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Community Diagnostic Centre – East Grinstead

Design and Access Statement

30/01/2025

Issue and Revision Record

Information class: Standard

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Document Reference: 100120806-MM-A1-EG-RP-AR-0002 - East Grinstead Architectural Design and Access Statement

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Revision	Date	Originator	Checker	Approver	Description
P01	30.01.25	CB/MR	NA	AF	Issued for planning

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1.0 Introduction and Brief

1.1 Overview

1.2 Architectural brief



Note: This is an initial sketch and a work in progress. The final design is based on the 3D visuals provided at the end of this document and may differ slightly from what is shown here.

Introduction and Brief

1.1 Overview

This Design and Access Statement has been prepared by Mott Macdonald on behalf of Queen Victoria NHS Foundation Trust. It describes the proposed development of a Community Diagnostic Centre (CDC) on an existing hospital site; Queen Victoria Hospital. Queen Victoria Hospital (QVH) is located in East Grinstead on Holtye Road, RH19 3DZ and provides life-changing reconstructive surgery, burns care and rehabilitation services for people who have been damaged or disfigured through accident or disease. The Trust wish to expand their range of community and primary care services, including the ownership and operation of Community Diagnostic Centres.

This should be read along with the planning statement (100120806-MM-XX-EG-RP-PL-0001)

The Sussex Integrated Care System (ICS) has plans for a number of CDCs at locations across the ICS area. The ICS has completed four such facilities to date.

The Queen Victoria Hospital has been identified via an Outline Business Case process as a site to host a CDC Hub. The facility is known as the East Grinstead (EG) CDC. The CDC will provide general treatment and diagnostic rooms alongside other support and staff spaces. The building should complement the existing site with consideration to the Jubilee Building – an important local landmark on the site which provides a frontage to Holtye Road.

The ambition of the Sussex ICS is to have multiple CDC's to support the delivery of care in Sussex. The programme objectives are to;

- Support delivery of faster diagnosis targets – through rapid diagnosis services
- Increase diagnostic capacity and accessibility
- Provide COVID-secure environments for diagnostic services
- De-pressurise acute sites and acute NHS services
- Develop sites that will offer the full range of diagnostic imaging and physiological tests, to build a 'one stop' model approach

Abbreviations

BNG – Biodiversity net gain
CDC – Community Diagnostics Centre
EG – East Grinstead
GA – General Arrangement
HBN – Health Building Notes
HTM – Health Technical Memorandum
ICS – Integrated Care System
QVH – Queen Victoria Hospital
RDS – Room Data Sheet
RPA – Radiation Protection Advisor

Introduction and Brief

1.2 Architectural Brief

The proposal is for a single-story building of a traditional type construction, that is designed in a style that fits into the proposed environment. The facade is composed of mixed-coloured brick, with hues of buff, brown, and red. It is designed to complement the existing Jubilee Building and the surrounding hospital with a modern interpretation of a traditional brick facade. The external areas are to be welcoming and provide access to green space to support the health and wellbeing of staff, patients and visitors.

The service model as specified by QVH, has resulted in a Schedule of Accommodation that provides the need for a facility with a gross internal area of 743m². The design will deliver a single-storey, Community Diagnostic Centre located on the existing Queen Victoria Hospital site. The CDC is intended to support the demand on the existing facilities on the site. It will provide five Generic Treatment rooms, a Lung Function Test Room, an Ultrasound room, a Dexa Scanner Room, an Ophthalmology Diagnostic Room and double Phlebotomy suite. These functions are supported by clinical support facilities and staff support spaces, there are also patient wait facilities.

The Schedule of Accommodation for the CDC was designed around the services and clinical pathways that are required to improve access to diagnostic testing, reduce waiting times, tackle the backlog of diagnostic activity and reduce health inequalities within the local communities that they serve.

The CDC should be fully accessible, incorporating all necessary rooms and provisions to accommodate varying levels of ability, in accordance with the requirements of the Equality Act 2010. The CDC should comply with dementia-friendly design.

A set of General Arrangement (GA) drawings have been developed to define the project scope such as the spatial quality, departmental adjacency and form. GA drawings have been discussed with the Trust and designed in conjunction with other design disciplines to create a cohesive, coordinated proposal.

Stakeholder workshops were held with building users during this design development stage. At these meetings, the user's requirements for patient flow, staff flow, clinical adjacencies and the size and quantity of accommodation have been discussed and reviewed. At the stakeholder meetings requirements for storage, waste disposal, fire safety requirements and IT have been considered and changes incorporated as necessary.



2.0 Site Analysis and Context

- 2.1 Site Definition & Analysis
- 2.2 Local Transport Routes
- 2.3 Site Description
- 2.4 Site Context
- 2.5 Site History
- 2.6 Site Opportunities and Constraints
- 2.7 Relevant Planning Policies

Location of
photograph



Queen Victoria Hospital Main Entrance - 1955

Site Analysis and Context

2.1 Site definition and analysis



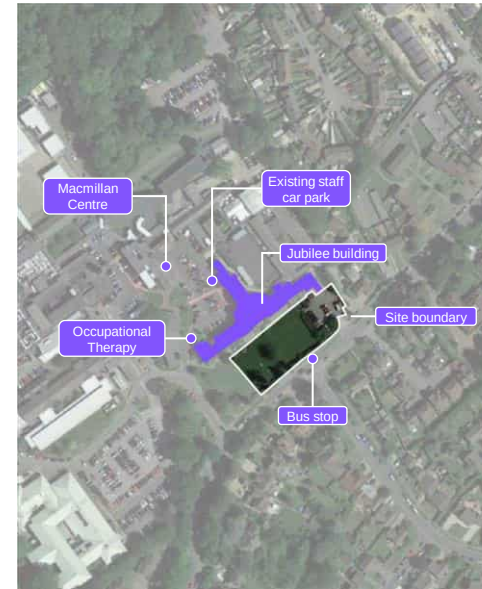
Wider Context

Queen Victoria Hospital (QVH) is located in East Grinstead, in the county of West Sussex, UK.



Transport links

QVH can be accessed directly by car. The closest train station to QVH is East Grinstead station (1.6km), however the most direct mode of public transport is by bus: visitors can use a variety of bus links to access the bus stop just outside of the site.



Immediate Context (QVH)

QVH is comprised of a collection of healthcare buildings dedicated to specific healthcare functions. The Jubilee Building at the front of the site holds historical significance to the local community and NHS staff.

The site was identified as the only available plot on the hospital grounds.



Proposed Site

The proposed site is located to the south of the Jubilee Building on the north side of the green. The green is roughly 1m below that of the Jubilee and has a slight slope. There is a small car park directly to the north-east of the site, the main carpark is to the south-west. The green can be accessed from two directions. However, both require careful consideration to ensure users can access the site safely on foot.

Site Analysis and Context

2.2 Local transport routes

Site location

The proposed site of the Community Diagnostic Centre is located to the northeast of East Grinstead town centre. It is on the site of Queen Victoria Hospital fronting Holtye Road. East Grinstead Railway Station is located approximately 1.6km to the southwest of the site, accessible by foot, cycle or bus.

Vehicle access is from the A264 Holtye Road which links to the A22, providing good highways links for both construction and post-construction phases. Careful planning is required to manage traffic flow during peak hours due to the proximity of local schools, residential areas and the hospital. The proposed hours of operation for the CDC will help to minimise staff movements at these peak times.

- — — Walking route
- Bus route



Introduction and Brief

2.3 Site Description

Queen Victoria Hospital is located in East Grinstead, West Sussex, England, situated approximately 1.5km northeast of the town centre. The hospital is renowned for its specialist services in reconstructive surgery, burns care, and rehabilitation.

The site predominantly features mid-20th century architecture, with significant modern additions and refurbishments enhancing its facilities.

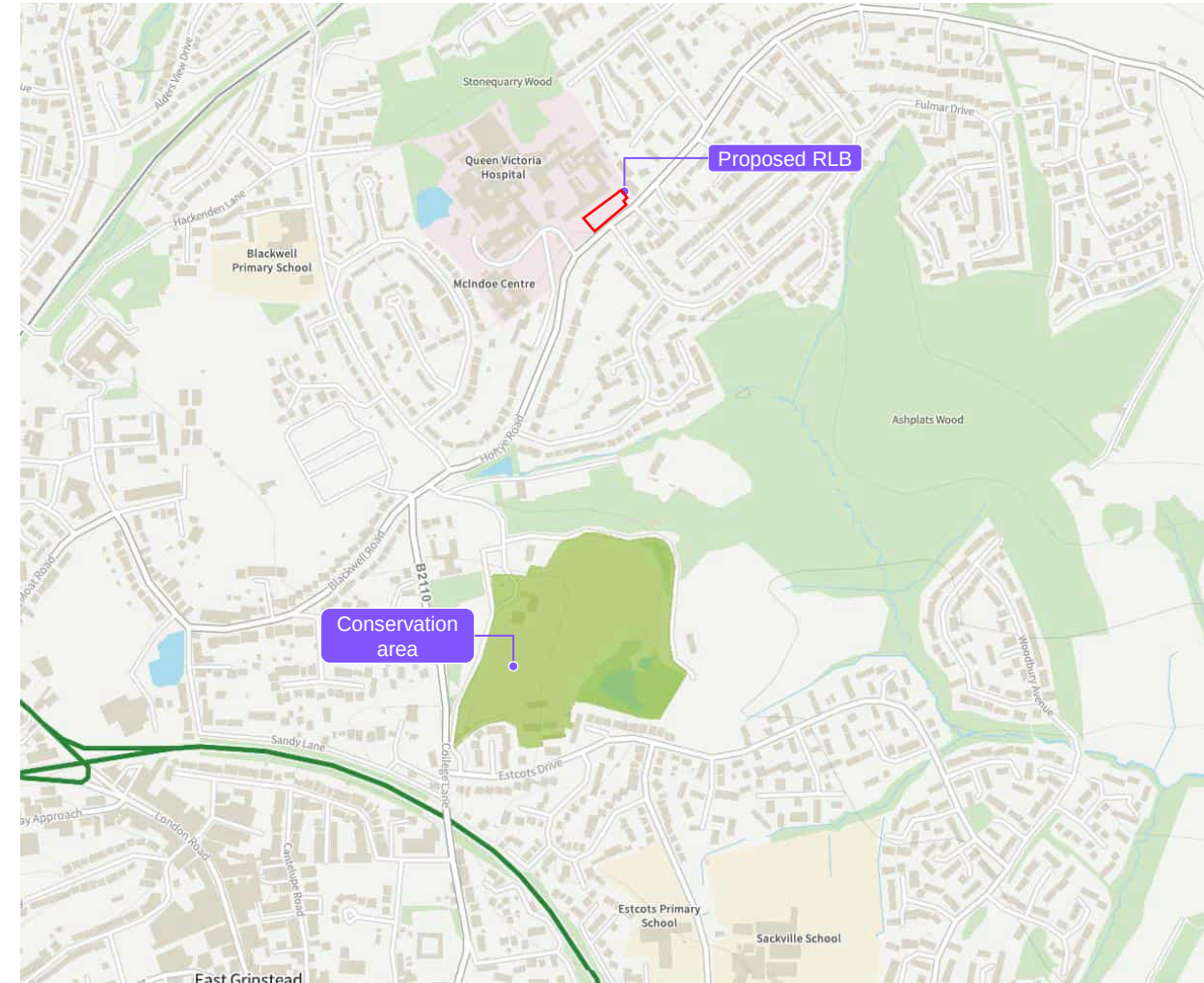
The surrounding area is characterised by a mix of residential, and light commercial uses. The site is located within a predominantly suburban setting.

Approximately 0.5 miles from the site is the Estcots and East Court conservation area.

The proposed building location is bordered to the south by Holtye Road (A264), with several residential areas beyond. To the west, the site adjoins an access road leading to the QVH car park, with multiple healthcare facilities of various uses and construction types situated on the remainder of the site towards the north and northwest. The wider surrounding areas include further car parks, walkways, public open (green) spaces and smaller parks.

The site location is highlighted in the image to the right. The hospital grounds are bordered by Holtye Road to the South and woodland to the north. Residential areas generally surround the site.

Grid Reference: TQ 40010 39204



Source: Map data (©) Estcots and East Court (gov.uk) contributors.

Site Analysis and Context

2.4 Site context



1



2



3

- 1 North view from west entrance
- 2 East view from west entrance
- 3 View from car park of Jubilee
- 4 View of car park



4



5

- 5 View from east of green of Jubilee
- 6 View from Holtye road of QVH
- 7 View of green
- 8 View from west of green of Jubilee
- 9 View from Holtye road of Jubilee
- 10 West view from west entrance



6



7



8



9



10

Site Analysis and Context

2.5 Site History

QVH dates back to 1863 when East Grinstead Cottage Hospital was founded, however, it was in 1936 where the hospital found its permanent home at the East Grinstead site. Following the employment of Archibald McIndoe, QVH became renowned for its innovative and holistic approach to plastic surgery techniques and recovery following an influx of burn victims during WWII.

The Jubilee Building is home to minor injuries and sleep disorder units. This historic, red brick building is highly regarded by staff and locals and as such holds local significance. It is imperative that the CDC and any other external works are sensitive to the Jubilee, especially considering its proximity to it.

Character

The Jubilee Building holds historical and architectural significance for both the site and the local community, particularly due to its tower and art deco features. The new CDC will complement the Jubilee by responding to its brick façade, creating a modern aesthetic though tall vertical lines and contemporary materials, which harmonise with the existing site.



Site Analysis & Context

2.6 Site Opportunities and Constraints

The proposed CDC sits to the northeast of the green, directly in front of the Jubilee Building. Various locations were considered for the CDC location. The Trust direction was to use location 3b as this is the only site that is feasible.



Opportunities

- Close to a small car park and a short walk from the main carpark – this provides a high level of accessibility for all users, maintenance vehicles and emergency vehicles
- Easy to locate and access off Holtye Road and from the rest of the site.
- Close to the bus stop on Holtye Road
- Can create a facility, enhancing community and social value, which compliments the functionality of the site, visible from Holtye Road
- South facing – access to lots of natural light which will enhance the patient experience



Site Analysis & Context

2.6 Site Opportunities and Constraints

Constraints

- On a green site – BNG consideration is required to ensure that it is making a positive impact. The BNG mitigation is off site.
- On a sloped site – although a slope can make for a more difficult site, the building will be at a lower level to the Jubilee meaning it will be less visually obstructive and allow more sunshine onto the south facing Jubilee wall.
- Currently, the only pedestrian access from the bus stop is through an existing carpark to the northeast of the site or by going via a long path via the south most access from Holtze road and across the front of the Jubilee building. A new pedestrian access is proposed between the bus stop and the existing vehicular entrance. This new access will be fully accessible.
- Planning considerations regarding the CDCs relationship to the Jubilee Building – the CDC site is challenging but there is no other piece of land available within the hospital grounds. For a description of the site selection process, please refer to the planning statement. Within these constraints, the building has been designed to respect the heritage of the site by reflecting the materials in a modern way.
- Existing trees are considered constraints, especially ones of significant maturity, functional purposes (like the Christmas tree) and for purposes of memorial.
- Careful consideration needed during construction due to existing residential, healthcare buildings and constrained site



Site Analysis and Context

2.7 Relevant planning policies

For the design to be successful it needs to consider relevant local policy alongside other relevant design guides and legislation.

Mid Sussex District Plan

This document reflects on the aspirations of Mid Sussex district council for maintaining social, economic and environmental sustainability. The proposal should also enhance the character of its surroundings.

The design is assessed against such policies as:

- Policy DP1: Sustainable Economic Development
- Policy DP2: Town Centre Development
- Policy DP3: Village and Neighbourhood Centre Development
- Policy DP17: Ashdown Forest Special Protection Area (SPA) and Special Area of Conservation (SAC)
- Policy DP20: Securing Infrastructure
- Policy DP21: Transport
- Policy DP25: Community Facilities and Local Services
- Policy DP26: Character and Design
- Policy DP28: Accessibility
- Policy DP29: Noise, Air and Light Pollution
- Policy DP34: Listed Buildings and Other Heritage Assets
- Policy DP37: Trees, Woodland and Hedgerows

- Policy DP38: Biodiversity
- Policy DP39: Sustainable Design and Construction
- Policy DP41: Flood Risk and Drainage

The Mid Sussex District Plan informs all subsequent planning documents such as the East Grinstead Neighbourhood Plan

East Grinstead Neighbourhood Plan

Similarly to the Mid Sussex District Plan, the East Grinstead Neighbourhood Plan aims to achieve sustainable development, ensuring that only suitable developments which are appropriate for the area are delivered.

The most notable policies to the CDC proposal are:

- Policy EG3: Promoting Good Design
- Policy EG4: Heritage Assets
- Policy EG10: Employment Provision
- Policy EG11: Mitigating Highway Impacts
- Policy EG12: Car Parking
- Policy EG13: Embracing Modern Technology
- Policy EG14: Protection of Open Space

A part of the East Grinstead Neighbourhood Plan, there were site specific policies; one of these related to Queen Victoria Hospital. The East Grinstead Neighbourhood plan contains policy SS6 relating to QVH states:

“The loss of the hospital use will be resisted.

Proposals for new and extended hospital facilities and general practitioners services will be supported, including ancillary uses, subject to:

- (1) The design conserving and complementing the historic and architecturally significant elements of the hospital and protecting the character of the cottage hospital, tower and World War Two additions;”
- (2) The new buildings of up to four storeys in height subject to design justification and protecting the character of the cottage hospital, tower and World War Two additions;
- (3) Appropriate landscaping with native species;
- (4) Provision of adequate parking, drop off and pick up facilities, public transport infrastructure such as bus stops, taxi rank facility and travel plans for staff will need to be implemented”

3.0 Architectural Design Proposal

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Architectural Design Proposal

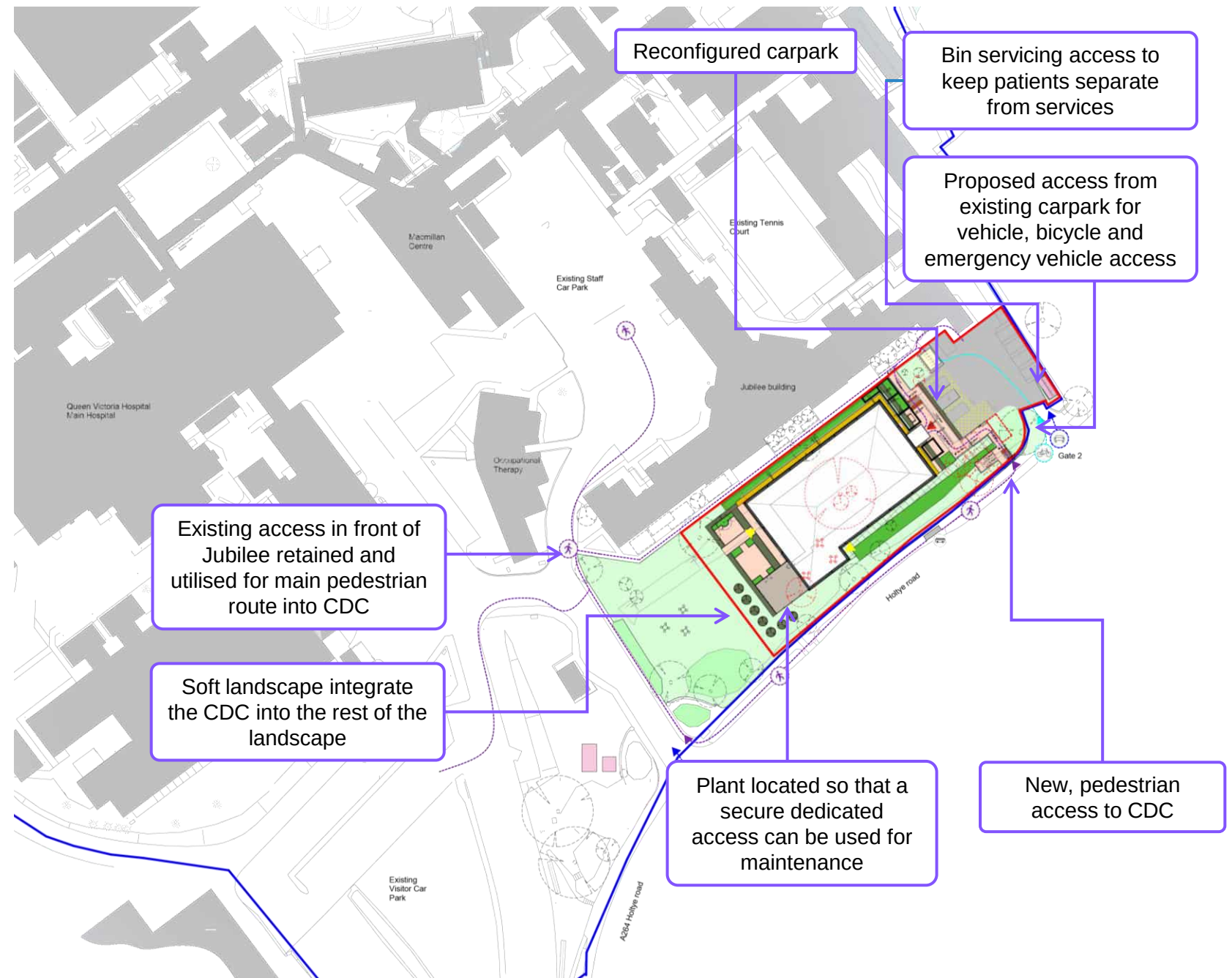
3.1 Site Location Plan

The proposed CDC sits on the sloped green at the front of the site directly in front of the Jubilee. The slope of this site allows the CDC to sit lower than the Jubilee.

The Trust specified that the building should be on the northeast of the site. This location allows for access to the small carpark to the northeast and retains the green area to the southwest of the CDC.

A new pedestrian access has been proposed from Holtye road, targeting people that would get to the hospital by transport.

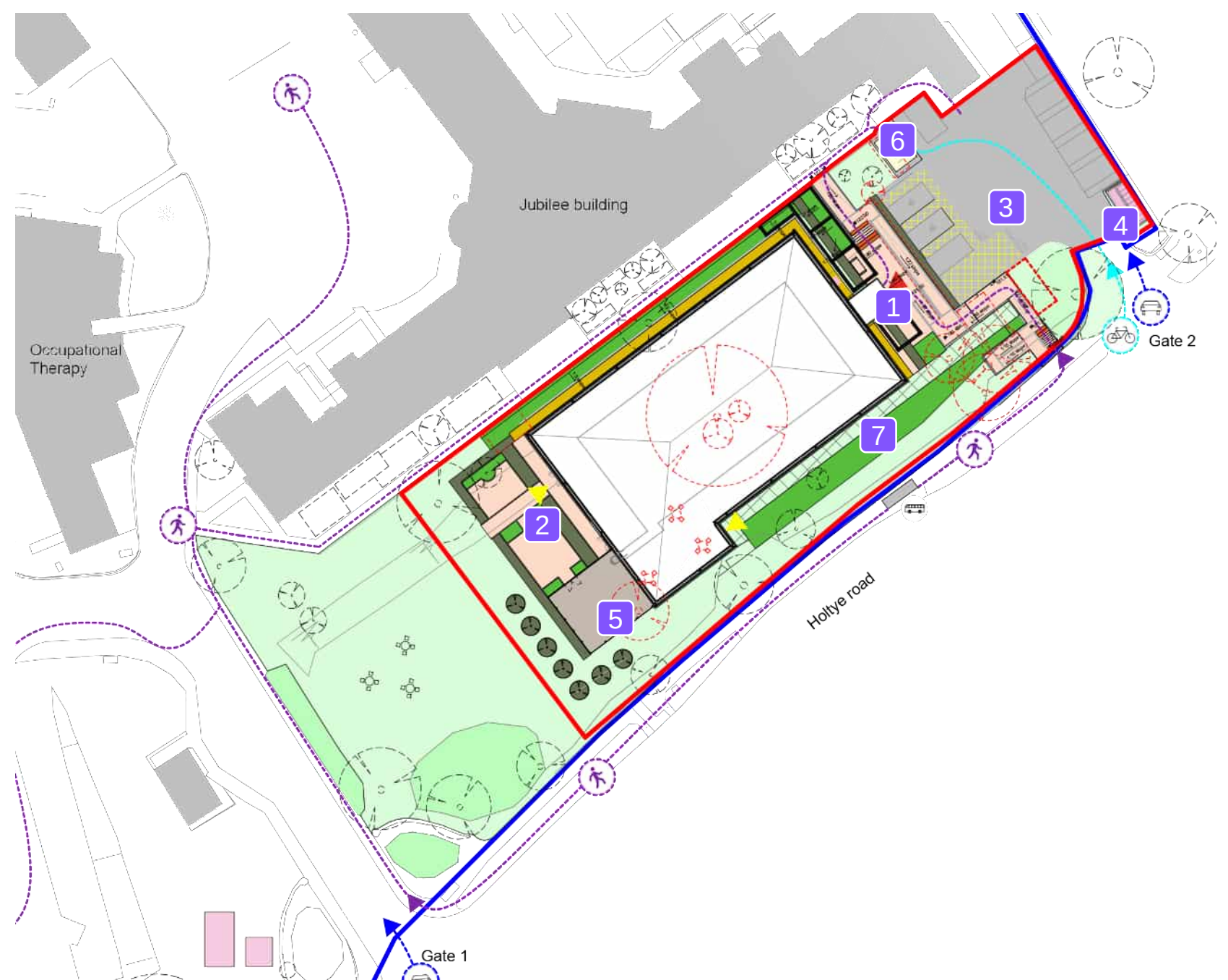
- Proposed CDC site boundary
- Ownership boundary
- Parking & vehicular access
- Footpath & hardscape landscape
- Existing grassed / planting zone
- Concrete
- Proposed low shrubs area
- Proposed Bin store
- Proposed cycle store
- Existing bushes / hedges
- Gravel path - for facade maintenance
- Proposed low box hedge
- Carpark pedestrian path
- Proposed maintenance path - Grasscrete
- Main building entrance
- Other building entrance
- Existing vehicular entrance
- Bicycle entrance
- Pedestrian entrance
- Existing Tree (Quantity, type & exact location TBC in next stage)
- Existing Tree (Quantity, type & exact location TBC in next stage)
- Slope
- Pedestrian access
- Existing Vehicular access
- Bicycle access
- Existing retaining wall
- Existing trees/hedges to be removed



Architectural Design Proposal

3.2 Site Plan

- 1 Draught lobby
- 2 Proposed garden
- 3 Reconfigured car park
- 4 Bin store
- 5 Outdoor, enclosed plant area
- 6 Bicycle shelter
- 7 Plant access route



Architectural Design Proposal

3.3 Landscaping Strategy

The primary landscape design principles for the East Grinstead CDC site are:

- To provide external spaces required for the new CDC building.
- To help integrate the new CDC building within the setting of the existing Jubilee Building.
- To mitigate the loss of any trees that are required to be removed to accommodate the new CDC building.
- The use of clipped yew or box hedges to reference the historic character of the hospital landscape and the art deco style of the Jubilee Building.

External Spaces

The external spaces around the new CDC building consist of four separate areas:

- Entrance approach area.
- Landscape buffer between the CDC building and the Jubilee Building.
- The Medicinal Garden to the western side of the CDC building.
- The existing memorial garden area.

The entrance approach

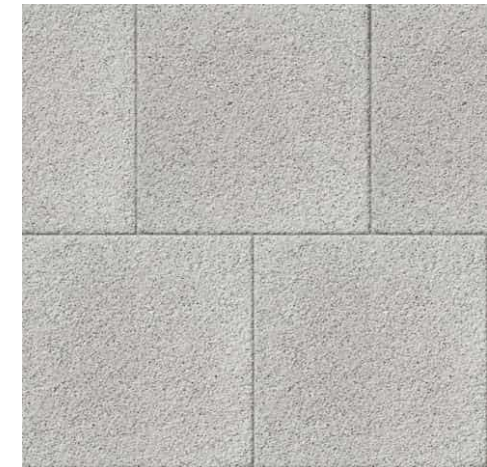
This area sits between the existing car-park and the new CDC building.

A sloping pathway and an alternative stepped access from the Jubilee Building leads into a paved area in front of the entrance foyer of the CDC building.

Ornamental planting and a low, clipped yew or box hedge will separate the paved area from the CDC building. A single galvanised steel and timber seat will provide seating outside the building.

A new low, clipped yew or box hedge will be planted between the sloping pathway and the existing car-park.

Paving material in the paved area to the front of the entrance will be a mid-grey, granite aggregate concrete block. The paving will be edged with a graphite-coloured block. A further area of silver concrete flag paving will lead into the building.



Architectural Design Proposal

3.3 Landscaping Strategy

Landscape buffer between the CDC building and the Jubilee Building.

Located between the new CDC building and the existing Jubilee Building, this area is intended to create a harmonious transition between the two structures, featuring an array of shade-loving plants such as ferns and grasses.

The planting areas will be mid and low height shrub planting. These will be separated by low, neatly clipped yew hedges, adding structure and separation to the different planting spaces.



Bugle



Scaly fern



Polypody fern



Snowdrops



Giant Himalayan lily



Lily of the valley



Blue oat grass



Winter windflower



Pheasant tail grass



Carex grass



Clipped Yew

Shade-loving plants

Architectural Design Proposal

3.3 Landscaping Strategy

The medicinal garden.

Adjacent to the staff area of the new CDC building will be an external rest area, designed specifically for the use of CDC staff. This tranquil garden will be bordered by a low, neatly clipped yew or box hedge that separates it from the surrounding landscape.

The garden's paved areas will be mid-grey, granite aggregate concrete blocks, with edges defined by graphite-coloured blocks. Leading from the building into the wider landscape, silver concrete flag paving creates a seamless transition.

In reference to the unique history of the hospital, the garden's plant species have been chosen for their traditional associations with medicine and their historical medicinal purposes, creating a space that is both beautiful and relaxing.



Canterbury Bells



Chamomile



Soapwort



Block paving and edge



Lavender



Valerian



Flag paving



Witch Hazel



Selfheal



Honeysuckle



Echinacea



Juniper Tree

Medicinal plants

Architectural Design Proposal

3.5 Schedule of Accommodation

Waiting Area x 2
Reception
Office – 4 person
Interview Room
Changing Places
Baby Change
Baby Feed
WC x 2
Accessible WC
Sub Wait

Staff Changing Area – F
Staff Changing Area – M
WC x 2
Unisex Shower
Bev Bay

Cleaners Store
IT Hub and Server Room

Internal Plant Room
External Plant Room
Switch Room

Lung Function Test room
(C/E / Treatment room style)
Generic Treatment room x 5
Ultrasound Room
Ophthalmology Diagnostic
Room
Virtual Consult Room
Dexa Scanner Room
WC x 2
Staff Rest
Bay – Resus Trolley
Dark Room
Change
Phlebotomy
Dirty Utility
Clean Utility
Store – Equipment
Virtual Consult
Bay – Crash Trolley



Architectural Design Proposal

3.6 Design Principles & Concept

- 1 Patient wait is digitalised and monitored by reception.
- 2 Patient facilities are local to wait rooms but also separate from wait to provide privacy
- 3 Interview room provided next to the reception with two entry/exit points. Provides a safe, quiet space for confidential conversations and patient waiting
- 4 Clustered clinical treatment rooms to provide direct access for patients and staff with minimal travel time
- 5 Generic treatment rooms located on the building perimeter to provide natural light
- 6 Centralised clinical support for easy access from treatment rooms
- 7 Sub-wait to serve phlebotomy to reduce unnecessary patient movements through the building
- 8 Staff rest optimising staff break times as they don't need to travel to the main buildings for break facilities
- 9 Staff facilities at the back of plan to create a threshold between patients and staff and provide additional access through the back of the CDC
- 10 Plant at ground floor to reduce the CDC height and enhance the overall appearance
- 11 Outdoor, enclosed plant area (no roof)



Architectural Design Proposal

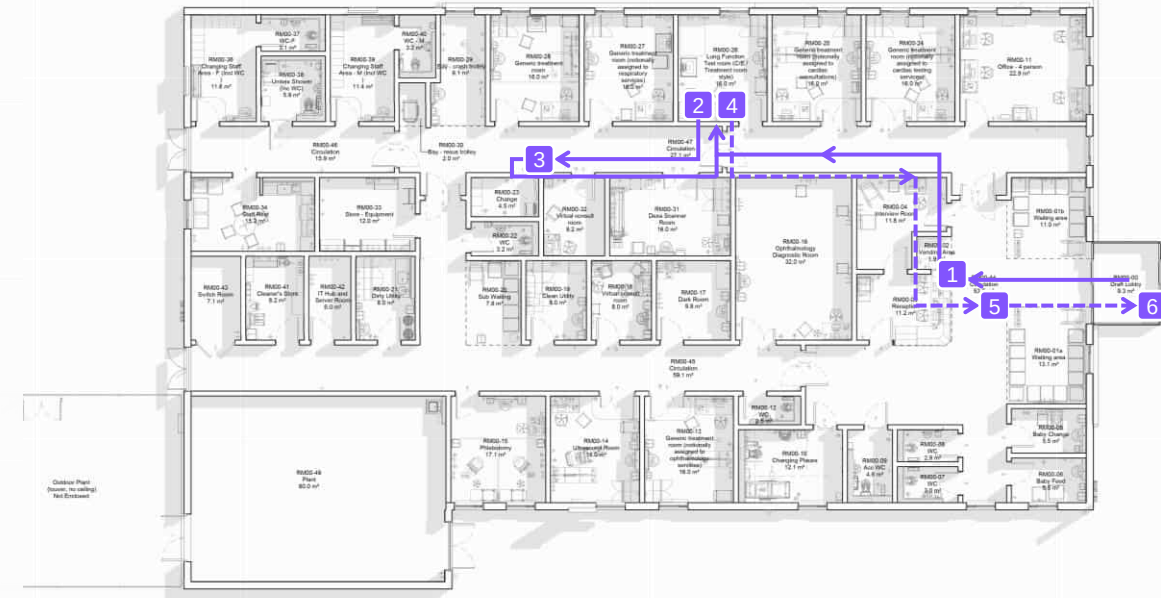
3.7 User Journey

- > Patient out
- > Patient in
- X Patient stage



Patient flow – Phlebotomy

- 1 Patient enters the CDC through the main entrance and signs in via digital kiosks in the waiting area
- 2 Patient is redirected to the phlebotomy waiting area
- 3 Patient is called into the Phlebotomy room for their appointment
- 4 If the patient is not stable e.g. lightheaded, they will be led back to '2' if not they will leave the CDC



Patient flow – General treatment/diagnostics room (lung function)

- 1 Patient enters the CDC through the main entrance and signs in via digital kiosks in the waiting area and waits in the main waiting area
- 2 Patient is directed to the general treatment/diagnostics room
- 3 Patient may be asked to walk 30m using the southern corridor
- 4 Patient is led back to complete diagnostics
- 5 Patient is directed to the reception area. Should additional treatments be required they will wait in main waiting room until redirected when they will repeat steps 2-3
- 6 Patient leaves CDC

Architectural Design Proposal

3.7 User Journey

- > Patient out
- > Patient in
- X Patient stage



Patient flow – Ophthalmology

- 1 Patient enters the CDC through the main entrance and signs in via digital kiosks in the waiting area
- 2 Patient is directed into the Ophthalmology diagnostics room
- 3 Should additional treatments be required they will wait in main waiting room until redirected when they will repeat steps 2-3
- 4 Patient leaves CDC



Patient flow – General treatment/diagnostics room (south of plan)

- 1 Patient enters the CDC through the main entrance and signs in via digital kiosks in the waiting area and waits in the main waiting area
- 2 Patient is directed to the general treatment/diagnostics room
- 3 Patient directed back to the reception
- 4 Should additional treatments be required they will wait in main waiting room until redirected when they will repeat steps 2-3
- 5 Patient leaves CDC

Architectural Design Proposal

3.7 User Journey

- > Patient out
- > Patient in
- X Patient stage



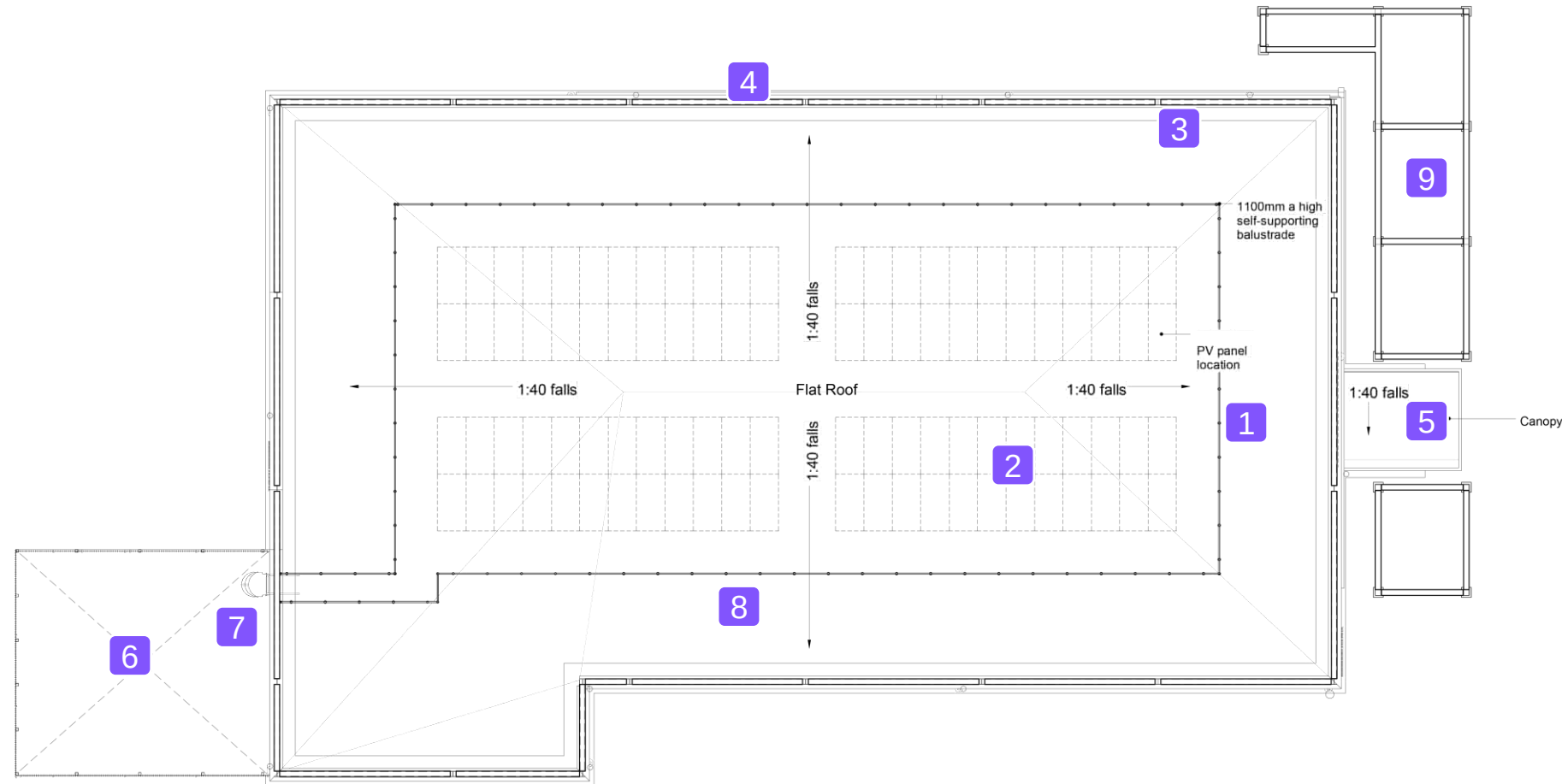
Patient flow – DEXA Scanner

- 1 Patient enters the CDC through the main entrance and signs in via digital kiosks in the waiting area and waits in the main waiting area
- 2 Patient is directed to the change and changes into gown
- 3 Patient is directed to the DEXA scanner
- 4 Patient is directed back to the change and dresses
- 5 Patient directed back to the reception. Should additional treatments be required they will wait in main waiting room until redirected when they will repeat steps 2-3
- 6 Patient leaves CDC

Architectural Design Proposal

3.8 Roof Plan

- 1 Flat roof with 1:40 falls
- 2 Proposed photovoltaic panels to comply with Approved Document L
- 3 Rainwater outlets penetrate the parapet wall into rainwater hoppers and downpipes.
- 4 350mm parapet wall to minimise the view to photovoltaic panels These will require maintenance once every 12 months. A fixed ladder is provided for access
- 5 Draught lobby canopy
- 6 Outdoor, enclosed plant area (no roof)
- 7 Safe and lockable access ladder to roof
- 8 1100mm balustrade to act as a safety barrier from if access to the roof is required.
- 9 Pergola at ground floor

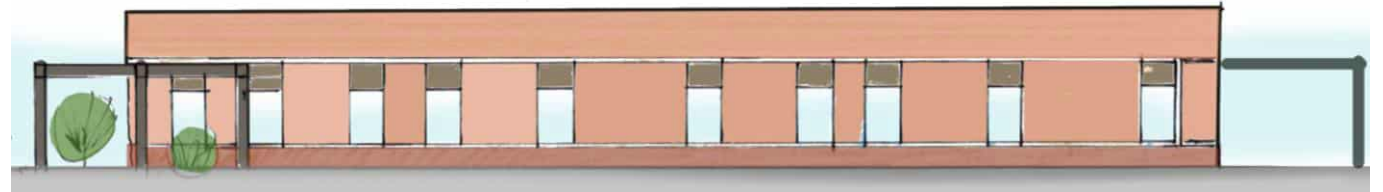


Architectural Design Proposal

3.9 Elevation Design Principles & Concept Sketches

Design Philosophy

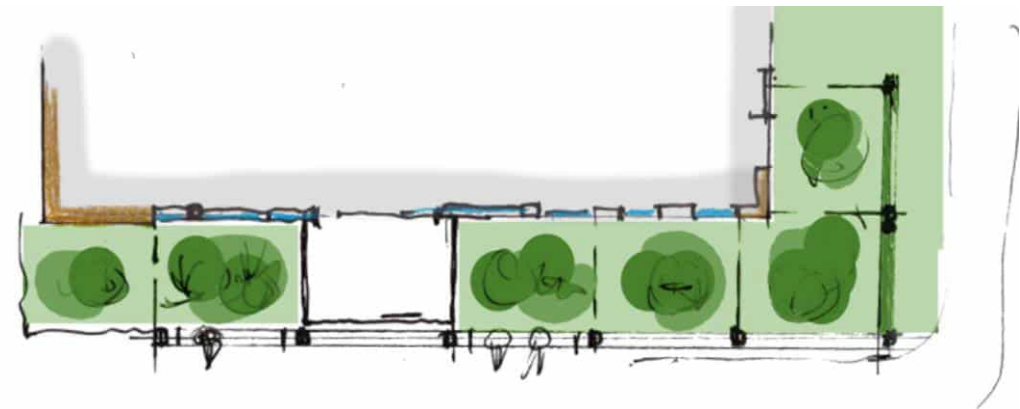
- A single-story brick building is proposed, in keeping with the massing on the overall site.
- Overall material choices that are reflected across the wider site. Darker textured brick at the base to anchor the building on the site.
- A lighter mixed colour brick is proposed to the top section of the building, utilising recessed brick, reflecting the details from the wider site.
- The use of panels above windows maximise openings, breaking up the brickwork façade, creating rhythm, but minimising the glazed area to reduce solar gain. The openings emphasise the modulation.
- Banding above the windows add visual interest whilst referencing details elsewhere on the site in a modern way. The banding also frames the entrance and more active, north side of the building.
- A pergola is proposed to link the building to the proposed landscaping, proposed in western red cedar this will initially be a red/orange wood fading to a soft silver. Both colour ranges have been considered in the choice of adjacent materials.
- The landscaping interacts with the pergola that wraps the around the elevation facing the Jubilee Building and the main entrance to the CDC. Over time the building will become embedded into the landscape through proposed climbing vegetation which will establish itself on the pergola.



Sketch North Elevation



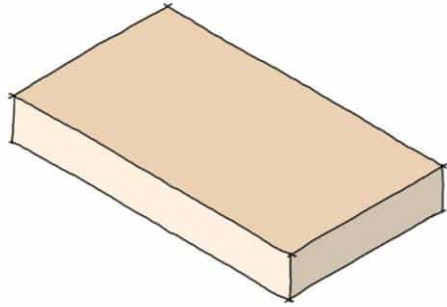
Sketch East Elevation



Sketch – External Entrance

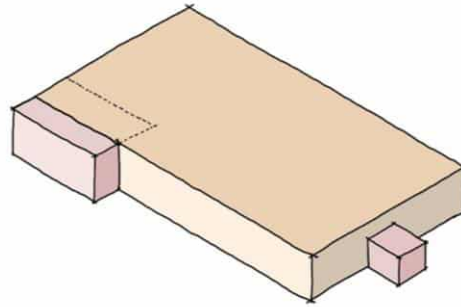
Architectural Design Proposal

3.10 Design development



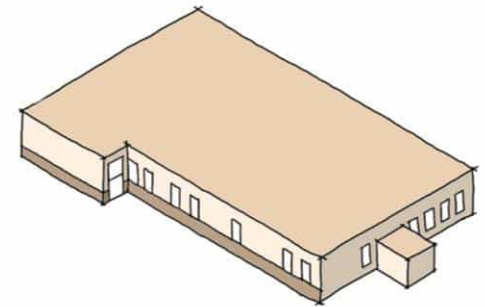
Simple, rational form

The main mass of the building is simple with a rational internal floor plan



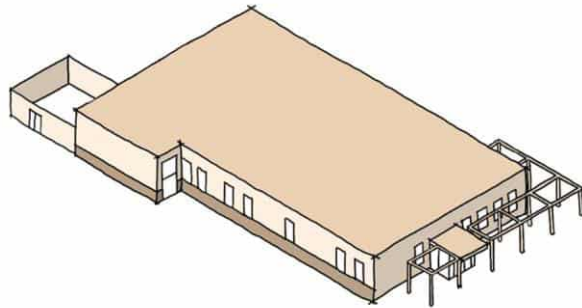
Plant and lobby

The requirement for plant meant that the plant space was increased. A draft lobby was added to the building to identify the entrance.



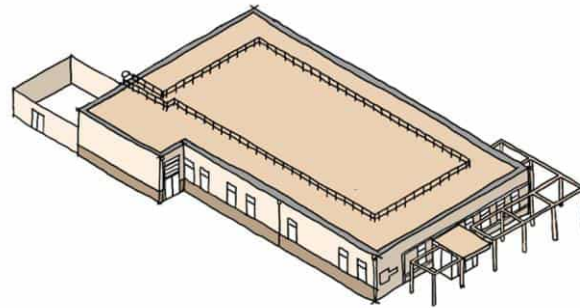
Voids and anchors

A darker band of brick anchors the building into the context. Tall windows and glazing help the upper part of the building feel light and less imposing.



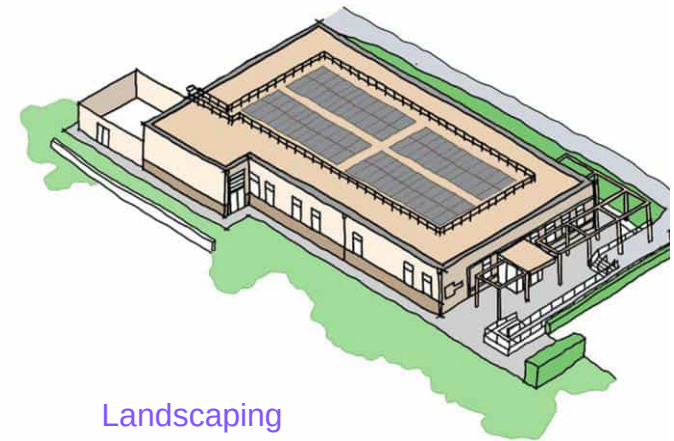
Canopy, pergolas and fencing

Pergolas have been added to the front and back of the building to create visual symmetry. The canopy and fencing help create more intimate welcoming spaces also well as concealing external plant areas.



Materials and detailing

The mixed brick façade and roof coping detail is sympathetic to the surrounding context whilst providing texture and interest. The false glazing panels provided scale against the existing landscape.



Landscaping

Planting, sloped pathing and external seating have helped to establish the proposal into the existing landscape, making it a destination on the site

Architectural Design Proposal

3.11 Elevation Design Principles & Concept

Design Approach

A key consideration for the design was how the CDC needs to be sympathetic towards the wider site & Jubilee building. The trust emphasised the local significance of the building and how locals were sceptical about having the CDC directly in front of the Jubilee.

Façade and Materials

The view from Holtye road is the most important view of the Jubilee for locals and visitors. The most prevalent feature of the Jubilee is the tower and spire and blocking this from the roadside view should be minimised. Throughout the design progress, consideration has been made to keep the height of the CDC to minimum to maintain a view of the Jubilee from Holtye road. From the sketches and sections, the design sits approximately a metre below the first floor of the Jubilee Building. The view of the CDC is obstructed by the planting to the perimeter of the site, however there is still visual interest created by tall windows and a textured brick facade. A guard rail has been introduced to provide safe access to the roof whilst ensuring a near unobstructed view of the jubilee above the parapet. The tower and spire are still very visible from the roadside.



Visualisation of CDC from Holtye Road



Visualisation of CDC from main hospital entrance – only the crown of the CDC is visible



South Elevation of the CDC



Existing image of Jubilee from Holtye Road

Architectural Design Proposal

3.11 Elevation Design Principles & Concept

The façade design takes in consideration the Jubilee Building, reinterpreting the materials and components aiming for a contemporary take. The text below analyses the different elements of the existing façade.

- 1 The Jubilee Building, uses brick in different bonds to break up the façade and create different textures.
- 2 Stone copings and coursing used to articulate the direct elements of the façade highlighting the windows different levels and entrances.
- 3 The vertical running soldier bond brick pattern at the top of the Jubilee façade, accentuates height.
- 4 Larger floor to ceiling window geometry is broken into smaller sections.



The proposed site features a strong predominance of brick facades. The design approach for the proposed CDC aims to continue the dialogue of being part of the whole but singular. This design draws on the red tones of the main hospital building while also considering the brown and buff tones present in the Jubilee Building. A notable characteristic of the Jubilee Building is its banding, which defines a clear sense of base, middle, and crown.

The proposed CDC building positively complements the Jubilee Building, rather than appearing to accidentally emerge from it, allowing the Jubilee Building to be clearly read so that it remains the dominant element as you approach the site.

The precedent study showcases contemporary interpretations of brick design, where a sense of base, middle, and crown is set but also incorporating materials like metal panelling or precast banding that illustrate the articulation and interest possible through extrusions and reassessment, and the natural masonry character that is achieved through the use of mixed-colour brick.

Precedents

Woonsite Westmalle. AIDarchitecten

School by a School / Studio Nauta + De Zwarte Hond. Photograph by Jordi Huisman

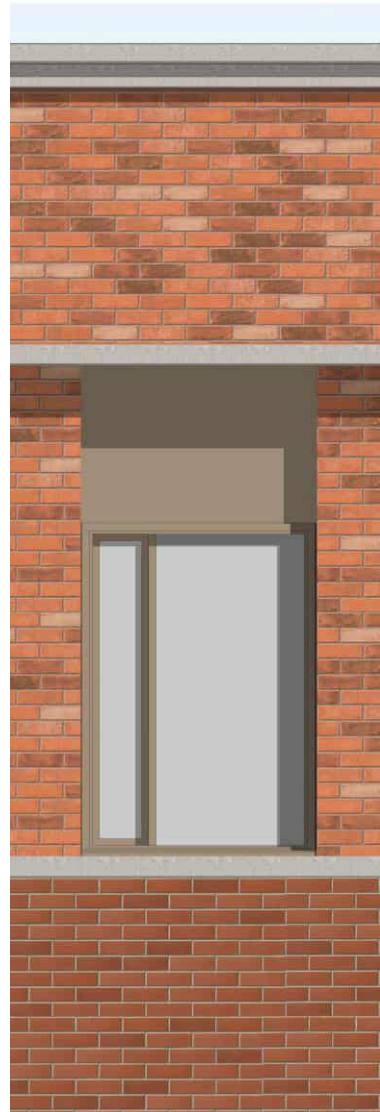
Beacon Heights, Church Rd Haywards Heath.

Electricity Supply Board Headquarters. Dublin Ireland, Grafton Architects & O'Mahony Pike

Architectural Design Options

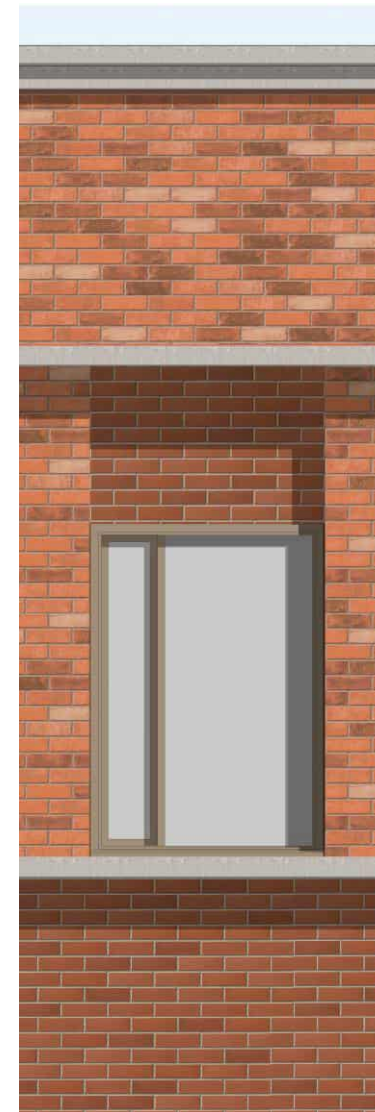
3.12 Elevations Material Palette Development

Following initial feedback from the LPA the design has been refined, breaking up the extent of the proposed facing brickwork, adding further detail above the building glazing. The next two pages explore possible ways to do this.



Option 1 -

Traditional Spandrel Panel



Option 2 -

Continuation of the base brick detail.

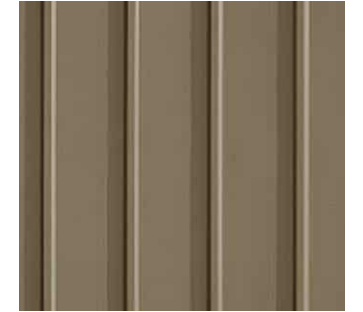
Architectural Design Options

3.12 Elevations Material Palette Development



Option 3 -

Extending the concrete detail
with a fluted concrete panel



Option 4 -

Profiled metal spandrel panel

Architectural Design Options

3.12 Elevations Material Palette Development

Different brick facades have been tested with varying textures and colour variations. Option 2 has been taken forward into the design.

Option A -

Vibrant, red toned, varied brick with sanded texture, and flat, red brick base.

Option B -

Muted, brown toned, varied brick with buff brick base. Both with sanded texture

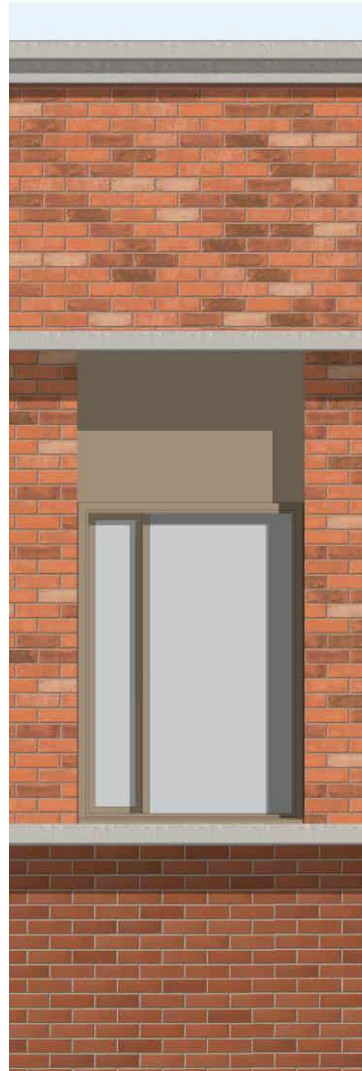
Option C -

Muted, brown toned, varied brick with sanded texture, and flat, red brick base.

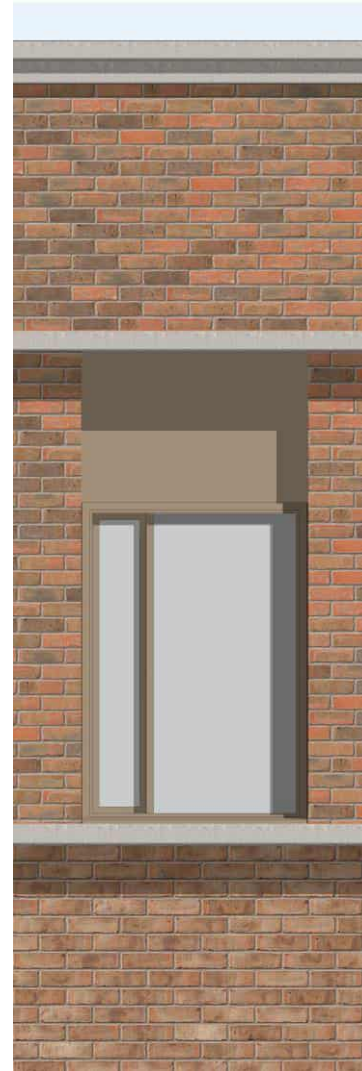
Option D -

Muted, brown toned, varied brick with sanded texture and flat brown brick base

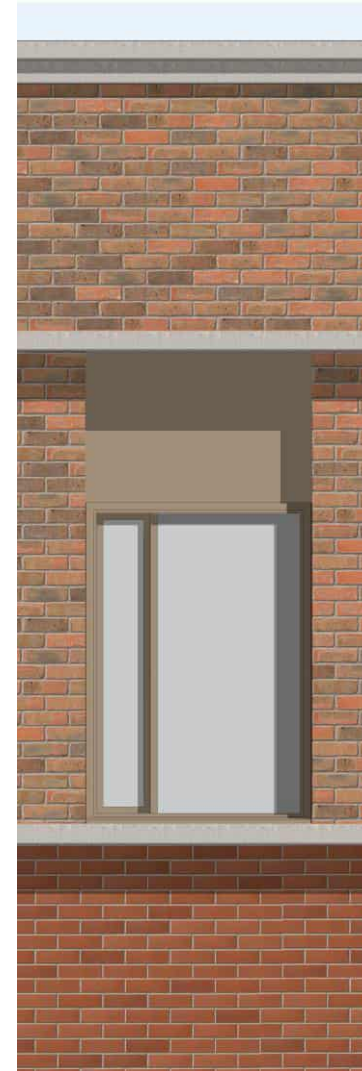
Option A



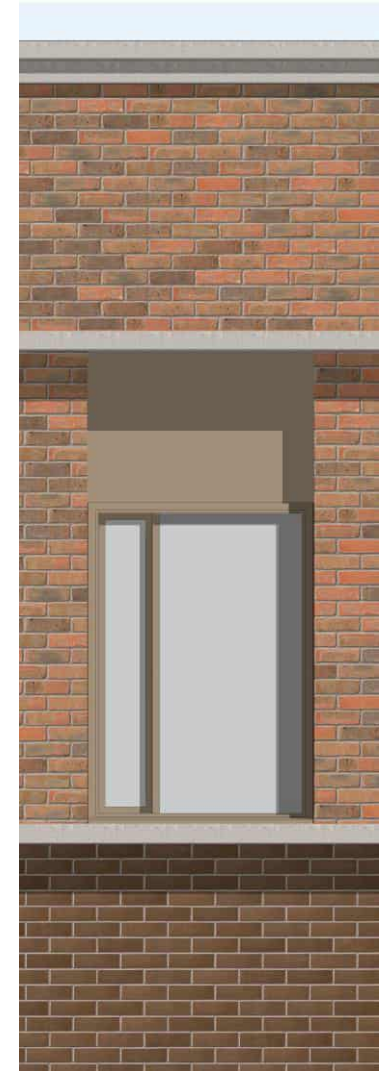
Option B



Option C



Option D



Architectural Design Proposal

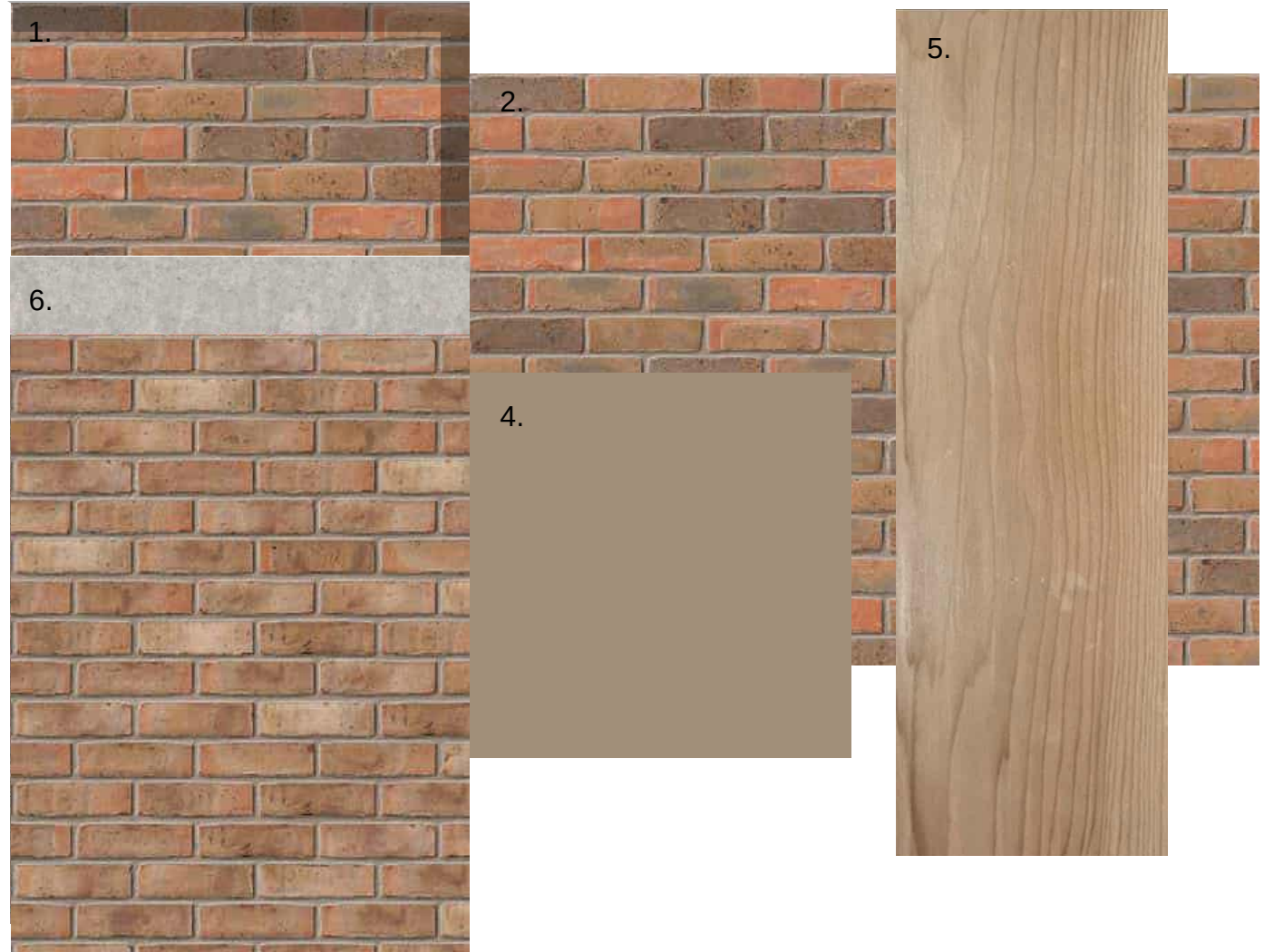
3.13 Emerging External Elevations Material Palette

Option 1 & B

Option 1 & B has been taken forward, for its crisp and appropriate aesthetics. A light mixed colour brick with hues of red, brown and buff façade design, with light mortar and accents of warm timber, crisp precast concrete banding and complimentary aluminium, give as contemporary look to the CDC which complements the site.

Emerging External Elevations Material Palette

1. Bexhill Red A0825A – Recessed Stretcher Bond. A textured brick which provides some colour variation.
2. Bexhill Red A0825A – Stretcher Bond
3. Birtley Olde English Buff A2730A - Stretcher Bond. A neutral brown toned brick with a textured face.
4. PPC Aluminium RAL 1019. Soft olive brown, harmonising with the adjacent landscaping and proposed timber pergola.
5. Western Red Cedar
6. Pre-Cast Concrete Banding & Coping. Precast concrete panels, with textured surfaces and warm pigments.



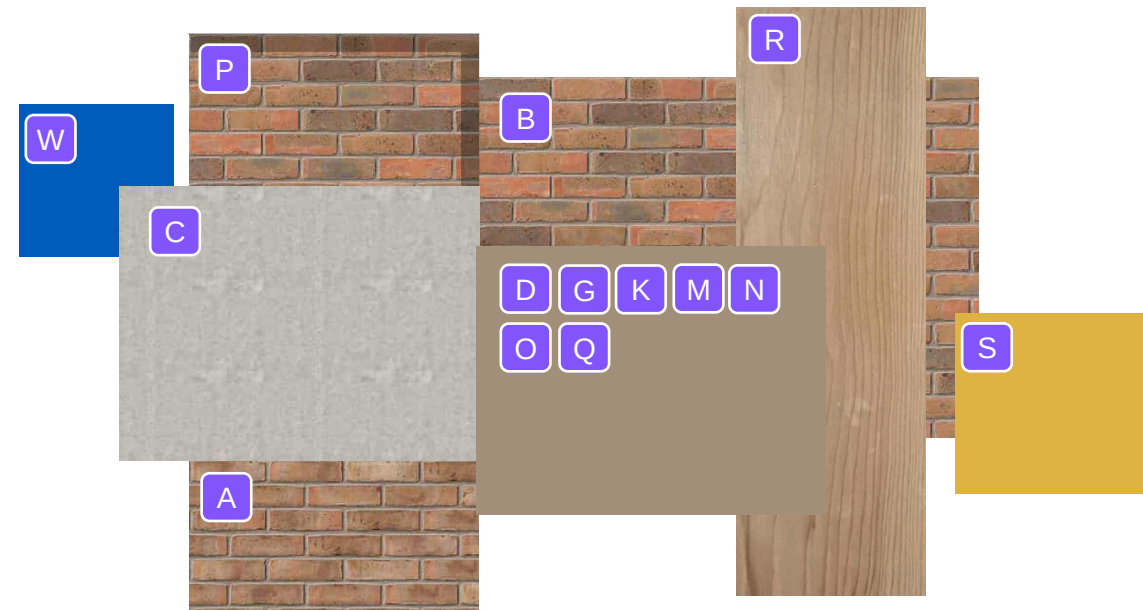
Architectural Design Proposal

3.14 Proposed Elevations & Material Palette

- A** Brick - Birtley Olde English Buff A2730A - Stretcher Bond. Light buff mortar or similar.
- B** Brick - Bexhill Red A0825A – Stretcher Bond. light Buff Mortar
- C** Smooth Precast Parapet Capping & Banding
- D** Curtain wall system - Glazing, RAL 1019.
- E** 1100mm a high self-supporting balustrade, galvanised finish PV area on the roof.
- F** Retaining walls - coping stone faced.
- G** Fixed and openable Windows with glazed in smooth metal spandrel panel above, RAL 1019. Restrictors to be provided where required.
- K** Down pipe with 300m hopper box at the head RAL 1019.
- M** Thermally Broken Aluminium Glazed double door w/ window above and metal spandrel panel. RAL 1019.
- N** Thermally Broken Aluminium Plant double leaf door. RAL 1019.
- O** Aluminium Metal Louvers panels.RAL 1019.
- P** Brick - Bexhill Red A0825A – Recessed Stretcher Bond, light Buff Mortar
- Q** Overhang lightweight Aluminum canopy. RAL 1019
- R** Western Red Cedar Pergola - 200x200mm square section
- S** PPC Aluminium Canopy soffit RAL 1012
- T** Thermally broken aluminium openable glazed window, opaque.
- U** External ramp/stairs metal railing PPC finished. RAL 1019
- V** Western red cedar vertical slatted timber door to external plant enclosure.
- W** NHS Blue Signage



Proposed East Elevation



Proposed Elevations Material Palette

Architectural Design Proposal

3.15 Elevations

- A** Brick - Birtley Olde English Buff A2730A - Stretcher Bond. Light buff mortar or similar.
- B** Brick - Bexhill Red A0825A – Stretcher Bond. light Buff Mortar
- C** Smooth Precast Parapet Capping & Banding
- D** Curtain wall system - Glazing, RAL 1019.
- E** 1100mm a high self-supporting balustrade, galvanised finish PV area on the roof.
- F** Retaining walls - coping stone faced.
- G** Fixed and openable Windows with glazed in smooth metal spandrel panel above, RAL 1019. Restrictors to be provided where required.
- K** Down pipe with 300mm hopper box at the head RAL 1019.
- M** Thermally Broken Aluminium Glazed double door w/ window above and metal spandrel panel. RAL 1019.
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- O** Aluminium Metal Louvers panels.RAL 1019.
- P** Brick - Bexhill Red A0825A – Recessed Stretcher Bond, light Buff Mortar
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- T** Thermally broken aluminium openable glazed window, opaque.
- U** External ramp/stairs metal railing PPC finished. RAL 1019
- V** Western red cedar vertical slatted timber door to external plant enclosure.
- W** NHS Blue Signage



Architectural Design Proposal

3.15 Elevations

Pre-Planning Consultation and Response to Feedback

As part of the pre-application process, a constructive consultation was held with the planning authority to review the initial design proposals for the Community Diagnostic Centre. The feedback received was both detailed and valuable, offering insights to enhance the scheme in alignment with local planning policies and contextual sensitivities.

The RIBA Stage 2 design for the building that was presented as part of the pre-planning application, has since been developed to RIBA 3 and adjusted where possible to address the topics raised. Below is a summary of how the issues identified during the consultation have been addressed.

Site Layout and Accessibility

- Introduced a new pedestrian route from the main car park, cutting across the lawn to directly link with the western entrance.
- Retained the east-facing main entrance to accommodate ambulance access and maintain wheelchair accessibility.
- The existing path that runs in front of the Jubilee Building is going to be upgraded and made level, but those works are not part of this planning application.

Extent of brick and development of elevation including fenestration.

- Reduced the building's height by approximately 700mm by replacing the parapet with a lower upstand, minimizing the perception of bulk.
- Enhanced the western elevation with additional windows and glazed doors to improve visual appeal and provide natural light to internal spaces.
- Added a window to the Baby Feed room for functionality and

daylight.

- Introduced false panels projecting into the brick to enhance window proportions and create visual interest.
- The concrete banding at high level has also been refined, and for significant lengths, the lower string course has been removed. Any remaining banding is used in a more focused way to frame collections of windows or doorways.

Balustrades and Guarding

- Galvanized steel is an industry-standard material known for its durability, corrosion resistance, and cost-effectiveness, making it ideal for long-term use. Its natural finish complements the rest of the materials of the building. The choice of a galvanized finish, rather than painting it black, ensures alignment with the surrounding and enhances its subtle reflectivity against the blue sky, creating a balanced, cohesive, and visually appealing design while avoiding the additional costs of black coatings.

Materials and Colour Scheme

- Selected a light-coloured multi brick with tones pink, brown and buff, with light mortar for a crisp, modern aesthetic that complements existing buildings without mimicking.
- Incorporated a different brick in the base than the main body brick for variety and character.
- Used coordinated metal finishes for windows, doors, cladding, and rainwater downpipes.
- Added softer timber colour timber pergolas.
- The primary function of this pergola structure is to break up the massing of the building and create a link with the surrounding landscape, seating areas and pathway. Over time, plants will climb the pergola and add further interest.

External works & Integration with Landscape

- Developed pathways and seating areas to connect the building with the surrounding landscape.
- Added a decorative timber screen to enclose plant areas and visually link with the pergola.

Visual Representations and Context

- Produced photomontages showing the building's integration with the streetscape and hospital site.
- Included a site section to illustrate the building's height relative to adjacent structures and landscape features.

Follow-Up Consultation and Positive Feedback

- A follow-up meeting was held on 15 January 2025 with the planning authority to present the design updates made in response to their initial feedback.
- During the discussion, the concept of a new pedestrian pathway connecting directly to Holtie Road was introduced, which was positively acknowledged. Additionally, it was noted that the south elevation had previously appeared flat; this feedback has been addressed, and the elevation has been further developed to enhance its visual interest.

Architectural Design Proposal

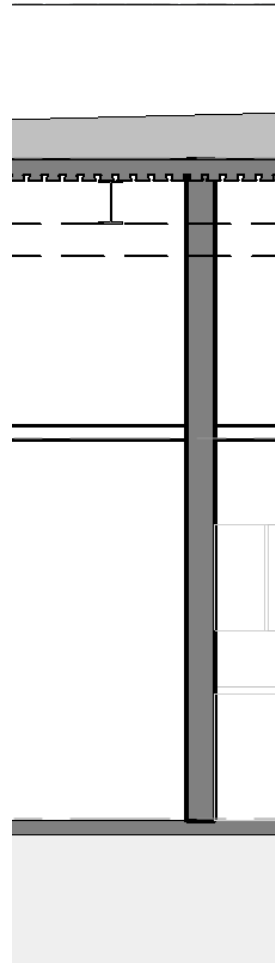
3.16 Sections

The CDC is designed to the key height dimensions illustrated below. The CDC has been designed to work either as a traditional design or a modular design, however it is understood that there is a preference for this building to be constructed using traditional steel beams and columns.

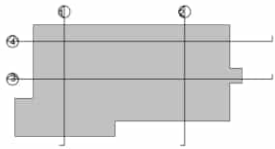
The building will be constructed using tradition steel beams and columns with a composite slab. This will support the roof build up which is slightly pitched for drainage purposes. The structural depth is 685mm

The MEP zone has a depth of 1200mm to compensate for the level of ventilation in clinical spaces. Some rooms have 10 air changes so require a higher level of ventilation. This depth also allows service runs to overlap each other

The ceiling heights are 2700mm in height as specified by the health building notes. This is to facilitate large equipment required in these rooms. It is proposed that in corridors and spaces where it is acceptable, the ceiling will be lowered to 2.4m to assist the MEP zone reduction in height to lower the overall height of the building. TBC
An allowance of 100mm is provided for the ceiling build-up.

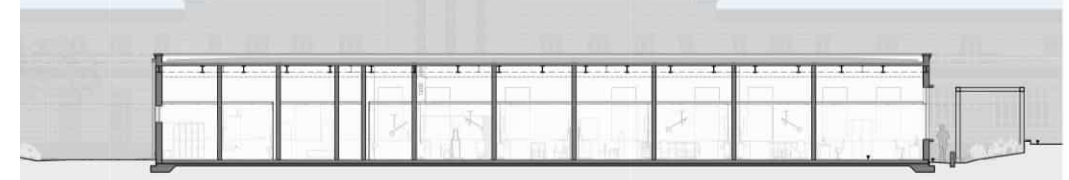


Key plan



Section 3

Section 4



Section 1



Section 2



Architectural Design Proposal

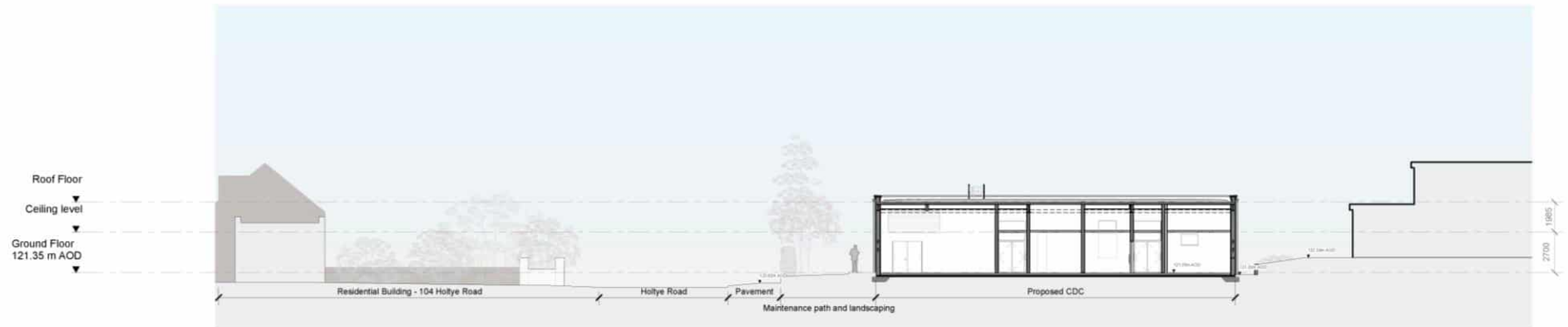
3.17 Long sections

These sectional drawings illustrate the relationship between the Jubilee Building, the proposed CDC building, the main road, and the house on the opposite side of the road. The design intent is to position the CDC building discreetly behind existing hedges and large trees near Gate Two of Queen Victoria Hospital. From the main road, the view will predominantly feature the Jubilee Building tower, with partial visibility of the Jubilee Building and the CDC building.

Key plan



Site Section 1



Site Section 2

Architectural Design Proposal

3.18 Access Strategy



There are three different walking routes which can be taken to access the site: from the main patient carpark, from the staff car park and from the bus stop. The route from the car park utilise the existing path in front of the Jubilee Building. The route from the bus stop has been created to provide direct access to the CDC from the bus stop by creating a path through the existing retaining walls and landscaping. All routes are designed to be pedestrian friendly with inclusive design in mind.



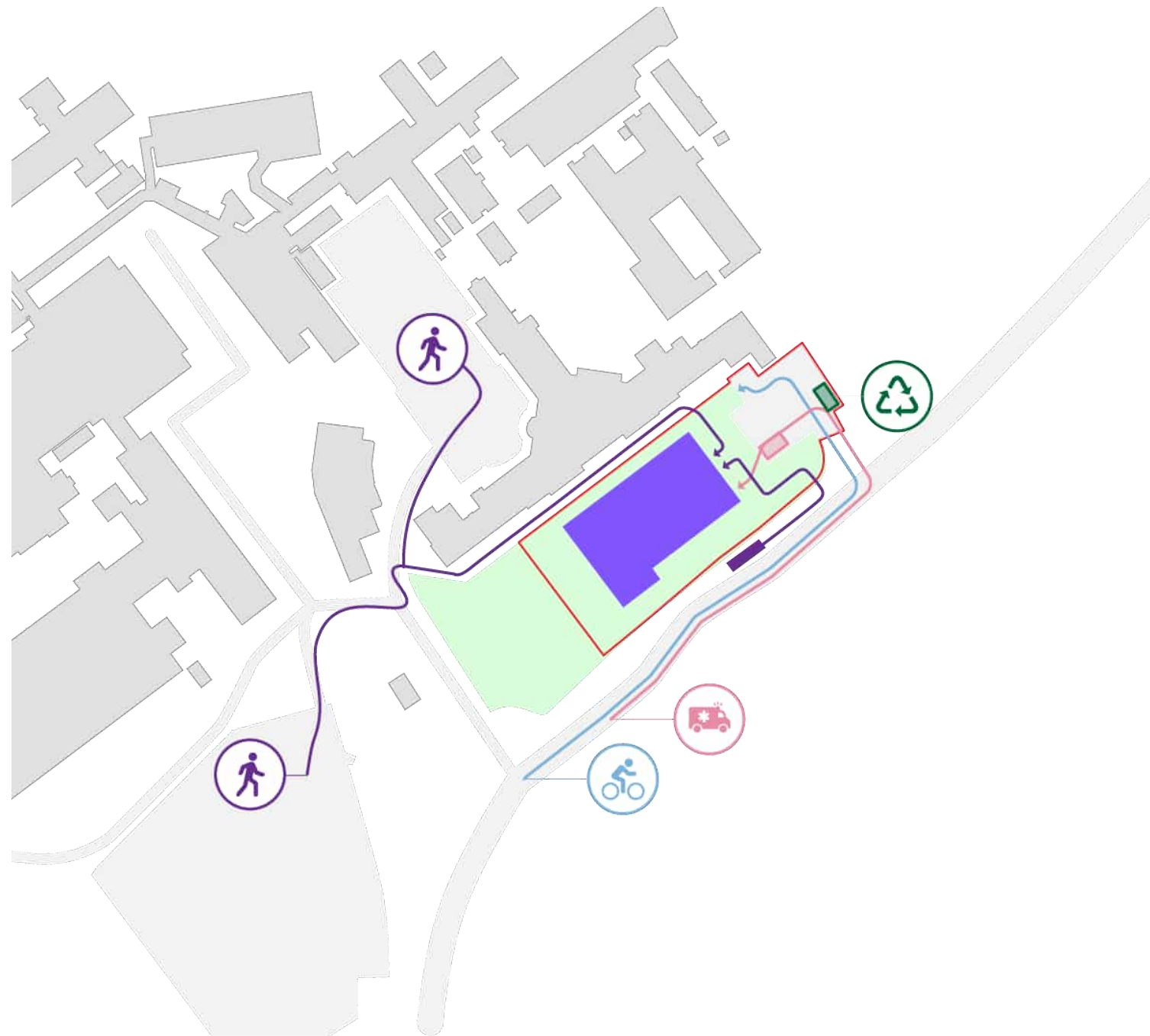
Cyclists access the CDC through the existing carpark to the east. A bicycle shelter is located to the northeast of the CDC, this connects to a pedestrian path so that cyclist can be kept separate from carpark traffic after dismounting their bikes.



Emergency vehicle access to the CDC will be through the existing car park. The pink square identifies the emergency parking space which ambulances can use.



The waste store is the left of the site entrance. For the removal of waste, a tug will utilise the existing service yard accessed from Gate 3 on Holtye Avenue, in the north-east corner of the QVH site. Pedestrians and vehicles are kept separate to mitigate collisions.



Architectural Design Proposal

3.19 Servicing Strategy

Plant areas are located to the south of the site, along the main access route where occasional vehicle access is required by the energy provider for maintenance, servicing and replacement.

Deliveries and refuse collection takes place through the main carpark.

Fire tender access will be through the main access road. A designated space for the fire tender has been allocated in main carpark area if required. For more detail refer to the fire strategy report and drawing.

See page 21 for the carpark design detailing accessible parking spaces and carpark design.



External plant area



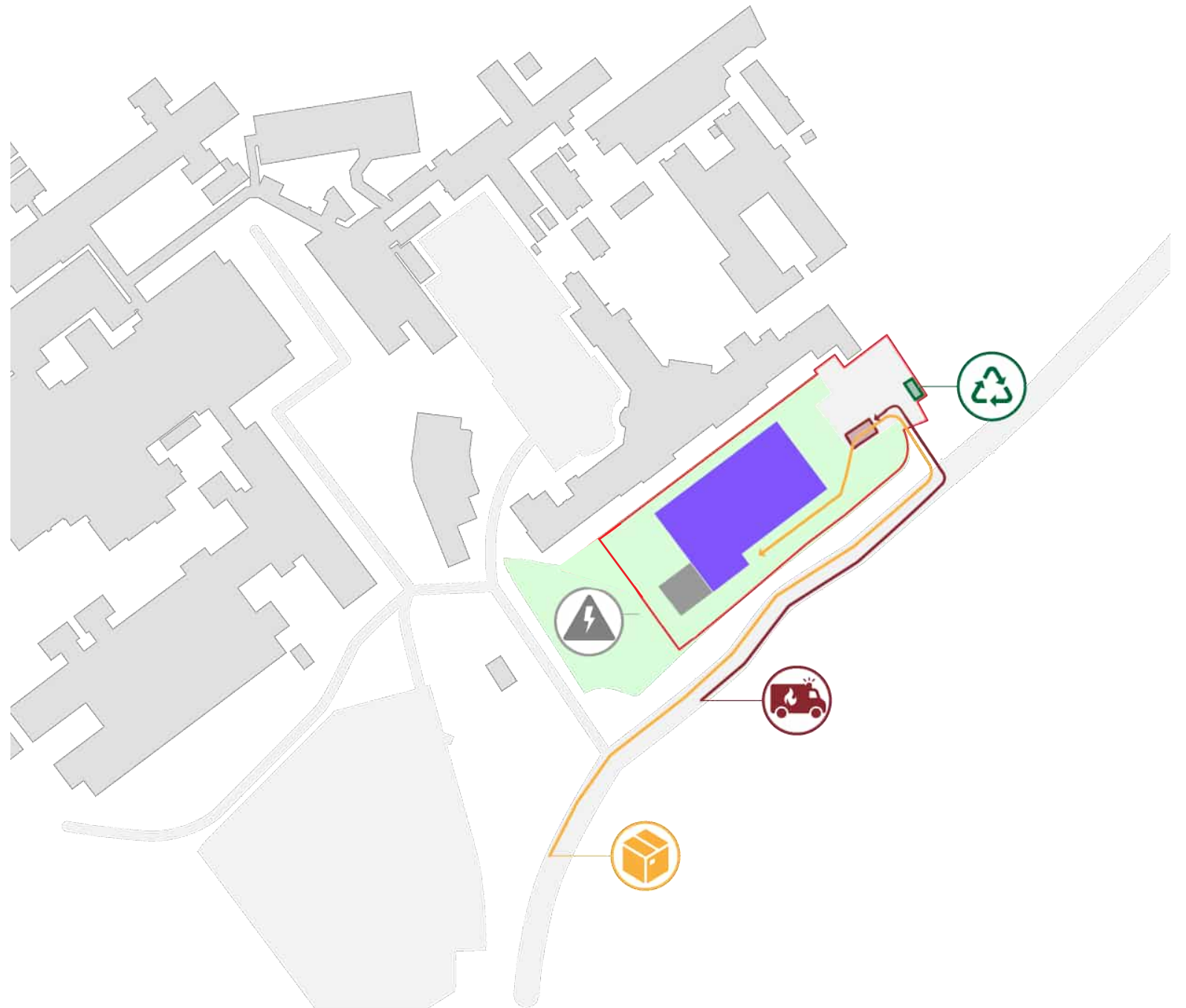
Fire tender access and parking space



Delivery collection route



Refuse collection route



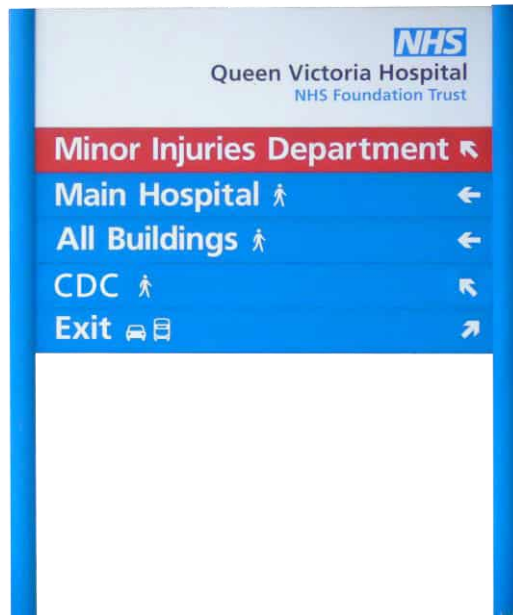
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3.20 Signage

To help with wayfinding, signage should be utilised both on the building and across the site which directs staff and patients to the CDC. The current site layout is confusing and wayfinding is difficult, it is important that it is easy to navigate the site to locate the CDC, signage will help patients to do this.

The proposed CDC building within the hospital estate necessitates a comprehensive update to the hospital's signage system. This ensures clear navigation, consistent branding, and seamless integration, with accessible and visible wayfinding for all users.

Floor mounted signage in parking areas and adjacent to paths to direct users to the CDC. Below is an indicative signage update to current site signage.



Wall mounted signage, with the building name to identify the building



A East elevation

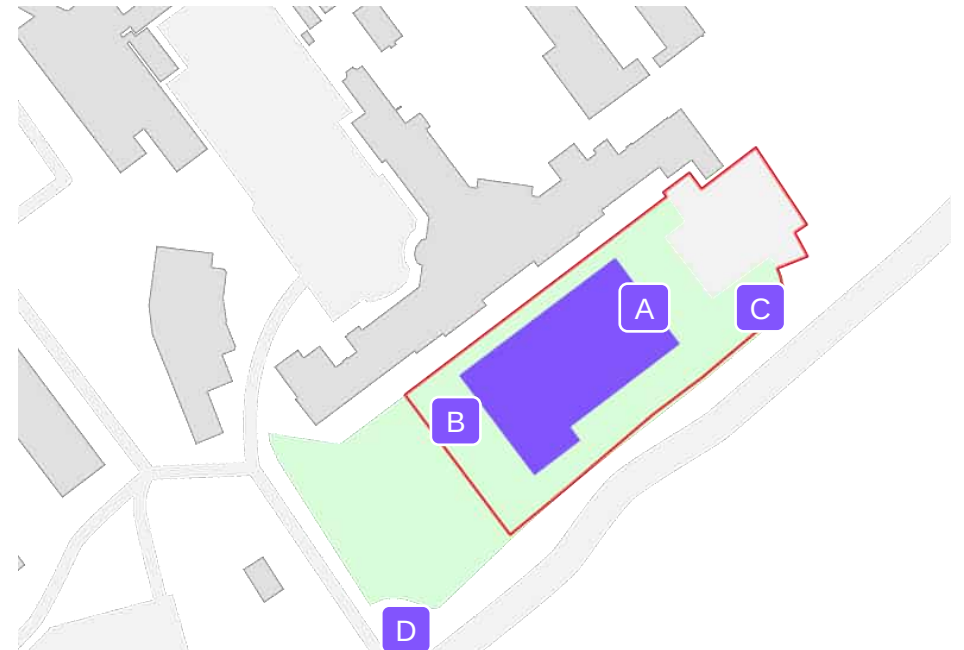


B West elevation

C Existing signage at gate 2



D Existing signage at main gate



Architectural Design Proposal

3.21 Maintenance Strategy

CLEANING STRATEGY

The building has been designed with a practical cleaning inspection and maintenance strategy in mind. The primary method for window cleaning will utilize a water-fed pole, capable of reaching heights of up to 10 meters.

MAINTENANCE STRATEGY

External inspections of the building will be conducted as needed, using either an external mobile platform or scaffolding.

The glazing should be designed for external replacement, ensuring that operations inside the building are not disrupted. All plant areas are located on the ground floor, while photovoltaic (PV) panels are situated on the roof.

Large MEP (Mechanical, Electrical, and Plumbing) equipment replacements can be transported from the main car park to the plant areas using trolleys, fixed-wheeled moving skates, or similar equipment.

For the maintenance of the photovoltaic (PV) panels on the roof, a safe and lockable ladder is provided on the south elevation for access. Additionally, a 1500 mm clear zone around the panels has been designated to facilitate safe access and maintenance.

BALUSTRADE AND GUARDING

The balustrades in the roof plant areas feature an 1100 mm high metal free standing barrier system.

VEHICLES

Emergency fire tender access has been planned via the main access road to the site.

Managed deliveries and service vehicles will have access to a back-of-house service area through a pedestrian zone, connecting the existing car park to the southwest

entrances. This area is separated from the main entrance.

Please note that an enclosure for the generator, bulk fuel storage, and substation located outside the site is positioned further south.

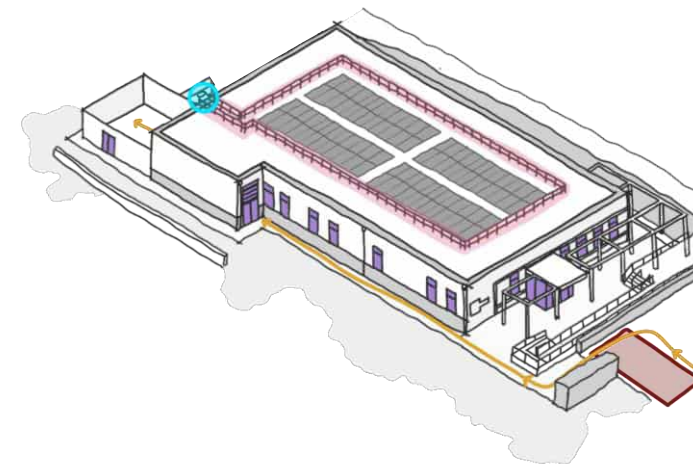
MEP PLANT

Routine maintenance is assumed to occur at regular intervals (monthly). The plant area can be accessed via the ground floor, and it is assumed that any replaced items will fall within manual handling restrictions.

Exceptional or significant planned maintenance is assumed to be irregular, occurring at intervals greater than 10 years. For the replacement of large plant items, a mobile wheeled device or similar equipment will be necessary to transport items from the car park to the plant areas.

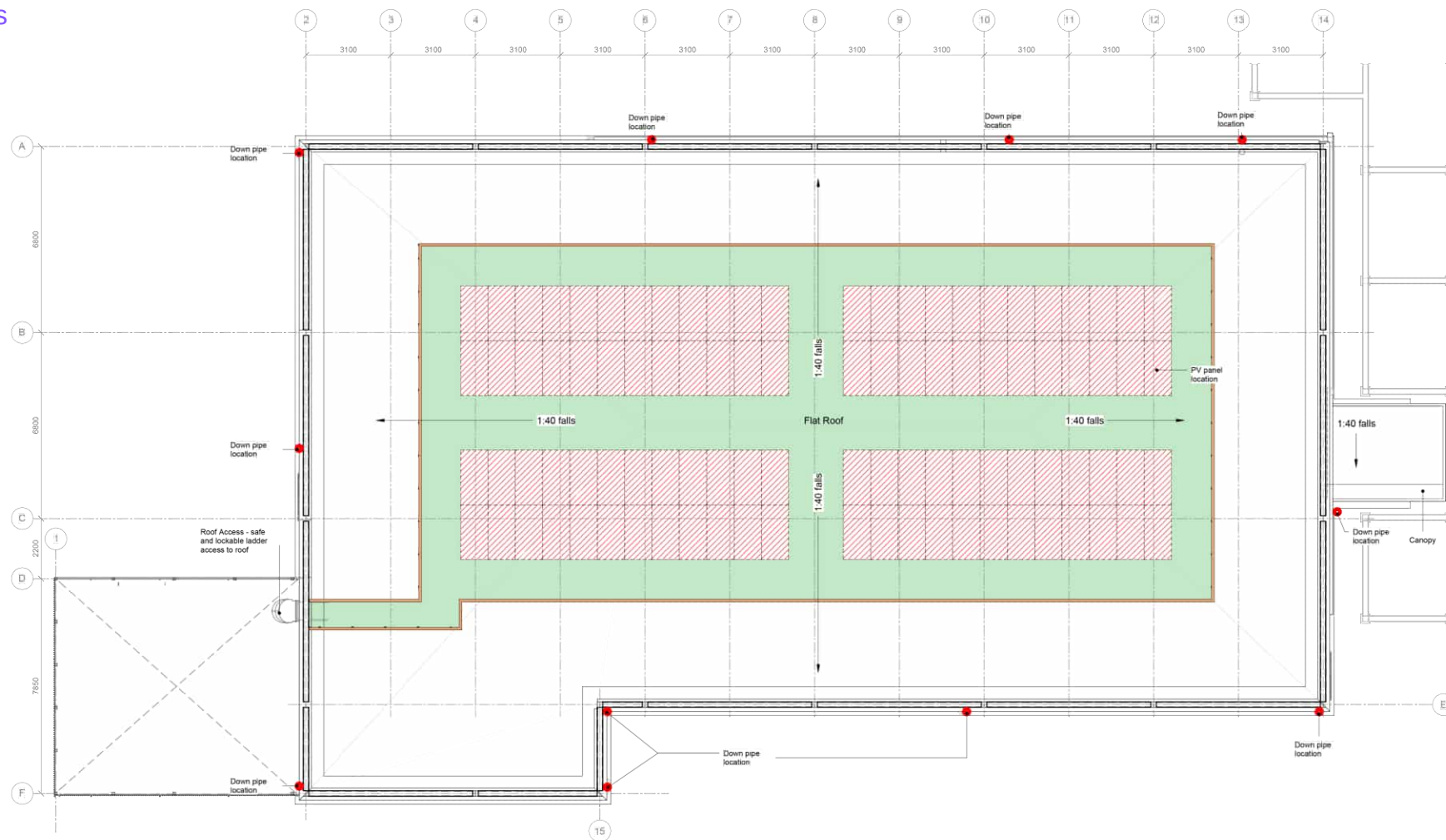
Access to the roof PV area is available from the south side of the site via an external ladder, leading to a flat roof where a safe area is demarcated by barriers. PV replacement will require a lifting device such as a MEWP or lifting platform to carry the panels to the roof level.

Please refer to the roof plan on the following sheet for additional details.



Architectural Design Proposal

3.22 Maintenance Strategy – Roof access



- 1100mm a high self-supporting balustrade
- Indicative PV panel location
- Roof plant access route - plant and PV maintenance/replacement
- Down pipe

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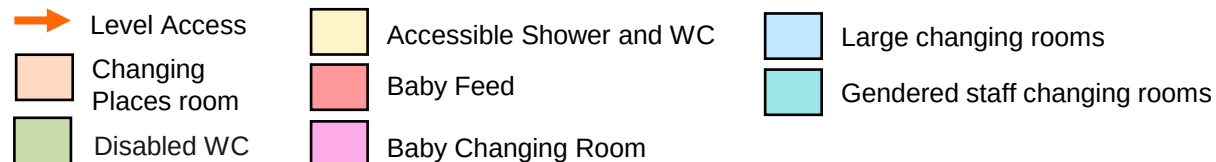
3.23 Inclusive Design

The design provides step-free access to the main entrance using a ramp located at the front of the building.

In addition to the above, the below items provide further accessibility and inclusivity within the design:

- Main entrance and FM Support / Staff entrance will have level thresholds.
- Accessible WC/Shower in staff area.
- Accessible WCs in patient areas and waiting room area.
- Gender neutral WCs.
- Accessible 'changing places' BS8300 sized shower room with WC.
- Large changing room for patients.
- Changing Places equipped with hoist. Refer to Changing Places: The practical guide (CPT Funding 2021 England only – Local Authorities reference)
- Baby change facility within the waiting area.
- Baby Feed room within the waiting area.
- Clear, visually contrasting signage throughout
- 1900mm wide corridors - Sufficient space for wheelchair and ambulant person to pass each other comfortably. Refer to HBN_00-04 - Page 11 - figure 13

The diagrams to the right indicate the elements of inclusive design.



4.0 Proposed Visuals

4.1 QVH gate 2 entrance, looking from carpark

4.2 Holtye Road, looking at CDC

4.3 QVH main hospital entrance, looking at the garden

4.4 QVH main hospital entrance, looking from Holtye Road



Proposed Visuals

4.1 QVH gate 2 entrance, looking from carpark



Proposed Visuals

4.2 Holtye Road, looking at CDC



Proposed Visuals

4.3 QVH main hospital entrance, looking at the garden



Proposed Visuals

4.4 QVH main hospital entrance, looking from Holtye Road



Visualisation of CDC from main hospital entrance – only the crown of the CDC is visible

