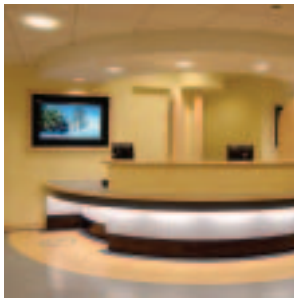


Hinchingbrooke Hospital Integrated
Emergency Care Centre (ECC),
Huntingdon, Cambridgeshire

One-stop shop for care

In the lead up to the refurbishment of its new ECC at Hinchingbrooke Hospital, the trust constantly achieved over 98 per cent success in reaching the national four-hour Accident & Emergency (A&E) wait target. This resulted in a 'reward' of £350,000 extra funding from the NHS – cash placed into the capital pot for the ECC project.



Overview

Before the new ECC was developed, A&E was under mounting pressure due to increasing patient admissions. Conditions were cramped and lack of space was having an adverse effect on patients' dignity and privacy. There was also a rise in the number of NHS performance targets being missed. A&E cubicles designed for one trolley were being used for two, while in the waiting area, 12 out of 60 seats were in a corridor.

The new ECC plan created more space by extending the hospital frontage. It also improved the main entrance with a redesign, better signage and changed a road layout at the front of the hospital for quicker and easier ambulance access.

This large and complex project was no easy undertaking. It involved multiple decants, refurbishments and construction in a live hospital environment. It demonstrated the real benefits of

close partnership working. The ultimate aim was to bring together existing A&E services and the GP Out-Of-Hours service (OOHs) to offer a 'one stop shop' for emergency care.

A PSCP was appointed very quickly to carry out the work and start on site was in March 2005. The project target date was January 2006 and the building was handed over 11 days ahead of schedule.

David Woods, Hinchingbrooke Healthcare NHS Trust Capital Services and Project Manager, said, "The ProCure21 principle enabled us to achieve a scheme under budget, despite adding changes to the layout of the front road, two major bays, the front entrance canopy, cooling to patient areas and new open-plan office areas. The success of the scheme has been rewarding for all concerned."



Achievements and benefits

- Hinchingsbrooke Trust constantly maintained over 98 per cent success in achieving the four-hour A&E wait target during redevelopment of the ECC. This resulted in an award of £350,000 extra funding from the NHS. David Woods said, "The performance of the trust's A&E department appeared to actually improve during the construction period."
- As a result of the trust's A&E performance, it and the local Primary Care Trust submitted a bid for national funding for a Walk-in Centre and was awarded £750,000.
- Excellent working relationships were established between the A&E department's Modern Matron Karen Mitchell and Colin Chapman, Kier Eastern's General Foreman. Through frequent communication, the trust and the PSCP were constantly kept informed of progress and could adapt to meet patient and staff needs.
- Despite relatively late instructions, several additions to the scheme – including construction of an office area – were completed ahead of schedule and within budget.
- Modernisation, improved access and reduced inconvenience for patients.
- Further benefits for patients include consistent service delivery and direct access to advice from social services and mental health teams. The ECC has also enhanced communication across services, such as GP surgeries and primary care teams.
- Efficient use of resources by location on one site.
- Solid walls at the ambulance parking bay obscure ambulance activity from patients and therefore improve the patient experience.



Principles and objectives

The new ECC is very much in line with NHS policy encouraging integration of services to ensure a more 'seamless' pattern of care. The ECC also supports the NHS drive to improve waiting times for emergency care and access to GP services (both areas of care have explicit and demanding standards and form part of the NHS Performance Framework).

From the trust's point of view, providing OOHs and A&E in one location streamlines care, offers better value for money and makes the best use of staff skills. Healthcare professionals are able to share clinical knowledge and expertise and there is a combined approach to training, education and communication.



Major issues

Disruption caused by refurbishment and construction had to be kept to a minimum in a live hospital environment, yet the project was complex, involving multiple moves. For example, A&E had to be moved to another area at the front of the hospital already occupied by physiotherapy. In turn, physiotherapy was moved to a new modular building built as part of the overall project but not part of the ProCure21 process.

"What I liked about the ProCure21 approach was the team rapport. We built a good working relationship which is very important in such a demanding project."

This meant two different working processes were adopted throughout the scheme. David Woods commented, "What I liked about the ProCure21 approach was the team rapport. The project began with a teambuilding workshop attended by the whole team, the trust, the designers and the constructors. This does not happen in traditional procurement methods. We built a good working relationship which is very important in such a demanding project."





Successful initiatives

Materials/technology

- Relocation of a road in front of the hospital created a two-way route for ambulances only. This involved relocating footpaths, introducing a new zebra crossing and widening the road. New bollards separate pedestrians and vehicles.
 - A new corridor link from A&E to the main hospital for OOHs access and bed transfer.
 - Environmental controls and cooling to patient areas.
 - A nurses station and digital imaging area with wipeable keyboards.
 - The front entrance has a patient focused design with large floral coloured images of tulips, daffodils and gingko bilabo to reflect the red, yellow and green zones relating to the NHS major incident plan.
- A new reception area along with an interactive information centre for patients. Large television screens in the waiting area.
 - A new decontamination area with door access direct from outside.

Contacts

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