DarwinGroup®



Space to Care

Supporting the future of NHS estates and patient care

The NHS faces challenges from rising demand, limited fit-for-purpose space and evolving models of care

A huge challenge lies ahead for NHS estates and infrastructure

Lord Darzi's 2024 independent review of the state of the NHS highlighted the scale of the challenge facing NHS estates and infrastructure. Trusts are under pressure from ageing, unfit-for-purpose facilities, rising demand, delayed care, and rapidly escalating maintenance backlogs.

But this is more than an estates issue. The challenges facing the NHS have a direct and profound impact on patients every single day.

- Growing elective backlogs leave millions waiting in pain or anxiety for treatment.
- Pressures on emergency departments are leading to longer waits, ambulance delays, and care being delivered in corridors.
- Discharge blockages mean patients remain in hospital unnecessarily, putting them at increased risk of infection and reducing bed availability for those who urgently need it.

The Government set out long-term ambitions through the 10-Year Health Plan and New Hospitals Programme, but these initiatives will take years to deliver, and the costs of essential interim work continue to soar.

In the meantime, deterioration of the NHS estate and persistent staffing shortages contribute to rising safety incidents, avoidable harm, and worsening patient outcomes.

The NHS needs immediate, practical solutions to tackle today's challenges while building for tomorrow.

By investing in a more flexible, adaptable, and future-proofed estate, the health service can create the right foundations for innovation and improved outcomes.

The NHS is operating under unsustainable pressure, and it is compromising patient care



7.41m

As of August 2025, **the elective care waiting list stood at 7.41 million cases,** reflecting 6.26 million patients waiting for treatment.



13.4wks

In August 2025, the **median wait time for patients waiting to start treatment was 13.4 weeks** – a significant increase from 8 weeks in August 2019.



92.5%

From January to March 2025, **92.5% of NHS beds** for acute hospital care were occupied.



1 in 7

Almost **1 in 7 hospital beds are occupied by patients who are medically fit to go home,** but cannot be discharged due to insufficient social care capacity or community support.

The ageing NHS estate has resulted in a sizeable maintenance backlog



£13.8m

In 2023/24, the maintenance backlog across the NHS stood at **£13.8bn,** more than double in real terms, what it was in 2015/16.



42%

As of 2022/23, **42% of the NHS estate** had been **built before 1985,** with over 2,000 buildings pre-dating the NHS itself.



41

41 NHS buildings have been found to contain reinforced autoclaved aerated concrete (RAAC), with seven hospitals found to contain RAAC throughout.



438,000m²

Across the NHS estate in England, there is **438,000m²** of floor space that is empty or under-used.



5,400

Between 2019 and 2024, the NHS faced **5,400 clinical service incidents** every year due to infrastructure failures, disrupting the care of **over 137,000 patients.**



600

Over **600 days of clinical time each year are lost** through urgent repair incidents such as leaks or power failures.



>£100m

43 of 215 NHS Trusts hold backlog bills of **£100 million** or more.



£4.3bn

Between 2014/15 and 2018/19, **£4.3 billion was taken** from capital budgets intended for long-term investment to plug shortfalls in day-to-day spending.

Darwin Group has the scale, expertise and fleet to support the NHS in meeting these challenges



With almost two decades of experience, Darwin Group specialises in designing and delivering modular healthcare spaces - providing over 69,000m² of clinical environments and more than 2,000 patient beds across the UK.

Our off-site, precision-built facilities help NHS providers ensure their estate strategies keep pace with the Government's ambitions for health system reform.

From GP surgeries and community diagnostic centres to full surgical hubs, Darwin Group delivers permanent grade modular buildings for a wide range of clinical and non-clinical applications - helping to alleviate capacity pressures, support service resilience, and reduce elective care waiting lists.

Darwin Group is positioned to act as a trusted delivery partner to NHS providers. Its modular, On-demand service can support a modern healthcare estate by providing spaces that:

- Can be delivered quickly and at scale;
- Are aligned to the duration and nature of need;
- Can be expanded, reduced or reconfigured as circumstances change;
- Can be redeployed to serve entirely new purposes;
- Support sustainable, circular-economy principles; and
- Can be financed flexibly, with hire-based models suited to both revenue and capital budgets.

Modular health configurations

CGI example layouts of healthcare facilities, including operating theatres, assessment rooms, clinical spaces, and waiting rooms



Built in factory-controlled conditions and fully compliant with HBN and HTM standards, our modular healthcare buildings are rapidly deployable and scalable to each project's technical and regulatory requirements – ensuring spaces meet the highest standards of clinical excellence.



Our solutions can bridge the gap between urgent healthcare capacity and long-term infrastructure goals



Darwin Group partners with NHS and independent healthcare providers to meet growing service demands by delivering modular healthcare spaces tailored to both the duration and nature of need.

Whether decanting services, supporting refurbishment, alleviating pressure during periods of high demand, or responding to unexpected surges, our modular healthcare spaces can evolve with care delivery.

Our On-Demand modular spaces give NHS providers the flexibility to respond to an ever-changing environment. Buildings can be rapidly deployed and adapted for new uses, scaled up or down to match capacity needs, and reconfigured as services evolve.

With access to the UK's largest modular building manufacturing capacity and fleet, we're equipped to respond rapidly to urgent requirements or support longer-term estate strategies while permanent building plans are being developed. Our modular healthcare spaces can help the NHS manage today's capacity pressures while remaining agile for future care demands.

Whether additional space is needed to expand capacity during repair or refurbishment or to accommodate seasonal surges, Darwin Group can provide permanent grade, clinical or non-clinical spaces at pace and scale. Our On-Demand modular buildings accelerate delivery (when compared to traditional construction) without compromising on quality - and unlike temporary mobile units, our facilities offer superior patient and staff experiences, to help providers achieve greater care outcomes.

From office and meeting spaces to clinical consultation rooms and ultra-clean operating theatres, we provide the right facility for as long as it's needed, with adaptable financing options that help NHS providers navigate capital constraints and respond swiftly to immediate and changing estate needs.

On-Demand modular spaces can help to maintain continuity of care and avoid further bottlenecks when existing estates require refurbishment or repair. They also support wider ambitions to move away from reactive crisis management to more strategic, system-wide estate planning.



James Paget Orthopaedic Elective Centre

Case study: **James Paget University Hospitals NHS Trust, Orthopaedic Outpatient Building**

The requirement

James Paget University Hospitals NHS Trust needed to expand its urgent and emergency care services to reduce unnecessary admissions into its A&E department, support winter surges and enhance clinical flow through the creation of a same-day emergency care (SDEC) unit.

The solution

To enable this, the Trust required a fast and flexible solution to relocate its orthopaedic outpatient department, freeing up the optimal location next to the Emergency Department, improving access and streamlining patient flow.

The patient impact

This proximity allows patients to be assessed, treated, and discharged more efficiently - reducing wait times, avoiding unnecessary admissions, and ultimately improving patient experience, leading to greater clinical outcomes.



James Paget Orthopaedic Outpatient Centre

The single-storey facility was designed to meet all Fire Safety and Infection Control standards and includes nine consultation and examination rooms, three plaster bays, an orthotics treatment room, a resus bay, and accessible toilets.

Supporting spaces such as reception, staff areas, offices, storage, and an IT hub ensure it functions as a complete clinical environment.



James Paget Orthopaedic Outpatient Centre

This hireable, modular building was constructed in just 16 weeks, with patients able to be seen the following day.

Its rapid delivery freed up critical hospital space for the new SDEC unit while providing a modern, well-equipped environment for orthopaedic care.

The Trust partnered with Darwin Group to deliver a new On-Demand modular facility.

75% of the above-ground build was completed offsite at the Darwin Group York facility, with the remaining work including delivery, installation, and final finishes, carried out at the hospital.



James Paget Orthopaedic Outpatient Centre

The project demonstrated how On-Demand modular healthcare facilities can give NHS Trusts the adaptability to respond quickly to service pressures, balancing short-term needs with long-term estate planning.

Current policy fails to deliver the speed and flexibility that the healthcare estate demands

The NHS needs fit-for-purpose facilities

Despite increased capital funding and a refreshed New Hospital Programme, progress on delivery remains slow. In the meantime, outdated estates and inadequate buildings continue to impact on patient care.

For the NHS to overcome its multifaceted challenges, its infrastructure must be agile, resilient, and future-ready - capable of adapting to surging demand and evolving patient needs.

But transformation takes time. While permanent solutions are being planned - whether new hospitals, estate upgrades, or system-wide reforms - the need for additional capacity and improved environments is immediate.

On-Demand modular buildings offer a strategic bridge to that future.

They provide high-quality, flexible spaces that can be deployed quickly to deliver real impact now - whether that's reducing waiting lists, decanting services to enable refurbishment, expanding clinical capacity, or improving staff and patient experience.



Basingstoke Cardiac Catheterisation Labs (Hampshire Heart Centre)

Despite a strong track record of supporting the NHS in overcoming estate and capacity pressures, modular infrastructure remains underutilised.

1.

Maximising the role of modular spaces in modern healthcare infrastructure.

On-Demand modular buildings remain both misused and undervalued across the healthcare system. They are too often treated as a reactive, temporary solution rather than a central component or long-term estate strategy. The deployment of On-Demand modular buildings alongside permanent construction (traditional or MMC) presents a more strategic and cost effective approach to estate management. This combined model enables NHS providers to:

- Match space provision precisely to changing service needs;
- Avoid overbuilding or carrying unused capacity;
- Reduce whole-life costs through adaptable, redeployable assets; and
- Improve resilience by delivering additional space quickly and at scale when required.

2.

Protecting patients during long-term estate development.

The slow pace of permanent hospital development is falling behind the urgency of today's healthcare challenges, putting patient outcomes, elective care reductions, and safety at risk.

With delays to new-build programmes and growing repair backlogs, there is an urgent need for immediate, high-quality solutions that maintain service continuity, prevent delays, and improve care while long-term estate plans are delivered.

3.

Streamlining procurement and enabling flexible funding.

Current procurement frameworks are often too slow and inflexible to address urgent needs, such as seasonal surges, estate failures, or expanding diagnostic capacity.

While fast-track routes such as direct award procurement do exist, inconsistent use and a lack of national guidance on hire or revenue-funded models create uncertainty and discourage innovation. Clear guidance and flexible funding mechanisms would allow Trusts to deploy modular solutions quickly, efficiently, and strategically.

Our plan for the future of NHS estates...

We are calling on the Government to...

1.



Recognise and unlock the potential of On-Demand modular solutions.

Align the 10-Year Infrastructure Strategy with the 10-Year Health Plan to unlock the potential of On-Demand modular buildings solutions.

Encourage NHS trusts to integrate permanent-grade modular facilities into long-term estate planning as a tool to support flexible, rapid-delivery infrastructure, recognising that immediate capacity does not always require permanent ownership.

2.



Encourage continuity of care and reduce waiting lists through deployment of On-Demand modular clinical space.

Encourage NHS trusts to utilise hire-based procurement models (suited to both revenue and capital budgets) as practical solutions to address short-term capacity gaps without compromising patient care.

Trusts must be given the confidence to implement modular solutions to bridge gaps in capacity, reducing delays while longer-term estate planning progresses.

3.



Clarify guidance and streamline deployment.

Publish clear national guidance, and best practice examples, on hire-based procurement models (suited to both revenue and capital budgets) for NHS estate development.

This should give local providers confidence to embed modular facilities into infrastructure strategies as practical, safe, and flexible alternatives to traditional capital builds.

While fast-track frameworks exist, internal NHS approval processes often slow deployment. Clear guidance and incentives should reduce these bottlenecks, allowing modular facilities to be rapidly deployed for urgent needs such as seasonal surges, elective backlogs, or estate failures.

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