

**Board of Directors – Public**

<b>Subject:</b>	2024/25 Capital Expenditure Plan		<b>Date:</b> 4 <sup>th</sup> July 2024		
<b>Prepared By:</b>	Thomas Palmer – Financial Controller				
<b>Approved By:</b>	Finance Committee				
<b>Presented By:</b>	Jen Leah – Deputy Chief Financial Officer				
<b>Purpose</b>					
To update the Board of Directors on the progress to develop the 2024/25 capital programme, agree the commencement of schemes and to ask the Board of Directors to formally approve the 2024/25 Capital Plan.				<b>Approval</b>	<b>X</b>
				<b>Assurance</b>	
				<b>Update</b>	
				<b>Consider</b>	
<b>Strategic Objectives</b>					
Provide outstanding care in the best place at the right time	Empower and support our people to be the best they can be	Improve health and wellbeing within our communities	Continuously learn and improve	Sustainable use of resources and estates	Work collaboratively with partners in the community
<b>X</b>				<b>X</b>	<b>X</b>
<b>Identify which Principal Risk this report relates to:</b>					
PR1	Significant deterioration in standards of safety and care				<b>X</b>
PR2	Demand that overwhelms capacity				<b>X</b>
PR3	Critical shortage of workforce capacity and capability				
PR4	Failure to achieve the Trust’s financial strategy				<b>X</b>
PR5	Inability to initiate and implement evidence-based Improvement and innovation				
PR6	Working more closely with local health and care partners does not fully deliver the required benefits				
PR7	Major disruptive incident				
PR8	Failure to deliver sustainable reductions in the Trust’s impact on climate change				<b>X</b>
<b>Committees/groups where this item has been presented before</b>					
Capital Resources Oversight Group (verbal) Finance Committee (Approval – June 2024)					
<b>Acronyms</b>					
<ul style="list-style-type: none"> <li>• CROG – Capital Resource Oversight Group</li> <li>• ICB – Integrated Care Board</li> <li>• ICS – Integrated Care System</li> <li>• SFH – Sherwood Forest Hospitals</li> </ul>			<ul style="list-style-type: none"> <li>• NHSE – NHS England</li> <li>• OBC – Outline Business Case</li> <li>• PID – Project Initiation Document</li> </ul>		
<b>Executive Summary</b>					
<p>The 2024/25 Capital Expenditure Plan was discussed and approved at the Finance Committee meeting of 25<sup>th</sup> June 2024.</p> <p>The Trust’s capital resources come from two main sources:</p> <ul style="list-style-type: none"> <li>• A share of the Nottingham &amp; Nottinghamshire ICB (the ICB) capital envelope, which predominantly funds ‘business as usual’ capital requirements such as equipment replacement and backlog maintenance.</li> <li>• Specific targeted allocations for NHS priorities, such as for Digital improvements and the development of Community Diagnostics capacity.</li> </ul>					

This report covers the 2024/25 Capital Expenditure Plan relating to the ICB capital envelope. Capital schemes relating to targeted allocations are approved on an individual basis in line with the Trust's Scheme of Delegation.

The paper describes the approach to developing the 2024/25 Capital Expenditure Plan, including the prioritisation approach to ensure that limited resources are allocated appropriately. The initial split of schemes is between:

- 1) Priority 1 - Committed Spending (anything approved by FC/Board previously)
- 2) Priority 2 - Need to Do programmes (maintaining what we have – patient safety maintenance)
- 3) Priority 3 - Want to Do Programmes (enhancing what we have or something new we currently don't have)

The overall value of the 2024/25 Capital Expenditure Plan funded via the ICB capital envelope is £13.6m. The allocation of the 2024/25 capital programme into prioritised areas results in a pre-commitment against the available £13.6m of £9.6m, resulting in £4.0m available to service the Priority 2 & 3 schemes. All pre-committed schemes are taken as such and progress to delivery of those schemes is underway.

Priority 2 and 3 schemes have as yet not been approved and not commenced expenditure. Those have been included within the body of the report with a proposed plan for agreement to commence or hold.

Further to this, the report includes a recommendation of pre-commitment of medical equipment for 2025/26. If the 2024/25 capital programme is forecasting an underspend of up to £2.0m by Month 9, these items can be accelerated into the 2024/25 programme. This will release funding from 2025/26 to cover the pre-commitment of 2024/25 slippage and maximise the utilisation of 2024/25 allocation.

Progress in the delivery of the Capital Expenditure Plan is managed through the Trust's Capital Resources Oversight Group (CROG), which is chaired by the Chief Financial Officer and includes corporate and clinical representatives from across the Trust. The CROG reports into the Trust Management Team and provides updates through the Trust's Finance Committee.

The Finance Committee agreed to recommend delegation to CROG to accelerate those items of the capital programme at Month 9 if the spend forecast for 2024/25 deems this necessary to maximise the capital PDC allocation this year and next.

Finally the paper details a governance structure for reviewing Priority 2 & 3 schemes whereby a Capital Prioritisation sub-group of CROG will assess all new capital bids and recommend to CROG appropriate priority order of as yet unapproved schemes. CROG then have the delegated ability to approve the commencement of the next most appropriate prioritised scheme from the listing when funding is available to do so.

### **Recommendation**

Following presentation and recommendation by the Finance Committee at their meeting on 25 June 2024, the Board of Directors are asked to approve the 2024/25 Capital Plan (including the commencement of the £9.6 pre-commitment and £3.4m 'Top-Priority' schemes) and support the ongoing prioritisation process.

**Board of Directors (Public)  
4<sup>th</sup> July 2024  
Capital Programme 2024/25 and Future Years**

The purpose of this paper is to provide an update and assurance on the status of the Trust's Capital Plan for the financial year 2024/25. This was presented to the Finance Committee at their meeting on 25 June 2024 where they agreed to recommend approval to the Board of Directors. This was also verbally discussed at the Capital Resources Oversight Group (CROG) meeting on 20 June 2024.

**Context**

Throughout the planning process for the financial year the Nottingham & Nottinghamshire ICS capital envelope was recognised as £86.0m across the three provider organisations in the ICS. Inclusive of a 5% planning overspend assumption of £4.4m, this resulted in an ICS Capital plan of £92.9m.

Changes to the NHS Financial Framework confirmed late in May 2024 have resulted in a reduction of £8.1m to the ICS capital envelope. This is due to the Nottinghamshire Revenue Financial Plan Limit exceeding a 'fair share' allocation as calculated by NHS England (NHSE).

The SFH share of the reduced envelope totals £13.6m as at June 2024. This is a reduction of £1.4m from the value that had been assumed during the planning process.

**Approach to 2024/25 Capital Planning**

As part of the 2024/25 planning process a Capital Prioritisation Workshop event was held in April 2024. This workshop involved stakeholders from across the Trust, with representation from Divisional Triumvirates and Leadership teams, the Trust Executive, Finance and Procurement teams, Capital Leads and other clinical and non-clinical colleagues as required.

The purpose of the workshop was to understand the capital landscape of the ICS, including the constraints that the Trust needs to work within for the financial year and the need for a refined focus on SFH capital requests alongside collaborative working to determine an appropriate prioritisation methodology.

Through the workshop and subsequent working groups a set of principles have been agreed to develop a prioritisation matrix, which leads to three groups of priority - Committed Spending (Priority 1), Need to Do (Priority 2), and Want to Do (Priority 3). The prioritisation process includes an assessment of risk, statutory requirements and strategic fit, with a scale of scoring applied to each of these.

This prioritisation approach has then been applied to proposed schemes to allocate the £13.6m Capital Expenditure Plan for 2024/25. Of this, £9.6m has been determined as Committed Spending (Priority 1), as per the table below. This includes the capital required to progress the MRI build, which has been identified as a priority for the Board.

	£m	£m
SFH Capital Plan 2024/25 & 2025/26	2024/25	2025/26
Trust Allocation	13.60	
<b>Pre-Committed Capital Expenditure</b>		
Estates	3.53	
MRI	3.50	8.75
IT	2.42	
Equipment	0.10	2.00
<b>Total Pre-Committed Capital Expenditure</b>	<b>9.54</b>	<b>10.75</b>
<b>Remaining SFH Capital Available for Distribution</b>	<b>4.06</b>	

Appendix One provides detailed scheme information to the pre-commitments above and current pre-commitment for 2025/26 (NB include MRI, £2m medical equipment tbc).

Following the allocation of Committed Spending there is a balance of £4.1m for 2024/25 (less any M1-2 Capital expenditure already reported). This balance will be categorised based on the scoring framework set out above ('Need To Do' and 'Want to Do'). The table below provides an overview of those schemes categorised as 'Need to Do' by Capital Leads, with a total value of £9.3m (Appendix Two provides a detailed breakdown).

Matrix Score	Next Steps	Estates		IT		Med Equip		Total	
		No	£'000	No	£'000	No	£'000	No	£'000
6	Essential scheme with needs to commence - immediate approval recommended	0	£ -	0	£ -	0	£ -	0	£ -
5		0	£ -	1	£ 160	0	£ -	1	£ 160
4	Top Priority - approval recommended to commence once funding is available	0	£ -	2	£ 300	7	£ 1,465	9	£ 1,765
3		4	£ 3,500	4	£ 250	17	£ 1,335	25	£ 5,085
2		0	£ -	0	£ -	1	£ 300	1	£ 300
1	Recommended to re-prioritise into "Priority 3 Want todo" category process	1	£ 2,000	0	£ -	0	£ -	1	£ 2,000
0		0	£ -	0	£ -	0	£ -	0	£ -

Four schemes are Estates in nature and have scored as 'Top Priority', however given the time to scope and complete enabling works are unlikely to be spent during this financial year. Consideration should therefore be given to commencement of enabling works to scope those schemes with a view to agreement of pre-commitment for 2025/26. These schemes are:

Department	Sub Department	Scheme Description	Division	Value (£'000)	Need To Do / Want To Do	If Need To Do				Total Score
						Risk Register Score	Regulatory Score	Strategic Score	Financial Impact Note	
Estates	Schedule 38	Spine Corridor Replacement (Phase I)	Estates	1,000	Need To Do	1	0	2	Neutral	3
Estates	Schedule 38	Spine Corridor Replacement (Phase II)	Estates	1,000	Need To Do	1	0	2	Neutral	3
Estates	Schedule 38	Spine Corridor Replacement (Phase III)	Estates	500	Need To Do	1	0	2	Neutral	3
Estates	Schedule 38	CSSD Works	Estates	1,000	Need To Do	1	0	2	Neutral	3

The remaining 'Top Priority' schemes amount to £3.4m across 30 schemes (including 24 items of essential medical equipment replacements). This is within the remaining level of funding available for 2024/25 and the Finance Committee has therefore recommended that the commencement of these schemes is approved by the Board of Directors. These schemes are:

Department	Sub Department	Scheme Description	Division	Value (£'000)	Need To Do / Want To Do	If Need To Do				Total Score
						Risk Register Score	Regulatory Score	Strategic Score	Financial Impact Note	
IT	Clinical	Digitisation - Risk Assessment	Digital	100	Need to do	1	1	2	Neutral	4
IT	Technical	Virtual Desktop Expansion (DataCentre)	Digital	150	Need to do	1	2	0	Neutral	3
IT	Projects	Orion Systems Upgrade	Digital	25	Need to do	1	2	0	Neutral	3
IT	Projects	ICE Upgrade to Version 8 / Order Comms Nerve Centre)	Digital	25	Need to do	1	2	0	Neutral	3
IT	EPR	Electronic Document Management Solution	Digital	200	Need to do	1	1	2	Financial Gain With This	4
IT	Projects	Patient Facing digital services	Digital	50	Need to do	1	1	1	Financial Loss Without This	3
Med Equip	Med Equip	Ultrasound Devices - Radiology	CSTO	210	Need To Do	1	1	1	Financial Loss Without This	3
Med Equip	Med Equip	Ultrasound Devices - Cardiology	Medicine	120	Need To Do	1	1	1	Financial Loss Without This	3
Med Equip	Med Equip	Ultrasound - Portable (POCUS, eg lung ultrasound, ascitic fluid identification, vascular access and dvt assessment)	W&C	60	Need To Do	1	1	1	Financial Loss Without This	3
Med Equip	Med Equip	Cardiac Equipment - Cath suite, clinic 4	Medicine	50	Need To Do	1	1	1	Financial Loss Without This	3
Med Equip	Med Equip	Flexible Endoscopy, including nasopharyngeal laryngoscopes	Medicine	100	Need To Do	1	1	1	Financial Loss Without This	3
Med Equip	Med Equip	Anaesthetic Equipment - inc patient monitors	Surgery	75	Need To Do	1	1	1	Financial Loss Without This	3
Med Equip	Med Equip	Audiological Equipment	Surgery	20	Need To Do	1	1	1	Financial Loss Without This	3
Med Equip	Med Equip	capital accessories	Trust-wide	100	Need To Do	1	1	2	Financial Loss Without This	4
Med Equip	Med Equip	ECG Recorders rolling replacement	Medicine	30	Need To Do	1	1	1	Financial Loss Without This	3
Med Equip	Med Equip	Image intensifier Carm	CSTO	80	Need To Do	1	1	1	Financial Loss Without This	3
Med Equip	Med Equip	Laboratory Equipment, Faxitron etc	CSTO	100	Need To Do	1	1	1	Financial Loss Without This	3
Med Equip	Med Equip	Microscopy Equipment, including Ophthalmic Ceiling mount	CSTO	50	Need To Do	1	1	1	Financial Loss Without This	3
Med Equip	Med Equip	Patient Monitoring Systems ITU	Trust-wide	140	Need To Do	1	1	1	Financial Loss Without This	3
Med Equip	Med Equip	Radiological Equipment (skyplates)	CSTO	80	Need To Do	1	1	1	Financial Loss Without This	3
Med Equip	Med Equip	RF Fluoroscopy Room, mobiles etc Win10	CSTO	1000	Need To Do	2	1	1	Financial Loss Without This	4
Med Equip	Med Equip	Medical Equipment, previously revenue	Trust-wide	50	Need To Do	2	1	1	Financial Loss Without This	4
Med Equip	Med Equip	Unanticipated shorter life realize eg cyber	Trust-wide	120	Need To Do	2	1	1	Financial Loss Without This	4
Med Equip	Med Equip	Bariatric - beds (inc ITU & Maternity) and hoists Patient handling eg bath shower hoists ie	Trust-wide	75	Need To Do	1	2	1	Financial Loss Without This	4
Med Equip	Med Equip	Alenti	Trust-wide	60	Need To Do	1	2	1	Financial Loss Without This	4
Med Equip	Med Equip	Patient Lifting Equipment inc tugs	Trust-wide	60	Need To Do	1	2	1	Financial Loss Without This	4
Med Equip	Med Equip	Patient Ventilation Equipment eg MRI	Surgery	50	Need To Do	1	1	1	Financial Loss Without This	3
Med Equip	Med Equip	Patient Warming Systems, includes incubators/CTGs	W&C	0	Need To Do	1	1	1	Financial Loss Without This	3
Med Equip	Med Equip	Surgical instrument refresh, inc camera stacks,chole,urethro	Surgery	120	Need To Do	1	1	1	Financial Loss Without This	3
Med Equip	Med Equip	Surgical Treat Equipment eg diathermy	Surgery	50	Need To Do	1	1	1	Financial Loss Without This	3
Med Equip	Med Equip	Theatre Equipment eg op table, oneoff specialis	Surgery	100	Need To Do	1	2	1	Financial Loss Without This	4

Two of the schemes amounting to £2.3m fall below the priority 2 scoring value and therefore are within the reprioritise as 'Want to Do' (Priority 3) schemes. These are:

Department	Sub Department	Scheme Description	Division	Value (£'000)	Need To Do / Want To Do	If Need To Do				Total Score
						Risk Register Score	Regulatory Score	Strategic Score	Financial Impact Note	
Estates	Development	Car Parking	Estates	2,000	Need to Do	1	0	0	Neutral	1
Med Equip	Med Equip	CSSD RO Machines	CSTO	300	Need to Do	0	1	1	Financial Loss Without This	2

It is recommended that the prioritisation group review the scoring for those schemes and if agreed that they are accurate, both schemes are taken through the Priority 3 process of an OBC / PID production for consideration.

Assuming agreement to the commencement of the Top Priority schemes the remaining capital allocation for 2024/25 would be £0.7m, plus any in-year slippage that may be experienced on agreed schemes.

Appendix Three show the Priority 3 schemes by Area with an estimated value included where available at the time of this paper, as well as a list of Capital items that were submitted through 2024/25 Planning, the Trust's 'Risks and Opportunities' process or the Capital Prioritisation Workshop, that have not been identified in Priority 2 and 3 submissions.

It is proposed that these schemes are worked up by divisional leads to an OBC / PID, to be presented to the Capital Prioritisation Sub-Group before being recommended to CROG regarding priority order of approval if funding becomes available.

### Medium Term & Future Years

Following on from the associated challenges in 2024/25 regarding the financial constraints of the Trust and System capital plan, it is anticipated that the 2025/26 programme will be of a similar or greater value to 2024/25. Any pre-commitments that arise throughout 2024/25 that impact the 2025/26 Capital planning process will be reported via routine capital updates at both CROG and Finance Committee. At present, these currently stand at the remaining balance of the MRI programme (£8.8m) and the ongoing Medical Equipment Replacement Programme (£2.0m).

Consideration will be given to items of enabling work included in the 2024/25 programme which may become pre-committed during the year, including required car parking developments.

### Next Steps

With regards to the available balance for distribution, Capital leads have been asked to complete the scoring matrix for any of their Priority 2 and Priority 3 in-year schemes which will subsequently go through a review process, with an approval process to be agreed for the scheme to commence.

Any schemes not progressed as part of this exercise will be considered as part of the Trust's ongoing Capital Planning cycle for the following financial year.

### Recommendation

Following presentation and recommendation by the Finance Committee at their meeting on 25 June 2024, the Board of Directors are asked to approve the 2024/25 Capital Plan (including the commencement of the £9.6 pre-commitment and £3.4m 'Top-Priority' schemes) and support the ongoing prioritisation process.

## Appendix 1 – Breakdown of Committed Spend Schemes

### Estates

<b>1. Building / Health and Safety</b>		
Scheme Name	Allocation £'000	Information
CIP Trunks	£300	Escalated to CNH to provide evidence of ownership before we proceed with the works
Mortuary / Histopathology AHU	£1,050	Currently being designed and to be issued to SFS shortly
Health and Safety		
<i>TB3 Access Control Upgrade</i>	£19	Complete
<i>Car Parking/Drop off Provision for CP16</i>	£18	To be reviewed if these works are still required and the current costs are £10k over the allocation.
<i>NICU Main Entrance</i>	£21	These works have been identified as a requirement from the CQC, will complete June 2024
<i>Tube Transport Upgrade</i>	£60	Complete
Spine Corridor Upgrade	£100	Complete and formal letter issued to CNH to take over the maintenance of the floor
CSSD Water Tank Upgrade	£100	TVE to be issued to SFS
<b>Sub Total: Building / Health and Safety</b>	<b>£1,668</b>	
<b>2. Service Developments</b>		
Scheme Name	Allocation	Information
Dr's Mess Refurbishment	£310	Programme issued by SFS which is unacceptable, further discussions are taking place to improve this.
Theatre Motion Detection	£95	FVR awaited to proceed, SFH reviewing the non-compliance issues raised by CNH. – Solution agreed by CNH and this is being worked through.
CRF Creation	£300	Alternative solution being worked up with utilising TB3, current allocation remains the same
MRI Enabling Works (Outside W&C)	£300	Costs to be issued W/C 17/006/2024, SFS aware of the need for this to be in use by August 2024
Fit to Sit	£253	Programme issued by SFS which is unacceptable, further discussions are taking place to improve this.
Little Millers Cooling	£100	FVR awaited to proceed
Breast Screening Expansion	£300	Cost reviewed and TVE to be issued, possible impact on programme due to the BSA
CT Scanner Room 2 (Enabling Works)	£100	Works being designed up to support the works from GEHealthcare and Skanska
<b>Sub Total: Service Developments</b>	<b>£1,758</b>	
<b>3. Feasibilities</b>		
Scheme Name	Allocation	Information
Car Parking Provision (Enabling Works)	£20	Proposals due shortly
MRI New Build	£20	Business Case Approved, allocation to be identified by CROG
Spine Corridor Replacement	£20	Kier have been appointed to review the costs for the works and provide a programme based on drawings produced in 2021.
Pathology Labs Refurbishment	£10	Awaiting date of meeting
Pre-Op KTC	£10	Consultants appointed and providing drawings, costs and program for inclusion in the business case
<b>Sub Total: Feasibilities</b>	<b>£80</b>	
<b>Total Estates Pre-Commitments 2024/25</b>	<b>£3,506</b>	
<b>Total Estates Pre-Commitments 2024/25 (MRI)</b>	<b>£3,500</b>	<b>MRI - Case approved at £12.25m of Capital with £3.5m spent in 2024/25. Remainder as part of Capital 2025/26</b>
<b>Total Estates Pre-Commitments 2024/25 (All)</b>	<b>£7,006</b>	
<b>Total Estates Pre-Commitments 2025/26</b>	<b>£8,750</b>	<b>MRI - Case approved at £12.25m of Capital with £3.5m spent in 2024/25. Remainder as part of Capital 2025/26</b>

**Appendix 1 (cont.)**

**I.T**

<b>I.T Capital Pre-Commitments 2024/25</b>			
<b>Code</b>	<b>Description</b>	<b>Comments</b>	<b>Baseline24/25 £'000</b>
		18/6 part of pre commitments and approved	
KX14887	End User Remote Access		£30
KX14022	VXRail	18/6 part of pre commitments and approved	£756
KX14817	Wireless Hardware Refresh	18/6 part of pre commitments and approved	£40
KX14818	Pathology Laboratory Information System (LIMS)	18/6 part of pre commitments and approved	£60
KX14031	Laptop & PC Replacements (7 year useful life)	18/6 part of pre commitments and approved	£60
KX14090	Cyber Security (Unsupported Operating Systems)	18/6 part of pre commitments and approved	£300
KX14096	PAS Upgrade	18/6 part of pre commitments and approved	£25
KX14076	Health Community Portal	18/6 part of pre commitments and approved	£25
KX11614	Endoscopy Implementation	18/6 part of pre commitments and approved	£50
KX14962	UPS refresh	18/6 part of pre commitments and approved	£10
KX14907	EPR Frontline Digitisation pay bak	18/6 part of pre commitments and approved	£1,060
<b>Total I.T Pre-Commitments 2024/25</b>			<b>£2,416</b>

**Equipment**

£100k of pre-commitments have been identified for purchase as part of the ongoing Medical Equipment Replacement Programme in 2024/25, with a further £2m to be identified for pre-commitment in 2025/26. The £100k is covers anything charged to Capital Accessories and covers mainly mop up costs relating to the Pharmacy robot and ongoing Ultrasound probe replacements.

**Appendix 2 – Breakdown of Priority 2 schemes 2024/25**

**Estates - £5.5m**

Department Scheme Number	Department	Sub Department	Scheme Description	Division	Value (£'00)	Need To Do / Want To Do	If Need To Do				Total Score
							Risk Register Score	Regulatory Score	Strategic Score	Financial Impact Note	
Schedule 38	Estates	Schedule 38	Spine Corridor Replacement (Phase I)	Estates	1,000	Need to Do	1	0	2	Neutral	3
Schedule 38	Estates	Schedule 38	Spine Corridor Replacement (Phase II)	Estates	1,000	Need to Do	1	0	2	Neutral	3
Schedule 38	Estates	Schedule 38	Spine Corridor Replacement (Phase III)	Estates	500	Need to Do	1	0	2	Neutral	3
Schedule 38	Estates	Schedule 38	CSSD Works	Estates	1,000	Need to Do	1	0	2	Neutral	3
Development	Estates	Development	Car Parking	Estates	2,000	Need to Do	1	0	0	Neutral	1

**I.T - £710k**

Department Scheme Number	Department	Sub Department	Scheme Description	Division	Value (£'000)	Need To Do / Want To Do	If Need To Do				Total Score
							Risk Register Score	Regulatory Score	Strategic Score	Financial Impact Note	
KX14865	IT	Clinical	Digitisation - Risk Assessment	Digital	100	Need to do	1	1	2	Neutral	4
KX14565	IT	Technical	Virtual Desktop Expansion (DataCentre)	Digital	150	Need to do	1	2	0	Neutral	3
KX14958	IT	Projects	Orion Systems Upgrade	Digital	25	Need to do	1	2	0	Neutral	3
KX14993	IT	Projects	ICE Upgrade to Version 8 / Order Comms Nerve Centre)	Digital	25	Need to do	1	2	0	Neutral	3
NEW	IT	EPR	Electronic Document Management Solution	Digital	200	Need to do	1	1	2	Financial Gain With This	4
KX14814	IT	Projects	Patient Facing digital services	Digital	50	Need to do	1	1	1	Financial Loss Without	3
KX14028	IT	Technical	Device Refresh (WOWs, Plan to refresh 50 per annum)	Digital	160	Need to do	1	2	2	Neutral	5



**Appendix 2 (cont.)**

**Equipment - £3.1m**

Department Scheme Number	Department	Sub Department	Scheme Description	Division	Value (£'000)	Need To Do / Want To Do	Risk Register Score	Regulatory Score	Strategic Score	Financial Impact Note	Total Score
	Med Equip	Med Equip	CSSD RO Machines	CSTO	300	Need to Do	0	1	1	Financial Loss Without This	2
	Med Equip	Med Equip	Ultrasound Devices - Radiology	CSTO	210	Need to Do	1	1	1	Financial Loss Without This	3
	Med Equip	Med Equip	Ultrasound Devices - Cardiology	Medicine	120	Need to Do	1	1	1	Financial Loss Without This	3
	Med Equip	Med Equip	Ultrasoun - Portable (POCUS, eg lung ultrasound, ascitic fluid identification, vascular access and dvt assessment)	W&C	60	Need to Do	1	1	1	Financial Loss Without This	3
	Med Equip	Med Equip	Cardiac Equipment - Cath suite, clinic 4	Medicine	50	Need to Do	1	1	1	Financial Loss Without This	3
	Med Equip	Med Equip	Flexible Endoscopy, including nasopharyngeal laryngoscopes	Medicine	100	Need to Do	1	1	1	Financial Loss Without This	3
	Med Equip	Med Equip	Anaesthetic Equipment - inc patient monitors	Surgery	75	Need to Do	1	1	1	Financial Loss Without This	3
	Med Equip	Med Equip	Audiological Equipment	Surgery	20	Need to Do	1	1	1	Financial Loss Without This	3
	Med Equip	Med Equip	ECG Recorders rolling replacement	Medicine	30	Need to Do	1	1	1	Financial Loss Without This	3
	Med Equip	Med Equip	Image intensifier Carm	CSTO	80	Need to Do	1	1	1	Financial Loss Without This	3
	Med Equip	Med Equip	Laboratory Equipment, Faxitron etc	CSTO	100	Need to Do	1	1	1	Financial Loss Without This	3
	Med Equip	Med Equip	Microscopy Equipment, including Ophthalmic Ceiling mount	CSTO	50	Need to Do	1	1	1	Financial Loss Without This	3
	Med Equip	Med Equip	Patient Monitoring Systems ITU	Trust-wide	140	Need to Do	1	1	1	Financial Loss Without This	3
	Med Equip	Med Equip	Radiological Equipment (skyplates)	CSTO	80	Need to Do	1	1	1	Financial Loss Without This	3
	Med Equip	Med Equip	RF Fluoroscopy Room, mobiles etc Win10	CSTO	1000	Need to Do	2	1	1	Financial Loss Without This	4
	Med Equip	Med Equip	Medical Equipment, previously revenue	Trust-wide	50	Need to Do	2	1	1	Financial Loss Without This	4
	Med Equip	Med Equip	Unanticipated shorter life realize eg cyber	Trust-wide	120	Need to Do	2	1	1	Financial Loss Without This	4
	Med Equip	Med Equip	Bariatric - beds (inc ITU & Maternity) and hoists	Trust-wide	75	Need to Do	1	2	1	Financial Loss Without This	4
	Med Equip	Med Equip	Patient handling eg bath shower hoists ie Alenti	Trust-wide	60	Need to Do	1	2	1	Financial Loss Without This	4
	Med Equip	Med Equip	Patient Lifting Equipment inc tugs	Trust-wide	60	Need to Do	1	2	1	Financial Loss Without This	4
	Med Equip	Med Equip	Patient Ventilation Equipment eg MRI Transport Sipap	Surgery	50	Need to Do	1	1	1	Financial Loss Without This	3
	Med Equip	Med Equip	Patient Warming Systems, includes incubators/CTGs	W&C	0	Need to Do	1	1	1	Financial Loss Without This	3
	Med Equip	Med Equip	Surgical instrument refresh, inc camera stacks,chole,urethro	Surgery	120	Need to Do	1	1	1	Financial Loss Without This	3
	Med Equip	Med Equip	Surgical Treat Equipment eg diathermy	Surgery	50	Need to Do	1	1	1	Financial Loss Without This	3
	Med Equip	Med Equip	Theatre Equipment eg op table, oneoff specialist	Surgery	100	Need to Do	1	2	1	Financial Loss Without This	4

**Appendix 3 – Breakdown of Priority 3 schemes 2024/25**

**Estates – N/A at June 2024**

**I.T - £810k**

Department Scheme Number	Department	Sub Department	Scheme Description	Division	Value (£'000)	Need To Do / Want To Do	If Need To Do				Total Score
							Risk Register Score	Regulatory Score	Strategic Score	Financial Impact Note	
NEW	IT	Projects	PACS Replacement	Digital	50	Want to do	1	1	1	Neutral	3
NEW	IT	Projects	Video Conferencing	Digital	50	Want to do	1	0	0	Neutral	1
KX14564	IT	Technical	Virtual Desktop Expansion (End User)	Digital	600	Want to do	1	0	0	Neutral	1
KX14856	IT	Technical	Backup System Replacement /Expansion (Rubri	Digital	110	Want to do	1	1	1	Neutral	3

**Equipment - £327k**

Department Scheme Number	Department	Sub Department	Scheme Description	Division	Value (£'000)	Need To Do / Want To Do	If Need To Do				Total Score
							Risk Register Score	Regulatory Score	Strategic Score	Financial Impact Note	
	Med Equip	Med Equip	Mammography 4th room - Equipment only	Surgery	112	Want to do	0	0	0	Financial Loss Without This	-
	Med Equip	Med Equip	Bladder scanners	Trust-wide	35	Want to do	1	1	0	Financial Loss Without This	2
	Med Equip	Med Equip	Electro-medical test equipment	CSTO	15	Want to do	1	1	2	Financial Loss Without This	4
	Med Equip	Med Equip	Ophthalmic Equipment eg slit lamp	Surgery	50	Want to do	1	1	2	Financial Loss Without This	4
	Med Equip	Med Equip	Green/H&S agenda eg entonox, nitrous	Trust-wide	40	Want to do	1	1	2	Financial Loss Without This	4
	Med Equip	Med Equip	Decon technology adoption	Trust-wide	25	Want to do	1	1	1	Financial Loss Without This	3
	Med Equip	Med Equip	Clinical Lamps/Lights, inc Op theatre light	Surgery	50	Want to do	1	1	2	Financial Loss Without This	4

**Menti and Risks & Opportunities Submissions**

- Redevelopment of Sensory Room Ward 25
- Cortak Equipment – Medicine
- EAU flooring including Bed Base reconfiguration.
- ED Redevelopment
- Ophthalmology Clinic expansion
- Audiology booth
- Case Note storage
- Surgical Robot
- Bed storage works
- Removal of wall of neonatal unit
- Newark med record
- Maternity triage relocation
- Video Conferencing
- ADU Replacement