


Board of Directors' Meeting 5 August 2021

Agenda item	220/21			
Report	Estates Quarterly Report			
Executive Lead	Director of Public Participation Julia Clarke			
	Link to strategic pillar:		Link to CQC domain:	
	Our patients and community	√	Safe	√
	Our people		Effective	√
	Our service delivery	√	Caring	
	Our partners		Responsive	√
	Our governance		Well Led	√
	Report recommendations:		Link to BAF / risk:	
	For assurance		BAF5 Estates infrastructure	
	For decision / approval		Link to risk register:	
	For review / discussion		1482 Fire Evac	
	For noting	√	1934 Fire Alarm Obsolete	
	For information		1751 Compliance Struct	
For consent				
Presented to:	Finance & Performance Assurance Committee 27 July 2021			
Executive summary:	<p>The attached report highlights some of the estates functions and operations that are integral to the delivery of high quality clinical care ensuring that SaTH provides a safe, high quality and efficient estate. This report is a summary of Estates activity over Q1 21/22. It covers;</p> <ul style="list-style-type: none"> • Strategic Estates Capital Programme • Backlog Maintenance Capital Programme • Estates Operations – Reactive Compliance and Planned Preventative Maintenance • Medical Engineering • Environmental Sustainability <p>The Estates Strategic Plan is also being finalised and will be presented to Trust Board with the Green Plan in October. It is an integral part of service planning, national and local objectives and future planning.</p>			
Appendices	Annex 1: Estates and MES Q1 report			
				

1.0 Introduction

The attached report highlights some of the estates functions and operations that are integral to the delivery of high quality clinical care ensuring that SaTH provides a safe, high quality and efficient estate.

2.0 Estates Capital Programme

2.1 The Estates Capital Programme Office (CPMO) was very active during FY20/21 delivering Covid adaptations, large centrally-funded strategic schemes as well as Trust-funded schemes. The impact of the investments (all delivered on time and on budget) has provided a safer physical environment and has enabled required changes to patient pathways and clinical models to support improved operational performance. In FY21/22 a total of £31.8M of investment is planned across both Strategic Estates and Backlog capital programmes. Of the planned investment a total of £5M was specifically allocated for backlog schemes with another £2.8M on Endoscopy (See slides 2-6 in Annex).

Further projects are being developed but await central funding approval.

2.2 Major Strategic Schemes planned for completion in FY21/22:

- RSH A&E Reconfiguration £9.3M
- RSH 32 Bed Modular Ward £7.1M
- RSH MRI-CT £3.5M
- RSH / PRH Endoscopy £2.85M
- RSH Lingen Davies Clinic Rooms £285K

2.3 Major Strategic developed schemes awaiting central capital approval

- PRH Renal Move Offsite £4.5M
- Community Diagnostic Hub £7.5M – (this is a community project supported by SaTH Strategic Estates Department)
- PRH Cardio Respiratory (Apley) £3M

2.4 A number of significant backlog maintenance capital schemes are also currently underway will be completed in 21/22 including:

- PRH Uninterruptible Power Supply / Isolated Power Supply £1M (£500 approx in FY21/22)
- RSH / PRH – Building Management System £1M (£500 approx in FY21/22)
- RSH / PRH – Ventilation Replacements £800K

3.0 Operations - Planned Preventative Maintenance & Reactive Compliance

This is always a key area in Estates, especially in an organisation with ageing estate and equipment. The department has almost completed the Authorised Persons appointment processes and recruitment is currently ongoing for Medical Gas, Ventilation & Electrical Role. The current position is 89% of posts are now filled (compared to less than 45% in 2019) and this follows investment in 2019/20 into these key roles. Competent Persons recruitment is now underway and planned to be complete by end of August 21. This would release cash efficiencies once in post and trained. The Apprentice Programme continues to be developed with Workforce with intake expected in Autumn 21. (See slides 7-9 in Annex)

3.1 There is an improving position on Planned Preventative Maintenance (PPM) which is currently 81.5% completed on time (the remainder being completed late). This has improved from under 40% in 2019/20. PPM compliance is lower in comparison to Reactive completed lines due to the urgency of the reactive requests as a result of IPC / NHSI/E visit requests.

3.2 Reactive jobs have seen a significant rise of 800 jobs during June as a result of preparation for NHSI/E visit. Total reactive for month of June is 2,800 approximately. This has put significant strain on the estates operations department. Additional contractor support has been engaged. Week 25 has seen a doubling of reactive jobs in comparison to the same week in 2020. (see slide 9 in Annex)

PPM completions continue to rise and are expected to reach a target of 90% by end of Dec 2021 when the investment in permanent workforce rather than contractors is implemented

- Statutory 2,109 jobs completed (e.g. water testing)
- Mandatory 922 jobs completed (e.g. lift service)
- Routine 433 jobs completed
- **TOTAL 3,464 jobs completed**

3.2 Reactive Maintenance

- 7,725 reactive job lines were assigned, 7,642 were completed 98.9%.
- Average response time 14.1 hours.
- Average completion time 1.8 hours.

3.3 Estates compliance

Policies – 9 documented

- 1 issued to Health & Safety, Security & Fire Committee (HSSFC) in June for approval (Fire Safety)
- 5 drafts being submitted to August HSSFC for review (Electric, Lifts, Pressure Systems Safety Regulations (PSSR), Business Continuity Plan & Pest Control)
- 3 under review/updates to be submitted to HSSFC in October (Decontamination, Medical Gases and Heating & Ventilation)

4.0 Medical Engineering Services (MES)

4.1 Despite all the pressures of the pandemic the team undertook commissioning of 860 new medical devices in Q1 FY21/22.

4.2 Planning underway for £1.8M capital replacement programme in FY21/22.

4.3 Planned Preventative Maintenance (PPM) compliance targets for medical devices within the trust is set in line with benchmarking and best practice peer groups. SaTH traditionally achieves high compliance and reached 95% in Q1. There are over **33,000** assets being managed, an increase of approximately **3,000** in the last year. MES handled **7,580** jobs in Q1

MES are providing support and planning of major medical device projects including Infusion and Bed/ Mattresses management as well as the Althea Endoscopy managed contract.

(See slide 10 in Annex)

5.0 Sustainability Update

5.1 SaTH's multi-disciplinary Good Corporate Citizen Group continue to meet quarterly and SaTH still performs in the upper quartile of the national Sustainability standards.

5.2 The NHS ambition to achieve net zero carbon by 2040, means that SaTH needs to begin to decarbonise its heating system. In order to deliver the NHS target, a Zero Carbon road map will be required and will support the development of proposals for HTP. An exercise is currently underway to develop a Heat Decarbonisation Plan encompassing the Trust's wider environmental initiatives as well as a Roadmap for carbon net-zero.

5.3 The Trust's Green Plan is currently being finalised.

5.4 The reconfiguration of the new A&E department is currently underway and is aiming to achieve a 'Very Good' BREEAM rating which is particularly high considering that the project is not new build.

(Slides 11-12 in Annex)

6.0 Risks and Actions

BAF																
Created Date	Risk Ref	Risk Title/Descriptor	Strategic Objective	Cause & Effect	Assurance Committee	Inherent Risk Priority	Risk Control	Control Assurance (1st Line)	Control Assurance (2nd Line)	Control Assurance (3rd Line)	Gap(s) in Control / Assurance	Overall Assurance Assurance Level	Residual Risk Priority	Action Required	Programme Notes	Target Risk Priority
30 Sep 2020	BAF-5	There is a risk that the current and future estates, infrastructure and equipment does not comply with national specifications, meet service needs and/or service user needs. Executive Lead: Julia Clarke Operational Lead: Will Naoh Last Updated: 13 Apr 2021 Latest Review Date: Latest Review By: Last Review Comments:	We deliver our services utilising safe, high quality estate and up to date digital systems and infrastructure	Hazard(s) / Cause(s) The ageing buildings, physical environment, associated infrastructure and inadequate backlog resources present a risk of services falling and impacting on the delivery of patient services. Effect(s) & Impact(s) There is a risk of the Trust breaching its conditions, regulatory action being taken against the Trust, poorer patient outcomes and/or patient harm, and adverse publicity and reputational damage.	Finance & Performance	High - 14 - 20	Board-approved fully funded Capital Programme including backlog maintenance plan and medical equipment budget in place. Control Owner: Will Naoh Estates Plan 2015-2025 in place (with interim plan for 2021) Control Owner: Will Naoh Programme of planned preventative maintenance (PPM) in place Control Owner: Will Naoh	Capital plan developed and overseen by CPG Monthly Estates report to SLCO Independent Authorising Engineers (APEs) recruited MICAD system utilised for planning and monitoring	Approval through GLC and Trust Board Additional capital allocation for backlog maintenance secured Quarterly report on all aspects to F&P from April 21 Progress reported monthly to Director of Corporate Services	Internal Audit oversight and reporting through ARAC Annual Oakleaf six facet survey Sign off of Ward 36 (PRH) and SDEC (RSH) Weekly report to HTP and potential to expedite schemes Annual Six Facet Survey	Capital available against ageing estate Lack of clinical service vision Clear alignment with HTP and potential to expedite schemes Adequate number of Competent Engineers (CEs) to undertake PPM	Adequate Assurance Date: 12 Apr 2021 Assurance By: Tony Holt Adequate Assurance Date: 12 Apr 2021 Assurance By: Tony Holt Adequate Assurance Date: 12 Apr 2021 Assurance By: Tony Holt	High - 14 - 15	Development of Capital Plan for 21/22 - to be presented to May Trust Board Person Responsible: James Drury To be implemented by: 26 May 2021 Development of Estates Plan for 21/22 Person Responsible: Julia Clarke To be implemented by: 31 Jul 2021 Agreement to appoint into establishment based on concomitant reduction in external contractors costs and CIP contribution. Person Responsible: Will Naoh To be implemented by: 30 Sep 2021	12 Apr 2021 Tony Holt J.C. - to be presented to July Trust Board following finalisation of Capital Plan and Service Delivery priorities 12 Apr 2021 Tony Holt J.C. - recruitment underway	1 - SL - 2 10

7.0 Conclusion

The Board of Directors is asked to note the update across the Estates function and the progress being made across key areas. The Board is also advised that from 1 July 2021 Estates moved into the portfolio of the Finance Director who will provide future updates.

Julia Clarke
Director of Public Participation
July 2021