

Critical Care Ward Conversion
- Queen's Medical Centre (Nottingham)

An 'exemplary' conversion project at Queen's Medical Centre

£4m

/ Project value

January 2020

/ The project commenced

November 2020

/ The project was completed

An "exemplary" design and build scheme, we helped optimise the functionality of one of England's largest hospitals. The £4m budget project at the Queen's Medical Centre (QMC), Nottingham, converted a ward space that was originally developed in the 1970s into a modern, cutting edge Critical Care Ward. Supporting the Nottingham University Hospitals (NUH) NHS Trust in delivering upon its "Tomorrow's NUH" strategy, the complex upgrade was completed in November 2020, ahead of programme and inside budget. Notably, our programme end date remained fixed despite the pressures associated with the Covid-19 pandemic. Working collaboratively with the Trust, and utilising interactive 3D models, we were able to design the package of works according to the priorities of the hospital's clinical staff, particularly around space maximisation. Significantly, through proactive early mitigation, we were also able to ensure that the Guaranteed Maximum Price (GMP) did not increase.

The brief

The NUH NHS Trust required a contractor to advance its modernisation programme for the QMC's Critical Care Wards. We were appointed as the Principal Supply Chain Partner via a call-off agreement as part of the ProCure22 Framework to complete this major conversion package. The work is part of a wider £25m Critical Care Expansion Programme.



"An exemplary project. Works were of high quality, completed on time and within budget."

Henry Wade
Nottingham University Hospitals NHS Trust

“GRAHAM worked closely with the Trust’s estates and clinical staff to ensure their requirements were prioritised to deliver a facility that would provide the best platform to heal those in need. When construction started, outstanding teamwork maintained functional bed spaces to cure Covid-19 patients in Spring 2020, as we switched to phased delivery.”

Finlay Murray
GRAHAM Health Director

The challenges

Only weeks into construction, the pandemic began. Against this backdrop, we worked with the Trust to stagger possession to facilitate its operational demands and to preserve the continuity of clinical service. We developed strong working relationships with the Trust’s estates team and clinicians, with a commitment to flexible working to ensure the successful project resolution. Although the onset of Covid-19 increased the complexity of delivery, it served to strengthen the resolve of the collective team to achieve the best possible outcomes. Demonstrating flexibility, we reworked the project programme to offer potential options for areas that the Trust could retain past the original possession dates.

The solution

Within an existing, ageing facility, our conversion package at QMC has enabled the delivery of the best clinical outcomes for 21st Century critical care provision. Not only has it addressed both staff and patient requirements for a safe, calm, healing and conducive working environment, it has also maximised the flexibility and adaptability of the building’s footprint. Our collaborative and empathetic approach ensured that clinical operations and medical services continued as normal. During delivery, we also established clean (clinical) and dirty (support accommodation) areas within the building footprint which allowed the remaining support accommodation, including staff facilities, to be optimally located and, where necessary, rationalised. Quality Cost Control identified a potential underspend, which enabled the Trust to allocate and target the projected underspend budget at “wish list” works. Timely identification ensured that the extra wish list ward works were completed within the original programme. Exemplifying the success of partnership working, we have developed the pipeline of work further, including three additional orders, with the Trust.

Outputs & Benefits

- Delivery:** The project was completed early and inside budget, and delivered to the highest quality standards
- Mitigating disruption:** We reworked the project programme to offer options of areas that the Trust could retain past the original possession dates, better meeting their needs to deliver patient care
- Collaboration:** Liaison with the clinical team during the outbreak of Covid-19 allowed advanced notice of works so that the Trust could plan care continuity. An example includes positioning patients requiring medical gases in adjacent ward areas so that they were not affected by pipe line break in at gas changeover
- GMP:** GMP was not increased through proactive early mitigation while an early warning of potential underspend allowed the Trust’s clinical team to invest the allocated budget on wish list works



For more information on how we’re delivering lasting impact:

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