## 3Ts Redevelopment

Teaching, Trauma and Tertiary Care



#### Introduction

The 3Ts Redevelopment of the Royal Sussex County Hospital is a £420 million programme to replace all the buildings on the front of the existing main hospital site. Some of these are amongst the oldest in the NHS still providing inpatient beds and first came into use 20 years before Florence Nightingale became a nurse.

The programme is in the decant stage, which will make space for the first of the two new hospital buildings in the redevelopment. All clinical services will continue to run throughout both the decant and the main construction phases of the project.

The programme's Outline Business Case received approval from the Treasury on 1 May 2014. This is an agreement in principle for the programme and is the major approval required for the redevelopment to go ahead.

This document contains information and key messages about the 3Ts Redevelopment. It is reasonable to expect, with the positive outcome for the Outline Business Case, that there will be considerable interest amongst the public, NHS staff and the media. This document



is written to help answer queries about the project and to enable informed discussion about the nature, intent and extent of the redevelopment.



## Decant

Maintaining Care - Making Space



St Mary's Hall Administration and Management Centre

#### Decant

The decant programme will free up just over 20% of the main site, the space needed to build Stage 1 of the redevelopment, whilst maintaining or improving the hospital's clinical services. Six locations are being used for the decant, five of them on the existing site and one, St Mary's Hall on Eastern Road, which becomes a permanent part of the hospital's campus. The decant plan has been informed by the need to keep clinical services accessible to patients and to maintain adjacencies between key clinical services.

As part of decant Nuclear Medicine will move into a purpose built modular unit which meets all its requirements, unlike its current 'temporary accommodation' which it has occupied for 40 years. This building will be located in front of the east wing of the existing Barry Building. Work on it will start in August 2014.

The wards from the Jubilee Building will move into a temporary ward building that will give them more space, storage and individual rooms for the majority of patients. They currently occupy cramped, converted 'nightingale style' wards. All other clinical and support services are moving into accommodation that is at least as good as their current location.



## Decant - Key Facts

- There will be no reduction in services to patients.
- Decant will free up just over 20% of the main site for redevelopment by providing just under 9000m<sup>2</sup> of accommodation equivalent to 8 floors of the Thomas Kemp Tower.
- The programme has been designed to prioritise patient access, the patient environment and clinical adjacencies.
- There are 6 locations being used for decant, 5 on-site and 1 extending the hospital campus.
- Decanted services will move into new modular or refurbished existing buildings.

## Decant - Locations and Services

Decant Building	Functions/Departments	Projected Completion Date
St. Mary's Hall (Refurbishment)	Administrative and management offices; Trust HQ; Cardiac Gym; Physiotherapy Inpatient Support; Rheumatology Offices.	Complete 2013 /14
Front Car Park (Temporary Modular Build)	Nuclear Medicine - Clinical; Radiopharmacy; Speech & Language Therapy. Rheumatology OPD; Physiotherapy OPD.	Late Summer 2015
Royal Alexandra Children's Hospital (Refurbishment)	Paediatric Audiology	Summer 2014
Thomas Kemp Tower Courtyard (Temporary Modular Build)	Oncology and Clinical Infection Service Inpatient Beds.	Spring 2015
Building 545 (Refurbishment)	ENT OPD; Audiology; Junior Doctors' Mess	Winter 2014/15
North Service Road Building (New build)	Site Management Offices; EBME Department; MIE Store; Post Room Nuclear Medicine Offices Medical Physics Offices;	Late Summer 2015



## Main Development

Improving Care - New Environments



#### Main Development

The main development will take place in 3 stages. This will ensure the hospital site and all clinical services can continue to run throughout the nine years of construction. On completion the redevelopment will occupy 45% of the main hospital site. The programme has been planned so that each new building will accommodate the services from the next construction site. This ensures that the majority of clinical services only have to move once, into new, permanent and significantly improved accommodation.

Across the new buildings 65% of beds will be in single, en-suite rooms. The rest will be in single gender, four bedded bays, also with en-suite facilities. This and the other new clinical facilities will bring about a marked improvement in privacy and dignity for patients. All the clinical areas within the new buildings, from general floor layout to fixtures and fittings, have been designed with clinical input and leadership. The space and facilities available to patients and staff will be of the highest standard drawn from examples of best practice across the UK and beyond.

There will be improved clinical facilities for all services within the redevelopment and an associated improvement in the experience for all patients seen by these services. We have



already started asking our patients about their experience in the old buildings being replaced by the redevelopment; this will allows a clear comparison of patients' experiences before and after the redevelopment.

In particular the redevelopment will:

- establish an emergency 'hot' floor across level 5 between the new buildings and the existing Emergency Department, freeing up much-needed space in that area;
- bring the HIV and Infectious Diseases services together and provide negative pressure treatment facilities for patients requiring them;
- deliver a joint Acquired Brain Injury and Stroke service in Stage 1 which will bring together the expertise of four key services into one location to optimise the treatment of these patients;
- The redevelopment will create an integrated Imaging, Neuroimaging, Nuclear Medicine and Interventional Radiology service.

At the same time as the first new building is being constructed, a helipad will be built on the Thomas Kemp Tower to allow seriously ill and injured patients to be brought directly to site by air ambulance.

A new combined heat and power plant will be installed during the Stage 1 build. This will improve the energy use profile for much of the hospital.

The redevelopment will provide 312 additional underground parking spaces dedicated for patient and visitor use only. The reception areas of Stages 1 and 2 will be directly accessible by lift from the new car park and disabled parking will be located nearest to these lift cores. This will mean that we will have 820 car parking spaces on the site, 49% of which will be dedicated for patients and visitors, 46% for staff and 5% for disabled badge holders. We will also have 102 additional cycle spaces and 27 additional spaces for motor cycles.

The redevelopment will significantly improve the accessibility of the site. It will be possible to reach all the clinical areas of the hospital without having to go outside or negotiate stairs or slopes. Locating clinical and support areas will be far easier with a consistent system of signs used throughout the new and existing buildings. There will be 8 new passenger lifts, 6 dedicated bed lifts and 4 goods lifts. Facilities management services such as laundry and ward catering will use corridors and lifts separated from the main public areas and thoroughfares.

The improvements in space, service, layout and design will make it hard for many patients to believe they are in the same hospital that they knew, and tolerated, before.



### Main Development - Key Facts

- The programme is separated into three construction stages spread over nine years.
- The redevelopment will cover 45% of the main hospital site.
- Clinicians have been involved in all aspects of the clinical design.
- Most clinical services will be moving directly into new accommodation.
- 65% of bed will be in single en-suite rooms.
- There will be a marked improvement in privacy and dignity for patients.
- There will be an improvement in clinical facilities and therefore patient experience in all services within the redevelopment.
- A landing pad for the air ambulance will be built on top of the Thomas Kemp Tower
- A new combined heat and power plant will be installed.
- An underground car park will supply 312 extra spaces for patient and visitors only.
- All clinical areas of the site will be easily accessible from the new main entrance.
- A new hospital wide system of signs will be instigated to aid way-finding.
- Corridors and lifts for facilities management functions will be separate from public thoroughfares and lifts.



Local Care - Regional Services



### Stage 1 Information

Stage 1 will replace the wards and departments in the Barry Building, which took its first patients twenty years before Florence Nightingale began nursing. It will allow the full transfer of the Regional Neurosciences Centre from Haywards Heath and provide the full range of facilities to support the Major Trauma Centre in fit for purpose accommodation. The Stage 1 building will provide accommodation for all the decanted clinical services, with the exception of the Outpatient Physiotherapy service.

The lower floors will be focused on non-emergency, outpatient and support services. The outpatient services for those most likely to have mobility problems, for example Rheumatology and the Fracture Clinic will be as near to the reception area as possible. Level 5 of Stage 1 will connect directly with the Emergency Department. Together with level 5 of the Thomas Kemp Tower they will operate as a single, emergency focused floor. This will allow easy horizontal transfer between key emergency services. The floors around level 5 will accommodate services linked clinically with the work of the Emergency Department. The upper floors will house wards and rehabilitation services, including the joint Stroke and Acquired Brain Injury service. The topmost floor is set aside for teaching and meeting facilities.



Stage 1 will house the new main entrance for the hospital which will offer a spacious reception area and retail outlets. Level 6 of the building will also offer a dedicated public space including: a café, The Sanctuary multi faith space, the Patient Advice and Liaison Service and a link to the accessible roof gardens atop the Stage 2 building.

The main focuses of Stage 1 are District General Hospital services including Elderly Care and General Medicine wards, emergency care including Trauma, and Neurosciences.

### Stage 1 - Key Facts

- Replace the outdated wards from the Barry Building.
- Accommodate the transfer and expansion of the Regional Neurosciences Centre.
- Provide support services for the Major Trauma Centre
- Accommodate all previously decanted clinical services, except Physiotherapy Outpatients.
- Establish a 'hot' emergency floor on Level 5 across the Stage 1 Building, Thomas Kemp Tower and the existing emergency Department.
- Give ease of access to outpatient services by placing them on the lower floors.
- Provide gold standard ward accommodation on the upper floors of the building.
- House the new main entrance, spacious reception area and retail outlets for patients, visitors and staff.



Cancer Care - Innovative Research



### Stage 2 Information

Stage 2 will house the new and expanded Sussex Cancer Centre. This will include more specialist inpatient beds, more spaces for chemotherapy and more linear accelerators for radiotherapy. The co-location will significantly improve patient experience by removing the need to undertake lengthy outdoor transfers between inpatient areas and treatment facilities. The expansion will significantly increase the number of patients who can be treated and accommodated in the Cancer Centre.

The Stage 2 building will offer additional facilities for research and training including the Trust's Clinical Investigation and Research Unit and onsite offices for Brighton and Sussex Medical School. This will further enhance the Trust's reputation for high quality research and teaching, and build on its popularity as a place to train for medical and nursing students.

The building will have its own entrance on Eastern Road, a dedicated drop off and collection point at the rear and direct access to the underground car park.



The roof will be an accessible garden with a section screened off for therapy and rehabilitation; the rest will be available for use by patients, visitors and staff.

## Stage 2 - Key Facts

- The majority of the building will house the Sussex Cancer Centre.
- Inpatient, Radiotherapy and Chemotherapy services will all be expanded.
- The co-location, redesign and expansion of services will significantly improve patient experience.
- There will be new research and training facilities
- The building will be accessible at front and rear and from the underground car park.
- There will be an accessible garden covering the entirety of the building's roof.



Combined Logistics - Efficient Site

## Stage 3 - Narrative

Stage 3 will establish a facilities management and logistics centre on the site of the existing Cancer Centre. It will bring together a range of support services, such as the receipt and distribution of supplies and waste management. These are currently managed in a string of small, unconnected compounds. This final stage of the redevelopment will bring about site wide benefits.

## Stage 3 - Key Facts

- Bring together and rationalise facilities and logistics management functions.
- Improved services will benefit the entire hospital site.

## Project Timeline

Decant Programme Begins	Winter 2012
Services and staff affected by the construction of Stage 1 begin moves to alternative locations	Autumn 2013
Construction of Stage 1 begins	Autumn 2015
Stage 1 complete, construction of Stage 2 begins	Summer 2019
Stage 2 complete, construction of Stage 3 begins	Autumn 2022
Stage 3 and entire redevelopment complete	Winter 2023



# Services Moving Into 3Ts

### Stage 1

Ear , Nose and Throat Outpatients

**Audiology Outpatients** 

Maxillo-Facial Outpatients

**Rheumatology Outpatients** 

Discharge Lounge

Nuclear Medicine

Speech and Language Therapy

Physiotherapy

Occupational Therapy

Non-Invasive Cardiology

**Neuroscience Centre** 

- Neurology Ward
- Neurosurgery Ward
- Neuroscience Outpatients
- Neurophysiology
- Neuro Therapies

Nurse Bank Office

Fracture Clinic

Planned (Cold) Imaging

AMU and Ambulatory Care

Neuroscience and Polytrauma Theatres and Recovery

Interventional Radiology

Acute (Hot) Imaging

Infectious Diseases Service (Outpatients and Ward)

Critical Care

General Medicine Wards

**Elderly Care Wards** 

Respiratory Medicine Wards

Stroke Unit including Therapies



### **Cancer Centre**

- Cancer Wards
- Aseptic Suite
- Cancer Day Care
- Cancer Outpatients
- Cancer Support / Palliative Care
- Radiotherapy
- Chemotherapy

### **EBME**

## **Medical Physics**

Clinical Investigation and Research Unit

Brighton and Sussex Medical School (Onsite Offices)

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