

4.12 Access: Transport Plan

SUMMARY

Transport access has been considered for pedestrians, cyclists, disabled parking, Patient Transport Services (PTS), taxis/private vehicles, and servicing. Pedestrians access the building via the Main entrance (on the corner of Grafton Way and Huntley Street) and via the drop-off; vehicles access via drop-off area adjacent to Grafton Way; and servicing is via the Loading Bay off Huntley Street.

The site benefits from being accessible by a range of modes of travel, with bus stops, the London Underground, Overground and National Rail services all within close proximity. There are also well established cycle and pedestrian routes near by.

The proposed access strategy for each user group can be summarised as follows (see right):

- 1. Pedestrians: direct pedestrian access from a new proposed access at the Grafton Way / Huntley Street junction with a secondary entrance provided from the off street drop off designed as a shared surface.
- 2. Cyclists: dedicated cycling for both visitors and staff can be accessed from the service yard.
- 3. Disabled Parking: 5No off-street disabled parking bays provided for in the patient drop off area.
- 4. Taxi / Private drop off / PTS drop off: provided for in the patient drop off area.

- 5. Patient / Visitor Parking: There is no on-site parking available in the proposal apart from those listed above for disabled visitors. Therefore visitor parking will be within the existing on-street pay and display network and off-street public car parks.
- 6. Servicing: dedicated service yard (refer to Section 4.14) accessed off Huntley Street that will accommodate the majority of delivery and service demands (aside from clinical waste collections which is accommodated on street).

Refer to SKM’s Transport Assessment.

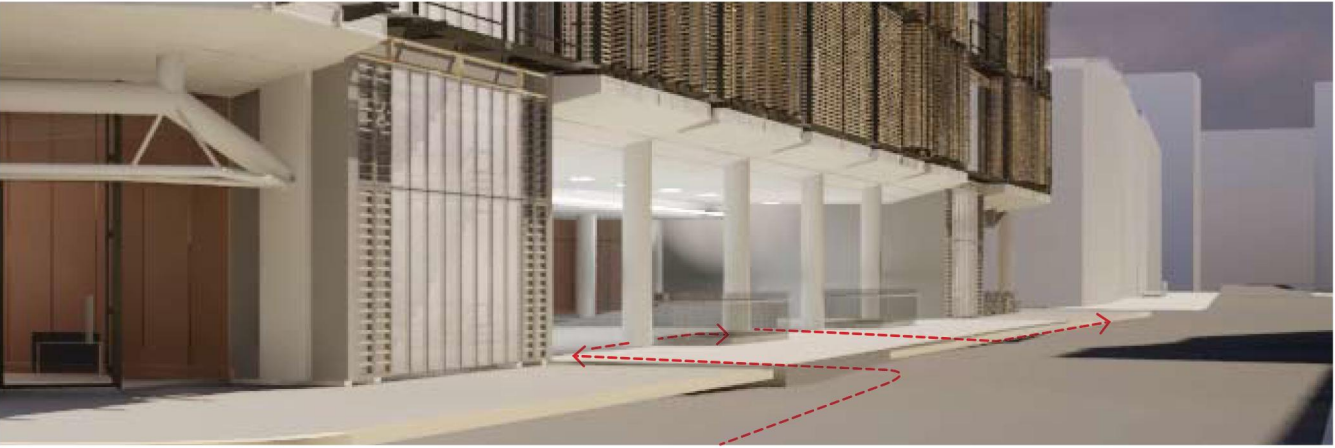
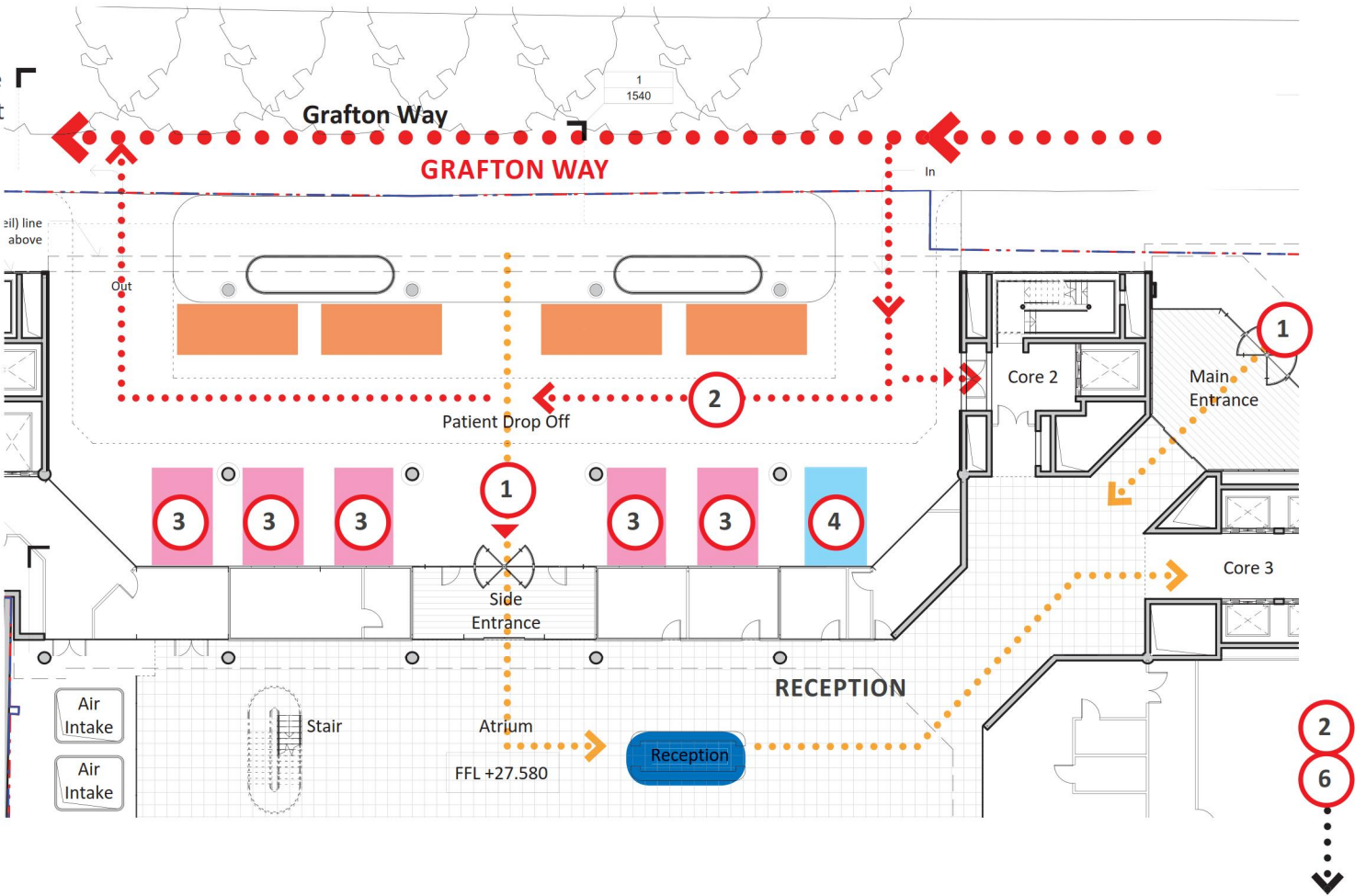
WAYFINDING

The awareness of the Atrium from the entrance at ground level will orientate visitors when they arrive at the building for the first time. Way finding signage will be required to guide people further through the building to the various destinations.

Way finding will be consistent to the end of the journey within the building.

**DRAWING TO SUPPORT THE
DISCHARGE OF PLANNING
CONDITION 34 AND BREEAM
HEA 06.2**

STW 12/10/2018



View of drop off
Extract 12046-EWA-A2-1575



4.13 Access: Patient Arrival

SUMMARY

Patients enter the building on Ground floor through the Main entrance or drop-off area. There is a bank of 4No Public lifts adjacent to the Main entrance for vertical movement through the building. There is also a staircase and a pair of Passenger lifts at either ends of the Atrium.

Patients will arrive via the following means:

- 1. Pedestrians - having used local public transport methods (bus, tube, train)
- 2. Cyclists
- 3. Disabled Parking (refer to Section 4.16)
- 4. Taxi /PTS/ Private Drop off (refer to Section 4.12)
- 5. Tunnel - via the existing UCLH tunnel network at B01 (refer to Section 4.22)

VERTICAL MOVEMENT

Lifts: Vertical transport is provided by a combination of lifts placed in strategic positions depending on its use:

- Public Lifts
- Fire Fighting Lifts
- Goods Lifts

Public Lifts: 4 No. Public lifts are provided in core 3. These will service all clinical floors. Although only 2No will serve Levels B02 to B04.

Day Care Lifts: 2No. Lifts are provided to transport patients to the Theatres.

WAYFINDING

Refer Section 4.18 Access: Wayfinding

PARKING

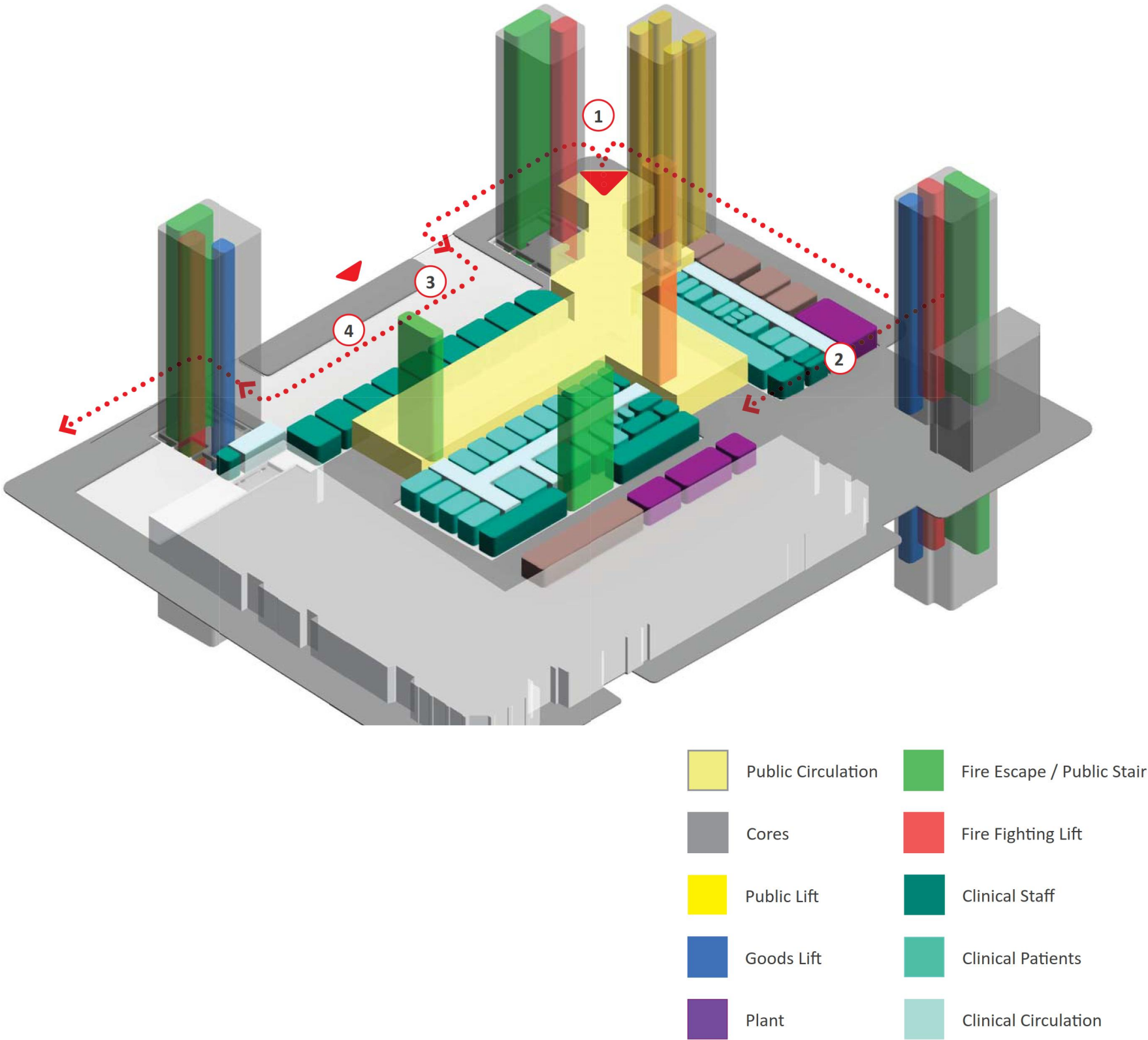
Refer to Transport Plan (Section 4.12)

CYCLE PARKING

Refer to Transport Plan (Section 4.12)

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STW 12/10/2018



4.15 Access: Staff

SUMMARY

Staff can enter the building either on Ground floor through the Main entrance or from the UCLH Tunnel system at Level B01.

GROUND FLOOR - VIA MAIN ENTRANCE

Staff access the site either via

1. Main entrance having walked or walking from local public transport methods (bus, tube, train)
2. Cycling
3. Drop off by car / taxi
4. UCLH tunnel system (Refer to Section 4.22)

ON FOOT

Pedestrian staff access the site via the corner main entrance which is shared with both patients and public entering the building. From here they filter to their relevant Staff Rest and Change areas distributed across the various floors and departments – refer to STW Clinical drawings for the positions

CYCLING

Staff arriving via bicycle enter the site through the Huntley Street staff access entrance. From here they proceed to Level B02 cycle storage via a staff lift. This lift will be card controlled. Staff showers and changing will be provided alongside uniform dispensary adjacent to the cycle storage.

BASEMENT 01 - VIA TUNNEL

The existing tunnel network will enable goods / FM / services and staff to travel between the UCLH buildings underground.

Refer to Section 4.22

- Public Lift
- Goods Lift
- Fire Escape / Public Stair
- Fire Fighting Lift

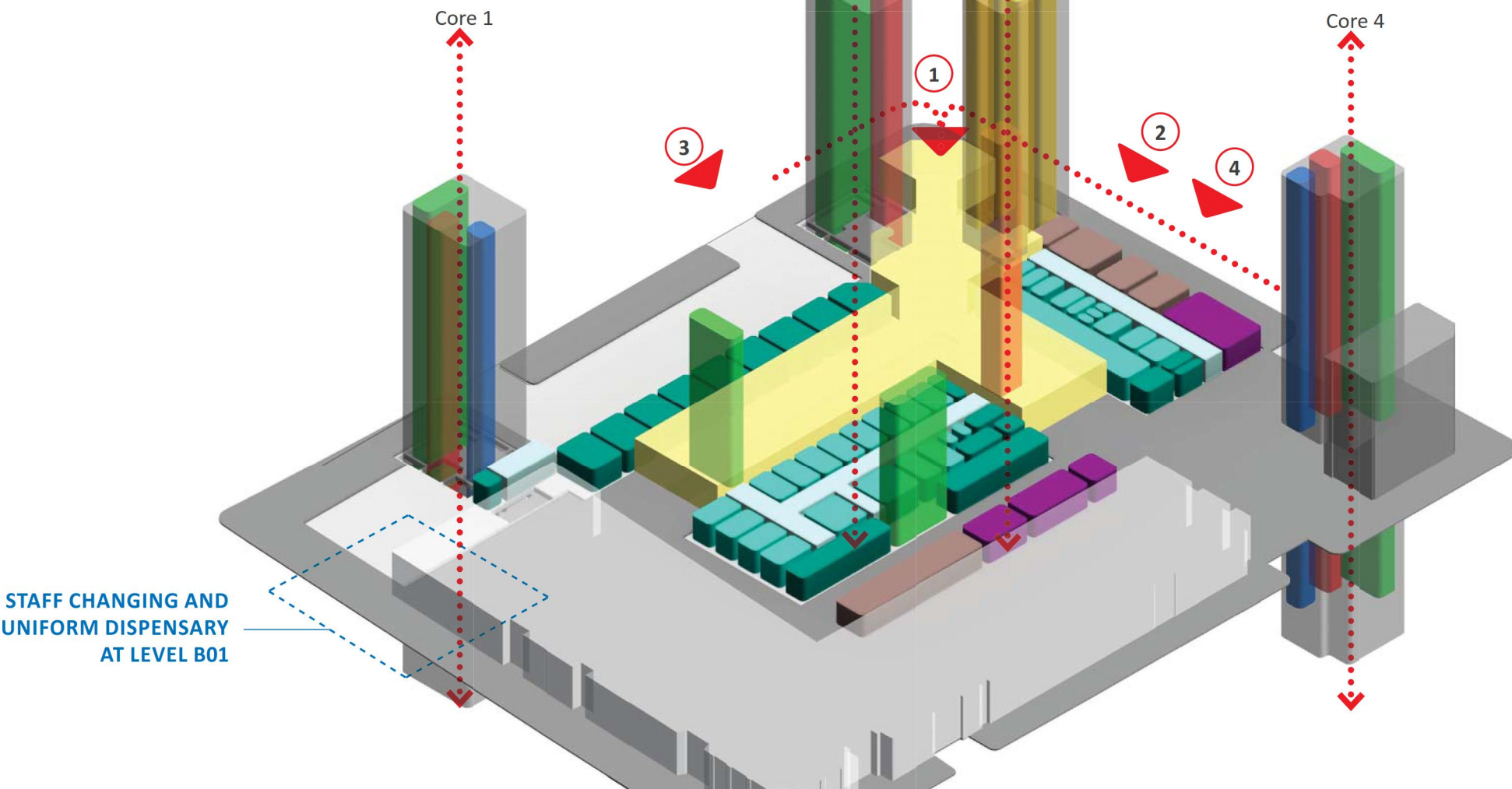
VERTICAL MOVEMENT

Stairs:

Stairs in cores 1, 2 and 4 (3No in total) are for staff and escape purposes and provide access to all levels except the roof levels. In the Atrium, a stair provides access for staff to the upper levels of the courtyard building and a secondary stair in the courtyard building provides a means of escape.

Bed Lifts:

A bed lift is provided in each of cores 1, 2 and 4 (3No in total). These are sized to accommodate Kings Fund beds. Bed lifts are located in the fire lobbies off the main stair cores and can therefore be used as fire fighting lifts. Bed lifts will service all clinical floors. It will be possible to bring patients from the wards directly to the Theatres or to PBT if necessary.



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4.19 Access: Services

SUMMARY

FM Services access the building in two ways - via the on-site Loading Bay/Service yard on the Ground floor on Huntley Street or the UCLH Tunnel system on Level B01.

LOADING BAY

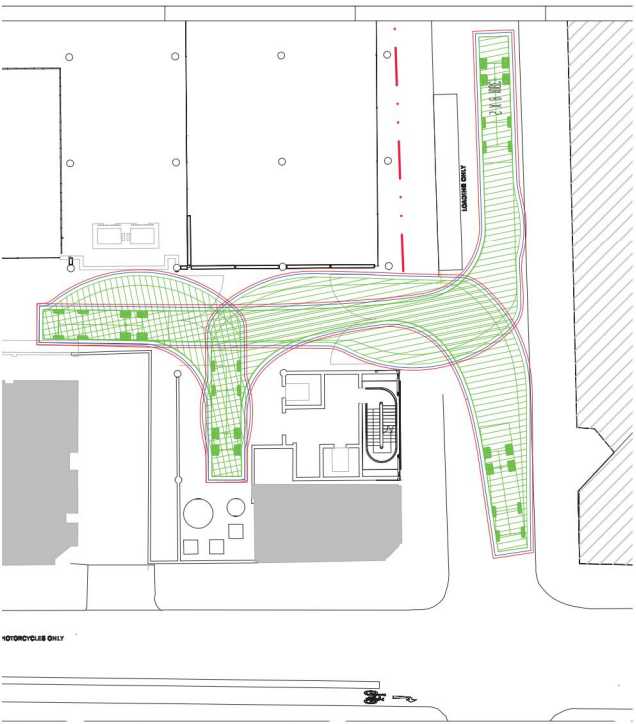
The proposed Loading Bay is located off Huntley Street in close proximity to the Cruciform Building delivery / service yard entrance. All deliveries and waste removals associated with the development will take place from this location apart from clinical waste which will be removed in the Shared Use Pay & Display/Timed Loading Bay. This is due to the height of the clinical waste vehicle.

Vehicles, apart from clinical waste, will pass under the building through to a secure and enclosed delivery / waste area. On-site UCLH staff will manage the Loading Bay.

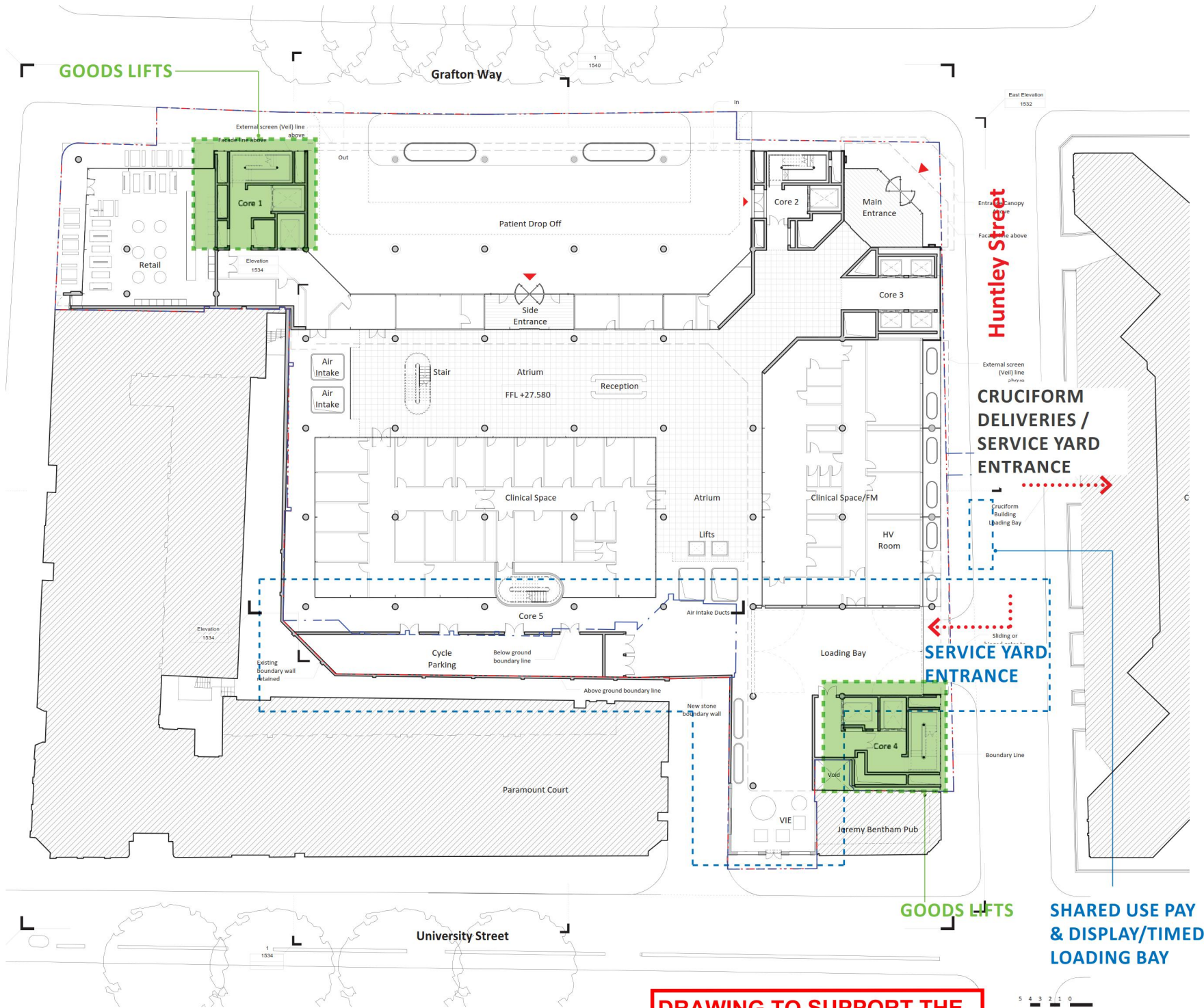
TUNNEL

The existing tunnel network will enable goods / FM / services and people to travel between the UCLH buildings underground.

Ref Section 4.22



Worst case tracking: BOC (8x2) vehicle TR-018
(SKM Drawing ref VN50118-ECC-TR-0018)



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4.21 Security

SUMMARY

This has been developed in consultation with The Trust Security Officer. All installations will be in line with the security requirements of the Secure by Design Police document, HTM & HBN's. They will also comply with all British Standards for CCTV, Access Control, Alarms and Manned guarding, and the UCLH's security specification document.

- 24 hour security, 7 days a week - manned security will be deployed in the building to offer a physical presence in the building and response, with support from a mobile team and the main team in UCH. It is currently planned to include at least three officers in the building all linked to the main control room via radio.
- Visible security presence - it is anticipated the building will follow suit from Phase 3 and have a visible security presence in the main reception area.
- Patrols - the building and site will be part of routine security patrols / checks over the course of a 24 hour period.
- Access control - the building will be protected with a mixture of electronic locks on the doors (both CCure and local electronic lock such as Salto) and physical locks for FM and non clinical spaces. All doors will be linked with door contacts to report to security when a door is false or breached doors with camera cover and where required, a security or police response can be deployed.
- Restricted access to certain areas of the building and site, for example the loading bay / services area and a separation between staff only and public areas.
- CCTV - will cover the outer envelope and internal public spaces and high risk risk areas such as non-clinical risk spaces and FM risk spaces.
- Intruder alarms - the inner risk areas will have intruder alarms attached, linking to red care and the main security control room.
- Panic alarms - all nursing stations, receptions and interview rooms will be linked to security via panic alarms for security intervention if required.
- Staff checks - all staff will require standard and in some cases enhanced background checks to ensure that the personnel are qualified and authorised to work in the UK and any criminal convictions have been taken into account.
- Police - the police will be an integral part of the response in emergency cases and as part of the intruder alarm response.
- Patient drop off - security patrolled and with vehicle registration for patient drop off vehicles (with restricted drop off times implemented ie. 30 mins maximum stay).

The proton beam sources, although they may not fall into the Counter Terrorist Security Advisor (CTSA) remit, will be subject to a higher level of physical and electronic security to ensure the safeguarding of the equipment.

A risk assessment will be carried out to ascertain what, if any, additional security measures are required for the building as a whole.

SECURED BY DESIGN

Secured by Design is the official Police flagship initiative supporting principles of 'designing out crime'. It focuses on crime prevention of homes and commercial premises and promotes the use of security standards for a wide range of applications and products. The aim being to achieve a good overall standard of security for buildings and the immediate environment and attempts to deter criminal and antisocial behaviour.

General design considerations, include but not limited to:

- Liaise with Architectural Liaison Officer (ALO) and Crime Prevention Design Advisor (CPDA).
- Create a sense of ownership and responsibility for every part of the development.
- Safe and secure working environment for patients, medical professionals and visitors.
- Secure vehicle parking (not applicable for this hospital).
- Adequate lighting should be provided.
- Controlled access to individual and common areas; between wards and between wards and public areas etc
- A landscaping and lighting scheme, which when combined, enhances natural surveillance and safety. Future growth and maintenance also taken into account.
- Site and building layout - kept simple to reduce hidden and isolated areas. Natural surveillance and CCTV monitored.
- Perimeter security - enclosed hospital perimeter with consideration given to building shell security to prevent scaling or climbing. Robust materials such as masonry or stone to be used to avoid forced entry through vulnerable material choice. Where boundaries are required, these should be appropriate (not 'fortress-like') to restrict access and unauthorised entry with a minimum height of 2m. No climbing aids in close proximity.
- Public entrances - the number of entrances to the hospital has been reduced to a minimum with pedestrians and vehicles directed through one or two entrances. Secure and controlled fire escapes

- Vehicular access - restricted to a minimum with restrictions enforced by signage, bollards, double curbs and landscaping
- Signage - from the hospital entrance through to the destination wards, signage should be clear and multilingual if applicable. Colour coded to aid simplicity.
- Cycle store - safe, secure and undercover with natural surveillance
- CCTV and alarm systems - well designed and properly managed
- Internal layout - clear signage and building logic, such as grouping functions together with straight corridors to aid CCTV surveillance. Reception and main entrance to be in close proximity to each other and the route forward logically sign posted. Reception desks should be located in order that surveillance of all parts of the wards / entrances can be achieved. High-risk areas of the building (ie. pharmacies) requiring internal wall reinforcement
- Secure plant and bin store, loading bay and oil tanks with natural surveillance within a safe area secured by fence / gate
- All grilles and visible / accessible services to use security screws or bolts, constructed so to avoid climbing
- Roof materials and construction to provide a robust and secure construction with roof glazing, service openings and plant rooms protected
- Security office and management strategy (see above for the Trust Security Officer's recommendations)



UCLH Phase 3 Reception Area
Visible security staff / staff patrols