

# brp presentation to the Primary Care Premises Forum

Alan Sankey : Director at brp architects

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## Size Matters :

From Simplicity ..... Up to 2003

To Complexity ..... 2004 - 2013

To Ambiguity ..... 2013 Onwards



# Size Matters :

The Pressing Question;-

- Design, Feel, Mood, Aspiration, Quality of Space, Rhythm, Order .....

- How Big?



- How Much?

# Size Matters :

Food for Thought;

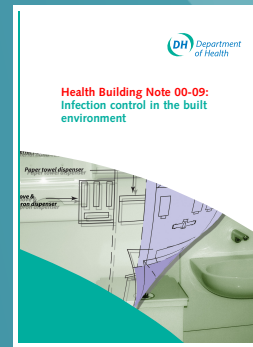
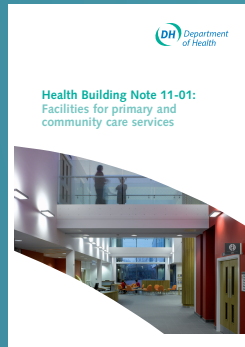
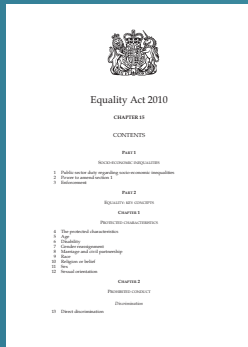
What do the following have in common?

- BS 8300
- DDA 1995 (Premises 2004) and the Equality Act 2010
- Building Regulations AD-M 2004
- HBN 11-01 : Facilities for Primary Care ... &
- HBN 00-09 : Infection Control

# Size Matters :

Food for Thought;

What do the following have in common?



# Size Matters :

The Experience from which we draw:

- Medical Centres of all descriptions, either GP or Trust led along with 3<sup>rd</sup> Party Developer Procurement and more recently Primary Care Portfolio holders
- Premises ranging from Single Handed Practices to Multi-Practice / Organisation Facilities of up to 30 Clinicians and 7 Stakeholders
- Projects embrace :
  - New Build
  - Extensions
  - Regeneration, Refurbishment and Upgrades
- Presently involved with 30+ 'Active' Healthcare projects – most jammed in the 'sausage machine'
- No LIFT
- No P21

# Size Matters :

## Establish An Understanding

- Behind the various standards controlling premises of different ages
- How the standards have evolved
- What the current development guidance should be delivering in 2014 stemming from the proposed 2013 changes, looking forward ..... and backwards
- What is actually being delivered?
- Where does it go from here?

# Size Matters :

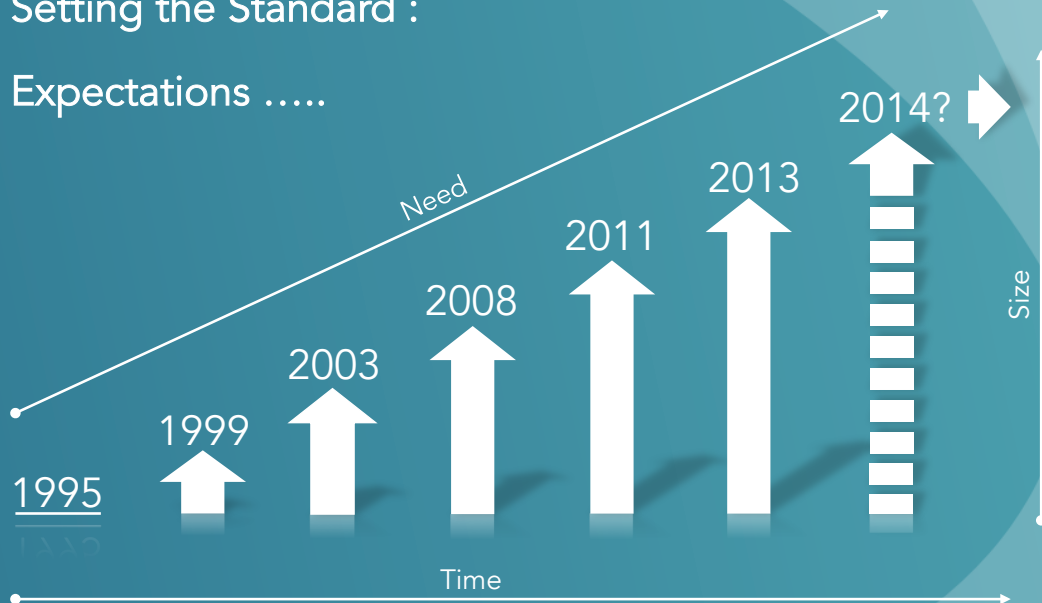
## Controlling Primary Health Premises Legislation :

- Pre 1999. DoH Statement of Fees & Allowances. 'Red Book'; Para 51
- HBN 36 from 1995 - Started to blur the boundaries
- 1999 – 2003. General Medical Practice Premises – *A Commentary*
- 2004 – 2008. Primary & Social Care Premises & Design Guidance
- HBN 11-01 2009 - 2011
- 2011. Facilities for Primary and Community Services : Planning & Design Manual : 1183.08 *England*
- HBN 11-01 2013 .....

## Size Matters :

Setting the Standard :

Expectations .....



## Size Matters :

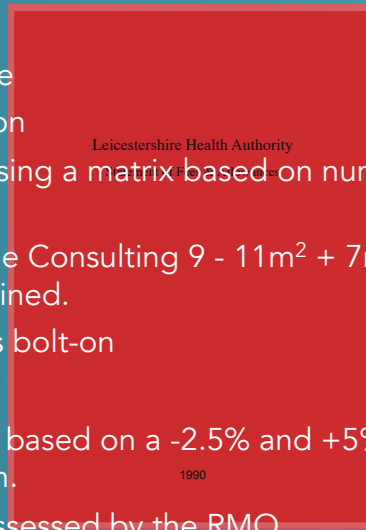
Simplicity .....

Up to 2003

# Size Matters :

## Design & Funding Principles : Pre 1999

- 'Red Book'
  - 'Cost Rent' Scheme
  - 'Slimline' legislation
  - Areas calculated using a matrix based on numbers of GPs and building type.
  - Key Rooms sized; ie Consulting 9 - 11m<sup>2</sup> + 7m<sup>2</sup> Examination or 13.5 – 14m<sup>2</sup> Combined.
  - Additional services bolt-on
  - Gross floor area
  - Area to be funded based on a -2.5% and +5% overall tolerance and 10% per Room.
  - Layouts formally assessed by the RMO



# Size Matters :

Paragraph 51  
Schedule 1a - Premises for 1 to 5 GPs

### 1. Gross Internal Areas (GIA) and National Building Cost Allowances

Number of GPs	1	2	3	4	5
Type of Premises (see notes (i) and (ii))	A	A	A	B	B
Gross Internal Area (GIA) Allowance m <sup>2</sup>	148	239	348	476	540
Building Allowance £	124,500	197,000	273,500	341,000	381,000
Car Park (see note (iii)) £	8,600	16,000	22,600	28,300	33,300

Notes:

- Type A are single storey premises.
- Type B are 2 storey premises with 2 staircases and 1 lift and include 20m<sup>2</sup> for each staircase and 15m<sup>2</sup> for the lift. Where a lift or staircase is not built, the floor area allowance should be reduced accordingly with no variation in the cost allowance.
- Exceptionally, where 3GP premises need to be built on 2 storeys, HAs may add 35m<sup>2</sup> for 1 staircase and 1 lift and increase the cost allowance to £312,000.
- Subject to the maximum shown, HAs may add an amount for car parking and associated external costs, where these are incurred.
- Exceptionally, HAs may consider additional costs for external security eg roller shutters, security glazing.

# Size Matters :

Paragraph 51  
Schedule 1a - Premises for 1 to 5 GPs

2. Additional Facilities —  
Gross Internal Areas (GIA) and National Building Cost Allowances at £/m<sup>2</sup>

Number of GPs	1	2	3	4	5
Building Cost Allowance - £/m <sup>2</sup>	793	766	717	702	692
Practice Manager - m <sup>2</sup>	14	N/A	N/A	N/A	N/A
Part Time GP - m <sup>2</sup>	18	18	18	18	18
GP Trainer – additional space - m <sup>2</sup>	4	4	4	4	4
Medical Trainees - m <sup>2</sup>	18	18	18	18	18
Dispensary - m <sup>2</sup>	14	14	23	23	23

# Size Matters :

Design & Funding Principles : Pre 1999

3GP



3GP = 348m<sup>2</sup> + Extras  
Single Storey



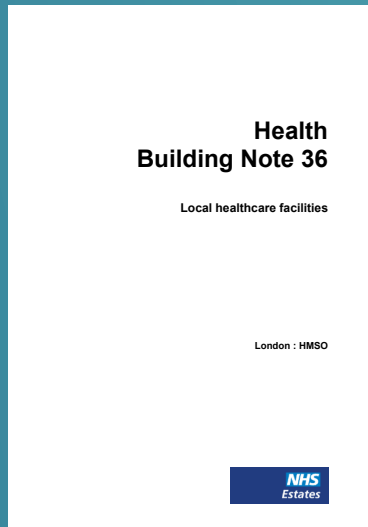
5 GP = 540m<sup>2</sup> + Extras  
Two Storey

5GP

# Size Matters :

## Design & Funding Principles :

'HBN 36' : 1995

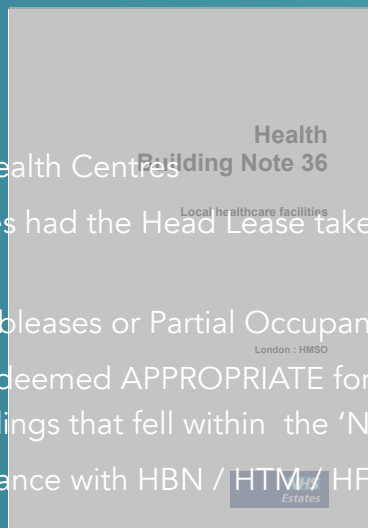


# Size Matters :

## Design & Funding Principles :

'HBN 36' : 1995

- Relevant or not?
- Written for NHS Health Centres
- Some 3PD schemes had the Head Lease taken by the NHS and not GPs
- Some had NHS Subleases or Partial Occupancy
- HBN 36 therefore deemed APPROPRIATE for the whole building or part of the buildings that fell within the 'NHS Estate'
- Introduced compliance with HBN / HTM / HFN Documentation
- Confusion ever since .....





# Size Matters :

## Design & Funding Principles : 1999 - 2003

- General Medical Practice Premises – A Commentary
  - A response to the first of the 'New Contracts'
  - Areas broadly calculated using the 'Red Book' type matrix based on numbers of GPs and building type
  - Same bolt-on elements for basic additional practice services
  - Substantial non-specific bolt on for Community Services relocated into Primary Care (NHS Vision) 'Services Development' and 'Services Management'
  - Remains a Gross Floor Area
  - Area to be funded based on a +/- 2.5% tolerance & 10% Room
  - Phasing out of the RMO - PCT reviewing schemes in-house
  - Used for GP led and 3PD Procurement



# Size Matters :

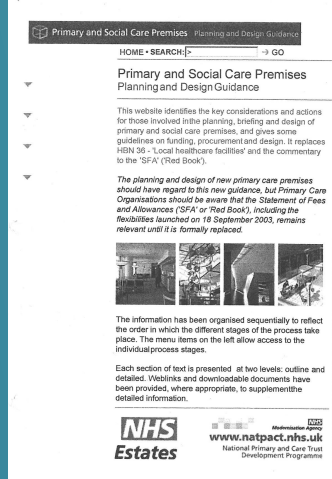
Complexity ..... 2004 - 2013



# Size Matters :

## Design & Funding Principles : 2004 - 2008

- Primary & Social Care Premises Planning & Design Guidance



# Size Matters :

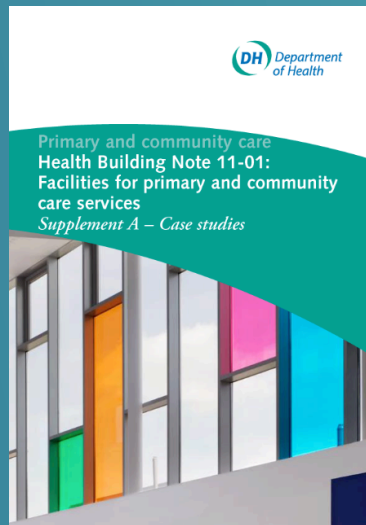
## Design & Funding Principles : 2004 - 2008

- Primary & Social Care Premises Planning & Design Guidance
  - First Web based guidance
  - First full breakdown on a room by room basis
  - Amalgamated Red Book & HBN 36
  - Individual rooms sized in documentation
  - All areas covered including some secondary elements
  - Increase in clinical room sizes to 15m<sup>2</sup>
  - Start to consider grouping of activities
  - Embraced larger space standards recognising DDA
  - First thought on quality of environment and not just floor space
  - Creation of 'Healthy Buildings'

# Size Matters :

## Design & Funding Principles : 2009 - 2011

- HBN 11 - 01



# Size Matters :

## Design & Funding Principles : 2009 - 2011

- HBN 11 - 01
  - Web based documentation to be rigidly adhered to
  - Generic Rooms – standard module from a matrix
  - Briefing now Patient List Size led
  - Complex methodology for determining the No. of clinical rooms
  - Increase in clinical room sizes to a 16m<sup>2</sup> multi-function standard
  - Move away from Personal Rooms to Clinical and Administration split changing the way people worked
  - Designed to maximise future flexibility – withdrawal of FE space
  - Forced building sizes upwards at a time of reductions in funding
  - Net areas

# Size Matters :

## Design & Funding Principles : 2009 - 2011

- HBN 11 - 01
  - Clinical Room Calculation Method

Calculating number of consulting/examination rooms required for general medical services:	
Catchment population:	10,000
Access rate:	5260 per 1000 population
Anticipated annual contacts:	$10 \times 5260 = 52,600$
Assume 100% patients use C/E room: Patients accessing a C/E room:	52,600
Assume open 50 weeks a year: Patients per week:	$52,600/50 = 1052$
Appointment duration	15 minutes
Patient appointment time per week	$1052 \times 15/60 = 263$ hours per week
Assume building operational	60 hours per week
Assumes room utilisation	60%
Rooms available	36 hours per week
Number of C/E rooms required:	$263/36 = 7.3$

- Equivalent for Treatment Rooms, but nothing for support spaces

# Size Matters :

## Design & Funding Principles : 2009 - 2011

- HBN 11 - 01
  - Standard Room Sizing

# Size Matters :

## Design & Funding Principles : 2009 - 2011

8m<sup>2</sup>

12m<sup>2</sup>

16m<sup>2</sup>

24m<sup>2</sup>

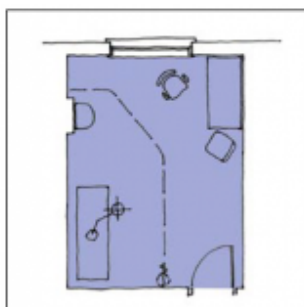
32m<sup>2</sup>

GENERIC PATIENT/CLIENT CONTACT SPACES			SPECIALIST CLINICAL SPACES		SUPPORT SPACES		
8 m <sup>2</sup>	interview (with or without clinical basin)			adult hearing test	clean utility	dirty utility	disposal hold
12 m <sup>2</sup>	interview	examination/therapy	single person recovery	physical measurement	cleaners	near patient testing	1-person office
16 m <sup>2</sup>	consulting/examination	treatment	podiatry	physical therapy	clean utility	dirty utility	disposal hold
24 m <sup>2</sup>	group		plaster				
32 m <sup>2</sup>	large group	exercise equipment	free movement exercise				
			in-patient social				

# Size Matters :

## Design & Funding Principles : 2009 - 2011

- HBN 11 - 01
  - Generic Rooms – 16m<sup>2</sup> standard module



The example layouts of the generic 16m<sup>2</sup> consulting/examination room on this website show access to all three sides of the couch. This is generally not required in primary and community care settings, where the couch can be aligned against one wall, leaving additional space for patients, escorts and mobile equipment (See layout) The couch should be correctly handed, however, and the clinical wash-hand basin should remain within the cubicle area.

The generic 12m<sup>2</sup> consulting/examination room with single-sided couch access described in this website is not recommended for use in primary and community care buildings as it offers less space for equipment and patients/escorts than the 16m<sup>2</sup> room.

# Size Matters :

Design & Funding Principles : 2011 - 31.03.2013



# Size Matters :

Design & Funding Principles : 2011 - 31.03.2013

- Facilities for Primary & Community Services : Planning and Design Manual 1183.08
  - Web based documentation
  - Same Generic Rooms as HBN 11-01
  - Patient List Size led
  - Designed to maximise future flexibility
  - Business-case led
  - Net Areas
- **31.03.2013** [www.spaceforhealth.nhs.uk](http://www.spaceforhealth.nhs.uk) and subscription service withdrawn.

# Size Matters :

To Ambiguity ..... 2013 Onwards

# Size Matters :

## Design & Funding Principles : Present and Future

- Facilities for Primary & Community Services : Planning and Design Manual 1183.08 - Post 01.04.2013
  - To continue but now to be hosted on Country specific web sites – DoH in England
  - Funding now determining space allocation – cost first approach
  - Specific room sizes now being reduced as small as possible to maximise accommodation within the available revenue
  - Early 2013 Trusts began imposing strict eligibility requirements  
eg. NHS Nottinghamshire

***1. Max 80sqm/1000 patients***

***2. A training practice***

***3. Not near another new / improved GP facility***

# Size Matters :

31<sup>st</sup> of March 2013

- The big shake up :
  - PCTs going
  - NHS Property Services mopping up all loose leases
  - LATs coming to the fore – same people : new roles
- Rush to reach Financial Close before the end of March.....
- Close of the 'Spaces for Health' Website and subscription service!



# Size Matters :

## Design & Funding Principles : Present and Future

- Case Study 1 : Project Summary;-
  - Appointment secured September 2007 for 2 Practices, Pharmacy & sub-let space. GMS space sized using *Primary & Social Care Premises & Design Guide* at 1,400m<sup>2</sup> Net
  - Project escalated following 'mopping up' of smaller & single handed Practitioners, 5 Practices in all by 2012. Sized **under 1183.08** using business case. Sized at 1.989m<sup>2</sup> Net
  - 2013 *NHS Nottingham* Review leaked and pre-empted
  - 29,000 Patients





# Size Matters :

## Design & Funding Principles : Present and Future



- Tendered at 1,989m<sup>2</sup> Net in March 2013
- Contract Awarded at 1,989m<sup>2</sup> Net in April 2013
- Constructed at 2,327m<sup>2</sup> Gross. Completed 2014
- Thus 2,327m<sup>2</sup> = 80 (per 1000) for 29,000 Patients

# Size Matters :

## Design & Funding Principles : Present and Future

- How it worked – Original Building;-
  - Many clinical rooms undersized, some consulting rooms as low as 13.5m<sup>2</sup> & hot-desking
  - Open plan admin areas are incredibly tight
  - Strive to minimise circulation has resulted in some internal office space
  - Under-provision of waiting space
- How does it work – Additional Space;-
  - Additional consulting rooms used to provide dedicated accommodation
  - Enhanced treatment and minor procedure suite
  - Base for support services
- HBN 11-01 Compliance?



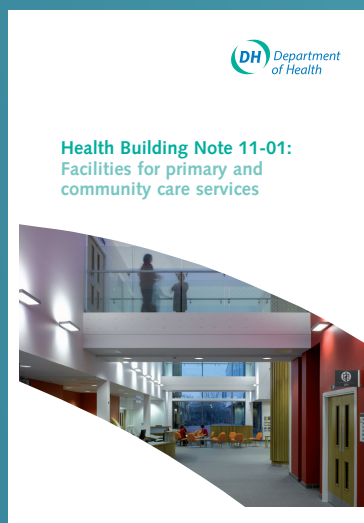
# Size Matters :

## Design & Funding Principles : Present and Future

- Case Study 2 : Project Summary;-
  - 3 GP, Practice HBN 11.01 based Accommodation 450m<sup>2</sup> Net
  - Rising list, training aspirations, house building programme, deprivation
  - NHS Notts ruling with 3,600 Patients, rounded to 4,000 was for a maximum GMS Space Allowance 320m<sup>2</sup> Gross
  - Critical Size of the Static Load of Any GP Facility;-
    - Equality Act Compliant Reception Desk
    - Staff & Patient Welfare Facilities
    - Practice Manager Office
    - Compliant Infection Control Spaces
    - Plant, Cleaner & Server Space
  - Adjacency to other recent premises and not approved for training

# Size Matters :

1<sup>st</sup> of April 2013



# Size Matters :

1<sup>st</sup> of April 2013

- DoH Website now the Source of Design Criteria in England
- HBN 11-01 2013 is Back
  - New Cover
  - Same Content
- Cost Neutrality
  - 500m<sup>2</sup> Scheme net 475m<sup>2</sup>
  - Reimbursement transfer from original site capped at £9,500 p/a
  - Equals £20/m<sup>2</sup> p/a – no 3yr review
  - Supplemental revenue sources; S106, CIL, Third Party occupiers ...
  - No Relaxation on HBN 11-01 sizes

# Size Matters :

1<sup>st</sup> of April 2013

- NHS England : Consultation / Discussion Document Released
- Proposed Guidelines for Premises Sizing;
- Independent of HBN 11 - 01
  - Stand Alone
  - LAT Objections

Due for implementation from 1<sup>st</sup> of April 2014

# Size Matters :



EFFECTIVE FROM 1 APRIL 2013

SCHEDULE 1A: PREMISES FOR 1—10,000 REGISTERED PATIENT LIST SIZE

1. Gross Internal Areas (GIA)

Number of patients	2,000	4,000	6,000	8,000	10,000
Type of Premises (see notes (i) and (ii))	A	A	B	B	B
Gross Internal Area (GIA) Allowance	199	333	500	667	833

PREMISES FOR 10,001—20,000 REGISTERED PATIENT LIST SIZE

Number of patients	12,000	14,000	16,000	18,000	20,000
Type of Premises (see notes (i) and (ii))	B	B	B	B	B
Gross Internal Area (GIA) Allowance	916	1,000	1,083	1,167	1,250

Note:

(i) Type A — Single storey premises

(ii) Type B — Two storey premises with 1 staircase and 1 lift

Where a staircase or lift is not built the GIA allowance should be reduced accordingly

(ii) Exceptionally, where 400m<sup>2</sup> contractor premises need to be built on two storeys NHS England may add 35m<sup>2</sup> for 1 staircase and 1 lift.



# Size Matters :

1<sup>st</sup> of April 2013

- NHS England : Proposed Guidelines for Premises Sizing;
  - Based Around Patient numbers now, not GP numbers
  - Benchmark 500m<sup>2</sup> Facility for 6,000 Patients  
= 83m<sup>2</sup> per 1,000 Patients
- Stand alone 2,000 Patient premises at 199m<sup>2</sup>
- Linear Scale for 4,000 – 10,000 Patients Premises (+ 166m<sup>2</sup> / 2000)
- Linear Scale for 10,000 – 20,000 Patients Premises (+ 83m<sup>2</sup> / 2000)
- All areas gross



# Size Matters :

## Comparison;-

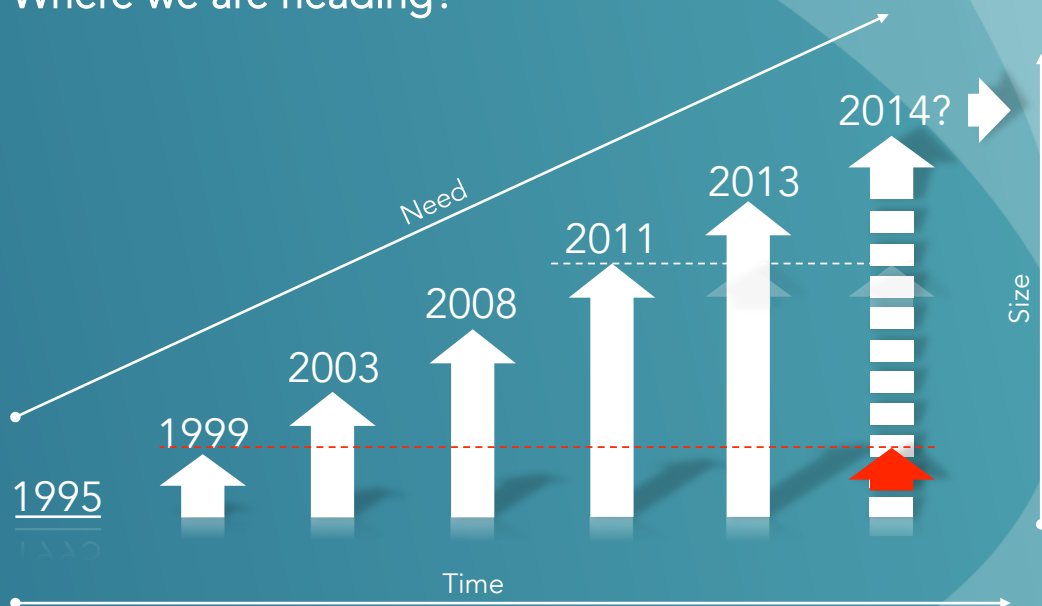
- Red Book ;-
  - Say 6,000 patients (Average practice list size c7,000)
  - Say 1,500 patients per GP (for ease) = 4GPs
  - A 4GP surgery = **476m<sup>2</sup>** ++

## 2014;-

- 2013 Proposed NHS England Schedule;
  - 6,000 patient surgery size = **500m<sup>2</sup>**

# Size Matters :

## Where we are heading?



# Size Matters :

## Design & Funding principles : Present and Future

- Where would we be with the NHSE guidance?
  - 83m<sup>2</sup> / 1000 patients is almost directly comparable to the 1999 allowances +/- for a small, average size facility
- Since the 1999 allowances;-
  - Support activities
  - BS 8300, DDA 1995 (Premises 2004) and the Equality Act 2010
  - Building Regulation AD-M 2004
  - HBN 11-01 Room Sizes ..... &
  - Infection Control HBN 00-09

All reduce the space available for clinical activities within a shell of any given size

Premises compliant with the larger 2004 guidance are spatially the benchmark for CQC compliance

# Size Matters :

## Recent Findings:



### Premises Survey results

2014

## Lack of investment is holding GP services back

- 4,720 GP surgeries (47.9% of all in the UK) responded to a survey about the state of the premises in which they work
- An almost 48% response rate to an unsolicited survey demonstrates just how deep the feelings run

## Size Matters :

### Recent Findings:

- 4 in 10** GP practices feel that their current premises are not adequate to deliver services to patients.
- 5 in 10** Practices have seen no investment or refurbishment in the past ten years.
- 6 in 10** Feel that their practice is not big enough to provide vital training and education programmes for GPs and their staff.
- 6 in 10** GPs have to share consulting rooms or employ hot-desking. This results in a range of constraints on GP services, with just over four in ten believing this restricts the number of appointments their practice can provide and three out of ten concerned it damages the overall delivery of services.
- 7 in 10** GPs feel their premises are too small to deliver extra or additional services to patients.

## Size Matters :

### A Lasting Thought .....

#### Statistics Published by the Kings Fund;

- 1995 : 221 Million Consultations
- 2007 : 299 Million Consultations

#### Statistics Published by the RCGP;

- 2012 : 340 Million Consultations
- 370 Million Consultations looming

53% Overall Increase in Patient Consultations over to 19 Years to 2012!

### So Spatially.....

*Where does that leave the Primary Care Estate?*

# Thank You

Alan Sankey : Director at brp architects

