

Stakeholder Engagement Toolkit





Welcome to the Stakeholder Engagement Workstream of the Design in Mental Health Network. We are committed to promoting and facilitating the meaningful engagement of stakeholders in co-production of design projects of any scale

Contents

Introduction	4
The RIBA Plan of Work	6
RIBA Stages – Overview	8
RIBA Stage 0 – Strategic Definition	10
RIBA Stage 1 – Preparation and Brief	12
RIBA Stage 2 – Concept Design	14
RIBA Stage 3 – Developed Design	16
RIBA Stage 4 – Technical Design	18
RIBA Stage 5 – Construction	20
RIBA Stage 6 – Handover and Close-out	22
RIBA Stage 7 – In Use	24
Further Information	26



Why do we need a toolkit?

In-keeping with the NHS Constitution and the Five Year Forward View, the Design in Mental Health Network actively encourages Stakeholder involvement in improving the design of health and social care environments. Expert-by-experience feedback is vital in helping care professionals and providers understand the impact of both good and poor design; the Design in Mental Health Network's Stakeholder Engagement Work Stream aims to facilitate Stakeholder engagement in co-production of design projects, and will champion Health Service Providers who involve the wide range of Stakeholders in all stages of design, in a relaxed and supportive setting.

Service Users, Carers and Families are inevitably the most directly affected by the mental health environment. However, Stakeholder engagement must consider the wider group who have an interest, a stake, in the environment. Stakeholders are a broad ranging group, and in addition to past and current Service Users and their support network, it often includes for example:

- · Clinical Staff who work in the services accommodated
- Estates, Facilities and Maintenance Teams
- Infection Prevention
- Trust Board
- Trust Members
- The Community in which the facility sits.

Our vision is that each design project in a mental health setting, whether a large scale new build or refurbishment project, or a small, single room project, ensures that relevant Stakeholders are engaged throughout the design and construction process. Together we can then ensure that we are listening to those who have a voice.

Who is this toolkit aimed at?

This toolkit is aimed primarily at Health Care Providers (e.g. NHS Trusts and Private Healthcare Providers) to allow Capital Projects Teams to appropriately plan projects, and proactively identify and engage their Stakeholder Groups.

The following pages outline a robust method for engaging with all Stakeholders involved in a design project, and takes a step by step approach to the engagement process, giving examples of "how to" engage effectively.

How to use the Toolkit

The following process map outlines a series of "tools" - meetings, workshops, visits, etc, to fully engage with the Stakeholder Groups. Engaging early, and consistently, creates a more transparent process and can help Stakeholders buy-in to the project vision, and understand inevitable project constraints.

Note that this process assumes that a project need has already been established at strategic level. Your Design Team may facilitate a number of the workshops and meetings however there are a number of useful tools available from the NHSi ACT Academy to help you at early stages of a new project, establishing working practices, identifying Stakeholder Groups, and building your vision for new facilities.

It will be important for Trusts and their Design Teams to recognise that many Stakeholders will not be experienced in reading "flat" drawings, and that methods that bring designs to life will ensure more meaningful engagement. Developing designs should not be presented as a "fait acomplis", but rather as a prompt for discussion and development of final project designs in a collaborative way.

Whilst it is important that we engage with a wide and diverse group, it is equally important to project success that Stakeholder Group representatives remain consistent through the design process, as far as possible, to ensure a consistent approach and understanding. This is noted in each stage of the engagement process on the following pages.

Trusts should consider capturing the full engagement process in order to evidence governance procedures and meeting best practice. Feedback from each engagement session should be recorded, either by the Trust project Lead, or Design Team Lead. This should be agreed at an early stage, with named roles and responsibilities being noted in the Project Execution Plan.

Finally, to encourage full engagement, Trusts should consider re-imbursement for Service-User / Carer travel expenses.

It is our intention that this toolkit be an evolving document: any feedback, following its use on a project will be gratefully received.





Why do we use the RIBA Plan of Work?

First developed in 1963, the RIBA Plan of Work is the definitive UK model for the building design and construction process. It is part of the mind-set of every architect and most other professionals involved in the construction industry and is woven into their processes.

The current Plan of Work comprises eight work stages, each with clear boundaries, and details the tasks and outputs required at each stage.

It is often helpful at the outset of a project to simply and clearly describe to the Stakeholder Group what each of the RIBA Stages entails, and how they will be involved. Design is an iterative process, and it is important for successful project outcomes that Stakeholders understand why their views are important, and how their decision making can have an effect.

For example, the impact of design decisions is magnified as a project progresses and the design has been developed in more detail: the more that is done influences the amount that has to be undone or re-done. It is important therefore that change is managed, and the RIBA Plan of Work can assist in this process. Importantly, each design stage should be "signed off" appropriately before the design progresses to the next, more detailed stage.

The RIBA Plan of Work Stages each identify core objectives: nition Identify client's business case and strategic brief and other core project requirements. Establish need, programme, overarching project requirements and feedback from previous projects. Stage 1 - Preparation and Brief Develop project objectives, including quality objectives and project outcomes, sustainability aspirations, project budget, other parameters or constraints and develop initial project brief. Undertake feasibility studies and review of site information. Stage 2 - Concept Design Prepare concept design, including outline proposals for structural design, building services systems, outline specifications and preliminary cost information along with relevant project strategies in accordance with design programme. Agree alterations to brief and issue final project brief.

Stage 3 - Developed Design Prepare developed design, including co-ordinated and updated proposals for structural design, building services systems, outline specifications, cost information and project strategies in accordance with design programme. Submit planning application at the end

Stage 4 - Technical Design Prepare technical design in accordance with design responsibility matrix and project strategies to include all architectural, structural and building services information, specialist subcontractor design and specifications, in accordance with design programme. Stage 5 - Construction Offsite manufacturing and onsite construction in accordance with the construction programme and resolution of design queries from site

Stage 6 - Handover and Close-out Handover of building and conclusion of building contract. Evaluate performance and provide feedback for use on future projects. Stage 7 - In Use Undertake in use services in accordance with

schedule of services. Carry out post-occupancy evaluation, review of project performance, project outcomes and research and development aspects. Updating of project information, as required, in response to ongoing client feedback.

Further information and useful forms are available from the RIBA Plan of Work Website: https://www.ribaplanofwork.com/Default.aspx

The Tookit starts here



RIBA Stages Overview

RIBA Stages - Overview



RIBA Stage 0
Strategic Definition

What to consult on:

- Strategic brief and vision
- Capacity planning
- Geography / service location
- Clinical specification, models
- Business model
- Business case requirements
- Current challenges to be addressed by the project
- Pre occupancy evaluation of existing facilities
- Post occupancy evaluation targets

- Consultation plan established Design champion selected
- CQC improvement targets
- established, if possible External Advisor need established
- Confirmation of functional requirement; bed numbers, etc
- Key areas for improvement

- Strategic Management Teams:
 Estates and Maintenance, FM, IT. Clinical, Financial
- Communication Team
- Care Quality Commission, if possible Clinical Commissioning groups
- as required
- NHS England as required
- Procurement



RIBA Stage 1 Preparation and Brief

What to consult on:

Establishing the brief

- Functional content
- · Vision: likes and dislikes, precedents, hopes and fears, exemplar visits
- Departmental adjacencies
- Model of care
- Bed numbers / ward sizes for in-patient services
- Current challenges to be addressed by the project; capture for Government soft landings
- Procurement options

- Design brief (evolving) Exemplar visit summaries
- SOC
- CQC targets established, if possible
- External advisors appointed Confirmation of functional
- requirement; bed numbers, etc Key areas for improvement
- Compliance statement

Who should be involved Communication Team

- Design Champion
- · Service User Experts by Experience, current or former
- Clinical Teams: Ward Managers, OT, Psychologists
- Carers and Families
- Client Specialist Advisors: Fire, Security, IT, Infection Prevention, Catering, Cleaning, Pharmacy, Mental Health Act / Legislation Leads, etc
- Maintenance Teams
- Senior Management Teams
- Local Community Groups • Clinical Commissioning Groups
- as required • NHS England as required



RIBA Stage 2 Concept Design

RIBA Stage 3 **Developed Design**





RIBA Stage 4 **Technical Design**



RIBA Stage 5 Construction



RIBA Stage 6 Handover and Close-out



RIBA Stage 7 In Use

What to consult on:

Developing the brief

Options appraisal

What to consult on:

- Functional content Internal adjacencies
- Key room design / P22
- Outline building specifications Outline engineering systems specifications (staff attack,
- patient call, fire, etc) • Innovations, product design
- Arts co-ordination
- · Procurement options

Outcomes

- Design brief (evolving)
- Strategic layout, site and building Planning pre-application advice
- Building regulations advice
- · External advisors appointed • Outline business case (if
- sufficient detail is available) Draft / proposed derogations schedule

- Who should be involved
- Communication Team Design Champion
- Service User Experts by
- Experience, current or former Clinical Teams: Ward Managers,
- Service Users, current or former
- Carers and Families Client Specialist Advisors: Fire, Security, IT, Infection Prevention, Catering, Cleaning, Pharmacy, Mental Health Act / Legislation Leads, etc
- Senior Management Teams
- Maintenance Teams Local Community Groups Local Planning Authority if
- complex / sensitive site Building Control if complex building / site

Developing the design

- Functional content • Detailed internal building layouts
- Elevation design
- Outline building specifications
- Innovations, product design
- External spaces
- · Interior design concepts Kev room mock-ups
- · "Loaded" plans, key rooms in 3D:
- fixtures, fittings and equipment Arts co-ordination
- Procurement options

Outcomes • Design brief (evolving)

- · Planning pre-application building
- Outline Business Case
- Peer review
- Draft / proposed derogations

Who should be involved • Communication Team

- Design Champion Service User Experts by
- Experience, current or former Clinical Teams: Ward Managers,
- Carers and Families
- Client Specialist Advisors: Fire, Security, IT, Infection Prevention, Catering, Cleaning, Pharmacy, Mental Health Act / Legislation Leads, etc
- Maintenance Teams
- Senior Management Teams • Trust Boards (governance
- Local Community Groups Local Planning Authority if complex / sensitive site
- Building Control: Local Authority or Approved Inspector

Clinical Commissioning Groups

NHS England as required

What to consult on:

Technical detail

- Detailed internal building layouts
- Elevation design Detailed building specifications
- Innovations, product design
- External spaces
- Interior design
- Artwork co-ordination Key room mock-ups and testing
- Fully "loaded" plans in 3d: fixtures, fittings and equipment

- Design brief (final)
- Fully co-ordinated design · Building Regulations application
- Tender information
- Full Business Case
- Peer review

Accepted / signed-off derogations schedule

Who should be involved Communication Team

- Design Champion
- Service User Experts by Experience, current or former
- Clinical Teams: Ward Managers, OT, Psychologists
 • Carers and Families
- Client Specialist Advisors: Fire, Security, IT, Infection Prevention, Catering, Cleaning, Pharmacy, Mental Health Act / Legislation Leads, etc
- Maintenance Teams
- Senior Management Teams • Trust Boards (governance approvals)
- Building Control: Local Authority or Approved Inspector Clinical Commissioning Groups
- NHS England as required

as required

What to consult on:

During construction

- On-site mock-up testing · Final setting out
- Final interior design
- · 1st brush decoration Final equipping
- Key decisions if site conditions dictate a design change

• Site visits through construction

Site familiarisation and training

- Key stages Soft landings handover preparation
- Who should be involved
- Communication Team
- Design Champion Service User Experts by Experience, current or former
- · Clinical Teams: Ward Managers, OT, Psychologists
- Carers and Families • Client Specialist Advisors: Fire, Security, IT, Infection Prevention,
- Catering, Cleaning, Pharmacy, Mental Health Act / Legislation Leads, etc Senior Management Teams

• Trust Boards (governance

What to consult on:

Preparing for handover

• Final artwork co-ordination

Site familiarisation and training

- Final decoration
- Outcomes · Soft landings handover
- Building opening event Peer review

Who should be involved

- Communication Team
- Design Champion Service User Experts by Experience, current or former
- (for review and orientation) Clinical Teams: Ward Managers, OT, Psychologists
- Carers and Families
- Client Specialist Advisors: Fire, Security, IT, Infection Prevention, Catering, Cleaning, Pharmacy, Mental Health Act / Legislation Leads, etc Maintenance Teams

Senior Management Teams

What to consult on:

- Post occupancy evaluations, year 1, 2 and 3
- Lessons learned review

Outcomes Post occupancy review

- Lessons learned report • CQC visits and reporting when
- Who should be involved Communication Team
- Design Champion Service User Experts by
- Clinical Teams: Ward Managers, OT, Psychologists
- Carers and Families
- Client Specialist Advisors: Fire, Security, IT, Infection Prevention, Catering, Cleaning, Pharmacy, Mental Health Act / Legislation Leads, etc
- Senior Management Teams Design and Construction Team

RIBA Stage 0 **Strategic Definition**

RIBA Stage 0 - Strategic Definition

















What to consult on:

- Strategic brief and vision
- Capacity planning
- Geography / service location
- Clinical specification, models of care
- Business model
- Business case requirements
- Current challenges to be addressed by the project
- Pre occupancy evaluation of existing facilities
- Post occupancy evaluation targets

- Consultation plan established
- Design champion selected CQC improvement targets
- established, if possible • External Advisor need established
- Confirmation of functional requirement; bed numbers, etc
- Key areas for improvement

Who should be involved

- Strategic Management Teams: Estates and Maintenance, FM, IT, Clinical, Financial
- Communication Team
- · Care Quality Commission, if
- Clinical Commissioning groups
- NHS England as required
- Procurement





- Large projects, suggest 2–3
- Use NHS Quality Service Improvement and Redesign (QSIR) tools if appropriate



- Number to depend on project size

roup size: 10-15 | 竹中竹中



- Estates / Capital Planning
- Clinical Leads, Ward Managers where appopriate

- Service User, Carers and Family

- Review high level project briefing bed numbers, clinical model, geography
- Review CQC reports and identify areas for improvement Identify current challenges in clinical service and estate
- Identify a Design Champion for the project Identify tasks to be undertaken
- (e.g. consultation plan, external appointments, procurement) · Identify business case process, internal governance procedures and gateway requirements





- · Workshop notes, including agreed actions and programme
- Driver diagrams
- Benefits realisation plan

····· Tool



- · 2no. Sessions
- Facilitated by Communications Lead

oup size: 10-15 🎁 🎁 10-15p dependent on project size

size: 1-2

disruption on clinical environment

• Small groups so as to limit

- Estates / Capital Planning
- Clinical Leads
- Service User, Carers and Family

- Board Level Representatives (e.g. Estates, Operations Director. Non-Exec Directors)
 - Communications Team

(e.g. DoF, Estates, Operations

· Communications Team

Procurement

- Design Champion
- Procurement
- Design Team if appointed



exercises / tasks

Identify Project Stakeholders

- Identify key messages Establish engagement programme, in line with project
- programme

• Meeting notes, including agreed

Use Procure 22 standard forms

for pre- and post-occupancy

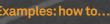
• PDSA cycles for future review

actions and programme

Carers and Staff survey

Benefits realisation plan

- Scan results of pin-up / group exercises
- Workshop notes, including agreed actions and programme





11

Images from left: Driver diagram. ACT Academy Plan, Do, Study, Act cycle diagram. ACT Academy P22 Pre + Post Occupancy Evaluation form. P22

Tool

Tool

(requires data collection tasks to be completed)

Ward visits / shadowing days

• 1-2 visits minimum required

• 1–2 meetings minimum required

size: 2-5



• Design Team

- Board Level Representatives Clinical Leads / Service Director
- Consideration to be given to ability of Service User representatives to engage

- Review of data collected e.g. length of stay, incidents of violence and aggression, out of area stay, re-admission rates, staff sickness, maintenance costs.etc Identify post occupancy
- evaluation targets Use Procure 22 standard forms for pre- and post-occupancy
- evaluation

 First-hand observations of how spaces / wards are currently used. Collate information on atmosphere, staff morale, behaviours, incidents, etc

 Observation notes, photographs where permitted, ensuring service users are not included in photos

RIBA Stage 1 Preparation and Brief

RIBA Stage 1 - Preparation and Brief

















What to consult on:

Establishing the brief

- Functional content
- · Vision: likes and dislikes, precedents, hopes and fears,
- Departmental adjacencies
- Model of care
- Bed numbers / ward sizes for in-patient services
- Current challenges to be addressed by the project; capture for Government soft landings
- Procurement options

Outcomes

- Design brief (evolving) • Exemplar visit summaries
- SOC
- CQC targets established, if possible
- External advisors appointed
- Confirmation of functional requirement; bed numbers, etc Key areas for improvement
- Compliance statement

Who should be involved

- Communication Team Design Champion
- Service User Experts by Experience, current or former
- Clinical Teams: Ward Managers, OT, Psychologists
- Carers and Families
- Client Specialist Advisors: Fire, Security, IT, Infection Prevention, Catering, Cleaning, Pharmacy, Mental Health Act / Legislation Leads, etc
- Maintenance Teams
- Senior Management Teams
- Local Community Groups
- Clinical Commissioning Groups
- NHS England as required

····· Tool



- Number to depend on project size

Community based sessions

Large projects, suggest 2–3 workshops

- Consideration to be given to ability of Service Users to engage
- Group work in table groups 4–6p

Suggested 特內 group size: 10-20 內內

Suggested 特情特 group size: 10-40 情情情報

People to include

• Carers

People

Carers

to include

- Service User Representatives
 - Clinical Teams: Ward Managers, OT, Psychologists

• Service Users in the Community

• Community Mental Health Teams

• Community Representatives

- Design Champions
- · Consistent Attendees from each group



Session exercises / tasks

Pin-up and group-based table exercises to encourage group

- · Hopes and fears for the project
- Likes and dislikes: red-green sticker exercise with precedent images. Review likes and dislikes in more detail in follow-up workshops
- · Schedule of accommodation: what's needed and what does it do? Exclude m2 areas at this stage
- Experience: capture good, bad and ugly of existing services / accommodation. Consider waste / use of space, efficiency, what works, what doesn't. Photos of existing
- Bubble diagram / adjacencies (departments and typical wards)



Capturing information



- · Scan results of pin-up exercises
- Photos of group activities
- Evolving design brief
- Driver diagrams

....... Examples: how to...



•



- Scan results of pin-up exercises
- Photos of group activities

Capturing Session exercises / tasks information

- Pin-up and group-based table exercises to encourage group interaction
- · Hopes and fears for the project
- Likes and dislikes: red-green sticker exercise on precedent images Schedule of accommodation:
- Experience capture: good and bad experience of services

Session exercises / tasks

Review findings of workshop and · Hopes and fears for the project

- Likes and dislikes: red-green sticker exercise on precedent images (use smaller selection)
- Schedule of accommodation: is there anything you'd like to see in a new facility?
- Experience capture: good and bad experience of existing services. What is it like for you? How does it make you feel, etc

Capturing information

- Note taking
- Survey using appropriate key questions

Creating a vision diagram. ACT Academy Likes and dislikes workboard. P+HS Architects Department adjacencies. P+HS Architects Hopes and fears workboard. P+HS Architects

····· Tool

Tool



• 1no. session with each group

Small meetings

Suggested group size: 2-5

• Consideration to be given to ability of Service Users to engage



People to include

Carers

• Service Users or Representatives • Clinical Teams: Ward Managers, OT, Psychologists

• Design Champions

RIBA Stage 2 **Concept Design**

RIBA Stage 2 - Concept Design

















What to consult on:

Developing the brief

- Options appraisal
- Functional content Internal adiacencies
- Key room design / P22 repeatable rooms
- Outline building specifications
- Outline engineering systems specifications (staff attack. patient call, fire, etc)
- Innovations, product design Arts co-ordination
- Procurement options

Outcomes

- Design brief (evolving)
- · Strategic layout, site and building Planning pre-application advice if appropriate
- Building regulations advice
- External advisors appointed
- Outline business case (if
- Draft / proposed derogations

Who should be involved

- Communication Team
- Design Champion
- Service User Experts by Experience, current or former Clinical Teams: Ward Managers, OT, Psychologists
- Service Users, current or former
- Carers and Families
- Client Specialist Advisors: Fire, Security, IT, Infection Prevention Catering, Cleaning, Pharmacy, Mental Health Act / Legislation Leads, etc
- Senior Management Teams
- Maintenance Teams · Local Community Groups
- · Local Planning Authority if
- complex / sensitive site Building Control if complex building / site





Concept design review workshop, facilitated by Architect Large projects, suggest 2no. workshops, start and sign-off of RIBA Stage 2

Consideration to be given to ability of Service Users to engage

Suggested

group size: 10-30 竹竹竹竹

- Group work in table groups 4-6p

People to include

- Carers Service User Representatives
- Clinical Teams: Ward Managers, OT, Psychologists
- Design Champions
- Consistent Attendees from each group

Session exercises / tasks

Session 1 exercises

- · Review guidance • Group exercise: review bubble diagram / adjacencies (departments and typical wards) from RIBA Stage 1
- Agree commonalities to confirm flow of building departments from RIBA Stage 1



- · Review site opportunities and constraints: walk-round of existing buildings or computer generated model
- · Identify opportunity for exemplar visits



- Session 2 exercises Review design development
- Review key adjacencies Review key routes: operations
- Sign-Off RIBA Stage 2





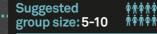
- Scan results
- Photos of group activities • Sign-off 1–200 building layout

Tool



Concept design sessions

- Weekly or meetings as required to suit scale of project
- Consistent attendance required



• Consideration to be given to ability of Service Users to engage

People to include

- Service User Representatives
- Estates Team



- Clinical Teams: Ward Managers, OT, Psychologists



- · Specialist Advisors (Fire, IP,
- Pharmacy, etc)
- Consistent Attendees from each group

Session



Session exercises / tasks

Session 2-5 exercises Building layout review

- Site context
- Key room design review

• Day in the life / pin exercise • Outline building services systems

• Innovations and products • Outline arts co-ordination





- Photos of group activities
- Sign-off 1–200 building layout
- Evolving design brief

····· Tool

Exemplar visits Target 2–3no. Visits as required

to suit scale of project

Detailed design sessions





Suggested

Suggested

group size: 2-5

group size: 2-4

People to include

People

to include

· Estates, FM

People

Carers

to include

Design Champions

• Service Users or Representatives

Clinical Teams: Ward Managers, OT, Psychologists

- Carers • Service Users or Representatives
- Clinical Teams: Ward Managers, OT, Psychologists
- Design Champions



exercises / tasks

exercises / tasks

Innovations and products

exercises / tasks

Outline building services systems

Specifications review

Exemplar visits of similar facilities



Photos if possible

Capturing

 Feedback forms capturing overall pros and cons of facility visited, and how this is reflected in own proposals



• Draft high level specifications





- Scan results of design and colour review



····· Tool

····· Tool

Small meetings

1no. session with each group

Consideration to be given to ability of Service Users to engage









Bedroom concept design

Session

 Day / therapy space concept design Concept colour palettes

Inclusion in design of key areas:

information

Note taking

Capturing

Early use of VR. P+HS Architects Developing Room Adjacencies. P+HS Architects

RIBA Stage 3 Developed Design

RIBA Stage 3 - Developed Design















Examples: how to...

Landscape. Southern Green Ltd Sketch elevation. P+HS Architects

Day in the life. P+HS Architects



What to consult on:

- Developing the design
 Functional content
- · Detailed internal building layouts
- Elevation design
- Outline building specifications
- Innovations, product design • External spaces
- Interior design concepts
- Key room mock-ups
- "Loaded" plans, key rooms in 3D: fixtures, fittings and equipment
- Arts co-ordination
- Procurement options

- Design brief (evolving)
- Planning pre-application building regulations advice
- Outline Business Case
- Peer review
- Draft / proposed derogations schedule

- Communication Team
- Design Champion
- Service User Experts by Experience, current or former
- Clinical Teams: Ward Managers,
- Carers and Families
- Client Specialist Advisors: Fire. Security, IT, Infection Prevention, Catering, Cleaning, Pharmacy, Mental Health Act / Legislation Leads, etc
- Maintenance Teams

approvals)

- Senior Management Teams • Trust Boards (governance
- Local Community Groups
- Local Planning Authority if complex / sensitive site
- Building Control: Local Authority or Approved Inspector
- · Clinical Commissioning Groups as required
- NHS England as required

Weekly or meetings as required to suit scale of project

• As required to suit scale of project

size: 5-10

.......

- Consideration to be given to ability of Service Users to engage
- Consistent attendance required
- Plan sessions in advance, including topics for review

- Service User Representatives • Clinical Teams: Ward Managers, OT, Psychologists
- Estates Team
- FM Teams

· Estates, FM

each group

Carers

- Specialist Advisors (Fire, IP, Pharmacy, etc)
- Consistent Attendees from each group

Consistent Attendees from

Service User Representatives

OT, Psychologists

Design Champions

Clinical Teams: Ward Managers,

- Building layout review
- 1-50 key room design: fixtures, furnishings and equipment
- Day in the life / pin simulation
- · Landscape design
- Outline building services design
- Concept interior design
- Art installation types and locations • Test against benefits realisation

- Scanned mark-up of layouts Photos of group activities
- Sign-off 1–100 building layout
- Sign-Off 1–50 key / repeatable
- Evolving design brief

· Sign-off high level specifications

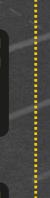
Specifications review

Detailed building services review

- Recap of design process and design development including design stage sign-off to date Review design intent for the site,
- Review 3D visuals of the scheme
- Review landscape design
- Sign-Off RIBA Stage 3

- Scan results
- Photos of group activities • Sign-off 1–100 building layout
- Sign-off design intent for Planning Application submission

- Feedback forms capturing public response





Tool

• 1no. session – all day / early evening drop-in

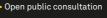
size: 10-20

size: 10-30

Consideration to be given to ability of Service Users to engage









- Service Users and Carers in
- Community Representatives
- Community

- · Community Mental Health Teams

Functional content

- Site context: opportunities and constraints
- Building layout
- Building massing Landscape
- Elevational design/treatment

- Photos of event

RIBA Stage 4 **Technical Design**

RIBA Stage 4 – Technical Design















Examples: how to...



What to consult on:

Technical detail

- Detailed internal building layouts • Elevation design
- Detailed building specifications • Innovations, product design
- External spaces
- Interior design
- Artwork co-ordination
- Key room mock-ups and testing
- Fully "loaded" plans in 3d: fixtures, fittings and equipment

Outcomes

- Design brief (final)
- Fully co-ordinated design • Building Regulations application
- Tender information
- Full Business Case
- Accepted / signed-off derogations schedule

Who should be involved

- Communication Team • Design Champion
- Service User Experts by
- Experience, current or former Clinical Teams: Ward Managers, OT, Psychologists
- Carers and Families
- Client Specialist Advisors: Fire, Security, IT, Infection Prevention, Catering, Cleaning, Pharmacy, Mental Health Act / Legislation Leads, etc
- Maintenance Teams
- Senior Management Teams
- Trust Boards (governance
- Building Control: Local Authority or Approved Inspector Clinical Commissioning Groups
- NHS England as required

Tool



Detailed design review sessions Weekly or meetings as required to suit scale of project

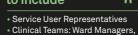
Suggested group size: 5-10

Suggested

group size: 2-4

- Consideration to be given to ability of Service Users to engage
- Consistent attendance required
- Plan sessions in advance, including topics for review

People to include



- OT, Psychologists • Estates Team
- FM Teams
- Specialist Advisors (Fire, IP,
- Pharmacy, etc) Consistent Attendees from each group

exercises / tasks

- 1–20 detailed room design, including detailed building services design • Detailed landscape design
- Detailed interior design
- Artwork
- Fixtures, furnishings and
- Access control

Capturing information

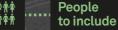
- Scanned mark-up of layouts
- Evolving design brief

- Photos of group activities
- Sign-Off 1–20 room design and environmental data
- Specifications brochures

Tool



Detailed design review sessions · As required to suit scale of project



- Estates, FM Specialist Advisors (Fire, Infection Prevention, etc)
- each group



- Consistent Attendees from

exercises / tasks

- · Detailed specifications review Detailed Building Services
- Access and maintenance, including landscape Technical design review

Capturing information

- Detailed specifications sign-off
- Technical design Sign-off (fire, doors, windows, ironmongery, sanitaryware, alarm systems, etc)







•

Images from top: Risk strategy. P+HS Architects Ironmongery. Safehinge Primera, Dragon Café Specification review. Armitage Shanks Access control. P+HS Architects

RIBA Stage 5 Construction

RIBA Stage 5 - Construction

















What to consult on:

During construction

- On-site mock-up testing
- Final setting out
- Final interior design
- 1st brush decoration
- Final equipping
- Key decisions if site conditions dictate a design change
- Site familiarisation and training

Outcomes

Site visits through construction

- Key stages
- Soft landings handover preparation

Who should be involved

- Communication Team • Design Champion
- Service User Experts by Experience, current or former
- Clinical Teams: Ward Managers, OT, Psychologists
- Carers and Families
- Client Specialist Advisors: Fire, Security, IT, Infection Prevention Catering, Cleaning, Pharmacy, Mental Health Act / Legislation Leads, etc
- Senior Management Teams
- Trust Boards (governance

····· Tool



Site visits

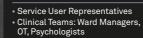
• Informative and engaging Key stages of construction

group size: 3-5

Consideration to be given to ability of Service Users to engage

People

to include



- Estates Team
- FM Teams
- Specialist Advisors (Fire, IP, Pharmacy, etc)

exercises / tasks

- Walk-round at key stages of construction
- General walk-round
- Mock-up tests
- Focus areas appropriate to group attendance: therapy areas, bedrooms, landscape for example



- Photos of group visits
 Site progress photos / timeline
- Meeting notes following the visit, particularly with any key decisions and comments
- · Commentary and results of
- Social media





Examples: how to...



·

Site progress photo. Medicinq Construction stage. P+HS Architects Site visit. P+HS Architects

RIBA Stage 6 Handover and Close-out

RIBA Stage 6 - Handover and Close-out









......









What to consult on:

Preparing for handover

- Final artwork co-ordination • Final decoration
- Site familiarisation and training

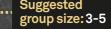
- Soft landings handover
- Building opening event Peer review

Who should be involved

- Communication Team • Design Champion
- · Service User Experts by







Consideration to be given to ability of Service Users to engage

to include

• Service User Representatives

- In-patient service users
- Carers
- Clinical Teams: Ward Managers, Admin teams, Ward Nursing Staff, Doctors, OT, Psychologists
- Estates Team
- FM Teams
- Specialist Advisors (Fire, IP, Pharmacy, etc)

exercises / tasks

- Mini-presentation, led by Design Team reminder of design intent and key decisions made through design and construction
- · General walk-round
- Focus areas appropriate to group attendance: therapy areas, bedrooms, landscape for example
- Building systems familiarisation • Fire strategy familiarisation

Capturing information

- Photos of group visits
- Meeting notes following the visit, particularly with any key comments and decisions







Orientation / training sessions. St Andrew's Healthcare Completion video. Sheffield Health and Social Care NHS FT Opening event. Cumbria Partnership NHS FT

•

Experience, current or former People Capturing ····· Tool (for review and orientation) group size: N/A information to include exercises / tasks Clinical Teams: Ward Managers, OT, Psychologists All Trust Stakeholders, including Chief Executive, Chair, **Building opening event** • Celebration of new facility · Photos of event Carers and Families • Facilitated by Communications project size • Interviews - Ward Staff, Board • Film of event Members, Design Team – consider making a film showing • Client Specialist Advisors: Fire, Service Users, Carers, etc Consider potential entertainment Social media (e.g. a singer for older adult schemes) Security, IT, Infection Prevention, Catering, Cleaning, Pharmacy, Mental Health Act / Legislation Leads, etc • Local MP the new facility Donors • Design Team · Social media tweets and posts • Maintenance Teams • Senior Management Teams

RIBA Stage 7 In Use

RIBA Stage 7 – In Use

















What to consult on:

- Post occupancy evaluations, year 1, 2 and 3
- · Lessons learned review

Outcomes

- · Post occupancy review
- Lessons learned report CQC visits and reporting when

Who should be involved

- Communication Team
- Design Champion
- Service User Experts by Experience, current or former · Clinical Teams: Ward Managers,
- · Carers and Families
- Client Specialist Advisors: Fire, Security, IT, Infection Prevention, Catering, Cleaning, Pharmacy, Mental Health Act / Legislation Leads, etc
- Maintenance Teams
- Senior Management Teams
- Design and Construction Team

Tool

Key questions to align with the relevant sections within the NHS England's Business Case Requirements Annex 8 Checklist **Project Completion Report** required within 6 months of occupation by NHSE.

performance and is separate to the Post Occupancy Evaluation (POE) required at 12 months, which focusses on the facility

for capturing Post Project Evaluation within the NHS Client's

Project end workshop

This Report focusses on team

Suggested group size: 10-15 情情情

People

to include

- Service User Representatives
- Board Representatives
- Clinical Teams: Ward Managers, OT, Psychologists
- Estates Team
- FM Teams
- Design Team Construction Team

exercises / tasks

- Review driver diagrams • Project performance summary, e.g. cost, programme, stage
- Project Team performance review (Client, Design Team, Construction

exercises / tasks

clear agenda items

Detailed lessons learned with

Capturing information

Capturing

Capturing

information

actions and programm

PDSA cycle as required

· Benefits realisation update

information

· Meeting notes following the visit,

particularly with any key actions,

Meeting notes, including agreed

Use Procure 22 standard forms

for pre- and post-cccupancy

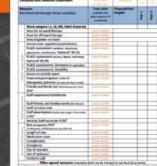
ownership and programme

- Meeting notes following the visit, particularly with any key actions, ownership and programme

Examples: how to...

- PDSA cycle as required







Lessons learned workshop. P+HS Architects P22 pre- and post-evaluation form. P22 Stakeholder feedback. pexels.com

····· Tool

····· Tool

Group meetings

to be completed

Workshop Lessons learned workshop facilitated by independent party

Minimum 3no. meetings required.

Requires data collection tasks

group size: 10-15 前前前

Suggested

group size: 2-5



People to include

- Service User Representatives · Board Representatives
- Clinical Teams: Ward Managers, OT, Psychologists
- Estates Team
- FM Teams

People

- Design Team
- Construction Team

- Board Level Representatives
- of Service User Representatives to engage

- Clinical Leads / Service Director
- Consideration to be given to ability

- years post occupancy review of data collected e.g. length of stay, incidents of violence maintenance costs, etc
- · Review benefits realisation plan

to include

exercises / tasks

- Review feedback at 1,2 and 3 and aggression, out of area stay, re-admission rates, staff sickness.
- Use Procure 22 standard forms for pre- and post-cccupancy evaluation
- PDSA cycle review

Further Information



Design in Mental Health Network www.dimhn.org

Issue 3 Editor: Cath Lake

Director, P+HS Architects Email: cath.lake@dimhn.org Telephone: 0113 245 4332

Text © Design in Mental Health Network, 2018

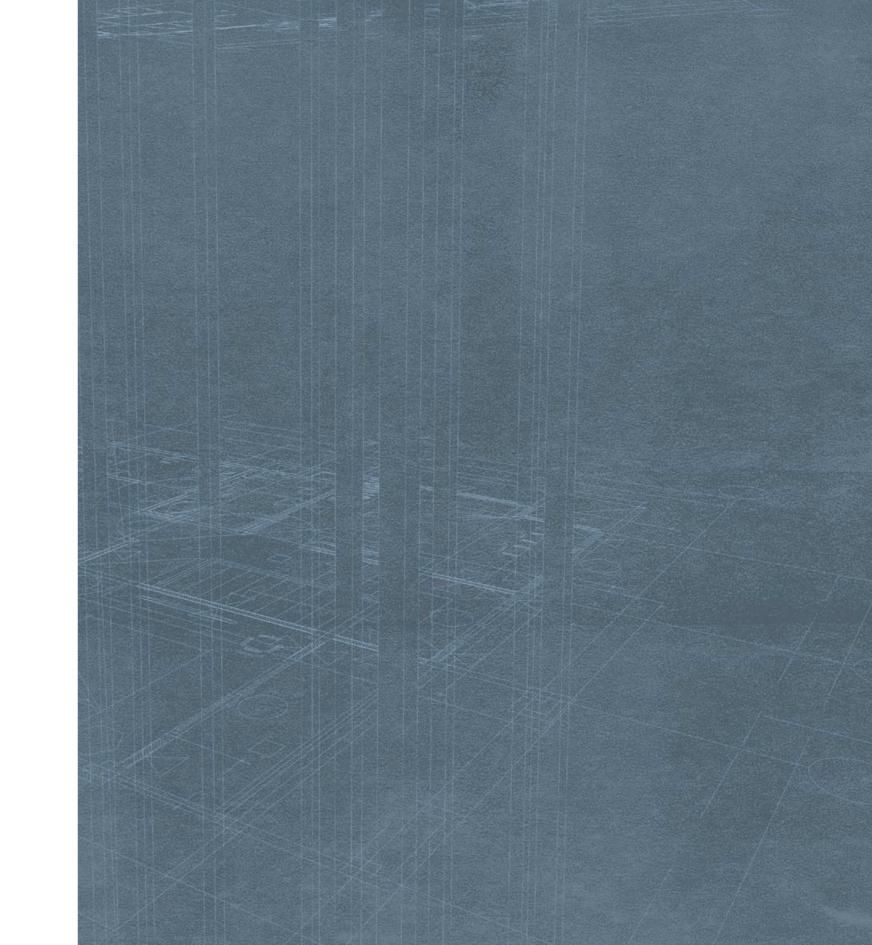
Published by the Design in Mental Health Network, September 2018

Printed by London South Bank University

Design and illustration by Lex Johan Set in 8/10pt Akkurat

Picture credits

Pages 1, 2, 8, 9, 27, 28: background illustrations designed by Archjoe / Freepik. Unless individually credited, all other images are from www.pexels.com and www.pixabay.com, and conform to the Creative Commons Zero (CCO) license





03

No 3 in a series of booklets, published by the Design in Mental Health Network, 2018