to RIBA Stage 3, or further if the project requires, worked up by the NHS Property Services appointed design team Details of the boundaries of responsibilities for Groups 1, 2 and 3 equipment and information about any Group 2 or other supplied specialist medical equipment MRI, xray, dentistry and the like etc) to be installed and/or accommodated by the contractor (new or transferred)	All other information to be worked up by NHSPS and/or the appointed design team and then the design and build contractor including drawings and detailed materials and workmanship specification The design and build contractor's design team to work up to RIBA Stage 4b design information and then beyond as necessary to deliver the project
ProCure22	To be used as a brief for the ProCure22 selection process and then to set NHSPS minimum requirements for the design to be developed from that point	Schedule of accommodation required Any site and planning specific requirements and for example aspirations as to the façade and its appearance and the extent of external works Scheme design to RIBA Stage 2, or further if the project requires, worked up by the NHS Property Services appointed design team (unless the ProCure22 PSCP is appointed from the outset/SOC stage/ProCure22 Stage 1, in which case the design is worked up by the PSCP's design team) Details of the boundaries of responsibilities for Groups 1, 2 and 3 equipment and information about any Group 2 or other supplied specialist medical equipment MRI, xray, dentistry and the like etc) to be installed and/or accommodated by the contractor (new or transferred) Details of any non health aspects of the project	All other information to be worked up by NHSPS and/or the PSCP and their appointed design team including drawings and detailed materials and workmanship specification The PSCP's design team to work up to RIBA Stage 4b design information and then beyond as necessary to deliver the project	To be used as a brief for the ProCure22 selection process and then to set NHSPS minimum requirements for the design to be developed from that point	Schedule of accommodation required Scheme design to RIBA Stage 2, or further if the project requires, worked up by the NHS Property Services appointed design team (unless the ProCure22 PSCP is appointed from the outset/SOC stage/ProCure22 Stage 1, in which case the design is worked up by the PSCP's design team) Details of the boundaries of responsibilities for Groups 1, 2 and 3 equipment and information about any Group 2 or other supplied specialist medical equipment MRI, xray, dentistry and the like etc) to be installed and/or accommodated by the contractor (new or transferred)	All other information to be worked up by NHSPS and/or the PSCP and their appointed design team including drawings and detailed materials and workmanship specification The PSCP's design team to work up to RIBA Stage 4b design information and then beyond as necessary to deliver the project	To be used as a brief for the ProCure22 selection process and then to set NHSPS minimum requirements for the design to be developed from that point	Schedule of accommodation required Any site and planning specific requirements and for example aspirations as to the façade and its appearance and the extent of external works Scheme design to RIBA Stage 2, or further if the project requires, worked up by the NHS Property Services appointed design team (unless the ProCure22 PSCP is appointed from the outset/SOC stage/ProCure22 Stage 1, in which case the design is worked up by the PSCP's design team) Details of the boundaries of responsibilities for Groups 1, 2 and 3 equipment and information about any Group 2 or other supplied specialist medical equipment MRI, xray, dentistry and the like etc) to be installed and/or accommodated by the contractor (new or transferred)	All other information to be worked up by NHSPS and/or the PSCP and their appointed design team including drawings and detailed materials and workmanship specification The PSCP's design team to work up to RIBA Stage 4b design information and then beyond as necessary to deliver the project
Development agreement (whereby for example a developer has undertaken to provide a health facility as part of and within an overall development).	To be used as a brief for the developer setting out NHSPS minimum requirements for the design to be developed from that point See also Appendix H - Shell and Core requirements	Schedule of accommodation required Any site and planning specific requirements and for example the extent of external works Scheme design to RIBA Stage 2 or 3, or further if the project requires, worked up by the NHS Property Services appointed design team Details of the boundaries of responsibilities for Groups 1, 2 and 3 equipment and information about any Group 2 or other supplied specialist medical equipment MRI, xray, dentistry and the like etc) to be installed and/or accommodated by the contractor (new or transferred) Details of any non health aspects of the project	All other information to be worked up by NHSPS and/or the appointed developer and its design team including drawings and detailed materials and workmanship specification The developer's design team to work up to RIBA Stage 4b design information and then beyond as necessary to deliver the project	To be used as a brief for the developer setting out NHSPS minimum requirements for the design to be developed from that point See also Appendix H - Shell and Core requirements	Schedule of accommodation required Scheme design to RIBA Stage 2 or 3, or further if the project requires, worked up by the NHS Property Services appointed design team Details of the boundaries of responsibilities for Groups 1, 2 and 3 equipment and information about any Group 2 or other supplied specialist medical equipment MRI, xray, dentistry and the like etc) to be installed and/or accommodated by the contractor (new or transferred)	All other information to be worked up by NHSPS and/or the appointed developer and its design team including drawings and detailed materials and workmanship specification The developer's design team to work up to RIBA Stage 4b design information and then beyond as necessary to deliver the project	To be used as a brief for the developer setting out NHSPS minimum requirements for the design to be developed from that point See also Appendix H - Shell and Core requirements	Schedule of accommodation required Any site and planning specific requirements and for example the extent of external works Scheme design to RIBA Stage 2 or 3, or further if the project requires, worked up by the NHS Property Services appointed design team Details of the boundaries of responsibilities for Groups 1, 2 and 3 equipment and information about any Group 2 or other supplied specialist medical equipment MRI, xray, dentistry and the like etc) to be installed and/or accommodated by the contractor (new or transferred)	All other information to be worked up by NHSPS and/or the appointed developer and its design team including drawings and detailed materials and workmanship specification The developer's design team to work up to RIBA Stage 4b design information and then beyond as necessary to deliver the project