

# Danetre Community Hospital, Daventry, Northampton

UNDER CONSTRUCTION

PROJECT TYPE: PFI Community Hospital

CONTRACT VALUE: £26.5M  
 EQUITY HELD: 100%  
 FINANCIAL CLOSE: MARCH 2005

AREA: 9000 m<sup>2</sup>  
 BUILD PERIOD: 2 years  
 CONCESSION LENGTH: 30 years  
 DATE COMPLETED/DUE: JULY 2006

Highly commended by the NHS design review panel.

Nominated for Best UK Deal to Reach Financial Close at the 2006 Public Private Finance Awards.

**UME's Role:** Project management, sponsor, investor ■

### Consortium members involved

- Clugston Limited (construction and hard FM)
- Aedas (architectural and space planning)
- WSP (civil and structural engineering)
- Capita/Interserve (mechanical and electrical engineering)
- Deloitte Touche (financial advice and modelling)

### Client/referee

Daventry and South Northants Primary Care NHS Trust

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Situated on a hilltop, this new community hospital brings together 11 separate functions including a GP surgery, community services, outpatients, inpatients and mental health provision. A restored listed building provides accommodation for the Primary Care Trust's headquarters.

We confirm that all services were carried out to all rules appropriate to the relevant trade or profession.

## Danetre Community Hospital, Daventry, Northampton

“UME wanted to show the local community our proposals – so we set up a stall in Daventry market. It really went down well with the public and the interaction was invaluable. It helped to set the project on a really accessible footing, which has paid dividends throughout the build phase.”

Andrew Roberts  
UME

“This PFI project was one of the first to go through under the new Green Book and as a result was subject to particular Department of Health scrutiny. Everyone recognised the need to work together to address issues and concerns so that financial close could be achieved within the agreed timescale.”

Richard Cook  
Daventry and South Northants PCT



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### Description

The design delivers a new and exciting 21st century community healthcare facility. The original Public Sector Comparator proposal was to incorporate and refurbish existing buildings – a solution which would have compromised the provision of modern, fit-for-purpose services.

### Background

Built on a hill top site, behind an 1830's listed building, the unit combines GP surgery, inpatients, outpatients, mental health and several community based services.

### Design process/challenges

There were a number of challenges in both design and build, due to the nature of the site:

- existing services had to remain operational throughout the redevelopment;
- adjacent land had transferred to social services for a separate PFI scheme;
- the site contains listed buildings that require protecting and restoration;
- the planning department indicated that any new development could not come forward of the historic chapel or detract from the listed buildings.

A further challenge for the legal team was that the new green book rules for affordability and value for money were introduced during this procurement. This resulted in a drop in the affordability envelope. We worked closely with the Trust's financial advisors and the rest of the team to re-engineer the bid so that it was value for money and affordable under the new rules.

### How UME made a difference

The UME Consortium provided an innovative solution enabling all clinical services to be accommodated within a brand new hospital. The final integrated solution was described by the Trust and its advisors as 'delivering what they had thought was not possible'.

The new hospital is a statement building that opens up vistas for the local streetscape. Visitors are drawn in through the main entrance into a light, two story atrium space. Natural light illuminates the internal spaces which are both flexible and energy efficient with natural ventilation and stepped back elevations. The design has evolved from the patients' perspective.

The contours of the site have been exploited to reduce the apparent height and mass of the three-storey building and the listed historic façade of the 1820's workhouse has been sympathetically restored and given greater prominence.

### Evaluation

Whilst combining all clinical activities into one new building on an extremely tight, live and contoured site was a major challenge for the construction team, a combination of inspirational design and careful planning has achieved excellent results.

Moving patients into temporary facilities was undertaken with great skill and sensitivity and was achieved with the minimum of disruption with the project team and trust staff working closely together.