

Mount Vernon Hospital, Barnsley Extension and Refurbishment to Ward 3 Including Provision of Additional Car Parking Design and Access Statement



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1.0 Site Context

This Design and Access Statement accompanies an application for an extension to Mount Vernon Hospital, Mount Vernon Road, Barnsley S70 4DP. The DAS has been written to meet the requirements of Article 4C of the Town and Country Planning (General Development Procedure) Order 1995 (as amended).

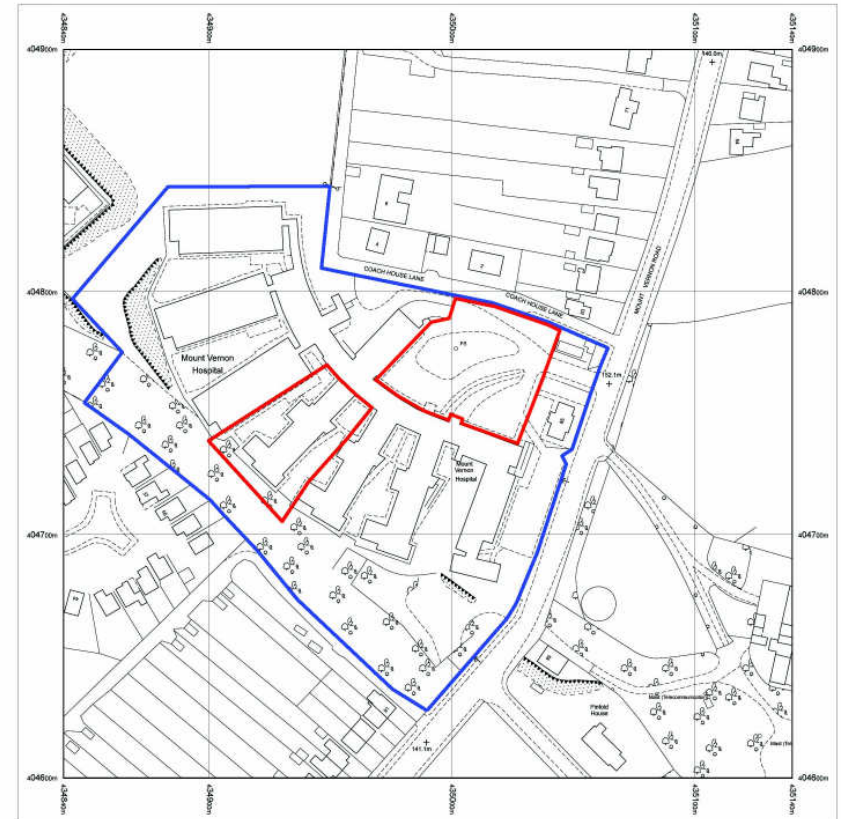
The overall site and existing hospital building is owned by Barnsley Primary Care Trust. Mount Vernon Hospital provides care for older people who no longer need to be in an acute hospital but who will still require some hospital based care.

It offers patients a wide range of services including respite care, occupational therapy, physiotherapy, speech therapy, dentistry, chiropody, dietetics and social services. There are currently in use wards for general elderly rehabilitation patients and a stroke rehabilitation unit.

Ward 3 is currently not allocated and will be used for the current proposal.



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2.0 Historical Context

The hospital was officially opened as a Tuberculosis Sanatorium on 18 May 1915.

In 1945 it was described as a poor quality sanatorium unit providing 'an old type ward block and some chalets' to accommodate 53 patients. The administrative quarters were in an old mansion. In 1960/61 certain old buildings were demolished and the site redeveloped to accommodate 90 chronic sick mainly geriatric patients. New wards were added in 1974 and patients from Lundwood and Kendray Hospitals were transferred there in September 1974.

3.0 The need for the proposal

Following a strategic review of services it was decided to combine facilities currently at Keresforth Hospital providing Community Rehabilitation and Respite Care with the therapy facilities currently available within Mount Vernon Hospital, providing a more efficient service from one location. The new unit will occupy the present vacated ward 3.

The unit will be supported by a multidisciplinary team including medical, nursing, physiotherapy, occupational therapy, speech and language therapy, social work and psychological services. The unit will be responsible for delivering a comprehensive rehabilitation package in partnership with service users and providing nursing support for people during respite.

There is also an outreach service offered by the unit to support the community.

The need for additional car parking is evident on-site and on occasions vehicles park on the road outside the site. This causes issues with local residents and the hospital are aware of these difficulties and the inconvenience it causes. In an attempt to address this problem additional car-parking will be provided as part of this project and will be sited adjacent to the existing main entrance.

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4.0 The Proposal

In order to enable this proposal to become a reality the existing ward 3 building needs to be adapted to the suit the needs of the intended patients. Single sex accommodation taking into account privacy and dignity issues are major factors enshrined in current health philosophy. The brief requires the provision of 12 single bedrooms with en-suite facilities designed to be completely accessible to all patient groups and those who require assistance.

The existing building did not provide this level of provision and was not capable of being economically adapted. The bedrooms are therefore being provided as a new build extension requiring part demolition of the existing building, (approximately 1/3). The brief requirement for support accommodation could be achieved by alteration and refurbishment of the remainder of the existing building.

By providing this additional footprint it enables the hospital to provide a first class healthcare service to patients in a modern healthcare setting. The current configuration, on two sites, does not provide the most efficient and effective quality of service to patients.

To ease on-site car parking, additional spaces are proposed, sited adjacent to the existing main entrance utilising a part of the soft landscaped island area. This will require the loss of two trees but the proposal includes for the provision of replacement trees.

5.0 Design Objectives

To ensure that the design of the extension fits its surroundings on this very important site.

To provide natural light and ventilation to all principal rooms wherever possible and create a feeling of space. To produce a building that is sustainable and energy efficient, designed economically.

To respect patient privacy and dignity throughout and provide a welcoming accessible environment that is secure and safe to all users.

To interpret the functional requirements of the brief to enhance the caring environment for the benefit of all who use the buildings.

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6.0 Design Constraints

There are numerous design constraints on the building and these must be considered along with the design objectives in any healthcare building.

Healthcare Design guidance in the form of design guides as HTM and HBN publications that the building must comply with to establish the size, shape and functional content of the rooms.

Space within the site curtilage is extremely limited and the adjacent tree covered, steeply sloping bank imposed severe constraints on the possible layout of the building. Extending the existing building would not have been possible without some demolition of the existing. The trees and bank have limited the extent of the footprint southwards towards the bank.

The existing buildings are mostly single storey flat roofed and built of various types of masonry, refer to photographs of the existing. There is a high maintenance requirement for the existing buildings.

The scale of the existing buildings indicated that a similar approach should be taken with the new extension and a low profile would minimise any visual impact on the nearby housing. The impact would be relatively restricted in any case, because of the large level difference and the existing trees which fall between the proposal and adjacent residential properties.

The new construction should be low maintenance and energy efficient.

The existing flat roofs have recently been recovered as part of the hospitals on-going maintenance plan.

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7.0 Site Specific Considerations

The footprint of the extension has been determined by the need to provide twelve en-suite bedrooms each with natural daylight and ventilation. A central corridor provides access to the bedrooms and this is centred at right angles to the existing building. Ancillary support rooms for bathroom, shower and nurse base complete the extension. The bedroom entrances are paired and set back to improve bed circulation and provide a degree of modulation to the corridor in an attempt to counter an institutional feel.

Bedrooms are fully accessible with en-suite bathrooms containing a walk in shower. Hoist tracking will be provided to all bedrooms and bathrooms and other selected areas to facilitate transport of less mobile patients.

The remaining part of the existing building will be refurbished to a high standard to provide further ancillary and staff rooms. This will include consulting rooms, gymnasium, lounge areas, dining room and servery, and administration offices.

The ward will be supported by the existing hospital disposal, catering and cleaning services.

Externally, the high standard of existing landscaping will be maintained and one fenced secure area will be provided for the sole use of ward patients. Security will be achieved using a timber boarded fence, 2.4m high to give visual privacy and security. Existing external materials will be replicated for new paving areas.

In order to provide a design that reflects a modern approach to healthcare, the extension has been designed with a monopitch sloping roof that breaks centrally. The roof will be a composite metal decking system (Kingspan or similar) with a standard finish and include an eaves and fascia system.

Windows will be low maintenance UPVC to the new extension of a similar size and proportion to the existing windows.

External wall treatment will be render in a light colour to visually lift the overall appearance and provide a textural and colour contrast to the various existing external wall materials. Contrasting coloured render panels will be used to form a feature above and below the windows.

The footprint of the extension does not effect the existing tree line or sloping bank.

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8.0 Sustainability and Energy Conservation

The proposed extension will take account of sustainability and energy conservation in the overall design as far as it is possible to do so with small healthcare extension. A key aspect is the provision of natural light and ventilation to all bedroom areas. The services design will reflect current thinking on achieving low energy usage and this will apply wherever possible in the part of the existing building affected by this project.

9.0 Car Parking, Access Issues and Public Transport

Thirteen additional car parking spaces are being provided as part of this proposal to supplement the existing. The spaces will be created within the existing soft landscaped island adjacent the main entrance. A number of existing car parking spaces adjacent to the new proposal will be redesignated in marked bays. The remainder including the disabled spaces will be unaffected by the proposal. Access to the main entrance for ambulances, drop off and for service vehicles will remain as existing.

General vehicular circulation remains unaffected with the existing flow and speed limit being retained.

The area for waste collection and deliveries to stores and kitchen has not been affected by the development.

Public transport and cycle facilities for the overall site provision remain as existing.

The extension will be designed to comply with the requirements of Part M of the Building Regulations.

10.0 Landscaping and Ecology

A tree assessment report is provided as part of this submission to cover the area of the proposed building extension and also the proposed new car parking at the front of the building.

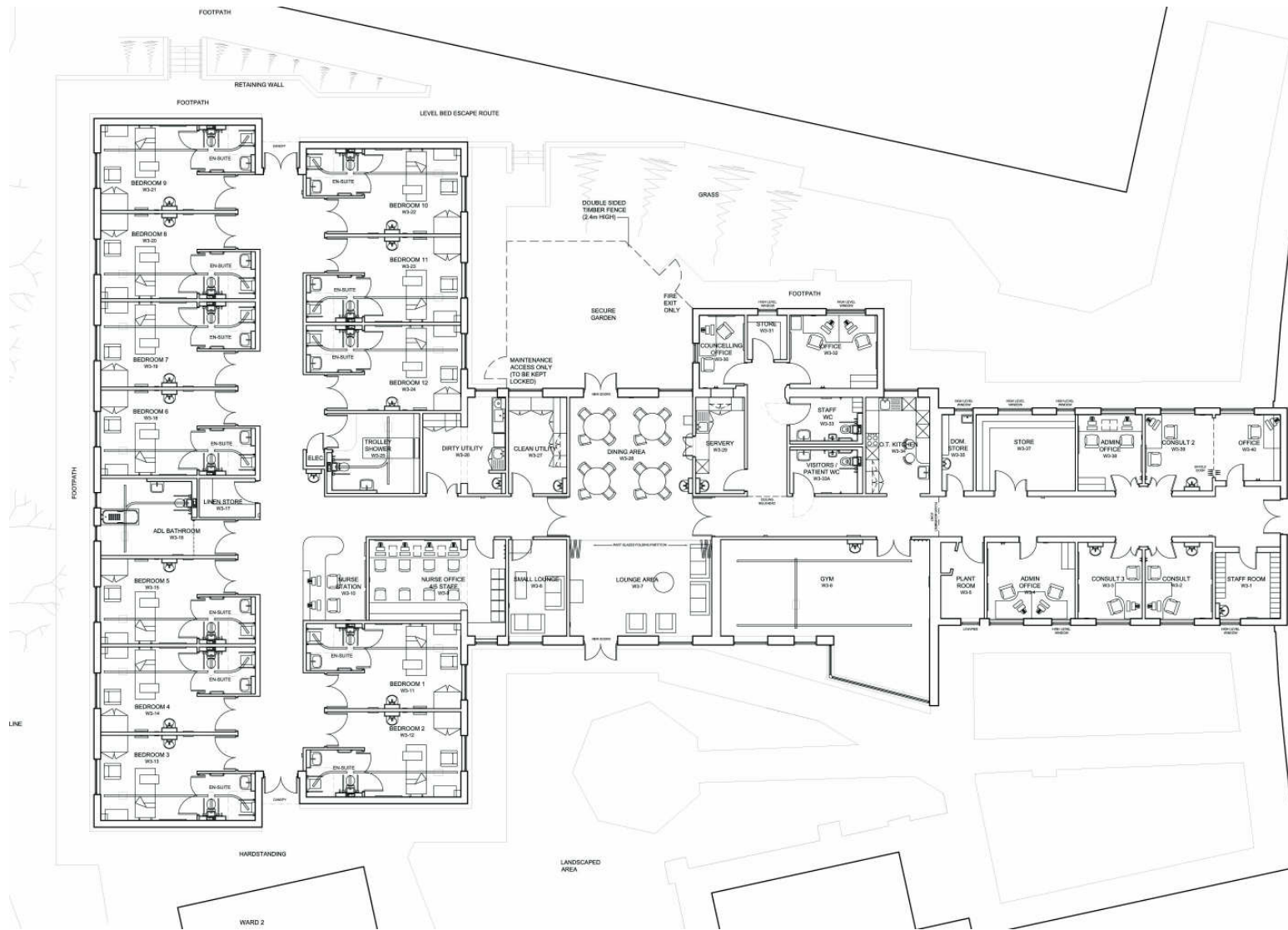
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Appendix B
Drawings
Layout Plan (Indicative internal Arrangement)

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Appendix B continued
Drawings
Proposed Additional Car Parking