

HOSPITAL PLANNING OFFICE.
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Panels for Health Board Consultants

Health Boards contemplating the formation of panels from which consultants will be selected for future projects might apply the following advisory guidelines.

1. Advertisement.

Advertisements should be placed in the national or local daily press and if considered desirable in one of the representative professional journals. All disciplines could be included in the one advertisement which should be featured fairly prominently. It should be stipulated that applications are being invited only from firms practising in Ireland and that the receipt of an application does not automatically guarantee inclusion on a panel.

Firms who have recently applied to the Health Board for appointment for a major hospital project and have already submitted information to support their application need not re-submit such information if applying for inclusion on the panel. This fact should be stated in the advertisement.

2. Size of Panels.

The size of panels for each discipline should be related to the programme of work the Health Board is likely to have over say the next five years. There is no merit in establishing a large panel if each firm on the panel is unlikely to receive a commission. Too small a panel, however, will not give sufficiently fair distribution of work amongst the consultants who have a genuine interest. The size of the panels will also be governed by the availability of suitable firms e.g. for mechanical and electrical services where the number of firms practising is rather limited.

3. Composition of Panels.

The policy may vary between each Health Board depending on the geographical location and the presence or absence of local firms. Should the area include a large urban content it is only to be expected that many of the consultants could be drawn from that area. On the other hand local projects of medium size and complexity could be handled equally well if not better by a firm based in the vicinity of the project.

4. Type of Panel.

Whatever the policy of the Health Board regarding the composition of panels it would be advisable to classify firms into broad categories possibly related to the type and size of projects they could most successfully undertake having regard to their resources and capabilities.

5. Review of Panels.

Once a panel has been drawn up it should not be regarded as being permanent but should be reviewed every two to three years in the light of the performance of each consultant and to take account of the establishment of new practices either within or outside the area also the changing circumstances of the existing firms. The performance of consultants should be monitored to see how successfully or otherwise they are complying with the clients requirements.

6. Continuity.

The question of continuity of employment arises particularly in hospital projects where progress of work may be slow and phased or extended over a number of years. Even where work is intermittent there can be a tendency to associate a particular firm or firms with a hospital despite the fact that there may never have been a formal agreement with the client.

While it is appreciated that a firm which has given good service in the past at a particular hospital would possess a good deal of background information nevertheless it is considered that all future appointments should be restricted to the particular project current at the time and not be an appointment as architect or engineer or quantity surveyor to the hospital on an indefinite basis. No firm should be left under the impression that their appointment for a particular project entitled them to automatically receive all future commissions for the same hospital. This underlines the need for the client to obtain copies of all relevant information from the design team at completion of the project so as not to be dependent on the consultants for information that may be needed at a future date.

7. Notification of Results.

Firms, whose application for inclusion in the panel is unsuccessful should be notified of this fact.

8. Interviews

It is for the Health Board to decide whether or not to hold interviews with firms who are short-listed with a view to their inclusion in the panel.

9. Performance Parameters

In assessing the relative performance of consultants the following points should be borne in mind ;

- (a) Ability to work co-operatively in a design team situation
- (b) Production of documentation when required by the client
- (c) Production of adequate documentation at pre-tender stages
- (d) Production of the required information for other members of the design team in good time and to the extent required
- (e) Good co-ordination of consultants work (Architect only)
- (f) Acceptance of role of Health Board as client - do not act as surrogate client
- (g) Acceptance of the parameters laid down by client including time and cost
- (h) Provision of detailed reports at the required stages and particularly at tender stage
- (k) Adequate performance of supervising duties

- (l) Strict control of extras and variations
- (m) Notification of costs of approved extras when such are being considered by client
- (n) Prompt settlement of final accounts.