

The Committee would also like a response on the following questions:

- **What are your objectives for the Open Space system?**

The aim of the programme is to deliver an innovative, integrated, user-focussed booking system and onsite service package for bookable/sessional rooms across our estate. This allows clinicians and other users to access space where and when they need it, allowing them to align flexibly with service needs and reduce property costs. For NHSPS and CCGs, it provides transparent utilisation and financial data, acting as a catalyst for better estate management. Our intention is to create a scalable platform where any NHS property owner can put their bookable space onto Open Space. This will create a single access point for users of any appropriate type to search for the space they need and provides them with maximum choice. Open Space will help support the NHS Long-Term Plan, particularly in supporting out of hospital care and social prescribing.

- **What testing and piloting have you done?**

A proof of concept was undertaken between April 2017 and 2019 at 19 properties across England. This was to test the concept and help inform us of key learnings to develop the Open Space offering. In this time there were 62,500 bookings, accounting for 378,000 hours of service delivery to patients. The Open Space model was further developed, and the pilot launched on 20 buildings across England on 29th April 2019. In the first 5 months, there have been more than 13,000 bookings, accounting for over 70,000 hours of usage. The pilot properties include a mix of clinical rooms and non-clinical rooms, including examination rooms, consulting rooms, meeting rooms and group activity spaces. Approximately 70% of bookings being for clinical space and 30% non-clinical. There has been intensive engagement with CCGs, Trusts and other end users throughout the pilot period to identify issues and opportunities to be incorporated into the programme when it rolls out more widely.

- **Where has this taken place?**

There are 20 pilot properties across the country, located in Blaydon, Chorley, Colne, Oldham, Sunderland, Houghton (2), Spalding, Liverpool, Preston, Redcar, Stanley, Sheerness, Sittingbourne, Birmingham, London, Stanley, Hastings, Nottingham (2) and Newcastle

- **How did decide which areas would be pilots?**

These buildings were chosen to represent a broad geographic spread across the country, a diverse range of property types (PFIs, community hospitals, provincial medical centres), and a varied cross-section of users. Individual buildings were selected on the basis of suitability of space, local requirements and stakeholder engagement.

- **How will you use the findings from the pilot to inform the future system?**

The development of Open Space has been a carefully considered and staged learning process. Throughout both the two-year proof of concept and Open Space pilot, we have continually sought to plan, implement, review, learn and adapt. The programme has been developed on the principle that the solution must work for all stakeholders – users, CCGs, NHSPS, NHSE and DHSC – and must be sustainable and scalable. We have continuously used

findings and feedback from the pilot to drive a number of refinements to the system before it is rolled out more broadly, onsite user experience, and reporting tools for CCGs, NHSPS and the user's central teams.

- **What steps are you taking to ensure it is user-friendly?**

For the pilot, we delivered a portal (www.openspace.nhs.uk/) which provides a simple interface allowing any visitor to browse rooms (with photos and room specifications) and register as a user. Once registered, a user can then check for availability, pricing and make a booking and payment. This is all fully automated. The registration process allows vetting of potential users to ensure they are compatible with the building.

At a site level, we have ensured that there is a full service provision to support the booking system. There is on-site resource to provide access to rooms and ensure that the space is clean and ready for use.

We have created a suite of reports to assist users, the CCGs and NHSPS to understand how the space is being used, and identify cost saving measures for users/CCGs, and management improvements for NHSPS. These have been developed and are being refined in collaboration with our stakeholders.

- **How will you encourage tenants to use it?**

We have a comprehensive marketing campaign, aimed at our existing customer base and potential new users. This includes posters, direct mail, email and targeted social media advertising. We are also promoting Open Space with NHSE/I. There has been considerable interest from other parts of the NHS and wider public sector around the possible use of the platform outside of the NHSPS portfolio.

- **What risks have you identified with the Open Space platform? How will you mitigate against them?**

A key element of the programme is that to make it sustainable and cost effective it requires up-front payment. Without this a huge administrative burden would be placed on NHSPS and its customers to provide invoicing, payment and credit and collection for potentially very small individual charges (sometimes as little as £10). There has been some resistance to this, although now in excess of 98% of customers have agreed to pay upfront by card. It does present a risk as the programme is expanded, so support from the wider system is important. We are seeking to mitigate the risk by exploring a number of payment options which provide greater choice for users but still provide a low cost, low administration up-front payment mechanism.