Alan Kondys - Framework Director IHP
Rosemary Jenssen - P22 POE Working Group Lead Kier

P22 Pre + Post Occupancy Evaluation Toolkit
P22 Principal Supply Chain Partners (PSCPs)
### ProCure Frameworks Overview

<table>
<thead>
<tr>
<th>P21 achieved</th>
<th>P21+ achieved</th>
<th>P22 currently</th>
</tr>
</thead>
<tbody>
<tr>
<td>£4.5 billion registered work</td>
<td>£4.2 billion registered work</td>
<td>£2.1 billion registered</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Time</th>
<th>Cost</th>
<th>Safety</th>
<th>Defects</th>
<th>Product</th>
<th>Service</th>
</tr>
</thead>
<tbody>
<tr>
<td>91%</td>
<td>97%</td>
<td>92%</td>
<td>82%</td>
<td>83%</td>
<td>87%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>P21+ achieved</th>
<th>P22 EPP focus</th>
</tr>
</thead>
<tbody>
<tr>
<td>15% GCS Cost Efficiency Savings</td>
<td>Cost + Service Efficiency Productivity + Outcome benefits</td>
</tr>
</tbody>
</table>

### P22 EPP focus:

- Cost + Service Efficiency
- Productivity + Outcome benefits
National Strategy Drivers

Capital regime, investment and property business case approval guidance for NHS trusts and foundation trusts

November 2016

Operational productivity and performance in English NHS acute hospitals: Unwarranted variations

May 2018

POE case study site locations

P21+ schemes

P22 schemes

NHS Property and Estates
Why the estate matters for patients

March 2017
P22 EPP Processes incl POE: GSL Compliant

P22 PRE OCCUPANCY EVALUATION TEMPLATE + SURVEY POSTCARDS

P22 POST OCCUPANCY EVALUATION TEMPLATE + SURVEY POSTCARDS

*FROM CABINET OFFICE GOVERNMENT SOFT LANDING SECTION 1.1.7 GSL MASTER PROCESS MAP
P22 POE Pre + Post Occupancy Evaluation Toolkit Guide v.5

27th February 2018
R C Jenssen, P22 EPP POE WG Lead

National and Local drivers
GSL complaint
Full range of Outcome measures
‘before’ and ‘after’ comparison
new build and refurbishment
Staff and Patient Survey Postcards
Aligns Business Case Requirements
Supported by PSCP POE Champions
For further guidance or assistance in completing the P22 POE, please contact your PSCP POE Champion.

- **PSCP appointment capture baseline in Pre-Occupancy Evaluation**
  - PSCP POE Champion complete page 1 POE draft

**Steps:**

1. **service specific p2+3**
   - Yes: POE page 2-3, Staff + Patient Experience Survey Postcards
   - No: Generate service specific page 2 + tailored surveys

   - **Mental Health Ward**
   - **Acute In-patients**
   - **Outpatients**
   - **Operating Theatres**
   - **Maternity**
   - **Emergency Dept**

2. **New service p 2+3**
   - **Trust review POE fields required, collate responses from others**
   - **issue draft POE 1+2, staff + patient survey to Trust**
   - **PSCP POE Champion complete/update page 2 POE draft**
   - **PSCP update page 1 POE draft**

3. **PSCP:Trust Meeting + Visit to complete POE 1-3 responses**
   - **PSCP input survey responses into excel spreadsheet**
   - **Trust collect completed survey postcards return to PSCP**

**Post-Occupancy Evaluation**
Year 1, 2 + 3 repeat

- **POE**
  - Process Flow Chart

- **POE Working Group**
  - For validation

**Additional Notes:**

- Share with EPP
- POE Working Group For validation

**Legend:**

- PSCP action
- Trust action

*Note: The diagram is a visual representation of the process flow.*
Inpatient Acute Ward
Mental Health Inpatient Ward
Urgent and Emergency Dept
Outpatients
Operating Theatres
Maternity Ante + Post
Paediatric Outpatients
Renal
Endoscopy
Imaging
NICU/SCBU
Critical Care
P22 Pre Occupancy Evaluation Sight and Sound Hospital

<table>
<thead>
<tr>
<th>Lessons Learnt</th>
<th>Positive</th>
<th>Negative</th>
</tr>
</thead>
<tbody>
<tr>
<td>Source: Trust Wide, From Copy of EHC Data 2016-17</td>
<td></td>
<td></td>
</tr>
<tr>
<td>CO2 emissions (kg/week)</td>
<td>9.9 kg</td>
<td></td>
</tr>
<tr>
<td>Water use (litres/m²)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Source: Trust Wide, From Copy of EHC Data 2016-17</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total waste cost per occupied floor area</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Source: Trust Wide, From Copy of EHC Data 2016-17</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Financial performance measures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Build cost per m²</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Source: Trust Wide, From Copy of EHC Data 2016-17</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Business case or other benefits Realised</td>
<td></td>
<td></td>
</tr>
<tr>
<td>1. Architectural excellence</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Improve patient experience</td>
<td></td>
<td></td>
</tr>
<tr>
<td>3. Facility to improve the clinical model of ambulatory care</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Interiors concept that works to a domestic environment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Return site to clinical use</td>
<td></td>
<td></td>
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<tr>
<td>Project measures</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pre-developing /existing baseline</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Proposal incl targets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trust wide and local hospital</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Gross Internal Area (GIA)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Waste cost per occupied floor area</td>
<td></td>
<td></td>
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<tr>
<td>Total cost per occupied flor area</td>
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<td>Total cost per occupied floor area</td>
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<td></td>
</tr>
<tr>
<td>Total cost per occupied floor area</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Functional content summary</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(attach schedule of accommodation)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>E2-39</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Audio booths + sound treated + ( E2-39 )</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vestibular room + lab = 1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Eye drop room + 1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Consult Rooms (3) = 99</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Audio booths + sound treated rooms = 8</td>
<td></td>
<td></td>
</tr>
<tr>
<td>E2-39</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vestibular Room + Lab = 1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Eye Drop Room + 2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Consult Rooms + 1</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Counselling = 4</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Not dispensary area</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Circulation area and as percentage</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patient area and Non roof top plant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Patient area and Non roof top plant</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Activity per annum</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Analysis of staff feedback posts</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Analysis of patient feedback posts</td>
<td></td>
<td></td>
</tr>
<tr>
<td>See attached data from Staff Survey (Feb 19)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>See attached data from Patient Survey (Oct 18)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-clinical floor space (current values, 2018)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Un-occupied or under used space</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Critical Infrastructure Risk (E/R) =2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Backlog Maintenance (E/m²)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Source: Trust Wide, From Copy of EHC Data 2016-17</td>
<td></td>
<td></td>
</tr>
<tr>
<td>P22_POE1_v3</td>
<td></td>
<td></td>
</tr>
<tr>
<td>P22_POE1_v3</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
P22 Pre Occupancy Evaluation Sight and Sound Hospital

“good to meet other families”

“make directions easier”

“smells clean but not like a Hospital”
Lessons Learnt Positive

Lessons Learnt Negative

Key comments/feedback
- Physical environment/space/functional content
- Activity/workload
- Functionality and effectiveness (social)
- Environmental measures (environmental)
- Financial performance measures (economic)
- Business Case Benefits Realisation measures
P22 POE Year 1 Page 2 Service specific Measures

- Patient experience
- Staff experience
- Service performance + outcomes
- Other agreed measures
  - Environmental comfort

Service Specific Measures: Mental Health Inpatient Ward

Service performance + outcomes

Other agreed measures

Environmental comfort

Pre + Post Occupancy Evaluation

Service Specific Measures: Mental Health Inpatient Ward

Complete date measures undertaken

<table>
<thead>
<tr>
<th>Measure</th>
<th>Pre-</th>
<th>Prevalence / ( &lt;) existing practice</th>
<th>Prevalence / ( &lt;) existing practice</th>
<th>Prevalence / ( &lt;) existing practice</th>
<th>Prevalence / ( &lt;) existing practice</th>
</tr>
</thead>
<tbody>
<tr>
<td>POE 1</td>
<td>2012</td>
<td>2013</td>
<td>2014</td>
<td>2015</td>
<td>2016</td>
</tr>
<tr>
<td>POE 2</td>
<td>2018</td>
<td>2019</td>
<td>2020</td>
<td>2021</td>
<td>2022</td>
</tr>
</tbody>
</table>

- Place: Assessment of the condition of the patient, appearance, maintenance of food 90.5%
- Place: Assessment of the patient’s condition, cleanliness, appearance, maintenance of food 90.5%
- Place: Assessment of the patient’s condition, cleanliness, appearance, maintenance of food 90.5%
- Place: Assessment of the patient’s condition, cleanliness, appearance, maintenance of food 90.5%
- Place: Assessment of the patient’s condition, cleanliness, appearance, maintenance of food 90.5%

Access to outside space

Target 95% 100%

Ward staff experience survey

Local results 80%

Non Ward staff experience survey

Trust wide 80%

Staff and families feedback survey

Trust wide 80%

Staff and families feedback survey

Trust wide 80%

Staff turnover rate Wigan current 3.7% 0%

Staff absenteism Round robin 11 days 0%

Nursing Staff vacancies % target 15% 0%

Bed occupancy 85% 90%

Length of stay M: 420 days 365 days

Medication costs M: £7000 (£7000)

Complaints 37% 15% 35%

Use of restraint 43.5% 66% 4.2%

Use of tranquilizer 16.7% 15.7% 10.1%

Other agreed measures

- Internal Lighting: Patient survey
- Internal acoustic: Patient survey
- Internal comfort: Staff survey
- Admissions, average per month
- Discharges, average per month
- Re-admission rates – Trust target 95% 95%
- Awards
Pre + Post Occupancy Evaluation

Project/Service Specific Commentary: Mental Health Inpatient Ward

Generally the new facility has been well received, with many respondents offering their feedback with comments around the new layout being “light, airy and modern, therapeutic and open-plan from the ceiling down”. A general consensus was positive “Overall a fabulous building, and great working environment.” At least that the wards are much easier now in terms of admission and discharges (Governess and Wayfarers). “The building in the Day Ward”, showing a shorter length of stay achieved, and now quantified with an 8.2% reduction from 18.8 days to 16.3 days.

Feedback highlighted variances between the level of design, operational and specification details within Phase 1 and Phase 2, a skill of reference to “cost savings” driving decisions i.e. extent of world-class V Key operated locks, insufficient supply of kitchen and cloths at doors.

Some disappointment expressed regarding availability of centralised garden designs, with soft ground. Some bundling generating its satisfaction amongst service users and staff. Maintenance of the planted areas within the internal courtyards has presented some difficulties for the Trust, all in need of weeding. However overall the accessibility of the gardens, the main open plan day areas, is seen as a positive for both patients and staff.

Integration of artwork, interior design and signage highlighted as modern, contemporary and reflecting the local history (words named after local stone miners).

Disturbed sleep raised as many service users relating to the sensory devices relating to the sensor night light directly above the bed being too bright and unable to switch off. The PNC layout and plan, has created some challenges, effort has been accommodated a complete turnaround in male female patient ratio’s over the last months.

Acoustics, particularly with the large open plan central day lighting area, identified as an area requiring further consideration on design and specification stage. Too bright in certain areas, volume has to be on any test to hear which further accentuates the acoustics within the large open plan areas. Some of the design/lessons learnt around allowing a sufficient gap between the window protection screen and the test bed.

The interface of systems, particularly the staff wall, nurse call and intercoms have caused particular difficulty with unfamiliar language and protocols for call locations and using the system. Many staff commented that they are unable to hear the door bell, and that the intercom is difficult to use and over complicated. A kniss learned around keeping systems simple, with clear communication and engagement with front line staff in design and specification stage.

Quality of installation including some building elements i.e. grab/hand rails to corridors, door in-swinging, wall finish in review suite; and co-location of similar alarms/exit buttons challenging staff, visitors and service users.

Lessons learnt in ensuring Design team fully understood the implications of their design on those occupying the building in-use. The Trust installed some 4D-concealed blind spot mirrors prior to occupation, in mirrors and corridors.

Building defects being dealt with appropriately but slowly ongoing communication and action required by tier, working with the Trust to reach the satisfaction of those occupying the new facility.

Lessons learnt, shares graphics number stickers being placed up, could be pinned on in future.

Future flexibility, Trust currently reviewing feasibility of incorporating all nursing style beds within Percentage Order (Adult All Functional Ward). Lessons learnt around consideration of open window louvres within courtyards, providing a climbing risk.

Written by: PSCG, agreed with Trust Client: Paul Jackson, Trust Capital Estates Officer

Date: 03.06.18

Care Plan: Operations Manager: 03.06.18

Revising: Assistant: Head POE Champion: 03.06.18
Lessons Learnt

Positive

Key comments/feedback

PSCP

Trust and PSCP

P22 POE Pilot Summary St Ann’s Poole

EPP – Post Occupancy Evaluation

Trust name: Dorset Healthcare University
NHFT

Project name (P22+P22 ref no): P22

Trust Client contact: Kerri Howlett

PSCP name: HP

PSCP contact: Alan Kontlys

Architect: W

Complete data measures undertaken

<table>
<thead>
<tr>
<th>Measure</th>
<th>Pre-development/Existing</th>
<th>Proposal mid targets</th>
<th>Key positive and improvement measure</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
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</tbody>
</table>

Design Appraisal/processes, dates + evidence

CQC Rating

P22 Post Contract Report

Physical environment/spaces/functioanl content

Total Gross Internal Area (GIA)

2,041 m²

Split new build / refurbishment

120% new build

Functional content summary

2 x 7 bed ward

Net depreciation area (ward)

501.6 m²

Circulation area and as a percentage

312 m² / 25%

Communication area

110 m²

Plant area and lift roof top plant

75 m²

Activity per annum

Patient attendance/patient bed day/ward

Kerri to advise

Other i.e. S206 suite

510 + new minor instant

Functionality and Effectiveness

Analysis of staff feedback postcards

66%

Analysis of patient feedback postcards

49%

Non-clinical floor space

< 35%

Unoccupied or under use space

< 2.3%

Environmental measures

BREEAM YES/No (score/target)

Very good

Energy use (kwh/m²)

Due

CO2 emissions (kgh/m²)

Due

Water use (l/hr/week)

Due

Other measures please state

Due

Financial Performance measures

Build cost per m²

£1,516/m²

External works / works starting (weeks)

Low

Construction period (weeks)

157

Closing staff (cost per annum)

Richard

Maintenance staff time (cost per annum)

Richard

Business Case or other Benefits Realisation measures

Cost to confirm

Kerri to confirm if flex used

Cost to confirm

Cost to confirm

Cost to confirm

100%
### P22 POE Year 3 Page 2 Service specific Measures

**Service Specific Measures: Mental Health Inpatient Ward**

<table>
<thead>
<tr>
<th>Measure</th>
<th>National average</th>
<th>Proprietary hospital</th>
<th>Year 1</th>
<th>Year 2</th>
<th>Year 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>Area for on ward therapy</td>
<td>n/a</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Area for off ward therapy</td>
<td>n/a</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Area of garden on ward</td>
<td>n/a</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Service user experience/satisfaction</td>
<td>66%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PIACE assessments: conditions, appearance, maintenance</td>
<td>National65.2%</td>
<td>Kent 82% 5 years</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PIACE assessments: privacy, dignity, well-being</td>
<td>National68.8%</td>
<td>Kent 82% 5 years</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>PIACE assessments: Dementia</td>
<td>National74.3%</td>
<td>Kent 82% 5 years</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Access to website up-to-date</td>
<td>95%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Improved attendance/participation rates in therapeutic/meaningful activities</td>
<td>Target 75%</td>
<td>Kent 82%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Friends and family saw (face to face)</td>
<td>Target 95%</td>
<td>Kent 82%</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Staff experience/satisfaction</td>
<td>78%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Staff turnover rate</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Staff absenteeism (time lost) 1% to 3%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bed occupancy</td>
<td>85%</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Length of stay (bed-days per inpatient)</td>
<td>See above</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Incident rate</td>
<td>Kent 0.0005 per patient day</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medication errors</td>
<td>Kent 0.0005</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other agreed measures</td>
<td>Environmental comfort, quiet, quiet, quiet</td>
<td>Service user survey 95%</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Notes:**
1. n/a: Internal data not available (trust wide www.nhs.uk/serviceuser/performance/about)
2. NIS: National Institute of Statistics
3. NIS: National Health Service statistics (www.nhs.uk/about)

### Other agreed measures
- Environmental comfort
- Quiet, quiet, quiet
- Service user survey 95%

**Awards**

- Patient experience
- Staff experience
- Service performance + outcomes
- Other agreed measures
  - Environmental comfort
P22 POE Year 3 Learning St Ann’s Poole

Bespoke/P22 POE comparison:
- Pre – Post comparison
- Broad feedback (postcards a hit!)

Highlights:
- Service users liked bedrooms - impact on integration?
- Staff rated the new facility at 98% - but 58% for access to staff room
P22 POE Toolkit Summary

- Framework Instruction 13
- POE Toolkit review & updates
  (in-use lessons learnt & NHS requirements)
- POE "page 2's" growing library
- Available on P22 Club
  (User Guide, Toolkit and completed Project POEs)
P22 Pre and Post Occupancy Evaluation - produced together.....

- Delivered by cross PSCP/DH working group
- Liaison with NHS-E & NHS-I
- Piloted with NHS Clients on Framework Projects
- Exemplar collaboration
- to deliver POE requirements and outcomes

......completed and shared together
Thank you for listening