

Council of Governors Estates update

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Associate Director of Estates & Facilities

November 2023



Presentation Aims

- PFI settlement
- Car parking
- Space management
- Capital
- Green plan
- Fire team

- Questions / contact



PFI Settlement

- Subject to Board/NHSE/DoHSC/PFI funder sign off
- Remedies historic poor performance
- Estimated capital value over 5 years is ~£15m
- Made up of three parts
 - ODP – ‘resets’ the contract – sustainable until 2043
 - Contract interpretations – clarity between all parties
 - Settlement – transfer of Sch 38 ‘retained estate’ liabilities and investment of 5 years *divisional impact*



Car parking

- ANPR roll out coming - Delivery ?Q1 2425
- 80 additional spaces at Newark Hospital through innovative partnership with NSDC
- ‘Drop off’ facility at KMH not prioritised – subject to ANPR works
- Northfield car park lease Extended, ?outright purchase



Space Management



Sherwood Forest Hospitals
NHS Foundation Trust

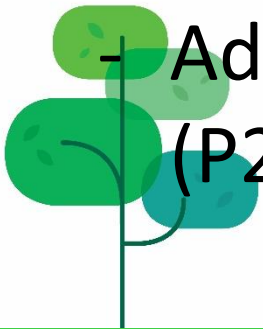
Introduction to
Paul Williams
new Space & Utilisation Manager



Capital works

Improving going forwards

- ODP/settlement has streamlined process for both Trust and Project Co.
- Upfront confirmed design, budget, programme
- Hand back process much more prescriptive
- Adoption of 'hybrid' market approach with Kier (P22) and Skanska

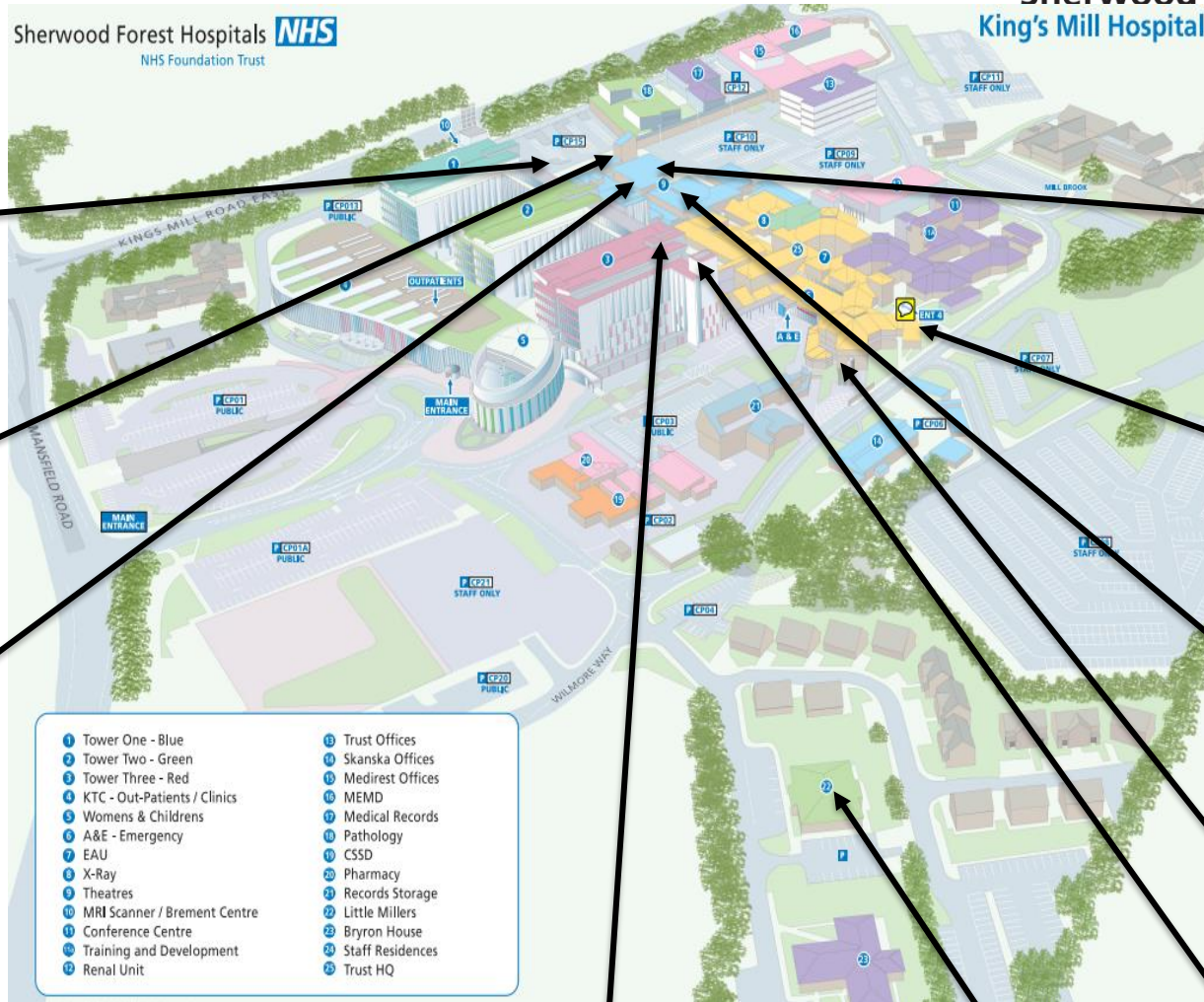


Sherwood Forest Hospital Foundation Trust

King's Mill Hospital



Sherwood Forest Hospitals
King's Mill Hospital NHS Foundation Trust



SKANSKA
Histopathology/Mortuary AHU
 £1,050,000
 February 24 – June 24
 Histopathology/Mortuary Ventilation plant upgrade to provide air changes in compliance with HTM's, HGN's and HBN's

SKANSKA
Old Spine corridor enabling
 £360,000
 November 23 – March 24
 Relocation of existing services within the old spine corridor, electrical and mechanical services to new location to enable continuation of spine corridor replacement

SKANSKA
Theatre door automation
 £65,000
 January 24 - March 24
 Upgrade of two door sets with automatic opens to remove risk and increase security

SKANSKA
Health and Safety - Various
 £100,000
 November 23 - March 24
 Anti-Ligature blinds in Clinic 11
 Crash Protection outside ED
 Layout revisions for CP16

SKANSKA
Fire Reports - Site Wide
 £70,000
 November 23 - March 24
 Fire works detailing and recommendations for prevention measures including additional smoke detectors, emergency lighting and fire alarm interfaces

- 1 Tower One - Blue
- 2 Tower Two - Green
- 3 Tower Three - Red
- 4 KTC - Out-Patients / Clinics
- 5 Womens & Childrens
- 6 A&E - Emergency
- 7 EAU
- 8 X-Ray
- 9 Theatres
- 10 MRI Scanner / Bremet Centre
- 11 Conference Centre
- 12 Training and Development
- 13 Renal Unit
- 14 Trust Offices
- 15 Skanska Offices
- 16 Medirest Offices
- 17 MEMD
- 18 Medical Records
- 19 Pathology
- 20 CSSD
- 21 Pharmacy
- 22 Records Storage
- 23 Little Millers
- 24 Bryron House
- 25 Staff Residences
- 26 Trust HQ

SKANSKA
Theatre Roofs Upgrade
 £450,000
 July 23 - November 23
 Provide watertight roofing works to CT Scanner roof & Theatre Holding Bay

SKANSKA
Entrance 4 Lifts
 £350,000
 January 24 - June 24
 Entrance 4 Lifts to be upgraded in accordance with HTM's

SKANSKA
Theatre motion detection
 £23,872
 January 24 – March 24
 To add motion detection to ventilation systems for energy saving efficiencies

KIER
New Discharge lounge
 £1,500,000
 February 23 – January 24
 Creation of new discharge lounge in Old Ward 3

SKANSKA
End Of Life Rooms on 16 wards
 £130,000
 January 24 - March 24
 End of Life rooms to be refurbished with new flooring, decoration and refreshment bays

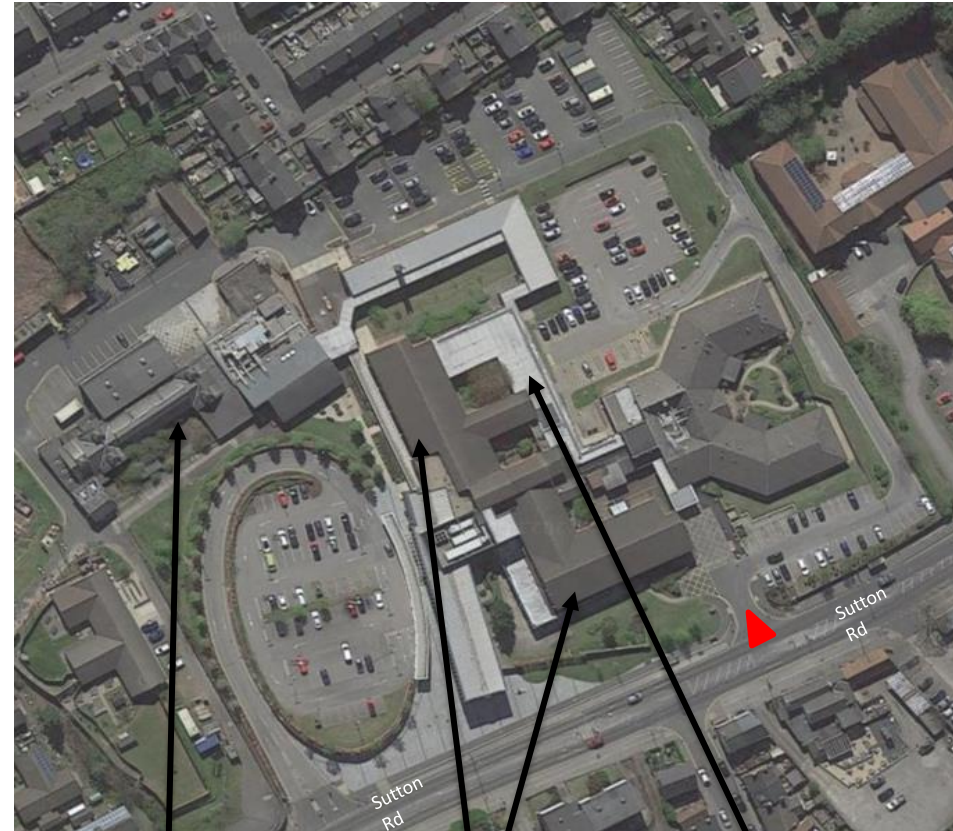
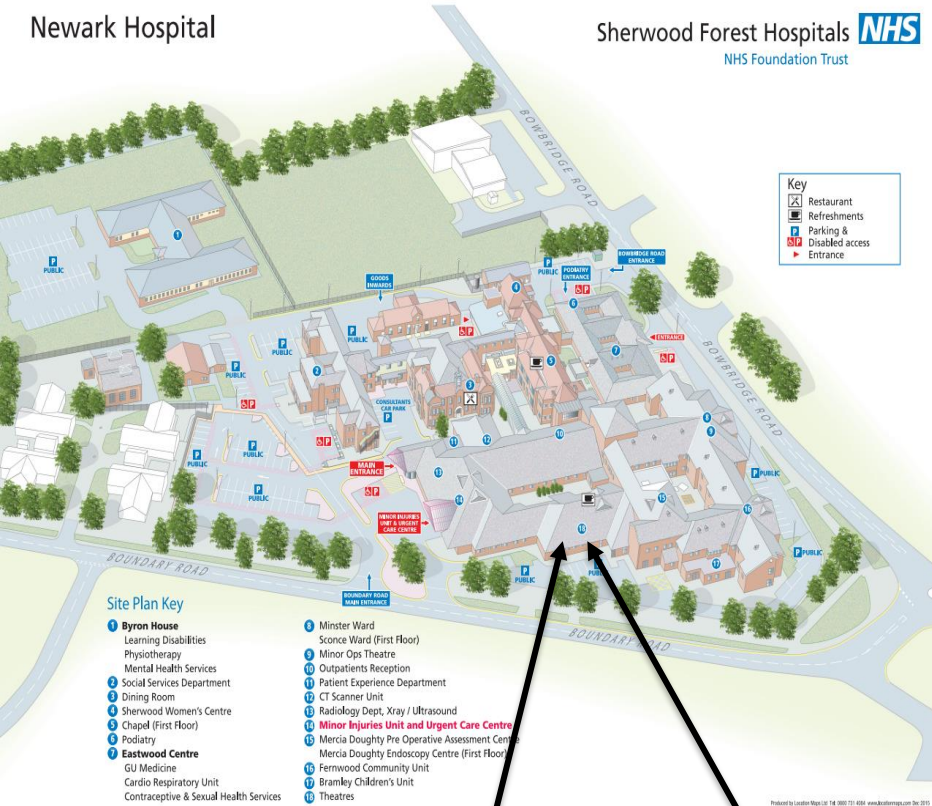
SKANSKA
Doctors mess
 £210,000.00
 November 23 – January 24
 Creation of a new doctor's mess on level 6, Tower C

KIER
Little Millers Upgrades
 £100,000
 April 23 – January 24
 Little Millers additional cooling and external play area upgrades

Replacement Pharmacy Robot -
 £170,000
 November 23 - March 24
 Upgrade of the current pharmacy dispensary (Interim Solution in KTC Fingers)

Sherwood Forest Hospitals Foundation Trust Newark Hospital

Newark Hospital



SKANSKA

Fire Reports – Site wide
£70,000
November 23 – March 24

Site wide Fire Works detailing recommendations for prevention measures including additional smoke detectors, emergency lighting and fire alarm interfaces

SKANSKA

Theatre motion detection
£23,872
January 24 – March 24

To add motion detection to ventilation systems for energy saving efficiencies

RIEER

TIF Theatre Project + Internal works
£5,700,000
November 22 – December 23

Multiple projects to increase activity at Newark General Hospital. Including a new Modular Laminar Flow Theatre,

RIEER

Community Diagnostics Centre (CDC)
£20,200,000
August 23 - May 2025

New centre to speed up diagnosis pathways

SKANSKA

MCH Fire Upgrades
Linhurst and Oakham Ward
£468,000
August 21 - November 23

Firestopping upgrade, installation of misting system and installation of 4 evacuation lifts to first floor wards

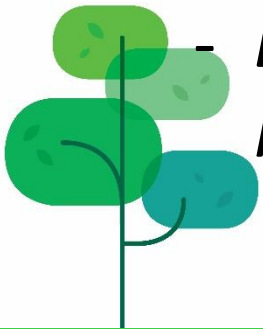
PHILIPS

DXR Rooms - Radiography
tbc
April 23 – November 23

Replace equipment and full refurbishment of Fluoroscopy and DXR rooms

Strategic priorities >2324

- *MRI (KMH)*
- *CDC (MCH)*
- *CSSD (KMH)*
- *Theatres & Critical Care (condition B investment) (KMH)*
- *Betterment and decant considerations as part of the PFI settlement investment*



Green plan

- Strategic and operational oversight groups established
- Recent PSDS capital bid withdrawn
- BAF 'off-track', more work to do

NHS Foundation Trust

Board Assurance Framework (BAF): October 2023

Principal risk <small>(What could prevent us achieving this strategic objective)</small>	PR 8: Failure to deliver sustainable reductions in the Trust's impact on climate change The vision to further embed sustainability into the organisation's strategies, policies and reporting processes by engaging stakeholders and assigning responsibility for delivering the actions within our Green Plan may not be achieved or achievable						Strategic objective	2: Improve health and wellbeing within our communities
Lead committee	Finance	Risk rating	Current exposure	Tolerable	Target	Risk type	Reputation / regulatory action	
Lead director	Chief Financial Officer	Consequence	3. Moderate	3. Moderate	3. Moderate	Risk appetite	Cautious	
Initial date of assessment	22/11/2021	Likelihood	3. Possible	3. Possible	2. Unlikely			
Last reviewed	23/10/2023	Risk rating	9. Medium	9. Medium	6. Low			
Last changed	25/07/2023							

Strategic threat <small>(What might cause this to happen)</small>	Primary risk controls <small>(What controls/ systems & processes do we already have in place to assist us in managing the risk and reducing the likelihood/ impact of the threat)</small>	Gaps in control <small>(Specific areas / issues where further work is required to manage the risk to accepted appetite/ tolerance level)</small>	Plans to improve control <small>(Are further controls possible. In order to reduce risk exposure within tolerable range?)</small>	Sources of assurance (and date) <small>(Evidence that the controls/ systems which we are placing reliance on are effective)</small>	Gaps in assurance / actions to address gaps <small>(Insufficient evidence as to effectiveness of the controls or negative assurance)</small>	Assurance rating
Failure to take all the actions required to embed sustainability and reduce the impact of climate change on our community	<ul style="list-style-type: none"> Estates & Facilities Department oversee the plan and education on climate change impacts Green Plan 2021-2026 Climate Action Project Group Sustainability Development Strategy Group Engagement and awareness campaigns (internal/external stakeholders) Estates Strategy Digital Strategy Capital Planning sustainability impact assessments Environmental Sustainability Impact Assessments built into the Project Implementation Documentation process Engagement with the wider NHS sustainability sector for best practice, guidance and support Process in place for gathering and reporting statistical data Adoption of NHS Net Zero building standard 2023 for all works from October 2023 Awareness to, and applications for, funding sources both internally and externally such as the Public Sector Decarbonisation Scheme and grants from Salix Ltd 	<p>Education of Board and staff at all levels</p> <p>Dedicated capacity to implement ideas for change</p>	<p>Training of the Board, decision makers and all staff at an appropriate level to increase awareness and understanding of sustainable healthcare</p> <p>Progress: Training package developed with Notts Healthcare Trust – awaiting ratification and training dates</p> <p>Lead: Associate Director of Estates and Facilities</p> <p>Timescale: December 2023</p> <p>Proposal to ICB partners for collaborative approach and resource</p> <p>Progress: At the ICB Estates Group in March 2023 a common approach to system wide sustainability reporting and resourcing was suggested and will be reflected in revised ToR. Update on progress sought from the ICB</p> <p>Lead: Chief Financial Officer</p> <p>Timescale: December 2023</p>	<p>Management: Sustainability update report to TMT Oct 22; Green updates provided routinely to Finance Committee</p> <p>Risk and compliance: Green Plan to Board Apr 21; Sustainability Report included in the Trust Annual Report</p> <p>Independent assurance: ERIC returns and benchmarking feedback</p>		<p>Positive</p> <p>Last changed November 2022</p>



Fire team

- Additions to team
 - Head of Fire
 - 2 PTE fire trainers/risk assessors
- Detailed workplan to improve compliance



WITH COMPLIANCE **NON-COMPLIANCE**

RECOMMENDATION

Sherwood Forest Hospitals NHS Foundation Trust has a statutory and common law duty of care to ensure safe provision and systems of work to protect patients, staff, visitors and any other person who enters the site. This duty extends to cover people who do not go to the site but may be affected by our activities or actions that could be harmful to the local or global environment.

Date: _____ Time: _____

Site name: _____

and observed that one or more of the principles in the above statement were breached or there was a breach of compliance of an agreed Trust policy.

The following breach(s) were observed:

ACTION REQUIRED

Support the process of activity completion

Review the risk methodology

Review or update the risk action plan

This form will be copied to your Director's management, and progress against the targets set will be monitored and reported to the Operational Fire Group.

Issued by: _____ Position: _____

Business & Facilities Department

Received by: _____ Position: _____



Questions?

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