

ARTIST BRIEF

Worcestershire Health and Care NHS Trust wishes to commission 2 experienced artists to produce two pieces of Public Art in the form of wall hangings for its new Ward facilities at Tenbury Community Hospital. The deadline for completion of the work is March 2012. A budget of £3,000 inclusive of all expenses is available for the creation of each bespoke piece of work to include framing and installation.

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1.0 Introduction to the commission

Worcestershire Health and Care NHS Trust is seeking artists to produce wall hangings to enhance the environment of Tenbury Hospital. The art work will be located within the inpatient wards of the hospital. Along with other works planned for the hospital, the art works will contribute to creating a nurturing and soothing environment that supports excellence in clinical practice, improving the experience of both patients and staff. The art works should be comfortable in context, reflecting the unique character of Tenbury, its surroundings and communities. The community of Tenbury care deeply about their environment and there is great love of, and respect for, the natural landscape and a strong sense of civic pride. The art work will be wall mounted. The commissioners are open to both figurative and abstract approaches, in line with the themes outlined below. The scale of the work has not been defined within the brief other than it being appropriate to the location and the need to have a significant impact on the room and those using it. However pieces approximately A0 in size would appear to fit the space available best. Likewise, the commissioners are open to differing approaches that may use large singular pieces or multiples smaller panels to achieve the desired effect. Photographs of the ward area and location of the artwork can be seen in the support materials accompanying this document.

This commission is one part of a series of projects that will enrich the Tenbury Hospital as part of a broader arts programme. This will include the use of sculpture, painting, photography, and community participatory projects as well as garden and landscape projects.

Tenbury Hospital is committed to implementing an Arts in Health programme to improve outcomes for patients and fully utilise the opportunity to provide suitable and meaningful public art at this new and exciting community facility. The project is also committed to using this opportunity as a vehicle for engaging with the local community to raise awareness of health issues, address health inequalities and raise the profile of the NHS and its services within the local community.

The benefits of Arts in Health are widely acknowledged and the Department of Health and Arts Council England have produced 'A Prospectus for Arts & Health', a set of national guidelines and case studies that celebrates the role of arts in health.

"The wealth of evidence and good practice examples illustrates the benefits right across the spectrum of arts and health, including improving clinical and therapeutic outcomes, helping users to express, contain and transform distress and disturbance, creating a less stressful environment for patients, service users, staff and visitors, increasing the understanding between clinicians and the people for whom they care, bettering public health, developing and delivering more patient-focused services, and improving the experience for all"

Prospectus for Arts and Health

http://www.artscouncil.org.uk/publication_archive/a-prospectus-for-arts-and-health

An Arts Project Team comprising representatives of stakeholders in the hospital building is responsible for Tenbury Hospital Arts Strategy and for commissioning the art work.

2.0 The Commission

2.1 Aims and objectives of the commission

This commission is for artists to produce works of art in the ward areas of Tenbury Hospital. The Arts Project Team is seeking high quality, original, bespoke artwork that will contribute to creating a nurturing, positive environment for patients and staff.

The aim of the commission is to:

- Improve the clinical environment, making it more 'patient friendly'.
- Improve the working environment of clinicians, carers and other health professionals.
- Engage staff, patients and the wider community in the project.
- Utilise the skills of local artists, makers, and crafts people where possible.
- For the work to connect to one, or more, of the themes chosen by the Art Project Team. These include:
 - Tenbury Hospital and the role of community hospitals
 - Tenbury; its landscape, nature and history
 - Wellbeing and leading a healthy life
 - A celebration of life
 - Medicine (its history and successes)

2.2 Expectations of artist's role

Each artist will be responsible for the production, framing and installation of the artwork. The total budget for each commission is £3,000, inclusive of VAT if the artist is VAT registered. The fee covers research, producing designs, researching materials, fabrication and installation, all travel and studio costs and attendance, as a minimum, at the following meetings:

- 1 Project briefing meeting with representatives of the Arts Project Team plus site visit at Tenbury Hospital to see the location for the works, see the wards in operation and meet staff and patients
- 1 further meeting with the APT to present design proposals
- 1 site visit to supervise installation of work

The artist will be required to create a simple record of their work in progress, incorporating photographs and/or drawings that the APT can use to publicise and explain the project.

The artist will be responsible for installing the artwork and will be required to provide a cleaning and maintenance manual alongside the final designs for approval.

The artist needs to consider the following:

- Interior design, lighting and colour scheme, details will be available at project briefing meeting.
- Locations of signage and other items which may need to be co-ordinated with the work.
- Infection Control and cleaning regime, ensuring the appropriateness of design and materials for low maintenance. It should be noted that any works that cannot be wiped clean with normal hospital cleaning fluids will need to be protected behind glass or similar.
- The work must be durable and robust, it must withstand knocks and being touched. There must be no sharp edges or areas vulnerable to chipping or cracking.
- Works must meet the technical and Health and Safety criteria required for the area in which it is to be displayed, details will be available at the project briefing meeting.
- The work is expected to have a 20+ year life in situ.
- The art work can be contemplative but should not reference any particular faith or deity.
- All work should be sensitive to different cultural groups and the final piece will be expected to reflect the cultural diversity of Tenbury, its surroundings and its people.
- The work should not feature inappropriate nudity or subjects of a suggestive nature.
- There should be no violent images.
- There should be no images portraying anything that is generally considered to be “unhealthy” i.e. smoking, drug abuse, alcohol abuse.
- Careful consideration should be given before portraying aspects of illness, trauma and death.

2.3 Timetable

The timetable for the commission is as follows

- *Tender Advertised w/c 3rd October 2011*
- *Deadline for the tender return 12noon on 19th October 2011*
- *Shortlisting of Artists 24th October 2011*
- *Interviews Monday 31st October 2011*
- *Appoint successful Artists Monday 31st October 2011*
- *Consultation, site visit and meeting w/c 7th November 2011*
- *Proposals presented to APT w/c 5th December 2011*
- *Installation complete by w/c 1st March 2012*

2.4 Payment of the fee

The fee will be paid in the following instalments:

£500 on signing the contract

£1,500 on approval of proposals

£1,000 on sign-off of installation

3.0 The Commissioning and Application Process

The Commission is being managed by the Arts Project Team (APT) which is allied to the Project Executive of the New Inpatient Facility Project and the executive management of the Hospital

The APT will be supported by a Technical Team to evaluate and approve proposals and final submissions.

3.1 Responsibilities of the commissioner

Should the commissioned artwork require structural site works, these will be identified by the artist and any associated costs will be borne by the commissioner unless they can be negotiated otherwise. Where the Work is to be created (in whole or in part) on site, the Commissioner will afford the Artist access at all reasonable times to the site.

3.2 Design approval process

The Artist will be required to produce proposed designs. It is hoped that the formal process will be supported by an ongoing, rich dialogue between all parties.

Final design approval will be subject to a Health and Safety and Infection Control review. The Artist will need to demonstrate that the designs have been fully costed and can be produced within the fabrication budget, and provide cleaning and maintenance for the works.

Only on approval of final designs, will the Commissioner then authorise the fabrication and installation of the work.

3.3 Ownership of designs

Unless otherwise agreed in writing, any maquettes, models or preliminary drawings shall remain at all times the property of the artist. However, the artist shall make available one set of drawings to the commissioner, to be agreed between the artist and the commissioner, for possible permanent display in the hospital alongside the work once it has been commissioned and installed.

3.4 Artist selection process

Interviews will take place at Tenbury Hospital. The interview panel will consist of members of the APT.

3.5 Applying

To be considered for the commission please submit the following information by email, in a format able to be read by Microsoft Office packages on a PC, to jenny.biddlecombe@hacw.nhs.uk by the date and time indicated in Section 2.3 above;

- an up-to-date CV
- an expression of interest outlining why you are interested in the commission and what relevant experience you have (maximum 2 sides A4 please)
- a completed tender cover sheet, appendix 3

- up to 12 images of your work, illustrating relevant previous work which demonstrate ability to work in public places

Deadline for submissions is 12noon on Wednesday 19th October 2011.

For more information, or to discuss this brief in more detail, please contact

Jenny Biddlecombe, Tenbury Hospital – Tel 01584 810643

Appendix 1 - Background to Tenbury Hospital

Tenbury Community Hospital, known then as the cottage hospital was first opened in December 1870. The house was given to the people of Tenbury Wells by Mrs Arabella Prescott and was to be used as a hospital. All the expenses, including the purchase of instruments, during the first year were paid for by the Mrs Prescott. It was reported that the number of patients in the first year was thirty nine, "none of whom died". There have been many extensions in the intervening years including wards, theatre, sanitary annex, x-ray, outpatients and more recently new day case unit facilities and on site accommodation for the community nursing and therapy teams, physiotherapy gym and offices, audiology and dental access.

Current service provision in Tenbury Community Hospital comprises:

- 17 beds supported by local GP medical care;
- 24 hour Minor Injuries Unit
- Operating theatre carrying out minor and intermediate cases in orthopaedics, general surgery, urology and gynaecology.
- Range of Consultant Out-patient Clinics;
- Nurse and Therapist Led Out-patient Clinics and Rehabilitation Services;
- Dental Access Centre
- X-ray Facilities

The Need for Change

In recent years, as inpatient accommodation standards and requirements have improved, it has become increasingly evident that the inpatient facilities at Tenbury Hospital needed improvement to meet the required standards for single sex accommodation, privacy and dignity and control of infection requirements. A project was initiated to better facilitate the delivery of modern, effective, high quality care for local people. [The new arrangements will allow the development of new care pathways and treatment for an increasing proportion of the patient group who are elderly.]

A New Era for Tenbury Hospital

In 2010 approval for capital funding for an extension and refurbishment of the inpatient facilities at Tenbury Hospital was secured. This was made possible by the initiation of a project jointly sponsored by Worcestershire Primary care Trust and the Tenbury Hospital League of Friends. Construction started in the November 2010 and is due to be fully complete by early Autumn 2011.

Population and Health Status

The future needs and demands of Tenbury Community Hospital can be best appreciated by first understanding the demographics of the catchment area the hospital is designed to serve.

Worcestershire

The population of Worcestershire is expected to increase by about 38,000 (or 7%) by 2026 to approximately 590,000. The most significant population growth will be in the older age groups. The 65 and older population is expected to rise by 56% to 151,000, with the 85+ population almost doubling to just over 24,000.

South Shropshire

The population of Shropshire is projected to increase by 16.9%, from 289,300 in 2006 to 338,000 in 2031. The 65 to 84 year age group is projected to increase by 34,500 people, or 70.2%, in the next 25 years, from 49,000 in 2006 to 83,500 in 2031. South Shropshire is projected to experience a growth in this age group of 78.0%. South Shropshire remains the district with the highest proportion of people 85 and over, at 2.9% in 2006 and projected 7.1% in 2031.

East Herefordshire

The total population of Herefordshire in 2011 is forecast to be 182,400. This is a 2.6% increase from 2006, and equates to an average growth of 0.5% per annum. The total population in 2026 is forecast to be 193,600; a growth of 8.9% from 2006. The number of people aged 65 and over is forecast to continue to increase. By 2026 the number of Herefordshire residents of this age is forecast to be 61,000 (68.0% higher than in 2006). In particular, the number of people aged 85 and over is expected to more than double, from 4,800 in 2006 to 10,200 in 2026.

Malvern Hills District

Of the 74,000 people who live in the Malvern Hills District nearly 30% of them live in all pensioner households, and roughly half of these are pensioners living on their own. The District has below average numbers of children and young adults, and, along with South Worcestershire in general, it has an ageing population. In planning a flexible and adaptive healthcare resource, it is the shifting balances in the local population that are of the greatest importance. 'Natural growth' trend data points to a 23% increase in the over-65 population in the Malvern Hills District, by 2011, against a possible 3.8% increase in the overall population over the same period. The number of under 16 year olds will remain static. However, 'natural growth' population data is being overtaken by the potential demographic impacts of immigration resulting from current revisions to the Regional Spatial Strategy (RSS) housing and employment land allocations for the Malvern Hills District.

The hospital's existing catchment population of 55,000 will grow by 3.8% by 2011. In addition, at least a further 4,900 homes will be built in the District. This will increase the catchment population by at least 10,000 i.e. we expect the hospital to be serving a population of nearly 70,000. Death rates from heart disease and strokes among under 75 year old people in the Malvern Hills District are continuing to fall and are already below the rates for England, the West Midlands and south Worcestershire. However, for deaths from stroke among women, the District is experiencing significantly higher rates than the average

for England. This relates specifically to the higher rate of deaths from stroke among older women in the District.

Death rates from cancers among under 75 year old people are below the rates for England, the West Midlands and south Worcestershire, although the rate for the Malvern Hills District has been increasing since 1999-2001.

The three year average death rates from accidents among the over 65s have risen steadily in Malvern since 1998, moving the District away from the target reduction rate. Death rates from suicide in the District are similarly volatile as a result of the small number effect, but they remain persistently upward and away from the target reduction.

Strategic Context

The PCT is developing its commissioning strategies within the following national, regional and local context:

- Our Health, Our Care, Our Say;
- The NHS Next Stage Review (Darzi review);
- Investing for Health;
- The Worcestershire Partnership's Partnership towards excellence - the sustainable community strategy for Worcestershire 2008- 2013;
- The local health economy's draft strategy Investing in Health for Worcestershire 2008/09
- 2012/13 A five year local health economy plan

The PCT's vision is to deliver the highest quality, patient centred, efficient health care to local people when needed, as close to their home as possible. The major drive for the model of care is the need for improved patient care, better health and greater choice for Worcestershire patients. The PCT's priority is the redesign of care pathways, improving the quality of care to local people and freeing up resources to reinvest in primary care and community based services. The PCT will therefore commission services which will operate around the needs of the patient, their families, and carers. The model will form the foundation of future patient care pathways, organisation, service and workforce design, new ways of working, and a framework for NHS Trust and primary care trust (PCT) business cases and implementation plans. The proposals set out in this OBC to extend health facilities in Tenbury Wells are entirely consistent with this strategic context.

Appendix 2 – Photographs.



Photo 1 – Site for Wall Art – Mens Ward



Photo 2 – Site for Wall Art – Ladies Ward



Photo 3 – Site for Wall Art – Ladies Ward

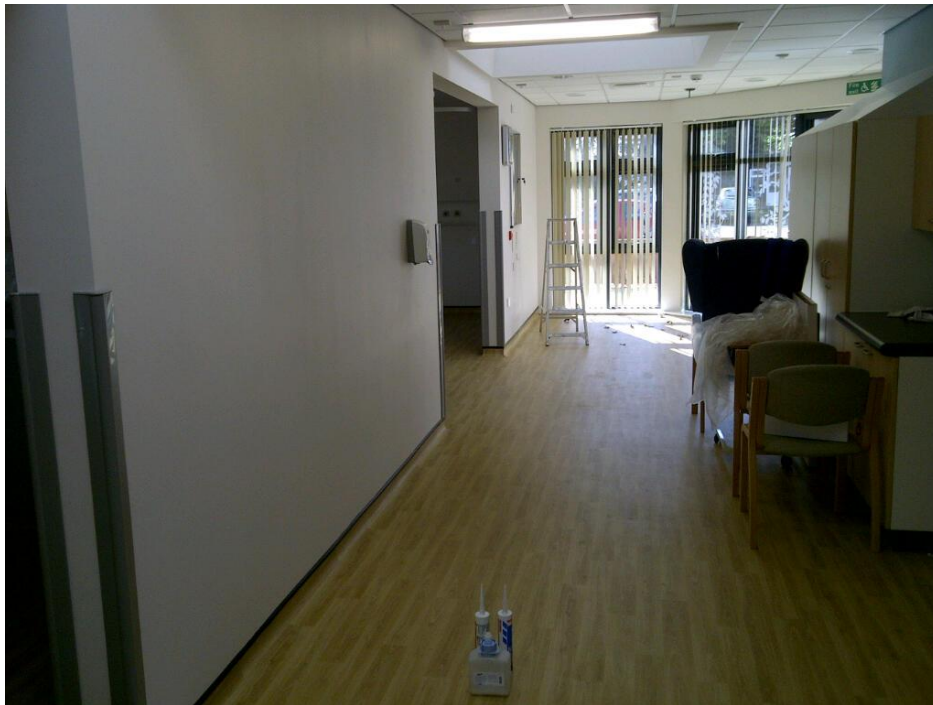


Photo 4 – Site for Wall Art – Ladies Ward



Photo 5 – Site for Wall Art - Lades Ward

Appendix 3
Tenbury Hospital – Wall Hanging - Tender Cover Sheet

Name

Address

Daytime contact telephone

Email

Website

The following questions are for information only and will not influence the commissioning process. All information will be kept confidential and securely disposed of on completion of the recruitment or contracting process.

- If you are self-employed what is your unique tax reference number?
- Do you carry Public Liability Insurance? Yes / No. Amount?
- Are you VAT registered? Yes / No If yes, what is your VAT registration number?

Referees

Please provide us with the names and contact details of 2 referees who are familiar with your work and who we may contact if you are shortlisted for interview. We will notify you if we are going to contact your referees.

Referee One

Name

Email address

Daytime telephone number

Relevant notes (e.g. name of associated project)

Referee Two

Name

Email address

Daytime telephone number

Relevant notes (e.g. name of associated project)

Signed

Date

Submit, with supporting documents, to jenny.biddlecombe@hacw.nhs.uk by 12 noon on Wednesday 19th October 2011