



National Breast Imaging Academy at Wythenshawe Hospital

Southmoor Rd, Wythenshawe,
Manchester M23 9LT

Design and Access Statement
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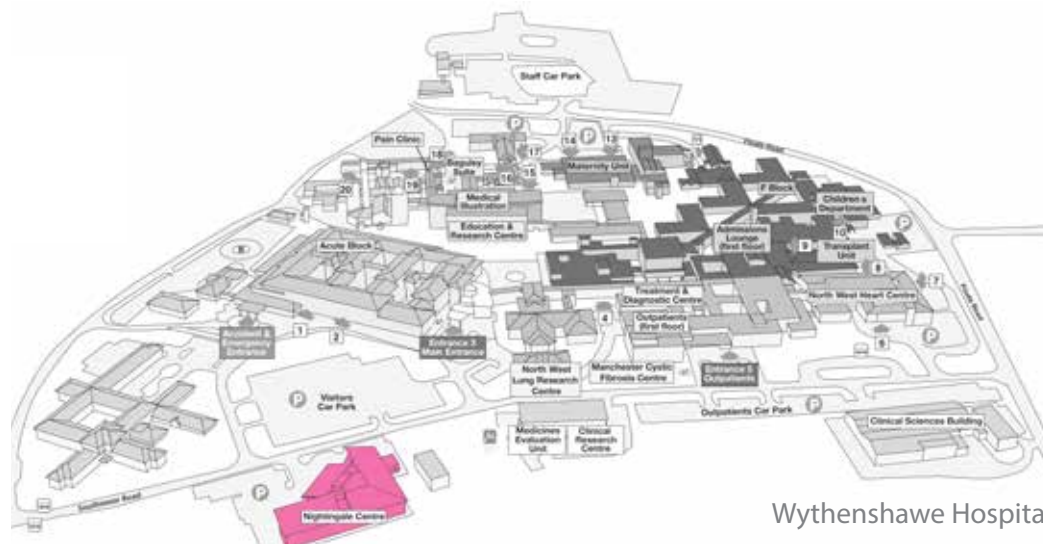
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Wythenshawe Hospital

1. Introduction

1.1 Project Definition

This design and access statement has been prepared by AFL Architects on behalf of Manchester University NHS Foundation Trust in support of a full planning application being made to Manchester City Planning Department for an extension to the existing hospital facilities at Wythenshawe Hospital.

The purpose of this document is to provide supportive information for the application to create a new National Breast Imaging Academy (NBIA) that connects to the existing Nightingale Centre.

1.2 Strategic Context

Breast Imaging Services, both across the North West and Nationally, are facing significant challenges in delivery and sustainability. This is the result of an increasing demand for ever more complex breast imaging, together with severe and worsening shortages across a multidisciplinary workforce.

There is a huge shortage of radiologists across all specialties and around 13% of breast radiologist posts are unfilled. Approximately 38% of consultant breast radiologists are expected to retire by 2025. There are similar shortages within the radiographic workforce and it is expected that 50% of the breast radiographic workforce will retire in the next 4 to 9 years. Funding streams for training non-medical personnel has moved into the apprenticeship levy thus putting pressure on Trusts to identify training funds for radiographic staff.

The Nightingale Centre is one of the largest and most prestigious breast centres in the UK and is the lead provider for breast services across Greater Manchester. As a result of the Greater Manchester Combined Authority Population Health Plan 2017-2021, cancer services across the city are under review and it is expected some services will be relocated to the Nightingale Centre. The centre has also experienced a 100% increase in referrals since opening in 2007 which is placing great pressure on existing facilities.



2. Project Brief

2.1 Vision

The proposed solution to the problems outlined above is to invest in a new purpose built space providing a National Breast Imaging Academy at the Nightingale Centre. This would provide a dedicated clinical training facility together with seminar and teaching spaces. The additional clinical capacity would enable Greater Manchester to implement the phase 3 proposals for breast imaging services across the city, while a prestigious National Academy would attract trainees across all specialties, thus addressing the workforce issues. This project is supported by Health Education England who have already committed £5 Million revenue to support trainers, trainees and new e-learning packages. The project team are also working collaboratively with Public Health England, The Royal College of Radiologists, The Society of Radiographers, The Association of Breast Clinicians and the British Society of Breast Radiologists.

2.2 Brief

The proposed facility will provide additional clinical accommodation and associated support spaces at ground floor level. This will include:

- 3 additional Consult / Exam rooms
- 2 additional Mammography rooms
- 2 additional Ultrasound rooms.
- Patient waiting room
- Staff Hub

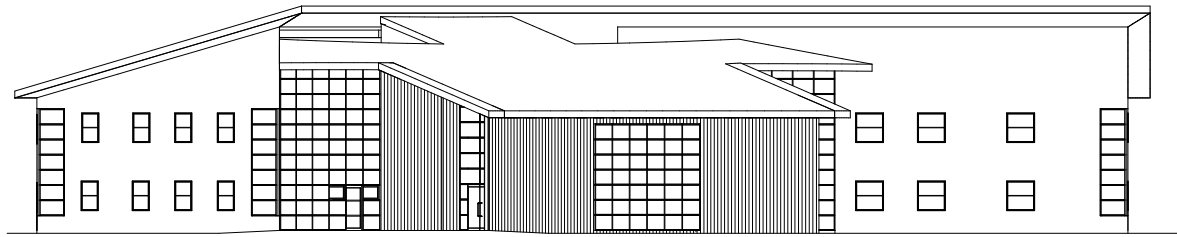
Patients will arrive to these rooms through the existing Nightingale Centre waiting area and reception. Staff will move freely between the two areas and the additional accommodation will be utilised within the same operational strategy as the existing Nightingale Centre.

Additional teaching spaces and staff offices will be provided within the existing Nightingale Centre building at first floor level. The proposed accommodation includes:

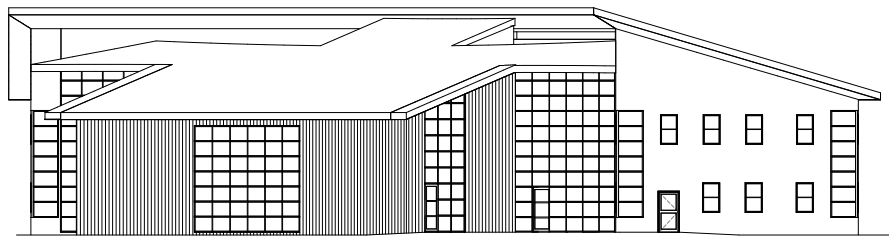
- Seminar space
- Tutorial room
- MAC Room for training purposes

The new accommodation is to be provided in a building environment that meets at least minimum standards and guidelines in terms of overall health & safety and welfare to staff and visitors, whilst reflecting the future vision of the hospital site.

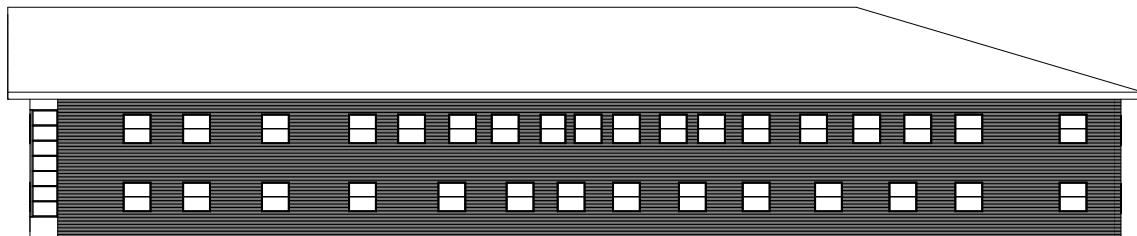
Nightingale Centre Existing Elevations



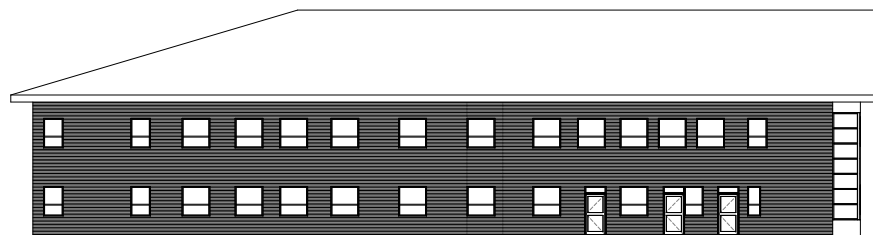
South Elevation



East Elevation



North Elevation



West Elevation



3. Design Statement

3.1 Site Appraisal

A feasibility report was commissioned by the Trust to determine the best location for the academy; a number of options were reviewed by AFL Architects. It was decided that the extension would be best located to the west of the existing building, as this would provide additional clinical accommodation within close proximity to the existing imaging facilities. The site to the west of the existing building is currently utilised as an informal car park for the hospital. There are also further opportunities in this location for future expansion of the National Breast Imaging Academy.

Constraints to building within this location include an existing verge and change in levels requiring excavation works to ensure level access connecting the two buildings. There is some external plant on the site which cannot be easily relocated.

3.2 Existing Building

The proposed extension is to connect to the existing two storey Nightingale Centre via a link corridor at ground floor level.

Materials of existing adjacent hospital building:

- Light stone cladding panels to two storey entrance area
- Cream render to the front elevation with light grey horizontal cladding.
- Red brick to side and rear elevations.
- Light grey aluminium windows and doors
- Sloped roof grey with louvred plant.

3.3 Design Principles

Use

The proposed use of the building has been defined by the client requirements and relates to the existing use of the hospital site. These sit within use class D1 – non-residential institutions.

The proposed development links back into the existing Nightingale Centre building via a link corridor at ground floor level. All clinical accommodation across both buildings is located at ground floor level. The first-floor level accommodation within the existing Nightingale Centre is for staff and visitor access only. The internal uses of the extension therefore complements the functionality of the immediately adjacent departments.

Clinical services will run from 08:00 – 18:00 for 5 days a week, Monday to Friday excluding public holidays. There will be two clinics per day: the morning clinic running from 08:00 - 13:00 and the afternoon clinic running from 13:00 - 17:00. Patients seen within the NBIA will all have entered the facility via the Nightingale Centre.

Amount

The accommodation required can be provided within a single storey building footprint of 401m² inclusive of the link corridor. The building footprint can be easily accommodated within the adjacent car park site area, with approximately 85% of the land retained for car parking purposes.

Layout

All patients will arrive to the proposed building via the main entrance in the Nightingale Centre. Once the patient has checked into reception, they will be directed to the NBIA via the link corridor and await onward signposting in the dedicated 20 person waiting area. The patient will access the clinical rooms from the waiting area and exit via the Nightingale Centre following consultation.

The layout has been designed to be future-proofed and allow for further expansion opportunities. Therefore, at ground floor level the existing corridors are open ended to the west elevation. In addition, all accommodation that requires natural daylight has been placed along the north, east and south elevations.





Material Images - (L-R) Brick sample panel swatches, Birtley Olde English Buff building, Springwell Red building.

Scale

The proposal is an extension to The Nightingale Centre which is a two to three storey high building with a sloped roof which accommodates plant equipment at second floor level. The proposed building is to be single storey with continuous floor levels to the adjacent building at ground floor. There will be no connection through to the Nightingale Centre at first floor level.

Landscaping

The proposed extension is located on an existing car park with the front elevation set back approximately 30m from the pavement and 14m from the front elevation of the existing Nightingale Centre. The front of the extension and associated pedestrian access routes will be landscaped in new asphalt laid to fall appropriately to provide level access to the external fire escape route.

Due to the change in levels between the proposed extension and the existing gravel car park to the west it is necessary to introduce a grass verge along the site boundary. The verge will be separated from adjacent surfaces by pin kerbs. Diamond wood fencing to match existing will be provided at the top of the grass verge along the west boundary of the site and the pavement edge to the south.

The access path to the rear of the proposed extension will be bitmac surface to match existing. Security to the rear of the centre will be maintained by providing a 2470mm high fence and access gate.

The existing cycle store will be re-provided. The existing bin store will be extended and elevation improvements will be made to the existing brick wall external plant enclosure.

Appearance

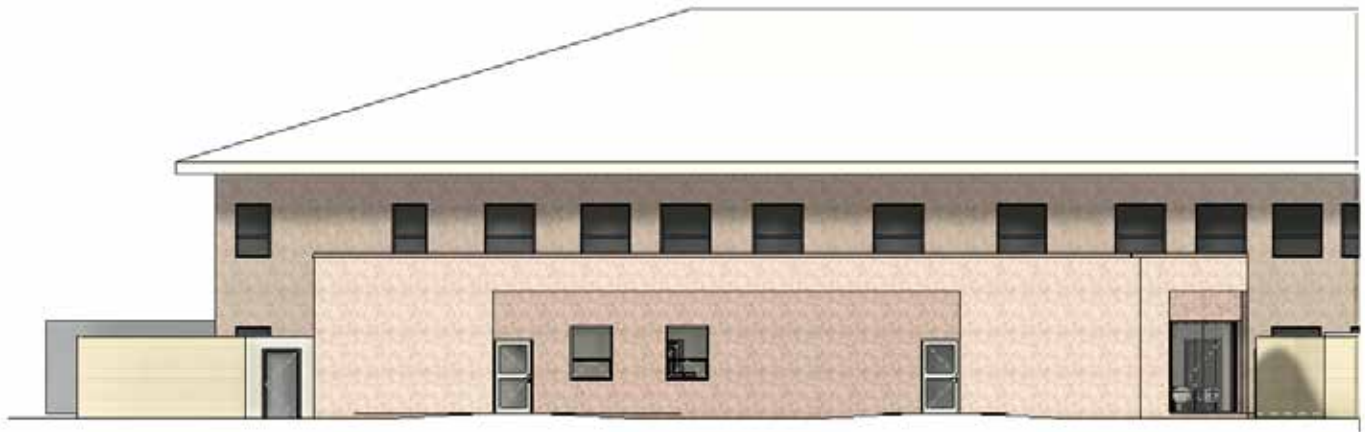
The south and west elevations to the proposed building are visible from the main pedestrian and vehicular access route through the hospital site. The external appearance of the building will consist of red brick in keeping with existing hospital buildings on the site and the eastern elevation to the Nightingale Centre. The facade is predominantly horizontal stretcher bond red brick in a light shade. Window reveals are expressed using a contrasting vertical stretcher bond pattern and a darker red brick set back from the external finish face.

All external glazing and doors will be polyester powder coated aluminium. Glazing to the sub-wait will be obscured to afford privacy to the patients.

Proposed Elevations



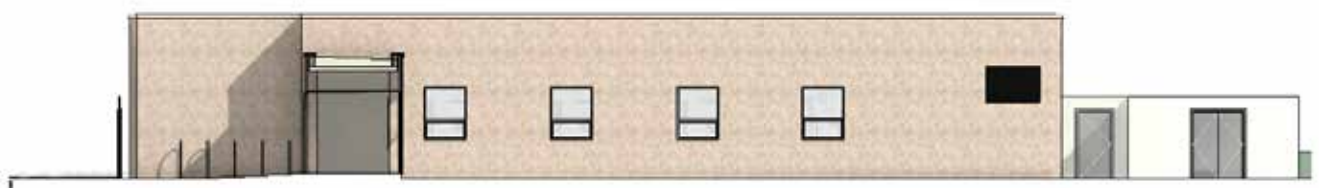
South Elevation



West Elevation



North Elevation



East Elevation

4. Access

4.1 External Access - Pedestrian



The proposed extension will be accessed via the existing Nightingale Centre building. The proposal offers level access to all parts of the proposed development. The finished ground floor level of the proposed extension is as per the existing connecting building. All escape routes will offer level or ramped access compliant to the relevant guidelines to a safe refuge area. These will be provided through doors with the necessary escape ironmongery.

4.2 Internal Horizontal Access

All public and staff areas of the proposed extension are at levels to match the existing. Circulation corridors within the existing building vary in width, proposed corridors shall be approximately 1800mm wide with 1500mm cross corridor doors with the required vision panels (compliant to BS8300). Disabled users will therefore have clear unobstructed routes throughout the building.

Lighting to corridors will comply with BS 8300 with lighting evenly diffused without glare, reflections or shadow.

4.3 Access Surfaces

Floor wall and ceiling surfaces shall be designed to comply with B.S 8300 9.12, 9.13 and 9.14, creating visually contrasting and tactile surfaces. Ceiling wall and floor materials shall contribute to an acoustic environment in accordance with B.S 8233.

At detail design and construction stages the latest legislation and good practice guidance on accessibility available will be referred to. These will include, for example BS8300:2001 (Design of buildings and their approaches to meet the needs of disabled people), the Building Regulations Approved Document Part B (fire safety), Part M (Access to and use of buildings), and Part K (Protection from falling, collision and impact).

4.4 Maintenance Access

All main plant areas are external access only. The internal IT Hub is located off the staff only corridor with secure access. Waste will be collected from individual rooms and removed from the building via the link corridor fire escape. The bin store has been extended to accommodate additional waste. The vehicular waste collection route remains unchanged. The current ambulance drop off point and emergency vehicle parking and turning area remains unchanged.

There is no access required to the roof level. The facade materials, doors and windows will be cleaned from ground level using pole cleaning where required. Infrequent maintenance access onto the roof, such as for biannual inspection of rainwater outlets and gutters, can be carried out using a temporary working platform. The tarmac footpath provides an appropriate surface around the perimeter of the building.

