

Great Ormond Street Hospital - VCB Extension

Design and Access Statement

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G.O.S.H. VCB Extension - Design and Access Statement

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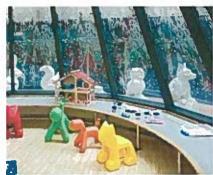
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Great Ormond Stre



Play area in GOSH

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G.O.S.H. VCB Extension - Design and Access Statement

1. Existing Buildings and Site Layout



Level 3 schematic



3D massing of hospital site

Great Ormond Street Hospital for Children NHS provides dedicated specialist healthcare for children and young people from the local area and nation wide.

The Hospital is of international importance and carries out many ground breaking procedures in addition to its day to day services.

Great Ormond Street Hospital (GOSH) fills much of the block framed by Great Ormond Street, Lamb's Conduit Street/Guildford Place, Guildford Street and Powis Place.

The Hospital is composed of a number of linked buildings which range in age from over 120 years old to less than 1 year old. The styles of the buildings on the site consequently range from Late Victorian to 21st Century Contemporary.

Many of the buildings have been superficially altered by the changing requirements of clinical and nursing practice but each retains the essence of the period in which it was designed.

There is little external space around the building and this mostly used for play space and landscaped seating areas. The main entrance approach and the buildings generally have been adjusted to become DDA compliant wherever practicable.



Aerial view of the hospital site

1.1 Existing Appearance



View from Great Ormond Stree



Main entrance from viewed from Great Ormond Street



Ambulance drop off area on Powis Place

The proposals covered by this application affect the Variety Club Building (VCB) which sits behind the Old and Frontage buildings as seen from Great Ormond Street. The VCB also forms the GOSH facade to Powis Place.

The VCB was constructed in the early 1990's to provide a new main entrance, operating theatres, specialist ward space and support services. The facade design of the VCB consists of a series of buff brick and brown window/cladding bands punctuated with white/silver oriel bays with light blue metal features at parapet level.



View of existing Peter Pan cafe



Close view of main entrance

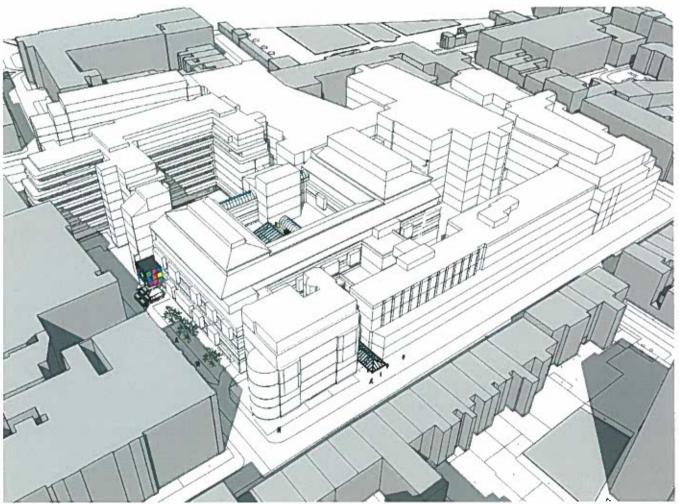
4. Design Principles

As previously discussed, the visual language of the VCB facade consists of a series of horizontal bands with oriel bays. Any elements behind the face of the brick bands are a darker brown and any elements in front of it are a lighter grey with projecting stair towers in white.

The only parts of the proposal that will be visible from the public realm are the link corridor over the main entrance and the plant space over the Ambulance Entry.

The other elements, the second link corridor and the glazed roof, are located within the central courtyard and will be visible only from within the hospital.

We have developed the following proposals through discussions with the Trust and a consultation with the Planning Department.



Aerial View of the hospital with proposed alterations

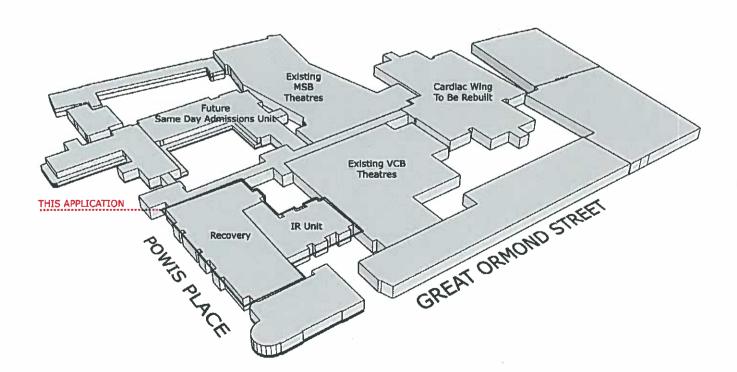
2. Background to the Proposal

As part of the Hospital's process of making continual improvements to patient care, there is an ongoing programme to replace most of the current building stock on the site.

The most recent addition arising from this process is the Morgan Stanley Building, whilst the next stage in this process will be the rebuilding of the Cardiac Wing.

To allow for the partial demolition of this latter building a number of clinical and other activities need to be dispersed to the other buildings on the site. In this process the Trust seeks to optimise the relationship of its various functions.

With the opening of the Morgan Stanley Building, some wards are being moved out of the VCB and new theatres have been built on level 3 whilst the existing ones have been refurbished. This created the opportunity to co-locate all interventional suites (radiology, angiography, theatres, etc) on this level, together with their shared support areas: the same day admit unit (SDAU), where patients are received on the day of their procedure, and the post anaesthetic care unit (PACU) where patients are taken immediately after their procedure.



3. Proposal



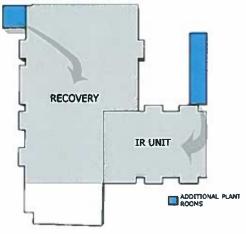
View of existing courtyard wall



Close view of the main entrance



Ambulance entrance on Powis Place



New plant locations

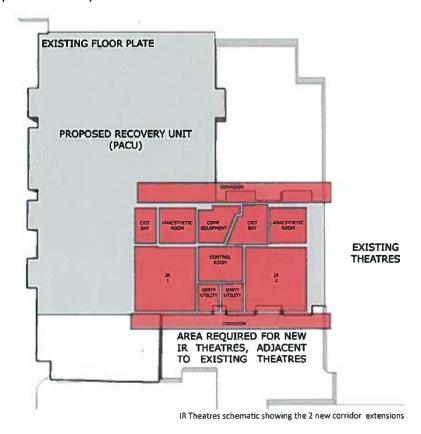
The proposal as described in this application consists of the conversion and expansion of vacated hospital wards at first floor level (hospital level 3) in the VCB to provide two Interventional Radiology Theatres and a Post Anaesthetic Care Unit adjacent to the existing 6 surgical theatres in the VCB and the new theatres in the MSCB. These new facilities will enable the Trust to provide improved minimally invasive procedures and recovery facilities.

As the existing floor plate width of the VCB is insufficient to accommodate the Interventional Radiology Theatre suites and the separate clean and dirty circulation corridors required (see sketch) the proposal is to expand the floor out over the approach to the main entrance and into the internal courtyard by effectively adding these two corridors to the face of the building.

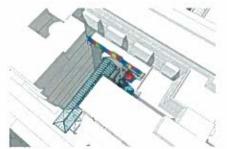
This additional space (totalling 65m2) thus provides the necessary access and circulation to and around the 2 new suites.

Given the plan layout of VCB building, these corridors fit between facade returns on both sides, spanning between parts of the existing building, allowing for a simplified and consistent architectural language for these additions.

Due to the specialist and clinical nature of the facilities being provided it is necessary to locally provide air handling units for the two new theatres and for the Post Anaesthetic Care Unit. Thus, it is proposed that the plant for the theatres will be located at Level 3 on the eastern wall of the courtyard and that for the Post Anaesthetic Care Unit over the ambulance entry on Powis Place. (see illustration)



4.1 Link Corridors



Sketch aerial view of the proposed main entrance



Sketch aerial view of the proposed glazed roof

The design intention of the 2 new corridors attached to the face of the building is to provide colourful, semi-transparent link bridges, which allow for a vague perception of the clinical activity taking place inside whilst providing the hospital with a playful appearance, above the main entrance approach but also inside the central courtyard which is at the heart of the VCB building and visible from all levels of the hospital street.

Through allowing fleeting shadows of clinical activity to be perceived from main public areas we are aiming to give children a sneak peak into what is taking place in these areas to start to get them accustomed with it and reassure them.

The glass facade itself creates 2 new colourful horizontals that complement the existing horizontal bands of the VCB façade.

To achieve and control the light, colour and translucency effects of the glass to the corridors it is proposed to use the Lumaglass, a simple and effective system of self-supporting u-shaped glass channels, called Reglit, combined with electroluminescent lighting in rainbow colours, adhered to the inside flange of the channel. The glass elements are fitted into an extruded aluminium perimeter frame that enables the creation of a simple, clean and clear glazed surface formed of full height (2.7 metres), illuminated, vertical



Sketch view of the proposed main entrance

Design Principles



Example of Lumaglass use - Dartford Community Hub

strips, unaffected by the presence of mullions and transoms.

The colour luminosity achieved by the luminescent strips is a light to be seen, rather than see by. Its luminosity is very localised and its intensity is controlled through dimmers.

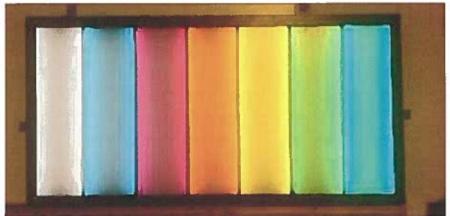
This will allow the colours in the facade to be boosted in the daytime and reduced at dusk. The light effect will not operate over night time.

Although the system is capable of many variation, the Lumaglass configuration which we have chosen is to have wired sandblasted glass enamel coloure, with glass fiber insulation and colour luminescent strips. This configuration will allow the wall to be seen as coloured at all times, irrespective of whether the luminescent strips are turned on or off.

The sample image below shows a configuration which includes insulation and illustrates how this improves the diffusion of light within the glass elements, giving it a softer appearance.



View from Great Ormond Street



Lumaglass installation with Wacotech insulation



Proposed view from Great Ormond Street



Main Entrance elevation

4.2 Plant Cube



Trespa panels example



Trespa paneis example

In considering the location of the Powis Place plant enclosure we did not want to add an oriel to the facade that would be a very different size to those used in the original design.

We were also limited as to location by the internal distribution of the ductwork. In looking at the existing facade the current ambulance entrance is underplayed and is not instantly recognisable by visiting drivers.

We have therefore located the plant and its enclosure over this entrance to improve its visibility from Great Ormond Street.

In considering the fabric of the plant enclosure we did not want to confuse the strength of the vertical shaft of the tower against the horizontal banding that abuts it with another white object.

In considering coloured options we concluded that brown is not appropriate as it challenges the relationship of the brown elements in the rest of the facade.

Instead we have opted for a coloured solution that clearly differs from the rest of the facade but which picks up from the colours used in the glass cladding over the main entrance. Our proposal is therefore to screen the plant with a cubic design in coloured Trespa cladding panels.



View from Powis Place

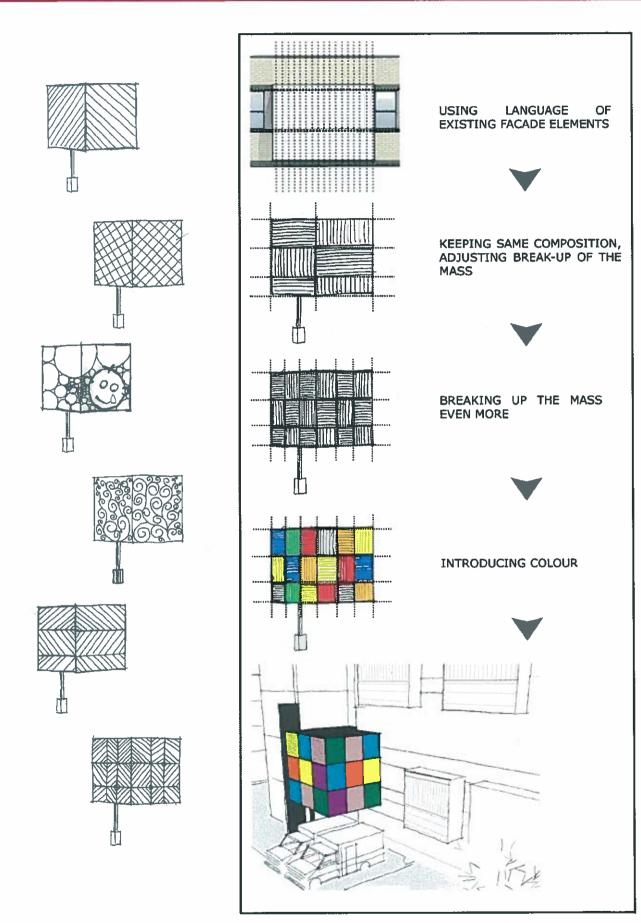


View from beginning of Powis Place



Elevation on Powis Place

Design Principles



Design options development for the plant cube

4.3 Courtyard



View of covered courtyard from level 3

Our proposals for the theatre corridor and plant space in the existing open courtyard within the VCB will reduce its size and regularize its shape into a rectangle, so it is proposed to enclose this space with a glazed roof to provide a covered, unheated, play space. This space forms the bulk (185m2) of the additional floor space being created by these proposals. It is our intention to maintain the existing planting under the glazed roof and

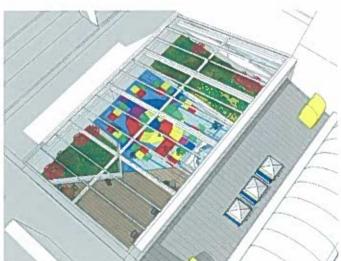
resurface the remaining area partly with a decking system and partly as a play surface.

The wood polymer compostie decking system will be installed over the footprint of the dismanteled Peter Pan cafe and it will serve as an extension of the seating area associated with the vending area adjacent to the reception.

The play area will be surfaced with a recycled rubber product to form 5 distinct multi-coloured hopscotch shapes.



Section through main entrance and courtyard



Aerial view of the glazed roof over the courtyard



View of the covered courtyard from the hospital street

5. External Works



Existing play area to the front of the building

It is not proposed to change the existing external works around the building except inside the courtyard as mentioned previously and the external play area to the right of the main entrance. Similar to the courtyard play area, this will also be surfaced with poured recycled rubber continuing the bubble pattern indoors.

The existing enclosure to this play area will be replaced with a 3 metres high transparent fence, fully integrated with the main entrance vestibul.

Replacement play equipment will be selected and installed in this area at a later date.



View of the external play area to the right of the main entrance





Sample images of the proposed decking and play surfaces

External Works



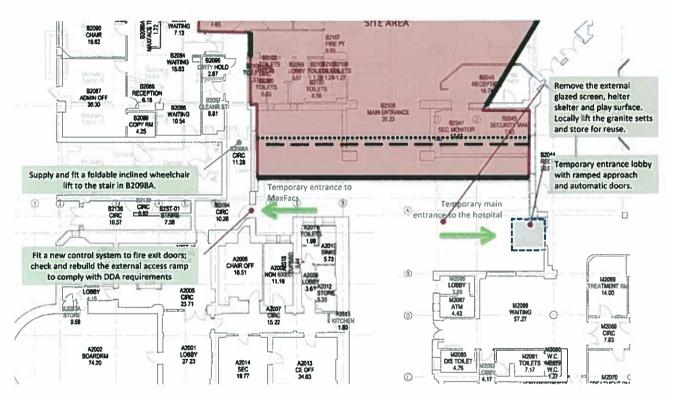
Proposed Main Entrance (level 2) layout

6. Access — temporary and permanent

These proposals will not affect access to either the site or to the buildings once it is complete, however in order to carry out these works it will be necessary to temporarily divert activity currently using the main entrance.

We will provide a temporary ramped entrance through the Out Patients Reception area which will also cater for the Patient Transport functions currently taking place in the Main Lobby. There will also be a second temporary entrance for the MaxFacs (dental) area which will include a new chair lift to one change in level.

The permanent works are designed to be DDA compliant and special consideration is given to the movement of children with disabilities around the hospital.



7. Conclusion

The proposed alterations will allow the Trust to provide improved facilities to its patients with minimal impact on the public view of the Hospital complex.



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