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Our vision for the future

Huddersfield Royal Infirmary (HRI)

- A new A&E
- Investment in existing buildings

Calderdale Royal Hospital (CRH)

- Additional wards
- 2 new theatres
- A new A&E
- A Children's A&E











Journey so far



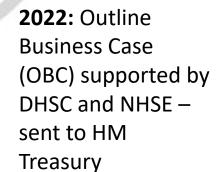
2013-16: Strategic engagement and testing with partners

2016: Public Consultation undertaken and views fed into final proposals

2019: Strategic **Outline Case** approved by **HM** Treasury



and DHSC



2022: HRI A&E business case approved

> **2022:** HRI A&E engagement and design completed

> > **2023:** HRI A&E constructed

2024: HRI A&E

opens



2013: Strategic Case of Need and proposals developed

Design Brief



The design was based on feedback from patients, members of the public, stakeholders and colleagues about what matters most to them.

They described their aspirations for modern health services, delivered in buildings that:

- offer a healing and therapeutic environment that is welcoming, calm and provides a light environment with external views
- is accessible and inclusive, supporting diverse patient needs
- ensures privacy and dignity
- enables social interaction.

A large number of design decisions were informed by feedback – here are a small selection...





You said:

"Provide sufficient ambulance bays."

"Patients arriving by ambulance should be admitted under a canopy that provides protection from the elements"



"Generous reception area facilitating security screens that will facilitate patient confidentiality and full visibility of the waiting area"



We did:

Using ambulance activity data we have identified how many bays are needed to accommodate ambulance drop-offs to minimise the risk of ambulances queuing.

The ambulance entrance features a large canopy.

The spacious and light reception area includes a number of features such as a wheelchair accessible space, full height security screens and positioning that allows visibility of the entrance and waiting area.



You said:

"All adult patients should arrive at the same place to be triaged to the most appropriate place – e.g. primary care, assessment unit, or emergency department."



We did:

Located a new assessment area between the ambulance and walk-in entrances, providing equitable access to the triage area.

"Move from a couch-centric to a chair-centric approach to patient examination. This is a better use of space and clinically preferred for some patients such as older people who can decondition quickly when laid down."

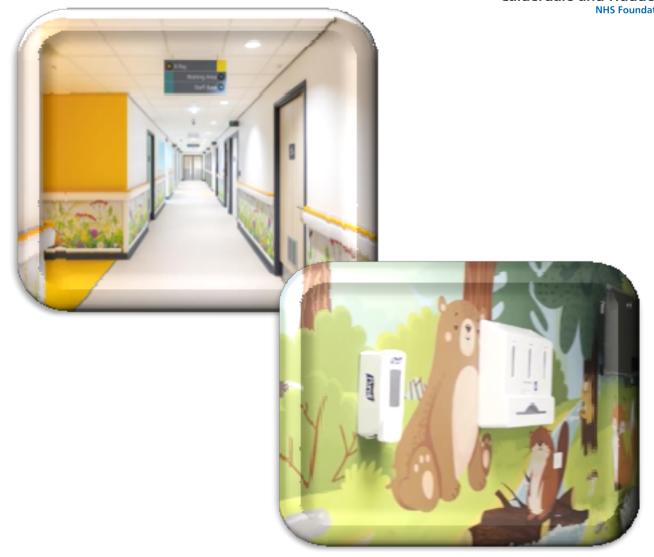
The cubicles have been designed to facilitate privacy and room for the required equipment in addition to the chairs used during patient examinations.



Paediatric Department

You said: "All paediatric patients should have access to separate facilities to adult patients"

We did: Created a purposebuilt paediatric emergency department with large waiting room and bright, spacious treatment areas.





Sister, Emmie Haxby, said: "It's a really lovely space to work in, and the Majors area feels calmer for having more space. The noise levels are so much better than the old department.

"I also think that because there is more room to work in, that colleagues feel able to use their initiative, rather than relying on the Nurse in Charge to come up with solutions.

"Morale certainly feels like it has improved."



Advanced Clinical Practitioner, Elana Watson-Walker, said: "I feel like it's something to be proud of. It's an uplifting place to work, the environment is a lot fresher than before.

It's taking a bit of getting used to the new layout but after a couple of shifts it felt like we'd all settled in."



Lindsey brought two-year-old Caleb in as he had a fall and he had been limping. She said: "I'm really grateful for this new space, it's so much better than the old A&E.

"The staff have been really clear about what's going to happen, and having some toys to play with and the television is also great for other young children."



Patient, Mark, said: It's clean and bright.
Compared to the old A&E it feels like it's gone from being Victorian to modern."





Adding value beyond construction





















