# gleeds

JERSEY FUTURE HOSPITAL CO025 – PROOF OF CONCEPT SITE OPTION ADDENDUM APPENDIX 22 – Benefits & Risk analysis

QUALITY ASSURANCE

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# States of Jersey

## Change Order 025 – Proof of Concept Appraisal

<sup>1</sup>Benefits and Risk Appraisal Methodology

<sup>&</sup>lt;sup>1</sup> CR025 Benefits and risk appraisal Process V1 - RH 220616

### PROPOSED APPRAISAL PROCESS

#### **Context**

CR025 requires Gleeds to complete an analysis of the benefits, risks and costs of developing hospital facilities at the Jersey General Hospital site and via a series of linked decant schemes in consideration of an alternative 'Option C'.

This will allow the alternative Option C to be compared with the other four site options reviewed within the CR004 brief from 30<sup>th</sup> December 2014:

- Option A Dual Site
- Option B Overdale
- Option C General Hospital
- Option D Waterfront

A fifth option, Option E – People's Park, was removed from the shortlist in February 2016 so the previous results generated in respect of its benefits and risk analysis have been discounted in this exercise.

Given that this change order relates to the selection of a preferred site the appraisal will, of necessity be based upon strategic data established from or associated with high level design solutions only. Our approach embodies the principles of the UK Treasury Green Book and currently accepted good practice in relation to option appraisal. It remains nonetheless important however to recognise that more informed appraisals will be completed at later OBC / FBC stages as greater levels of information relating to the options emerge.

#### Appraisal Methodology

A benefits and risk workshop was convened in March 2015, evaluating Options A – D. In order to ensure consistency of evaluation the same methodology will apply to the evaluation of Alternative Option C in June 2016.

#### Selection of Benefit and Risk Criteria

Change Order 025 prescribes the Benefit and Risk criteria and sub-criteria to be considered in assessing all options. These are understood to originate from earlier work completed by the States of Jersey project team and have been formally approved by the Project Board.

It should be noted that the range of risks and benefits criteria is broad. As such evaluation will need to be completed on a group basis so as to ensure that the range of competences needed to adequately assess risk or benefit is available.

The assigned Benefits, risks and sub-criteria weightings are included at appendix 1

#### The evaluation team

CR025 requires evaluation to be completed on an independent basis by the Gleeds team.

The evaluation of Options A – D in March 2015 was undertaken by the following team:

Evaluator	Role and origin						
Maria Willis	Scoring chair and facilitator						
Stewart Rowney	Rowney Sharman Limited; Evaluator						
Graham Underwood	Design Champion; Evaluator						
Stephanie Steedman	KE Planning; Evaluator						
Danny Gibson	MJ Medical; Evaluator						
Simon Boundy	Hassell Architects; Evaluator						
Peter Thomas	Arup; Evaluator						
Michelle West	HSSD; Evaluator						

The following team members are proposed to undertake the Alternative Option C evaluation:

Evaluator	Role and origin					
Rachel Heywood	Facilitator					
Terry Langdon	Gleeds Management Services; Evaluator					
Stewart Rowney	Rowney Sharman Limited; Evaluator					
Stephanie Steedman	KE Planning; Evaluator					
Danny Gibson / Simon Cuthbertson	MJ Medical; Evaluator					
Simon Boundy	Hassell Architects; Evaluator					
Peter Thomas	Arup; Evaluator					
Martyn Siodlak	HSSD; Evaluator					
Michelle West	HSSD; Evaluator					

#### Criteria and sub criteria weighting

A sub-criteria weighting mechanism has been included within the risk and benefits model to ensure that the evaluation process is sensitive to differences in sub-criteria importance.

The weighting arrangements are also different between benefits and risks with risk weighting reflecting a greater range of issues such as safety, sustainability and affordability.

The States of Jersey project team has been responsible for the assignment of sub-criteria weighting to ensure that selections adequately reflect stakeholder's expectations.

Sub-criteria weighting will not be shared with evaluators during the evaluation process so as to avoid the risk of any awareness of the relative importance of sub-criteria influencing scoring outcomes.

#### **Option Scoring**

Given the broad range of benefits and risk criteria proposed the scoring of options will be competed on the basis of their individual merit or otherwise being adjudged against each relevant criteria.

The use of attributes to better define sub-criteria is also not practical at this stage. As such to avoid any unrealistic grouping of options evaluators will need to be prepared to use both maximum and minimum scores wherever this is merited.

Sub criteria will be scored from a 0 and 5 range as set out in 'table 1 – Scoring Dimensions' below

Score	Benefit Scoring dimensions
0	The option does not meet the sub-criteria expectations in any way or is not considered to be able to do so following any further development.
1	To option goes some way to meeting the sub-criteria expectations or demonstrates an ability to do so following further development.
2	The option reflects at least half of the expectations of the sub-criteria but is unlikely to improve on this.
3	The option reflects at least half of the expectations of the sub-criteria and clearly demonstrates that greater achievement is possible following further development.
4	The option meets the expectations of the sub-criteria.
5	The option meets or exceeds the expectations of the sub-criteria and clearly demonstrates that the expectations can be exceeded following further development.

Table 1- Benefit scoring Dimensions

#### **Evaluation Arrangements**

The evaluation process will be managed by Gleeds through an Evaluation Workshop operated under the following principles:

• A full presentation of the proposals for Alternative Option C (including the linked decant projects) will be provided to the group along with an explanation of the underlying principles, opportunities and challenges encountered.

- The design development team will be available to respond to further questioning by the group as needed.
- The scoring of benefits and risks will be managed by a Gleeds facilitator and will be completed for Alternative Option C as a whole, inclusive of the off-site decant projects;
- Scores will be arrived at through collective discussion and will therefore reflect the combined view of all evaluators.

Evaluators will be required to supplement their scores with notes reflecting their opinion which will be provided to the States of Jersey upon request.

Gleeds will assign an independent member of its team to assess the robustness of the evaluation process and to consider the extent of records established to support its findings.

#### Sensitivity Analysis

The robustness of the weighted findings will be examined to determine the effect that any change in weightings would have on the calculated outcomes. This work will be completed by EY team members to determine to degree of change required to bring about a change in the ranking of options.

Further analysis of switching points may be required once scoring outcomes are known and will be identified as needed.

#### Comparison of results

The weighted findings of the benefits appraisal will be compared with the NPV of each option established within the GEM model to assess the trade-off between benefits and costs. This will allow a measure of the cost effectiveness of each option to be established through comparison of each site options cost of each unit of weighted score.

#### **Risk Review**

The above process will be repeated to consider the risks associated with Alternative Option C using the risk criteria previously agreed by the States of Jersey. In this case all model outputs will be similarly assessed to arrive at weighted risk scores for the option.

Similar workshop arrangements will be adopted to establish the risk scores and analysis comparable to that for benefits completed.

#### **Risk Scoring**

Risk scoring will operate in the same way as benefits scoring subject to the scoring dimensions in table 2 below

Score	Risk Impact scoring Dimensions
0	Considered to have negligible or no physical, financial, operational or political impact
1	Considered to have minimal physical, financial, operational or political impact.
2	Considered to have some physical, financial, operational or political impact but considered manageable
3	Considered to have moderate and disruptive level of physical, financial operational or political impact
4	Would have a severe or damaging physical, financial operational or political impact
5	Would have a catastrophic or major failure level of physical, financial operational or political impact

Score	Risk Likelihood scoring Dimensions
0	Not possible or fully mitigated
1	Rare (1 - 20% chance of occurrence)
2	Unlikely (21 - 40% chance of occurrence)
3	Possible (41 -60% chance of occurrence)
4	Likely (61 - 80% chance of occurrence)
5	Almost Certain / Certain (81 -100% chance of occurrence)

Table 2- Risk scoring Dimensions

#### **Recommendations**

The developed findings of the scoring process will be reviewed by the Gleeds team with recommendations included within the final Site Validation Exercise report. This will include the identification of the Preferred Option and / or any further actions required to support its acceptance by the States of Jersey.

R 025 - Benefits Criteria and Weighting		Safety	Sustainability Af	fordability	Short-term	Long-term						
			100%		1	.00%	-	Does Sub Crit	teria contribute to:	Do Sub Criteria impacts occur:		
	100.00%	33%	33%	33%	17	<mark>%</mark> 83%	100.0%	Safety	Sustainability	Affordability	Short-term	Long-term
1.0 Criteria: Massing, Design Quality and Planning Issues	13.39%											
1.1 The site must be considered capable of accommodating the spatial and service capacity requirements for the hospital, including forseeable potential future expansion and/or change.	5.13%	1 33%	33%	33%	17'	% 83%	5.1%	Yes	Yes	Yes	Yes	Yes
1.2 The potential site must fit within and not be out of accord with the Island Plan and Spatial Strategy.	0.57%	1 0%	33%	33%			0.6%		Yes	Yes	Yes	No
1.3 The site should not have any planning or use restrictions associated with it that pose an unacceptable risk to development.	0.28%	1 0%	0%	33%	6'	% 0%	0.3%	No	No	Yes	Yes	No
1.4 The site required for the total hospital development should be immediately available without major or long term infrastructure investment requirements.	0.57%	1 33%	0%	33%	11	% 0%	0.6%	Yes	No	Yes	Yes	No
1.5 The site should facilitate a high quality hospital design.	5.13%	1 33%	33%	33%	17	% 83%	5.1%	Yes	Yes	Yes	Yes	Yes
1.6 The site should facilitate civic pride, regeneration, protection of the environment and heritage and enable the hospital to be a good neighbour.	1.71%	1 0%	33%	0%	6'	% 28%	1.7%	No	Yes	No	Yes	Yes
2.0 Transport and Access Issues	15.95%									- 1		
<ul> <li>2.1 The site should be located to afford ease of access for the majority of the Island's population.</li> <li>2.2 The site should allow efficient and effective access by public, private and commercial transport and enable</li> </ul>	0.57%	1 33%	33%	0%	11	% 0%	0.6%	Yes	Yes	No	Yes	No
<ul> <li>2.3 The site should allow endert and endert did enderts by public, prode and commercial ransport and endore separation of traffic flows.</li> <li>2.3 The site should allow adequate parking facilities available for staff, patients and visitors.</li> </ul>	3.42%	33%	33%	33%	17	% 83%		Yes	Yes	Yes	Yes	Yes
2.4 The site should allow efficient and effective access by emergency vehicles.	1.71%	1 0%	33%	33%				-	Yes	Yes	Yes	Yes
2.5 The site should be accessible and easy to navigate by all users	5.13%	1 33% 1 33%	0%	0%			E 10/		No Yes	No	Yes	Yes
Response to the Island's Infrastructure and Geography	8.55%	33%	33%	33%	17	83%		res	res	Yes	Yes	Yes
<ul> <li>Response to the binne of medicated and ocception y</li> <li>The site should present minimal risks to its safe and on-going running in terms of the climate, potential health and environmental impacts.</li> </ul>	3.42%	1 33%	33%	0%	11'	% 55%	3.4%	Yes	Yes	No	Yes	Yes
3.2 The site should be capable of supporting key infrastructure for the hospital and add to the sustainability of the Island's infrastructure.	5.13%	1 33%		33%			5.1%		Yes	Yes	Yes	Yes
	24.27%	3370	55%		17	03/0		105	105	103	103	103
.0 Clinical and Non Clinical support Functionality .1 The site should be capable of accommodating or being supported by the full range of clinical and non-	21.37% 5.13%	1 33%	33%	33%	17'	% 83%	5.1%	Voc	Vor	Voc	Vor	Vac
clinical support functions. 1.2 The site must be capable of enabling implementation of the Department of Health and Social Services	5.13%	1 33%	33%	33%			5 1%	Yes Yes	Yes	Yes	Yes	Yes
approved Acute Service Strategy. 4.3 The site configuration should facilitate the implementation of Public Sector Reform.	0.85%	33%		33%					Yes Yes	Yes Yes	Yes Yes	Yes No
1.4 The site should facilitate compliance with all relevant legislation and good practice.	5.13%	1 33%	33%	33%	17	% 83%	5.1%	Yes	Yes	Yes	Yes	Yes
1.5 The site should facilitate a healing environment for patients	5.13%	1 33%	33%	33%	17	% 83%	5.1%	Yes	Yes	Yes	Yes	Yes
5.0 Clinical Care and Patient related Issues	29.06%	1										
5.1 The site should allow for the optimisation of clinical adjacencies and functionality.	5.13%	33%	33%	33%	17	% 83%	5.1%	Yes	Yes	Yes	Yes	Yes
5.2 The site should allow for the future hospital to be flexible in its future design and construction and allow for future proofing of all acute and non-acute services as part of a clear, sustainable, forward master-planning strategy.	5.13%	1 33%	33%	33%	17'	% 83%	5.1%	Yes	Yes	Yes	Yes	Yes
5.3 The hospital should be capable of accommodating key functional content, based on, but not wedded to	5.13%						5 1%					
current UK room scheduling guidance and current best practice. 5.4 The site should enable the quality of the patient environment to be high and privacy and dignity to be arbitraria	5.13%	33%		33%			5 1%	Yes	Yes	Yes	Yes	Yes
<ul> <li>achieved.</li> <li>5.5 The site should enable convenience of access for friends, family and visitors and access to essential local amenities.</li> </ul>	3.42%	1 33% 1 33%		33%			3 4%	Yes	Yes	Yes	Yes	Yes Yes
amenities. 5.6 The site should enable effective patient, visitor and logistical separation.	5.13%	33%		33%				Yes Yes	Yes Yes	Yes	Yes Yes	Yes
5.0 Patient Disruption, Staffing and Support Issues	9.12%	1										
6.1 The site should enable patient, staff, neighbour and visitor disruption to be minimised during development	0.57%	1 33%	33%	0%	11	% 0%	0.6%	Yes	Yes	No	Yes	No
6.2 The site and its development should have a positive effect on staff recruitment and selection.	5.13%	1 33%		33%					Yes	Yes	Yes	Yes
5.3 The site should enable staff, patient and vistor security relating to location and out-of-hours safety to be	3.42%	33%	33%	0%	11	% 55%	3.4%	Yes	Yes	No	Yes	Yes
7.0 Construction and Buildability issues	2.56%	1										
7.1 The site should enable construction logistics to be optimal	0.85%	33%		33%					Yes	Yes	Yes	No
<ul> <li>7.2 Access to the site for construction vehicles, deliveries and waste removal should be convenient.</li> <li>7.3 The site should enable protection of existing hospital services and minimise disruption during the build.</li> </ul>	0.85%	1 33% 1 33%		33%			1		Yes Yes	Yes Yes	Yes Yes	No No

025 - Risks Criteria and Weighting		Safety	Sustainability Affo	ordability	Short-term L	ong-term		13759	%			
			100%		100%	%		Does Sub Crit			Do Sub Crite	eria impacts
	100.00%	33%	33%	<mark>33%</mark>	17%	83%	100.0%	Safety	Sustainabi	lity Affordability	Short-term	Long-tern
Planning and Environment	3.60%			ı				Planning and	Environme	nt		
Failure to obtain necessary Planning Authority or use consents in a timely manner.	0.80%						0.00/					
		1 33%	0%	33%	11%	0%	0.8%	Yes	No	Yes	Yes	No
Unforeseen further obligated provision / costs / time required to satsify Planning Authority or related	0.80%						0.8%					
Stakeholder Requirements.	1.20%	1 33%	0%	33%	11%	0%		Yes	No	Yes	Yes	No
Public opinion and or local media oppose the site making political progression impractical.	1.20%	2.20/	220/	220/	170/	00/	1.2%	Vaa	Vee	Vee	Vaa	No
Delay to full or partial site availability delays construction and results in loss of project viability.	0.80%	1 33%	33%	33%	17%	0%		Yes	Yes	Yes	Yes	No
	0.0070	1 33%	33%	0%	11%	0%	0.8%	Yes	Yes	No	Yes	No
			5570	070	11/0			1			105	
Transport and Access	8.80%					50%		Transport an	d Access			_
Failure to overcome transport or environmental issues or obligations raised by the transport authorities	0.80%						0.8%					
and / or environmental regulators.		1 0%	33%	33%	11%	0%		No	Yes	Yes	Yes	No
Failure to be able to develop a viable Sustainable Transport Plan.	0.80%	1 0%	33%	33%	11%	0%	0.8%	No	Yes	Yes	Yes	No
Long-term impact results from site compromises resulting in inflexible, inefficient or inaccessible design.	7.20%	0,0	3370	3370	11/0	070			103		103	
		1 33%	33%	33%	17%	83%	7.2%	Yes	Yes	Yes	Yes	Yes
Services Infrastructure	10.40%					1010/		Services Infra				
	4.80%	1				121%			istructure			
Unsustainable increased cost or impact arising from requirement to provide robust power supplies.	4.80%	1 0%	33%	33%	11%	55%	4.8%	No	Yes	Yes	Yes	Yes
Unsustainable increased cost or impact arising from requirement to provide robust utility supplies.	4.80%											
		1 0%	33%	33%	11%	55%	4.8%		Yes	yes	Yes	Yes
Increased cost or unviable impact arising from requirement to address climate change impact.	0.80%	1 0%	33%	33%	11%	0%	0.8%	No	Yes	Yes	Yes	No
Clinical and Non Clinical support	28.80%					143%		Clinical and N	lon Clinical	support		
Failure to meet preferred departmental sizes, relationships and clinical adjacencies.	7.20%	1 33%	33%	33%	17%	83%	7.2%		Yes	Yes	Yes	Yes
Risk that the site cannot accommodate future flexibility or additional or reduced capacity in the event of	7.20%	3370	3370	3370	1770	0070			103	100	103	105
hospital failure.		1 33%	33%	33%	17%	83%	7.2%	Yes	Yes	Yes	Yes	Yes
Risk of the site choice introducing key safety, maintenance or operational concern.	7.20%	1 33%	33%	33%	17%	83%	7.2%		Yes	Yes	Yes	Yes
Risk of the site selection and hospital design not optimising opportunities for healing environment.	7.20%	1 33%	33%	33%	17%	83%	7.2%	Yes	Yes	Yes	Yes	Yes
Staff and Patient Issues	40.80%	1				396%		Staff and Pat	ient Issues			
Fixed point in site (e.g. listed buildings, planning restrictions etc.) constrain or prevent clinically optimal	7.20%					33070	=					
adjacencies or functioning.		1 33%	33%	33%	17%	83%	7.2%	Yes	Yes	Yes	Yes	Yes
Fixed point in site (e.g. listed buildings, planning restrictions etc.) prevent service development	7.20%						7.2%					
appropriate for future needs.		1 33%	33%	33%	17%	83%		Yes	Yes	Yes	Yes	Yes
Site spatial compromises place unacceptably high risk of unsustainable or unsafe operation.           The site should impacts on the quality of the patient environment to be high and privacy and dignity to	7.20% 4.80%	1 33%	33%	33%	17%	83%	7.2%		Yes	Yes	Yes	Yes
be achieved.	4.80%	1 33%	33%	0%	11%	55%	4.8%	Ves	Yes	No	Yes	Yes
Potential Travel Plan associated with Site does not mitigate impact of environmental impact of access,	7.20%	3370	3370	070	11/0	3370			103		103	105
egress and transport between sites.		1 33%	33%	33%	17%	83%	7.2%	Yes	Yes	Yes	Yes	Yes
Site constraints prevent optimum separation of clinical, patient, visitor and logistical flows, where these	7.20%						7.2%					
cannot be separated temporally.		1 33%	33%	33%	17%	83%	7.2%	Yes	Yes	Yes	Yes	Yes
Construction	2.80%	1				561%		Construction				
Risk to patient, staff, visitor and neighbour safety impact during construction arising from site	0.80%						0.004					
restrictions.		1 33%	0%	33%	11%	0%	0.8%	Yes	No	Yes	Yes	No
Long construction disrupts functioning of hospital and working environment - negatively impacts on	1.20%	1 33%	33%	33%	17%	0%	1.2%	Yes	Yes	Yes	Yes	No
Risk to staff safety and / or sense of well being as long familiar environment transforms more quickly	0.80%		2221				0.8%	N.				
than staff can adjust to.		1 33%	33%	0%	11%	0%		Yes	Yes	No	Yes	No
Development Opportunity	4.80%	1				39%		Developmen	t Opportuni	ty		
Development Opportunity						0070			••	•		

#### CR025 - Benefit Scoring System

Score	Benefit Scoring dimensions
0	The option does not meet the sub-criteria expectations in any way or is not considered to be able to do so following any further development.
1	To option goes some way to meeting the sub-criteria expectations or demonstrates an ability to do so following further development.
2	The option reflects at least half of the expectations of the sub-criteria but is unlikely to improve on this.
3	The option reflects at least half of the expectations of the sub-criteria and clearly demonstrates that greater achievement is possible following further development.
4	The option meets the expectations of the sub-criteria.
5	The option meets or exceeds the expectations of the sub-criteria and clearly demonstrates that the expectations can be exceeded following further development.

#### CR021 - Risk Scoring System

Score	Impact Dimensions	Likelyhood Dimensions
0	Considered to have negligible or no physical, financial, operational or political impact	Not possible or fully mitigated
1	Considered to have minimal physical, financial, operational or political impact.	Rare (1 - 20% chance of occurrence)
2	Considered to have some physical, financial, operational or political impact but considered manageable	Unlikely (21 - 40% chance of occurrence)
3	Considered to have moderate and disruptive level of physical, financial operational or political impact	Possible (41 -60% chance of occurrence)
4	Would have a severe or damaging physical, financial operational or political impact	Likely (61 - 80% chance of occurrence)
5	Would have a catastrophic or major failure level of physical, financial operational or political impact	Almost Certain / Certain (81 -100% chance of occurrence)

ce)

				NON WEIGHT	ED RESULT	S					WEIGHTED	RESULTS		
R025 - Benefits Scoring		Α	В	с	D	E	F	A		В	с	D	E	F
t <u>es:</u> ase populate cells highlighted in Yellow only		Dual Site Mixed New build & refurbishment	Overdale 100% New build	Jersey General 100% New Build	Waterfront 100% New Build	People's Park 100% New Build	Jersey General	Dual Mixed Ne & refurbi	w build 1	Overdale 100% New build	Jersey General 100% New Build	Waterfront 100% New Build	People's Park 100% New Build	Jersey G
ise populate cells ingringineu in reliow only		& returbishment						& returb	shment					
		6	5	4	2	1	3	6		5	4	2	1	3
	RESULTS	49	63	79	106	117	102	150 1.7		2.31	2.77	3.78	4.19	3.7
		33%	42%	53%	71%	78%	68%	34	6	46%	55%	76%	84%	74
CRITERIA & SUB CRITERIA	Weighting	]												
Massing and Planning Issues	0.0%	5	4	2	6	3	1	6		3	5	4	1	2
<sup>1</sup> The site must be considered capable of accommodating the spatial and service capacity requirements for the hospital, including forseeable potential future expansion and/or change.	5.13%	2	5	3	3	5	4	0.1	0	0.26	0.15	0.15	0.26	0.
The potential site must fit within and not be out of accord with the Island Plan and Spatial Strategy.	0.57%	4	3	4	0	0	4	0.0	2	0.02	0.02	0.00	0.00	0.
1.3 The site should not have any planning or use restrictions associated with it that pose an unacceptable risk to development.	0.28%	3	3	4	0	1	4	0.0	1	0.01	0.01	0.00	0.00	0.0
<sup>4</sup> The site required for the total hospital development should be immediately available without major or long term infrastructure investment or pulses and the site of the	0.57%	3	1	3	1	3	3	0.0	2	0.01	0.02	0.01	0.02	0.
investment requirements.  The site should facilitate a high quality hospital design.	5.13%	1	4	3	5	5	4	s	5	0.21	0.15	0.26	0.26	0.
<sup>6</sup> The site should facilitate civic pride, regeneration, protection of the environment and heritage and enable the hospital to be a good	1.71%		0	3	3	3	3	s 0.0		0.00	0.05	0.05	0.05	0.
neighbour.	_		-					5						
	13.4%	14	16	20	12	17	22	0.2	2	0.49	0.41	0.47	0.58	0.5
Transport and Access Issues The site should be located to afford ease of access for the majority of the Island's population.	0.6%	6	5	4	2	1 4	3	6	1	5	4	3 0.02	0.02	0.
The site should be located to arrord ease of access for the majority or the Island's population. The site should allow efficient and effective access by public, private and commercial transport and enable separation of traffic flows.	5.1%		0	4	4	4	4	s 0.0		0.01	0.02	0.02	0.02	0.
The site should allow adequate parking facilities available for staff, patients and visitors.	3.4%		3	2	3	5	2	s		0.10	0.21	0.21	0.21	0.
The site should allow efficient and effective access by emergency vehicles.	1.7%	1	0	2	4	4	3	s 0.0		0.00	0.03	0.07	0.07	0.
<sup>5</sup> The site should be accessible and easy to navigate by all users	5.1%		3	2	4	5	4	s 0.0	5	0.15	0.10	0.21	0.26	0.
	16.0%	5	7	14	19	22	17	0.1	6	0.26	0.43	0.60	0.72	0.
Response to the Island's Infrastructure and Geography	0.0%	5	6	2	2	1	2	5		6	2	2	1	
<sup>1</sup> The site should present minimal risks to its safe and on-going running in terms of the climate, potential health and environmental impacts	s. 3.4%	3	3	3	3	4	3	5 0.1	0	0.10	0.10	0.10	0.14	0.
2 The site should be capable of supporting key infrastructure for the hospital and add to the sustainability of the Island's infrastructure.	5.1%	1	0	3	3	4	3	0.0	5	0.00	0.15	0.15	0.21	0.
	8.5%	4	3	6	6	8	6	0.1	5	0.10	0.26	0.26	0.34	0.:
Clinical and Non Clinical support Functionality	0.0%	6	5	2	4	1	2	6		5	2	4	1	
1 The site should be capable of accommodating or being supported by the full range of clinical and non-clinical support functions.	5.1%	3	2	4	3	4	4	0.1	5	0.10	0.21	0.15	0.21	0.:
2 The site must be capable of enabling implementation of the Department of Health and Social Services approved Acute Service Strategy.	5.1%	4	3	4	3	4	4	s	1	0.15	0.21	0.15	0.21	0.
The site configuration should facilitate the implementation of Public Sector Reform.								5						
The site configuration should facilitate the implementation of Public Sector Reform.     The site should facilitate compliance with all relevant legislation and good practice.	0.9%		3	4	3	4	4	s 0.0		0.03	0.03	0.03	0.03	0.0
<ul> <li><sup>55</sup> The site should facilitate a healing environment for patients</li> </ul>	5.1%		4	3	4	4	3	5 0.1		0.21	0.15	0.21	0.21	0.:
	21.4%	10	15	18	17	20	18	0.5	1	0.64	0.75	0.74	0.85	0.
Clinical Care and Patient related Issues	0.0%	5	6	4	3	1	1	5		6	4	3	1	1
<sup>.1</sup> The site should allow for the optimisation of clinical adjacencies and functionality.	5.1%	1	2	2	4	4	3	5 0.0	5	0.10	0.10	0.21	0.21	0.1
<sup>2</sup> The site should allow for the future hospital to be flexible in its future design and construction and allow for future proofing of all acute and non-acute services as part of a clear, sustainable, forward master-planning strategy.	5.1%	1	1	2	4	4	5	0.0	5	0.05	0.10	0.21	0.21	0.
The hospital should be capable of accommodating key functional content, based on, but not wedded to current UK room scheduling	5.1%	2	1	3	4	4	4	0.1	0	0.05	0.15	0.21	0.21	0.3
guidance and current best practice.	5.170	-	-		4	4	4	s s 0.1		0.15	0.15	0.21	0.21	0.
<sup>4</sup> The site should enable the quality of the patient environment to be high and privacy and dignity to be achieved.	5.1%	2	3	3				5 0.1		0.00	0.14	0.14	0.14	0.:
<sup>5</sup> The site should enable convenience of access for friends, family and visitors and access to essential local amenities.	5.1%	3	3	3 4	4	4	4					0.21	0.26	0.
<sup>5</sup> The site should enable convenience of access for friends, family and visitors and access to essential local amenities.	3.4%	3	0	4	4	5	5	s 0.1		0.15	0.15	1.16		
<ul> <li>The site should enable convenience of access for friends, family and visitors and access to essential local amenities.</li> <li>The site should enable effective patient, visitor and logistical separation.</li> </ul>	3.4%	3	0	4	4 4 24		5 25	5 0.1		0.51	0.80	1.16	_2	
5       The site should enable convenience of access for friends, family and visitors and access to essential local amenities.       6         6       The site should enable effective patient, visitor and logistical separation.         Patient Disruption, Staffing and Support Issues	3.4%	3 3 12 6	0	4	4	5	5	2	6			1.16 1 0.02	2	
The site should enable convenience of access for friends, family and visitors and access to essential local amenities.         The site should enable effective patient, visitor and logistical separation.         Patient Disruption, Staffing and Support Issues         The site should enable patient, staff, neighbour and visitor disruption to be minimised during development.	3.4% 5.1% 29.1%	3 3 12 6 0	0 3 10 3	4 3 17 5	4 4 24	5 25 2	5 25 4	۵.E 6	6 0	0.51 3	0.80 5	1	2	0.
The site should enable convenience of access for friends, family and visitors and access to essential local amenities.         The site should enable effective patient, visitor and logistical separation.         Patient Disruption, Staffing and Support Issues         The site should enable patient, staff, neighbour and visitor disruption to be minimised during development.         The site and its development should have a positive effect on staff recruitment and selection.	3.4% 5.1% 29.1% 0.0%	3 3 12 6 0 0	0 3 10 3 3	4 3 17 5 0	4 4 24 1 4	5 25 2 4	5 25 4 1	3.0 6 5 0.0	6 0 0	0.51 3 0.02	0.80 5 0.00	1 0.02	2	0. 0.
The site should enable convenience of access for friends, family and visitors and access to essential local amenities.         The site should enable effective patient, visitor and logistical separation.         Patient Disruption, Staffing and Support Issues         The site should enable patient, staff, neighbour and visitor disruption to be minimised during development.         The site and its development should have a positive effect on staff recruitment and selection.	3.4% 5.1% 29.1% 0.0% 0.6% 5.1%	3 3 12 6 0 0 2	0 3 10 3 3 3	4 3 17 5 0 0	4 4 24 1 4 5	5 25 2 4 4	5 25 4 1 3	s 0.0 6 5 0.0 5	6 6 0 0 7 7	0.51 3 0.02 0.15	0.80 5 0.00 0.00	1 0.02 0.26	2 0.02 0.21	0. 0. 0.
The site should enable convenience of access for friends, family and visitors and access to essential local amenities.         The site should enable effective patient, visitor and logistical separation.         Patient Disruption, Staffing and Support Issues         The site should enable patient, staff, neighbour and visitor disruption to be minimised during development.         The site should enable staff, patient and visitor scurity relating to location and out-of-hours safety to be maximised.         Construction and Buildability issues	3.4% 5.1% 29.1% 0.6% 5.1% 3.4% 9.1%	3 3 12 6 0 0 2 2 2 5	0 3 10 3 3 3 3 9 4	4 3 17 5 0 0 3 3 3	4 4 24 1 4 5 4 13	5 25 2 4 4 4 4 12 2	5 25 4 1 3 3 7 3	s 0.0 s 0.0 s 0.0 s 0.0 s 0.0	6 0 0 0 7 7 7	0.51 3 0.02 0.15 0.10 0.27 4	0.80 5 0.00 0.00 0.10 0.10 6	1 0.02 0.26 0.14 0.42 1	2 0.02 0.21 0.14 0.36 2	0. 0. 0.
5       The site should enable convenience of access for friends, family and visitors and access to essential local amenities.         6       The site should enable effective patient, visitor and logistical separation.         7       Patient Disruption, Staffing and Support Issues         1       The site should enable patient, staff, neighbour and visitor disruption to be minimised during development.         2       The site and its development should have a positive effect on staff recruitment and selection.         3       The site should enable staff, patient and vistor security relating to location and out-of-hours safety to be maximised.         Construction and Buildability issues       1         1       The site should enable construction logistics to be optimal	3.4% 5.1% 29.1% 0.0% 5.1% 3.4% 9.1% 0.0% 0.0%	3 3 12 6 0 0 2 2 2 5 1	0 3 10 3 3 3 3 9 4 0	4 3 17 5 0 0 3 3 3 6 0	4 4 24 1 4 5 4 13 1 5	5 25 2 4 4 4 12 2 4	5 25 4 1 3 3 7 7 3 3 3 3	s 0.0 s 0.0 s 0.0 s 0.0 s 0.0 s 0.0 s 0.0	6 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0.51 3 0.02 0.15 0.10 0.27 4 0.00	0.80 5 0.00 0.00 0.10 0.10 6 0.00	1 0.02 0.26 0.14 0.42 1 0.04	2 0.02 0.21 0.14 0.36 2 0.03	0.
The site should enable convenience of access for friends, family and visitors and access to essential local amenities.         The site should enable effective patient, visitor and logistical separation.         Patient Disruption, Staffing and Support Issues         The site should enable patient, staff, neighbour and visitor disruption to be minimised during development.         The site should enable patient, staff, neighbour and visitor disruption to be minimised during development.         The site and its development should have a positive effect on staff recruitment and selection.         The site should enable staff, patient and vistor security relating to location and out-of-hours safety to be maximised.         Construction and Buildability issues         The site should enable construction logistics to be optimal         Access to the site for construction vehicles, deliveries and waste removal should be convenient.	3.4% 5.1% 29.1% 0.0% 5.1% 3.4% 9.1% 0.0% 0.9%	3 3 12 6 0 0 2 2 2 5 1 1 1	0 3 10 3 3 3 9 4 0 0	4 3 17 5 0 0 3 3 6 0 1	4 4 24 1 4 5 4 13 13 5 5 5	5 25 4 4 4 12 2 4 4 4	5 25 4 1 3 3 7 7 3 3 3 3 3 3 3	s 0.0 s	6	0.51 3 0.02 0.15 0.10 0.27 4 0.00 0.00	0.80 5 0.00 0.00 0.10 0.10 6 0.00 0.01	1 0.02 0.26 0.14 0.42 1 0.04 0.04	2 0.02 0.21 0.14 0.36 2 0.03 0.03	0.
<ul> <li>Patient Disruption, Staffing and Support Issues         <ul> <li>The site should enable patient, staff, neighbour and visitor disruption to be minimised during development.</li> <li>The site and its development should have a positive effect on staff recruitment and selection.</li> <li>The site should enable staff, patient and vistor security relating to location and out-of-hours safety to be maximised.</li> </ul> </li> <li>Construction and Buildability issues         <ul> <li>The site should enable construction logistics to be optimal</li> </ul> </li> </ul>	3.4%           3.1%           5.1%           29.1%           0.0%           0.5%           0.1%           0.0%           0.0%           0.0%           0.0%	3 3 12 6 0 0 2 2 2 5 1 1 1 0	0 3 10 3 3 3 9 4 0 0 0 3	4 3 17 5 0 0 3 3 3 6 0 1 1 0	4 4 24 4 5 4 13 13 5 5 5 5	5 25 4 4 4 4 12 2 4 4 4 5	5 25 4 1 3 3 7 1 3 3 3 3 1	5 0.0 5	6 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0.51 3 0.02 0.15 0.10 0.27 4 0.00 0.00 0.00	0.80 5 0.00 0.10 0.10 6 0.00 0.01 0.01	1 0.02 0.26 0.14 0.42 1 0.04 0.04 0.04	2 0.02 0.21 0.14 0.36 2 0.03 0.03 0.03	0.0 0.: 0.: 0.1 0.0 0.0
5       The site should enable convenience of access for friends, family and visitors and access to essential local amenities.         6       The site should enable effective patient, visitor and logistical separation.         7       Patient Disruption, Staffing and Support Issues         1       The site should enable patient, staff, neighbour and visitor disruption to be minimised during development.         2       The site should enable patient, staff, neighbour and visitor disruption to be minimised during development.         3       The site should enable staff, patient and vistor security relating to location and out-of-hours safety to be maximised.         Construction and Buildability issues         1       The site should enable construction logistics to be optimal         2       Access to the site for construction whicles, deliveries and waste removal should be convenient.	3.4% 5.1% 29.1% 0.0% 5.1% 3.4% 9.1% 0.0% 0.9%	3 3 12 6 0 0 2 2 2 5 1 1 1 0	0 3 10 3 3 3 9 4 0 0	4 3 17 5 0 0 3 3 6 0 1	4 4 24 1 4 5 4 13 13 5 5 5	5 25 4 4 4 12 2 4 4 4	5 25 4 1 3 3 7 7 3 3 3 3 3 3 3	s 0.0 s	6 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0.51 3 0.02 0.15 0.10 0.27 4 0.00 0.00	0.80 5 0.00 0.00 0.10 0.10 6 0.00 0.01	1 0.02 0.26 0.14 0.42 1 0.04 0.04	2 0.02 0.21 0.14 0.36 2 0.03 0.03	4 0.0 1.0 0.1 0.2 0.2 0.0 0.0
5       The site should enable convenience of access for friends, family and visitors and access to essential local amenities.         6       The site should enable effective patient, visitor and logistical separation.         Patient Disruption, Staffing and Support Issues         1       The site should enable patient, staff, neighbour and visitor disruption to be minimised during development.         2       The site should enable patient, staff, neighbour and visitor disruption to be minimised during development.         3       The site should enable staff, patient and vistor security relating to location and out-of-hours safety to be maximised.         Construction and Buildability issues         1       The site should enable construction logistics to be optimal         2       Access to the site for construction vehicles, deliveries and waste removal should be convenient.	3.4%           3.1%           5.1%           29.1%           0.0%           0.5%           0.1%           0.0%           0.0%           0.0%           0.0%	3 3 12 6 0 0 2 2 2 5 1 1 1 0	0 3 10 3 3 3 9 4 0 0 0 3	4 3 17 5 0 0 3 3 3 6 0 1 1 0	4 4 24 4 5 4 13 13 5 5 5 5	5 25 4 4 4 4 12 2 4 4 4 5	5 25 4 1 3 3 7 1 3 3 3 3 1	5 0.0 5	6 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	0.51 3 0.02 0.15 0.10 0.27 4 0.00 0.00 0.00	0.80 5 0.00 0.10 0.10 6 0.00 0.01 0.01	1 0.02 0.26 0.14 0.42 1 0.04 0.04 0.04	2 0.02 0.21 0.14 0.36 2 0.03 0.03 0.03	2.0 2.0 2.0 2.0 2.0 2.0 0.0 0.0

CR025 - Risks Scoring Summary			NON WEIGHTED RESULTS							WEIGHTED RESULTS				
		А	в	с	D	E	F	j	А	В	С	D	E	F
<u>Notes:</u> Please populate cells highlighted in Yellow only		Dual Site Mixed New build & refurbishment	Overdale 100% New build	Jersey General 100% New Build	Waterfront 100% New Build	People's Park 100% New Build	Jersey General		Dual Site Mixed New build & refurbishment	Overdale 100% New build	Jersey General 100% New Build	Waterfront 100% New Build	People's Park 100% New Build	Jersey General
		6	5	4	1	3	2		6	5	4	1	2	3
	Results	237	207	203	94	114	<b>109</b> é	500	9.94	8.68	8.24	3.06	3.58	4.10
		40%	35%	34%	16%	19%	18%	L	40%	35%	33%	12%	14%	16%
CRITERIA & SUB CRITERIA	Weighting													
1 Planning and Environment	0.0%	3	6	2	4	5	1		3	6	2	4	5	1
1.1 Failure to obtain necessary Planning Authority or use consents in a timely manner.	0.8%	4	12	6	16	16	4	25	0.03	0.10	0.05	0.13	0.13	0.03
1.2 Unforeseen further obligated provision / costs / time required to satsify Planning Authority or related Stakeholder Requirements.	0.8%	9	16	6	12	20	4	25	0.07	0.13	0.05	0.10	0.16	0.03
Public opinion and or local media oppose the site making political progression     impractical.	1.2%	20	25	9	10	10	3		0.24	0.30	0.11	0.12	0.12	0.04
Delay to full or partial site availability delays construction and results in loss of	0.8%	2	12	12	4	12	9	25	0.02	0.10	0.10	0.03	0.10	0.07
project viability.	3.6%		65	33	42	58	20	25	0.36	0.62	0.30	0.38	0.50	0.17
2 Transport and Access	0.0%	5	6	4	3	1	1		6	4	5	3	1	1
2.1 Failure to overcome transport or environmental issues or obligations raised by the	0.8%	9	16	4	3	3	2		0.07	0.13	0.03	0.02	0.02	0.02
transport authorities and / or environmental regulators.           2.2         Failure to be able to develop a viable Sustainable Transport Plan.	0.8%		10	1	0	0		25 25	0.05	0.10	0.01	0.00	0.00	0.01
2.3 Long-term impact results from site compromises resulting in inflexible, inefficient or inaccessible design.	7.2%	15	9	12	4	2	2	25	1.08	0.65	0.86	0.29	0.14	0.14
	8.8%	30	37	17	7	5	5		1.20	0.87	0.90	0.31	0.17	0.17
3 Services Infrastructure	0.0%	3	3	1	6	5	1		4	4	1	4	3	1
3.1 Unsustainable increased cost or impact arising from requirement to provide robust power supplies.	4.8%	2	2	2	2	2	2		0.10	0.10	0.10	0.10	0.10	0.10
3.2 Unsustainable increased cost or impact arising from requirement to provide robust	4.8%	2	2	1	1	1	1	25	0.10	0.10	0.05	0.05	0.05	0.05
utility supplies. 3.3 Increased cost or unviable impact arising from requirement to address climate	0.8%	2	2	2	8	4	2	25	0.02	0.02	0.02	0.06	0.03	0.02
change impact.	1 10.4%		6	5	11	7	5	25	0.21	0.21	0.16	0.21	0.18	0.16
									ļ				ļ	
Clinical and Non Clinical support     A.1     Failure to meet preferred departmental sizes, relationships and clinical adjacencies.	0.0%	6 15	4	5	4	1	3		6	4	5 0.86	1 0.29	2 0.43	3
<ul> <li>4.2 Risk that the site cannot accommodate future flexibility or additional or reduced</li> </ul>	7.2%		12	12		6		25	1.08					0.43
capacity in the event of hospital failure.	7.2%		12	12	4	4		25	0.65	0.86	0.86	0.29	0.29	0.43
Risk of the site choice introducing key safety, maintenance or operational concern.           4.4         Risk of the site selection and hospital design not optimising opportunities for healing	7.2%		9	12	4	2		25	1.08	0.65	0.86	0.29	0.14	0.43
environment.	7.2%		1	9	2	2		25	0.86	0.07	0.65	0.14	0.14	0.29
	28.8%	51	34	45	14	14	22		3.67	2.45	3.24	1.01	1.01	1.58
5 Staff and Patient Issues	0.0%	5	6	4	1	2	3		5	6	4	1	2	3
5.1 Fixed point in site (e.g. listed buildings, planning restrictions etc.) constrain or prevent clinically optimal adjacencies or functioning.	7.2%	10	12	10	1	4	8	25	0.72	0.86	0.72	0.07	0.29	0.58
5.2 Fixed point in site (e.g. listed buildings, planning restrictions etc.) prevent service development appropriate for future needs.	7.2%	12	12	12	1	4	4	25	0.86	0.86	0.86	0.07	0.29	0.29
5.3 Site spatial compromises place unacceptably high risk of unsustainable or unsafe operation.	7.2%	8	6	6	2	0	6	25	0.58	0.43	0.43	0.14	0.00	0.43
5.4 The site should impacts on the quality of the patient environment to be high and privacy and dignity to be achieved.	4.8%	1	1	1	2	3	1	25	0.05	0.05	0.05	0.10	0.14	0.05
5.5 Potential Travel Plan associated with Site does not mitigate impact of environmental impact of access, egress and transport between sites.	7.2%	12	16	2	2	1	1	25	0.86	1.15	0.14	0.14	0.07	0.07
<ul> <li>5.6 Site constraints prevent optimum separation of clinical, patient, visitor and logistical flows, where these cannot be separated temporally.</li> </ul>	7.2%	12	16	12	2	3	4	25	0.86	1.15	0.86	0.14	0.22	0.29
nows, where these cannot be separated temporary.	40.8%	55	63	43	10	15	24	25	3.94	4.51	3.07	0.67	1.01	1.70
6 Construction	0.0%	5	3	5	1	1	4		5	3	5	1	1	4
6.1 Risk to patient, staff, visitor and neighbour safety impact during construction arising	0.8%		2	20	0	0	12		0.16	0.02	0.16	0.00	0.00	0.10
from site restrictions. 6.2 Long construction disrupts functioning of hospital and working environment -	1.2%	20	0	20	0	0	12	25	0.24	0.00	0.24	0.00	0.00	0.14
negatively impacts on recruitment and selection.           6.3         Risk to staff safety and / or sense of well being as long familiar environment	0.8%		0	20	0	0	9	25	0.16	0.00	0.16	0.00	0.00	0.07
transforms more quickly than staff can adjust to.	1		2	60	0	0	33	25	0.56	0.02	0.56	0.00	0.00	0.31
7 Development Opportunity	0.0%	1	1	1	5	6	1		1	1	1	5	6	1
7.1 Additional cost or opportunity cost inherent with development of this site (outside	4.8%		0	0	10	15	0		0.00	0.00	0.00	0.48	0.72	0.00
of financial assessment).	4.8%		0	0	10	15	0	25	0.00	0.00	0.00	0.48	0.72	0.00
	Score	237	207	203	94	114	109		9.94	8.68	8.24	3.06	3.58	4.10
	RANK						2		6	5	4	1		

100%

Optic				
Dual	Site Mixed New build & refurbishment		RAW SCORE	
Risk Id	*Description of RISK	Impact	Likelyhood	RESULT
1	Planning and Environment			
1.1	Failure to obtain necessary Planning Authority or use consents in a timely manner.	2	2	4.0
1.2	Unforeseen further obligated provision / costs / time required to satsify Planning Authority or related Stakeholder Requirements.	3	3	9.0
1.3	Public opinion and or local media oppose the site making political progression impractical.	4	5	20.0
1.4	Delay to full or partial site availability delays construction and results in loss of project viability.	1	2	2.0
		Criter	ia Mean	8.8
2	Transport and Access			
2.1	Failure to overcome transport or environmental issues or obligations raised by the transport authorities and / or environmental regulators.	3	3	9.0
2.2	Failure to be able to develop a viable Sustainable Transport Plan.	2	3	6.0
2.3	Long-term impact results from site compromises resulting in inflexible, inefficient or inaccessible design.	3	5	15.0
	,	Criter	ia Mean	10.0
3	Services Infrastructure			
3.1	Unsustainable increased cost or impact arising from requirement to provide robust power supplies.	1	2	2.0
3.2	Unsustainable increased cost or impact arising from requirement to provide robust utility supplies.	1	2	2.0
3.3	Increased cost or unviable impact arising from requirement to address climate change impact.	1	2	2.0
	· ·	Criter	ia Mean	2.0
4	Clinical and Non Clinical support			
4.1	Failure to meet preferred departmental sizes, relationships and clinical adjacencies.	3	5	15.0
4.2	Risk that the site cannot accommodate future flexibility or additional or reduced capacity in the event of hospital failure.	3	3	9.0
4.3	Risk of the site choice introducing key safety, maintenance or operational concern.	3	5	15.0
4.4	Risk of the site selection and hospital design not optimising opportunities for healing environment.	3	4	12.0
		Criter	ia Mean	12.8
5	Staff and Patient Issues			
5.1	Fixed point in site (e.g. listed buildings, planning restrictions etc.) constrain or prevent clinically optimal adjacencies or functioning.	2	5	10.0
5.2	Fixed point in site (e.g. listed buildings, planning restrictions etc.) prevent service development appropriate for future needs.	3	4	12.0
5.3	Site spatial compromises place unacceptably high risk of unsustainable or unsafe operation.	2	4	8.0
5.4	The site should impacts on the quality of the patient environment to be high and privacy and dignity to be achieved.	1	1	1.0
5.5	Potential Travel Plan associated with Site does not mitigate impact of environmental impact of access, egress and transport between sites.	3	4	12.0
5.6	Site constraints prevent optimum separation of clinical, patient, visitor and logistical flows, where these cannot be separated temporally.	3	4	12.0
	· · · ·	Criter	ia Mean	9.2
6	Construction			
6.1	Risk to patient, staff, visitor and neighbour safety impact during construction arising from	4	5	20.0
6.2	site restrictions. Long construction disrupts functioning of hospital and working environment - negatively impacts on recruitment and coloction	4	5	20.0
6.3	impacts on recruitment and selection. Risk to staff safety and / or sense of well being as long familiar environment transforms	4	5	20.0
	more quickly than staff can adjust to.	Criter	ia Mean	20.0
7	Development Opportunity			
7.1	Additional cost or opportunity cost inherent with development of this site (outside of	0	0	0.0
	financial assessment).	Criter	ia Mean	0.0
		enter		0.0

# **Option B**

Over	dale 100% New build			
Risk Id	*Description of RISK	Impact	Likelyhood	RESULT
1	Planning and Environment			
1.1	Failure to obtain necessary Planning Authority or use consents in a timely manner.	4	3	12.0
1.2	Unforeseen further obligated provision / costs / time required to satsify Planning Authority or related Stakeholder Requirements.	4	4	16.0
1.3	Public opinion and or local media oppose the site making political progression impractical.	5	5	25.0
1.4	Delay to full or partial site availability delays construction and results in loss of project viability.	4	3	12.0
		Criter	ia Mean	16.3
2	Transport and Access			
2.1	Failure to overcome transport or environmental issues or obligations raised by the transport authorities and / or environmental regulators.	4	4	16.0
2.2	Failure to be able to develop a viable Sustainable Transport Plan.	3	4	12.0
2.3	Long-term impact results from site compromises resulting in inflexible, inefficient or inaccessible design.	3	3	9.0
		Criter	ia Mean	12.3
3	Services Infrastructure			
3.1	Unsustainable increased cost or impact arising from requirement to provide robust power supplies.	1	2	2.0
3.2	Unsustainable increased cost or impact arising from requirement to provide robust utility supplies.	1	2	2.0
3.3	Increased cost or unviable impact arising from requirement to address climate change impact.	1	2	2.0
		Criter	ia Mean	2.0
4	Clinical and Non Clinical support			
4.1	Failure to meet preferred departmental sizes, relationships and clinical adjacencies.	3	4	12.0
4.2	Risk that the site cannot accommodate future flexibility or additional or reduced capacity in the event of hospital failure.	3	4	12.0
4.3	Risk of the site choice introducing key safety, maintenance or operational concern.	3	3	9.0
4.4	Risk of the site selection and hospital design not optimising opportunities for healing environment.	1	1	1.0
		Criter	ia Mean	8.5
5	Staff and Patient Issues			
5.1	Fixed point in site (e.g. listed buildings, planning restrictions etc.) constrain or prevent clinically optimal adjacencies or functioning.	4	3	12.0
5.2	Fixed point in site (e.g. listed buildings, planning restrictions etc.) prevent service development appropriate for future needs.	4	3	12.0
5.3	Site spatial compromises place unacceptably high risk of unsustainable or unsafe operation.	2	3	6.0
5.4	The site should impacts on the quality of the patient environment to be high and privacy and dignity to be achieved.	1	1	1.0
5.5	Potential Travel Plan associated with Site does not mitigate impact of environmental impact of access, egress and transport between sites.	4	4	16.0
5.6	Site constraints prevent optimum separation of clinical, patient, visitor and logistical flows, where these cannot be separated temporally.	4	4	16.0
		Criter	ia Mean	10.5
6	Construction			
6.1	Risk to patient, staff, visitor and neighbour safety impact during construction arising from site restrictions.	1	2	2.0
6.2	Long construction disrupts functioning of hospital and working environment - negatively impacts on recruitment and selection.	0	1	0.0
6.3	Risk to staff safety and / or sense of well being as long familiar environment transforms more quickly than staff can adjust to.	0	1	0.0
		Criter	0.7	
7	Development Opportunity			
7.1	Additional cost or opportunity cost inherent with development of this site (outside of financial assessment).	0	2	0.0
		Criter	ia Mean	0.0

#### Option C Jersey General 100% New Build

4.3

Jersey	General 100% New Build		RAW SCOP	RE
Risk Id	*Description of RISK	Impact	Likelyhoo d	RESULT
1	Planning and Environment			
1.1	Failure to obtain necessary Planning Authority or use consents in a timely manner.	3	2	6.0
1.2	Unforeseen further obligated provision / costs / time required to satsify Planning Authority or related Stakeholder Requirements.	2	3	6.0
1.3	Public opinion and or local media oppose the site making political progression impractical.	3	3	9.0
1.4	Delay to full or partial site availability delays construction and results in loss of project viability.	4	3	12.0
		Criteria	a Mean	8.3
2	Transport and Access			
2.1	Failure to overcome transport or environmental issues or obligations raised by the transport authorities and / or environmental regulators.	2	2	4.0
2.2	Failure to be able to develop a viable Sustainable Transport Plan.	1	1	1.0
2.3	Long-term impact results from site compromises resulting in inflexible, inefficient or inaccessible design.	3	4	12.0
		Criteria	a Mean	5.7
3	Services Infrastructure			
3.1	Unsustainable increased cost or impact arising from requirement to provide robust power supplies.	1	2	2.0
3.2	Unsustainable increased cost or impact arising from requirement to provide robust utility supplies.	1	1	1.0
3.3	Increased cost or unviable impact arising from requirement to address climate change impact.	1	2	2.0
		Criteria	a Mean	1.7
4	Clinical and Non Clinical support			
4.1	Failure to meet preferred departmental sizes, relationships and clinical adjacencies.	3	4	12.0
4.2	Risk that the site cannot accommodate future flexibility or additional or reduced capacity in the event of hospital failure.	3	4	12.0

4.4	Risk of the site selection and hospital design not optimising opportunities for healing environment.	3	3	9.0
		Criteria	a Mean	11.3
5	Staff and Patient Issues			
5.1	Fixed point in site (e.g. listed buildings, planning restrictions etc.) constrain or prevent clinically optimal adjacencies or functioning.	2	5	10.0
5.2	Fixed point in site (e.g. listed buildings, planning restrictions etc.) prevent service development appropriate for future needs.	3	4	12.0
5.3	Site spatial compromises place unacceptably high risk of unsustainable or unsafe operation.	2	3	6.0
5.4	The site should impacts on the quality of the patient environment to be high and privacy and dignity to be achieved.	1	1	1.0
5.5	Potential Travel Plan associated with Site does not mitigate impact of environmental impact of access, egress and transport between sites.	1	2	2.0
5.6	Site constraints prevent optimum separation of clinical, patient, visitor and logistical flows, where these cannot be separated temporally.	3	4	12.0
		Criteria	a Mean	7.2

Risk of the site choice introducing key safety, maintenance or operational concern.

6	Construction			
6.1	Risk to patient, staff, visitor and neighbour safety impact during construction arising from site restrictions.	4	5	20.0
6.2	Long construction disrupts functioning of hospital and working environment - negatively impacts on recruitment and selection.	4	5	20.0
6.3	Risk to staff safety and / or sense of well being as long familiar environment transforms more quickly than staff can adjust to.	4	5	20.0
		Criteria	Mean	20.0
7	Development Opportunity			
7.1	Additional cost or opportunity cost inherent with development of this site (outside of financial assessment).	0	0	0.0
		Criteria	Mean	0.0

12.0

3

4

#### Option D ••• .... .

Waterfr	ont 100% New Build		RAW SCOR	
Risk Id	*Description of RISK	Impact	Likelyhoo d	RESULT
1	Planning and Environment	I		
1.1	Failure to obtain necessary Planning Authority or use consents in a timely manner.	4	4	16.0
1.2	Unforeseen further obligated provision / costs / time required to satsify Planning Authority or related Stakeholder Requirements.	4	3	12.0
1.3	Public opinion and or local media oppose the site making political progression impractical.	5	2	10.0
1.4	Delay to full or partial site availability delays construction and results in loss of project viability.	4	1	4.0
		Criteri	10.5	
2	Transport and Access			
2.1	Failure to overcome transport or environmental issues or obligations raised by the transport authorities and / or environmental regulators.	3	1	3.0
2.2	Failure to be able to develop a viable Sustainable Transport Plan.	0	1	0.0
2.3	Long-term impact results from site compromises resulting in inflexible, inefficient or inaccessible design.	2	2	4.0
		Criteri	a Mean	2.3
3	Services Infrastructure			
3.1	Unsustainable increased cost or impact arising from requirement to provide robust power supplies.	1	2	2.0
3.2	Unsustainable increased cost or impact arising from requirement to provide robust utility supplies.	1	1	1.0
3.3	Increased cost or unviable impact arising from requirement to address climate change impact.	2	4	8.0
		Criteri	a Mean	3.7
4	Clinical and Non Clinical support			
4.1	Failure to meet preferred departmental sizes, relationships and clinical adjacencies.	2	2	4.0
4.2	Risk that the site cannot accommodate future flexibility or additional or reduced capacity in the event of hospital failure.	2	2	4.0
4.3	Risk of the site choice introducing key safety, maintenance or operational concern.	2	2	4.0
4.4	Risk of the site selection and hospital design not optimising opportunities for healing environment.	2	1	2.0
		Criteri	a Mean	3.5
5	Staff and Patient Issues			
5.1	Fixed point in site (e.g. listed buildings, planning restrictions etc.) constrain or prevent clinically optimal adjacencies or functioning.	1	1	1.0
5.2	Fixed point in site (e.g. listed buildings, planning restrictions etc.) prevent service development appropriate for future needs.	1	1	1.0
5.3	Site spatial compromises place unacceptably high risk of unsustainable or unsafe operation.	2	1	2.0
5.4	The site should impacts on the quality of the patient environment to be high and privacy and dignity to be achieved.	1	2	2.0
5.5	Potential Travel Plan associated with Site does not mitigate impact of environmental impact of access, egress and transport between sites.	1	2	2.0
5.6	Site constraints prevent optimum separation of clinical, patient, visitor and logistical flows, where these cannot be separated temporally.	1	2	2.0
		Criteri	a Mean	1.7
6	Construction			
6.1	Risk to patient, staff, visitor and neighbour safety impact during construction arising from site restrictions.	0	0	0.0
6.2	Long construction disrupts functioning of hospital and working environment - negatively impacts on recruitment and selection.	0	0	0.0
6.3	Risk to staff safety and / or sense of well being as long familiar environment transforms more quickly than staff can adjust to.	0	0	0.0
		Criteri	a Mean	0.0
7	Development Opportunity			
7.1	Additional cost or opportunity cost inherent with development of this site (outside of financial assessment).	2	5	10.0

Criteria Mean

10.0

#### Option E People's Park 100% New Build

People'	s Park 100% New Build		RAW SCOR	
Risk Id	*Description of RISK		Likelihoo d	RESULT
1	Planning and Environment			
1.1	Failure to obtain necessary Planning Authority or use consents in a timely manner.	4	4	16.0
1.2	Unforeseen further obligated provision / costs / time required to satsify Planning Authority or related Stakeholder Requirements.	5	4	20.0
1.3	Public opinion and or local media oppose the site making political progression impractical.	5	2	10.0
1.4	Delay to full or partial site availability delays construction and results in loss of project viability.	4	3	12.0
I		Criteri	a Mean	14.5
2	Transport and Access			
2.1	Failure to overcome transport or environmental issues or obligations raised by the transport authorities and / or environmental regulators.	3	1	3.0
2.2	Failure to be able to develop a viable Sustainable Transport Plan.	0	1	0.0
2.3	Long-term impact results from site compromises resulting in inflexible, inefficient or inaccessible design.	2	1	2.0
		Criteri	a Mean	1.7
3	Services Infrastructure			
3.1	Unsustainable increased cost or impact arising from requirement to provide robust power supplies.	1	2	2.0
3.2	Unsustainable increased cost or impact arising from requirement to provide robust utility supplies.	1	1	1.0
3.3	Increased cost or unviable impact arising from requirement to address climate change impact.	2	2	4.0
		Criteri	a Mean	2.3
4	Clinical and Non Clinical support			
4.1	Failure to meet preferred departmental sizes, relationships and clinical adjacencies.	2	3	6.0
4.2	Risk that the site cannot accommodate future flexibility or additional or reduced capacity in the event of hospital failure.	2	2	4.0
4.3	Risk of the site choice introducing key safety, maintenance or operational concern.	2	1	2.0
4.4	Risk of the site selection and hospital design not optimising opportunities for healing environment.	2	1	2.0
-		Criteri	a Mean	3.5
5	Staff and Patient Issues			
5.1	Fixed point in site (e.g. listed buildings, planning restrictions etc.) constrain or prevent clinically optimal adjacencies or functioning.	4	1	4.0
5.2	Fixed point in site (e.g. listed buildings, planning restrictions etc.) prevent service development appropriate for future needs.	4	1	4.0
5.3	Site spatial compromises place unacceptably high risk of unsustainable or unsafe operation.	5	0	0.0
5.4	The site should impacts on the quality of the patient environment to be high and privacy and dignity to be achieved.	3	1	3.0
5.5	Potential Travel Plan associated with Site does not mitigate impact of environmental impact of access, egress and transport between sites.	1	1	1.0
5.6	Site constraints prevent optimum separation of clinical, patient, visitor and logistical flows, where these cannot be separated temporally.	3	1	3.0
		Criteri	a Mean	2.5
6	Construction			
6.1	Risk to patient, staff, visitor and neighbour safety impact during construction arising from site restrictions.	0	0	0.0
6.2	Long construction disrupts functioning of hospital and working environment - negatively impacts on recruitment and selection. Risk to staff safety and / or sense of well being as long familiar environment transforms more	0	0	0.0
6.3	risk to stall safety and 7 of sense of wen being as long familiar environment transforms more quickly than staff can adjust to.	0	0	0.0
_		Criteri	a Mean	0.0
7	Development Opportunity			
7.1	Additional cost or opportunity cost inherent with development of this site (outside of financial assessment).	5	3	15.0
		Criteri	a Mean	15.0

#### Option F Jersey General Hospital

Nak Jul       Planning and Environment       Image: Image	Jersey G	ersey General Hospital		RAW SCORE			
Image: Participand Environment:       4       1         1.1       Failure to both and ecessary Planning Authority or ves consents in a timely manner.       4       1       4         2.2       Unforescent further oblighted provision / costs / time required to satisfy Planning Authority or related Stakeholder Requirements.       3       1       3       1       3       3       1       3       3       1       3 <t< th=""><th>-</th><th></th><th>Impact</th><th></th><th>RESULT</th></t<>	-		Impact		RESULT		
2     Unforeseen further obligated provision / costs / time required to astisfy Planning Authority or related Stakeholder Requirements.     2     2     4      3     Public opinion and or local media oppose the site making political progression impractical.     3     1     3     3      4     Delay to full or partial site availability delays construction and results in loss of project viability.     3     3     3     3       2     Transport and Access     Criteria Mean     1     1     1     1       2     Failure to overticome transport or environmental regulators.     1     1     1     1     1       3:3     Congeterm impact results from site compromises resulting in inflexible, inefficient or inaccessible design.     2     1     2     1     2       Criteria Mean       Services infrastructure       1     2     2       Unsustainable increased cost or impact arising from requirement to provide robust power supplies.     1     1     1     1       Criteria Mean       1     2     3       Criteria Mean       2     2       Criteria Mean       1     2       Criteria Mean       1     2     2	1	Planning and Environment		u			
related Stakeholder Requirements.223.3Public opinion and or local media oppose the site making political progression impractical.313.4Delay to full or partial site availability delays construction and results in loss of project viability.333.4Tansport and AccessCriteria Mean212.5Failure to overcome transport or environmental regulators.2111.2Failure to overcome transport or environmental regulators.2111.3Long to be able to develop a vabile Sustainable Transport Plan.1112.3Services InfrastructureCriteria Mean12221.4Services Infrastructure1223666<	1.1		4	1	4.0		
A4       Delay to full or partial site availability delays construction and results in loss of project viability.       3       3       3         A4       Delay to full or partial site availability delays construction and results in loss of project viability.       3       3       3         A4       Transport and Access	1.2		2	2	4.0		
Criteria Mean       5.         Criteria Mean       5.         Criteria Mean       2       1         2.1       Criteria Mean       2       1         2.1       2       1       2       2       1       2       2       1       2 <th 2"2"2"2"2"2"2"2"2"2"2"2"2"2"2"2"2"2<="" colspan="2" td=""><td>1.3</td><td>Public opinion and or local media oppose the site making political progression impractical.</td><td>3</td><td>1</td><td>3.0</td></th>	<td>1.3</td> <td>Public opinion and or local media oppose the site making political progression impractical.</td> <td>3</td> <td>1</td> <td>3.0</td>		1.3	Public opinion and or local media oppose the site making political progression impractical.	3	1	3.0
Image: constraint of the set of the se	1.4	Delay to full or partial site availability delays construction and results in loss of project viability.	3	3	9.0		
1.1       Failure to vercome transport or environmental issues or obligations raised by the transport       2       1       2.2         1.2       Failure to be able to develop a viable Sustainable Transport Plan.       1 <td< td=""><td></td><td></td><td>Criteria</td><td>a Mean</td><td>5.0</td></td<>			Criteria	a Mean	5.0		
1.1authorities and / or environmental regulators.111<	2						
1.3       Long-term impact results from site compromises resulting in inflexible, inefficient or inaccessible       2       1       2.4         1.4       Services Infrastructure       Criteria Mean       1       2.4         1.1       Unsustainable increased cost or impact arising from requirement to provide robust power supplies.       1       1       2.4         1.3       Increased cost or unviable impact arising from requirement to provide robust utility supplies.       1       1       2.4         1.3.1       Increased cost or unviable impact arising from requirement to address climate change impact.       1       2       2.4         1.3.3       Increased cost or unviable impact arising from requirement to address climate change impact.       1       2       3.4       6.6         1.4       Failure to meet preferred departmental sizes, relationships and clinical adjacencies.       2       3       6.6         1.4       Risk that the site canot accommodate future flexibility or additional or reduced capacity in the event of hospital failure.       2       3       6.6         1.4       Risk of the site choice introducing key safety, maintenance or operational concern.       2       2       4       4         1.4       Risk of the site choice introducing key safety, maintenance or operational concern.       2       2       4       4         1.4	2.1	authorities and / or environmental regulators.			2.0		
3.3       design.       2       1       2       2         Services Infrastructure       1       2       2         1.1       Unsustainable increased cost or impact arising from requirement to provide robust power supplies.       1       1       2       2         1.2       Unsustainable increased cost or impact arising from requirement to address climate change impact.       1       1       2       2         1.3       Increased cost or unviable impact arising from requirement to address climate change impact.       1       2       2       2         1.1       Clinical and Non Clinical support       Criteria Mean       1       1       2       2       3       6         1.2       Risk that the site cannot accommodate future flexibility or additional or reduced capacity in the event of hospital failure.       2       3       6         1.3       Risk of the site choice introducing key safety, maintenance or operational concern.       2       2       4       4         1.4       Risk of the site selection and hospital design not optimising opportunities for healing environment.       2       2       4       4         1.2       Fixed point in site (e.g. listed buildings, planning restrictions etc.) constrain or prevent clinically optimal adjacencies or functioning.       2       2       2       4       4	2.2		1	1	1.0		
i.i.       Services infrastructure       1       2       2         1.1       Unsustainable increased cost or impact arising from requirement to provide robust power supplies.       1 </td <td>2.3</td> <td></td> <td>2</td> <td>1</td> <td>2.0</td>	2.3		2	1	2.0		
1.1       Unsustainable increased cost or impact arising from requirement to provide robust power supplies.       1       2       2.4         1.2       Unsustainable increased cost or impact arising from requirement to provide robust utility supplies.       1       1       1.4         1.3       Increased cost or unviable impact arising from requirement to address climate change impact.       1       2       2.4         1.3       Increased cost or unviable impact arising from requirement to address climate change impact.       1       2       2.4         1.4       Clinical and Non Clinical support       1       2       3       6.6         1.4       Failure to meet preferred departmental sizes, relationships and clinical adjacencies.       2       3       6.6         1.2       Risk to the site cannot accommodate future flexibility or additional or reduced capacity in the event of hospital failure.       2       3       6.6         1.3       Risk of the site choice introducing key safety, maintenance or operational concern.       2       2       4       4.8         1.4       Fixed point in site (e.g. listed buildings, planning restrictions etc.) constrain or prevent clinically optimal adjacencies or functioning.       2       2       2       4.4         1.4       Fixed point in site (e.g. listed buildings, planning restrictions etc.) prevent service development at parporprize for future needs.			Criteria	a Mean	1.7		
1.1supplies.1221.2Unsustainable increased cost or impact arising from requirement to provide robust utility supplies.1111.3.3Increased cost or unviable impact arising from requirement to address climate change impact.1122.41.3.3Increased cost or unviable impact arising from requirement to address climate change impact.1122.41.4Cilical and Non Clinical support11236.61.2Risk that the site cannot accommodate future flexibility or additional or reduced capacity in the event of hospital failure.236.61.3Risk of the site selection and hospital design not optimising opportunities for healing environment.2241.4Risk of the site selection and hospital design not optimising opportunities for healing environment.248.61.4Staff and Patient issuesCriteria Mean5.51.5Staff and Patient issues248.61.2Fixed point in site (e.g. listed buildings, planning restrictions etc.) prevent service development appropriate for future needs.236.63.3Site spatial compromises place unacceptably high risk of unsustainable or unsafe operation.236.63.4The site should impacts on the quality of the patient environment to be high and privacy and dignity to be achieved.1114.5Access, egress and transport between sites.342244.6Constr	3						
1.3       Increased cost or unviable impact arising from requirement to address climate change impact.       1       2       2.4         1.1       Failure to meet preferred departmental sizes, relationships and clinical adjacencies.       2       3       6.6         1.2       Risk that the site cannot accommodate future flexibility or additional or reduced capacity in the event of hospital failure.       2       3       6.6         1.3       Risk of the site choice introducing key safety, maintenance or operational concern.       2       3       6.6         1.4       Risk of the site choice introducing key safety, maintenance or operational concern.       2       2       4.4         1.4       Risk of the site choice introducing key safety, maintenance or operational concern.       2       2       4.4         1.4       Risk of the site choice introducing key safety, maintenance or operational concern.       2       2       4.4         1.4       Risk of the site selection and hospital design not optimising opportunities for healing environment.       2       2       4.4         5.1       Optimal adjacencies or functioning.       2       2       4       8.4         6.2       Site fail and Patient Issue       2       2       4.4         5.3       Site spatial compromises place unacceptably high risk of unsustainable or unsafe operation.       2	3.1		1	2	2.0		
Criteria Mean       Criteria Mean         1       Clinical and Non Clinical support       3         1.1       Failure to meet preferred departmental sizes, relationships and clinical adjacencies.       2       3       6.6         1.2       Risk that the site cannot accommodate future flexibility or additional or reduced capacity in the event of hospital failure.       2       3       6.6         3.3       Risk of the site choice introducing key safety, maintenance or operational concern.       2       3       6.6         3.4       Risk of the site selection and hospital design not optimising opportunities for healing environment.       2       2       4.4         6       Staff and Patient Issues       Criteria Mean       5       5         5.1       Fixed point in site (e.g. listed buildings, planning restrictions etc.) prevent service development appropriate for future needs.       2       2       4.4         6.3       Site spatial compromises place unacceptably high risk of unsustainable or unsafe operation.       2       3       6.6         7.5       Access, egress and transport between sites.       1	3.2	Unsustainable increased cost or impact arising from requirement to provide robust utility supplies.	1	1	1.0		
Clinical and Non Clinical supportVertical adjacencies.Vertical adjacencies.236.61.1Failure to meet preferred departmental sizes, relationships and clinical adjacencies.236.61.2Risk that the site cannot accommodate future flexibility or additional or reduced capacity in the event of hospital failure.236.63.3Risk of the site choice introducing key safety, maintenance or operational concern.236.63.4Risk of the site choice introducing key safety, maintenance or operational concern.236.63.4Risk of the site choice introducing key safety, maintenance or operational concern.236.63.4Risk of the site selection and hospital design not optimising opportunities for healing environment2244.84.4The site selection and hospital design not optimising opportunities for healing environment in site (e.g. listed buildings, planning restrictions etc.) prevent service development appropriate for future needs.2244.45.3Site spatial compromises place unacceptably high risk of unsustainable or unsafe operation.236.64.4The site should impacts on the quality of the patient environment to be high and privacy and dignity to be achieved.1115.5access, egress and transport between sites.22246Site constraits prevent optimum separation of clinical, patient, visitor and logistical flows, where these cannot be separated temporally. <td>3.3</td> <td>Increased cost or unviable impact arising from requirement to address climate change impact.</td> <td>1</td> <td>2</td> <td>2.0</td>	3.3	Increased cost or unviable impact arising from requirement to address climate change impact.	1	2	2.0		
1.1       Failure to meet preferred departmental sizes, relationships and clinical adjacencies.       2       3       6.4         1.2       Risk that the site cannot accommodate future flexibility or additional or reduced capacity in the event of hospital failure.       2       3       6.4         1.3       Risk of the site choice introducing key safety, maintenance or operational concern.       2       3       6.4         1.4       Risk of the site selection and hospital design not optimising opportunities for healing environment.       2       2       4.4         1.4       Risk of the site selection and hospital design not optimising opportunities for healing environment.       2       2       4.4         1.4       Risk of the site selection and hospital ges planning restrictions etc.) constrain or prevent clinically optimal adjacencies or functioning.       2       4       8.4         1.1       Fixed point in site (e.g. listed buildings, planning restrictions etc.) prevent service development appropriate for future needs.       2       3       6.4         3.3       Site spatial compromises place unacceptably high risk of unsustainable or unsafe operation.       2       3       6.4         4.4       dignity to be achieved.       1       1       1       1       1       1       1       1       1       1       1       1       1       1       1			Criteria	a Mean	1.7		
12       Risk that the site cannot accommodate future flexibility or additional or reduced capacity in the event of hospital failure.       2       3       6.0         13       Risk of the site choice introducing key safety, maintenance or operational concern.       2       3       6.0         14       Risk of the site selection and hospital design not optimising opportunities for healing environment.       2       2       4.0         14       Risk of the site selection and hospital design not optimising opportunities for healing environment.       2       2       4.0         15       Staff and Patient Issues	4						
1.2event of hospital failure.1.23.36.5.3.3Risk of the site choice introducing key safety, maintenance or operational concern.23.06.6.1.4Risk of the site choice introducing key safety, maintenance or operational concern.23.06.6.1.4Risk of the site selection and hospital design not optimising opportunities for healing environment.224.4.1.5Staff and Patient IssuesCriteria Mean224.6.1.6Fixed point in site (e.g. listed buildings, planning restrictions etc.) prevent service development appropriate for future needs.224.4.3.3Site spatial compromises place unacceptably high risk of unsustainable or unsafe operation.23.06.6.4The site should impacts on the quality of the patient environment to be high and privacy and dignity to be achieved.11.11.1.5Potential Travel Plan associated with Site does not mitigate impact of environmental impact of access, egress and transport between sites.2224.4.6Site constraints prevent optimum separation of clinical, patient, visitor and logistical flows, where restrictions.34126Long construction disrupts functioning of hospital and working environment - negatively impacts on recruitment and selection.34126.1ConstructionSite opportunity cost inherent with development of this site (outside of financial assesment).34126Development Opportunity cost inherent with development of t	4.1		2	3	6.0		
1.3       Risk of the site choice introducing key safety, maintenance or operational concern.       2       3       6.0         1.4       Risk of the site selection and hospital design not optimising opportunities for healing environment       2       2       4.4         Criteria Mean       5         Staff and Patient issues       Criteria Mean         Staff and Patient issues       Criteria Mean         Item is ite (e.g. listed buildings, planning restrictions etc.) constrain or prevent clinically appropriate for future needs.       Staff and Patient issues       A         Staff and prive or functioning.       2       2       4         A       A         A       Criteria Mean       1       1       1<	4.2		2	3	6.0		
Additional construction       2       2       4.4         Risk of the site selection and hospital design not optimising opportunities for healing environment.       2       2       4.4         Criteria Mean       5.3         Staff and Patient Issues       5         Fixed point in site (e.g. listed buildings, planning restrictions etc.) constrain or prevent clinically optimal adjacencies or functioning.       2       4       8.4         Fixed point in site (e.g. listed buildings, planning restrictions etc.) prevent service development appropriate for future needs.       2       2       4       8.4         Site spatial compromises place unacceptably high risk of unsustainable or unsafe operation.       2       3       6.4         The site should impacts on the quality of the patient environment to be high and privacy and dignity to be achieved.       1<	4.3		2	3	6.0		
Staff and Patient Issues       Staff and Patient Issues         1.1       Fixed point in site (e.g. listed buildings, planning restrictions etc.) constrain or prevent clinically optimal adjacencies or functioning.       2       4       8.4         1.2       Fixed point in site (e.g. listed buildings, planning restrictions etc.) prevent service development appropriate for future needs.       2       2       4       8.4         3.3       Site spatial compromises place unacceptably high risk of unsustainable or unsafe operation.       2       3       6.6         3.4       The site should impacts on the quality of the patient environment to be high and privacy and dignity to be achieved.       1       <	4.4				4.0		
Staff and Patient Issues       Staff and Patient Issues         1.1       Fixed point in site (e.g. listed buildings, planning restrictions etc.) constrain or prevent clinically optimal adjacencies or functioning.       2       4       8.4         1.2       Fixed point in site (e.g. listed buildings, planning restrictions etc.) prevent service development appropriate for future needs.       2       2       4       8.4         3.3       Site spatial compromises place unacceptably high risk of unsustainable or unsafe operation.       2       3       6.6         3.4       The site should impacts on the quality of the patient environment to be high and privacy and dignity to be achieved.       1       <			Criteria	a Mean	5.5		
optimal adjacencies or functioning.       2       4       84         5.2       Fixed point in site (e.g. listed buildings, planning restrictions etc.) prevent service development appropriate for future needs.       2       2       4       84         5.3       Site spatial compromises place unacceptably high risk of unsustainable or unsafe operation.       2       3       6.4         6.4       The site should impacts on the quality of the patient environment to be high and privacy and dignity to be achieved.       1	5	Staff and Patient Issues					
i.2       Fixed point in site (e.g. listed buildings, planning restrictions etc.) prevent service development appropriate for future needs.       2       2       4.0         i.3       Site spatial compromises place unacceptably high risk of unsustainable or unsafe operation.       2       3       6.0         i.4       The site should impacts on the quality of the patient environment to be high and privacy and dignity to be achieved.       1       1       1       1.0         i.5       Potential Travel Plan associated with Site does not mitigate impact of environmental impact of access, egress and transport between sites.       1       1       1       1.0       1.0         i.6       Site constraints prevent optimum separation of clinical, patient, visitor and logistical flows, where these cannot be separated temporally.       2       2       4.0         i.1       Risk to patient, staff, visitor and neighbour safety impact during construction arising from site restrictions.       3       4       12         i.2       Long construction disrupts functioning of hospital and working environment - negatively impacts on recruitment and selection.       3       3       4       12         i.3       Risk to staff safety and / or sense of well being as long familiar environment transforms more quickly than staff can adjust to.       3       3       9.0         i.3       Risk to staff safety and / or sense of well being as long familiar environment transforms more	5.1		2	4	8.0		
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