

South Tees Hospitals

NHS Foundation Trust

Meeting committee:	Board of Directors Public Meeting	Meeting date:	June 2013
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This paper is for: (Only 1 column to be marked with x as appropriate)	Action/Decision	Assurance	Information x
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Title	Estates and Facilities Management (EfM) Quarterly Report
Purpose	To provide the Board of Directors with a quarterly overview of EfM issues within the Trust and to provide formal board level reporting on performance

Summary	<p>The report provides headlines of current issues</p> <p>At National level</p> <ul style="list-style-type: none"> - Update on PLACE inspections <p>At Local Level</p> <ul style="list-style-type: none"> - Update on sustainability and waste management - Details on Innovation & Efficiency Workshop - Commencement of upgrading of ward 3, JCUH
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Prepared by:	Margaret McGloin Deputy Director Planning (Built Environment)	Presented by:	JILL MOULTON Director of Planning
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Recommendation:	Trust Board members are requested to consider the information contained within this report.
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Implications (mark with an x in appropriate column(s))	Legal	Financial x	Clinical x	Strategic	Risk & Assurance x
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TRUST BOARD OF DIRECTOR MEETING – JUNE 2013
ESTATES AND FACILITIES MANAGEMENT (EFM) REPORT

1 PURPOSE

2 NATIONAL EFM ISSUES

2.1 Patient Environment Action Team (PEAT)

PLACE assessments have now been undertaken across all 8 of the Trust sites with no major issues being raised other than that of waste bins. The assessment programme has identified a programme of replacement waste bins needs to be drafted to ensure compliance in future years. Action plans have been drafted for each of the sites and shared with the relevant service providers/managers and going forward meetings will be diarised to ensure that actions are undertaken within the relevant timescale.

Results will be published in September 2013.

2.2 Property Services (PropCo)

Regular bi monthly meetings continue to be held with the Durham & Tees Property Services Team attended by the Planning Department and Community Services Division. The main focus at the meetings to date has been to address estate utilisation issues relating to the Community Services Division. The next meeting is scheduled to take place on 24 June 2013.

3 HEADLINE LOCAL ISSUES

3.1 Benchmarking of the PFI Concession Agreement - JCUH

The change to the Deed of Variation which formally closes off the negotiations relating to bench marking of the PFI Concession Agreement has now received approval from the Trust and Carillion and is now with the funder for final approval.

3.2 Efficiency & Innovation Workshop

The Trust, Endeavour and Carillion took part in an Innovation and Efficiency Workshop on Tuesday 11 June. The purpose of the workshop was to establish joint working arrangements for the delivery of continuing cost reductions and efficiency savings. Both hard and soft services were reviewed to identify opportunities through innovation efficiency measures for savings to be delivered to the Trust without compromising quality.

It was agreed following the workshop that a number of workstreams would be established to develop proposals for joint review shortlisting, development and implementation.

3.3 HR Issues

Following a re-structuring of senior posts in the Planning Department, Mr Myles McQuade has been appointed to the post of Head of Estate & Facilities and will join the Trust on 8 July. Myles is an experienced Estate & Facilities Manager. A Mechanical Engineer by profession, his previous experience includes PFI Healthcare Operations Director for Mowlem's Project Services and more recently as Hospital Development Project Director at Mid Yorkshire Hospital's NHS Trust.

Paula Stracey, Property and Capital Planning Manager has been successful in passing with merit her recent land law exam as part of the Chartered Institute of Legal Executives.

3.4 Major Capital Schemes

Work commenced on site on May 13th to refurbish ward 3 at JCUH to provide 29 beds in improved and clinically appropriate accommodation for infectious diseases. To minimise bed reduction and to achieve en-suite sanitary accommodation to 4 x 5 bed bays, 4 single beds and improve toilet provision generally the footprint of the ward has been expanded by creating an external extension to accommodate new en-suite facilities.

A new nurse call system, bedhead trunking, flooring and redecoration is also included in the scope of works. The total cost of the works is approximately £1.3m and will be completed by mid October.

Infectious Diseases will then move to their new accommodation allowing work to commence on Ward 33 for Haematology Inpatients and to the Marton Day Unit to accommodate Haematology Outpatients.

3.5 Sustainability & Waste Management

- Work continues with Carillion at JCUH and FM colleagues at FHN to implement the recommendations / actions arising from the annual pre-acceptance waste audits. The Trust waste management policy has been amended to reflect these changes and will be reviewed at the June meeting of the Operational Health & Safety Group as part of the route to approval.
- Energy and Sustainability advisor is working with Pharmacy colleagues to improve segregation and secure a reduction in pharmacy waste at James Cook.
- A battery recycling facility 'Battery Back' has been introduced at the Friarage Hospital.
- Energy and Sustainability Advisor is working with procurement team to develop tender documents for new domestic waste and waste recycling contract at Friarage Hospital.
- The Trust declared 9356 tonnes as its total CO2 emissions from the JCUH energy centre under the monitoring procedures and permit requirements of Phase 2 of the EU Emissions Trading Scheme (EU ETS). The cost of purchasing allowances to cover the Trust emission was approx £29,000. The Trust has exercised its option to 'opt out' of Phase 3 of the EU ETS. This results in the Trust being given an emissions target rather than having to trade allowances for its total emissions on the carbon market. If the Trust meets the target no action is required. If emissions exceed the target, allowances only for the amount over the target would need to be purchased. Emissions totalling less than the target can be 'banked' against future years.

Energy Management

- The energy and sustainability advisor continues to work with Carillion at JCUH and the estates team at FHN to implement 'no-cost' energy savings initiatives identified during the recent trust wide energy management review. It is estimated that FYE savings achieved to date through optimising heating temperatures and re-aligning system operating times with department 'opening hours' will be approximately £40,000. The department is working with finance colleagues and trust energy management partners to identify funding to progress with the projects to support its 2013/14 P&E Energy Reduction target:
- Display Energy Certificates are due for renewal across both sites (9 buildings affected). and we are working with an external consultant to complete the certification process.

4 JAMES COOK UNIVERSITY HOSPITAL (JCUH)

4.1 PFI Performance

PFI performance measurement & service indicators for April 2013 are tabled below.

There are no major issues to present in this report.

Performance Measurement and Service Failure Indicators

Service Description	Current Month Performance	Rolling 12 Month Average Performance	Current Month Service Failure Points	Service Failure Points Rolling 12 Month Average
Soft Services:				
Cleaning	98%	98.5 %	2.02	0.88
Catering	100%	99.9%	0.00	0.45
Ward Housekeeping	100%	99.9%	0.00	0.01
Portering	99%	99.6%	0.06	0.05
Linen and Laundry	99%	99.8%	0.00	0.01
Telecommunications	100%	99.8%	0.00	0.00
Security and Car Parking	100%	99.4%	0.00	0.03
Waste Management	100%	100%	0.00	0.00
Hard Services:				
Estates and Maintenance	99%	98.7%	0.93	1.47
Grounds and Gardens	100%	100%	0.00	0.00

** The threshold before a financial penalty is incurred is 51 points.*

4.2 Service Failure Points

The aggregate number of service failure points during April resulted in no service fee deductions.

4.3 Car Parking & Security

The outcome of the work with the Governments Actuary's department on the bulk pension transfer relating to security and guarding has not yet been concluded. However this is anticipated to be very soon and discussions with Carillion and the Trust remain on going for the transfer of the services.

The Planning directorate is currently working on information to be shared with all divisions and directorates and to be displayed on the Trusts intranet & internet site explaining the key times when there are traffic pressures at JCUH advising staff, patients and visitors where possible to use an alternative mode of transport. Connect Tees Valley have shared with us a personalised travel widget - <http://www.connectteesvalley.com/widget.asp> This site can be used to plan an alternative journey. Detailed below is an example of the findings from using a postcode in Ingleby Barwick. For each area a detailed route can be provided with public transport times, costs etc.

Duration
Calories Burnt
Costs
Carbon Footprint



5.4 miles 8.73 km
1hr 45min



411 Cals
£0
0 Kg



5.5 miles 8.97 km
32min



210 Cals
£0
0 Kg



6.1 miles 9.84 km
9min

0 Cals



£4.26



1.96Kg

We are also working with Carillion to ensure traffic is moved around the site at key times for example the North visitors car park (V3) becomes very congested at approximately 3pm. To stop traffic building up the helicopter barrier is dropped, therefore directing cars to the South visitor car parks, and guards are strategically placed around the site to direct traffic to available parking spaces.

Car Parking Facilities at JCUH

The Trust is working closely with Middlesbrough Borough Council (MBC) to agree longterm improvements to car parking arrangements and access to the JCUH site. The objectives are to :

- increase the number of car parking spaces available on the site;
- improve the location of car parking available to visitors by reconfiguring current car parks;
- improve the quality of staff parking by finding a long-term solution for Brackenhoe car park;
- improve access and egress from the site

Key elements of this are to :

- sell the existing Brackenhoe site as development land;

- acquire land from MBC located on the Prissick base site to provide 1,100 spaces (650 replacement for Brackenhoe and 450 additional);
- develop an access road from the new car park onto Ladgate Lane;
- obtain consent to develop an additional 200 car parking spaces on land behind the Holistics Centre.

The process of obtaining planning consent is ongoing and the changes are linked to the MBC plans for the development of the Prissick base. The Trust await feedback from MBC about any conditions attached to section 106 agreement¹. MBC are expected to submit planning for Prissick during August.

Healthy Transport & Travel Policy

The Trust has signed up to Arriva's employer travel club whereby staff can receive up to 30% reduction on weekly and monthly arriva tickets. This has been briefed in the staff bulletin. Arriva will be on site on the 26th June to launch the scheme.

We have also revisited the information on the Trusts intranet site as the travel plan now has a number of schemes that staff can benefit from – liftshare (car sharing), cycle lockers, salary sacrifice for bikes, easyrider bus tickets, the Arriva employer travel club, cycle lockers, cycle compound, walkit.com, personalised travel planning and this month we have opened discussions up on discounted train tickets for the new rail halt.

4.4 Portering

There are operational issues still to be corrected with Carillion's proposed introduction of a computerised system (Portertrac) for the dispatch and control of portering staff. Existing services will be monitored to ensure standards are maintained whilst this new service is being introduced.

4.5 Laundry

There are no issues to be raised within the quarterly report and contract monitoring will continue to ensure supplies of clean linen are available at all times.

4.6 Switchboard/Reception

There is nothing to report on the voice automated switchboard scheme, as internal discussions within the planning and information directorate continue.

4.7 Post Room

One fault was reported with the franking machine at JCUH in May 13, all post was franked at FHN, however the fault was rectified within 4 hours so service disruption was minimal.

¹ Section 106 (S106) of the Town and Country Planning Act 1990 allows a local planning authority (LPA) to enter into a legally-binding agreement or planning obligation, with a land developer over a related issue. The obligation is sometimes termed as a 'Section 106 Agreement'.

First class post has slightly decreased following the TNT training sessions. Across both sites we have had 3 complaints on the TNT post, and each one has been investigated with feedback given to respective users.

Hotel Services are meeting with TNT on the 3rd July for a postage review meeting.

4.8 Residences

A painting and decorating programme in the older residences commenced in May 2013 with the student blocks. The programme also covers family and single blocks and is planned to run until October 2013.

Due to the high number of false fire alarm calls in the residences during 2012/13 a number of actions have been put in place e.g. changing the call out procedure, the fire brigade now attend out of hours, improved signage and information to tenants and £50.00 fines for all false fire alarms have been re-instated. In the previous quarter the false fire alarm calls outs were 13. This quarter this has been reduced to 8, a reduction of 40%.

4.10 Estates & Maintenance

Hard Services Overview

Service Delivery

During the period the planned preventative maintenance activities included:

- Lift 3 - Cardio bridge entrance has been out of service for 6 weeks following failure of the main lift motor variable speed drive. The original drive unit was returned to the manufacture for refurbishment but during re commissioning a further fault occurred; whilst the fault occurred only once and could not be repeated due to the serious nature of the fault, Pickering's our specialist contractor recommended replacement of the drive unit with new equipment. This has been ordered from the manufacturer and delivery is anticipated mid May.
- Pathology RO system output conductivity high and system in alarm. Prima Standby unit disinfected and new filters installed.
- Planned replacement of steam traps as recommended by Spirax Sarco following their routine inspection.
- Replacement of kitchen water softener booster pump. Getinge carried out re-testing of SSD steam quality following spurious results obtained previously. Air Power completed routine maintenance inspection of PR2 air compressors.
- As part of the Trusts, Endoscopy Washer Disinfector replacement programme the existing Elga Biopure RO Water has been decommissioned.
- SSD Tunnel Washer No 2 extensive repairs completed on leaks, heat exchanger and door operation.
- Pathology speciality gas leaking from regulator - isolated. Renewal required.
- Anetic Aid completed service on Theatre trolleys which could be made available to them.
- Pathology Autoclave gas seal on the chamber vent motor continues to cause a number of cycle failures due to leak rate performance, we have requested approval from the Trust to proceed with replacement of the gas seal – an update is requested.
- Completed annual service of Radio pharmacy Clean room in conjunction with Stockton QC.
- Bioquell completed 6 monthly service visit of LEV equipment in Pathology, Radio pharmacy, Mortuary and Theatres.

13 weekly maintenance programmes were completed in:

- ENT OPD
- Trauma Department
- Trauma OPD
- Surgical Day Unit
- Paediatric Day Unit
- ward 3
- ward 4
- ITU
- ward Core 1st Floor
-

26 weekly maintenance programmes were completed in:

- Medical Physics
- ward 14
- wards 20-21 inclusive
- ward 37
- Pathology
- Spinals 1st floor
- Spinals Ground floor
- Theatre Reception 2 (10-20)
- Medical Records
- Surgical Pre Assessment
- CSSD

52 weekly maintenance programmes were completed in:

- Ward 15
- wards 17-19 inclusive
- ward 24

5 THE FRIARAGE HOSPITAL (FHN)

5.1 Catering

Patient Catering

The revised provision for Patient salads has proven to be very popular with the uptake increasing by over 100%, to ensure improved patient choice the salads are now available at both main meal services.

On the Children's Unit a snack and lighter meal option is available, in conjunction with the full standard patient ward menu. There was a perception that the main choice leaned toward the snack items in preference to the main menu. Following discussion at the Children's Menu review meeting, it was agreed that the "Main Menu" be offered in the first instance. Following the changed procedure it has been confirmed by Senior Ward Staff that the revised services are working exceptionally well and that the support available from the nearby Café Bar has been beneficial in offering additional choice for the patients and a much improved facility for the children's carers, parents and visitors.

Dementia Work Group

Discussions remain ongoing regarding menu presentation and picture menus. The Nutritional Steering Committee and Group have secured limited funding to employ the services of Medical Illustrations to undertake trail photography of menu items that are being considered as a visual aid for patient menu choice.

Following the consultation meeting with Clinical Management, Matron and Dietician the pilot for the use of coloured crockery on Ainderby ward, along with the revision to patient choice methodology was launched informally on Tuesday 11th June with the formal launch on Monday 17th. To establish the efficacy of the implementation in terms of improving patient

nutritional intake a full and comprehensive audit of both plate waste and bulk waste has been conducted to capture data from at least two full cycles of the two week menu. This audit will continue in conjunction with the use of the coloured crockery, the available current national outcomes indicate a positive reduction in plate waste that generally indicates that patients are consuming more and therefore taking on additional nutrition.

To ensure patient dignity at ward level ALL patients in Ainderby ward will be served their meal on the coloured crockery, no one patient can be visually identified as having Dementia.

Nutritional intake supplementary products.

Surveys, audit and discussion with ward staff and dieticians have indicated that some elderly patients cannot manage a full meal. Provision had been previously made to address this with higher energy smaller portion products, however an important additional option in dietary / nutritional intake is by use of snack items that can be consumed by the patients when they feel the need and not necessarily at formal meal times. Products has been sourced that are individually sealed (IP&C compliant) and dated (Food safety compliant). This is a supplement to the current options available.

The Weekly Patient Survey result for the year of 2012 – 2013 Outcomes

During the period of April 2012 to March 2013 approximately 2300 patients completed a questionnaire, the results indicate a higher majority of patients are satisfied with the Patient meal service provided at the Friarage Hospital with less than 4% of patients finding the service less than acceptable with the remaining 96% finding it almost equally split between Good and Excellent.

The year on year results for 2011 – 2012 and 2012 – 2013 when taken in comparison indicate that satisfaction levels have been maintained with less than +/- 1% differential in year on year results.

The results and responses from the surveys are reported weekly to the various service teams and any required actions undertaken. Hotel Services Catering Administration publishes a quarterly “You said” – “We did” report that is displayed publically.

Nutrition Day 20 March

The Patient Catering Department displayed a typical full day’s patient food provision which included displays on hydration and nutrition. At lunchtime that day’s patient menu was made available through an identical patient service method used on the wards to members of the public and staff.

Users were asked for their comments regarding choice and quality, a common theme from visitors was how surprised they were at the amount choice throughout the day.

The most popular dish as tasted by the public from the day’s menu was Chocolate Sponge and Chocolate Sauce.(!)

Retail / Staff Catering

The replacement temporary catering facility (Café Bar-Plus) opened on February 26th, since the opening it is evident that the facility is providing much improved and appreciated services to both staff and visitors. The provision of services from 08.00 to 18.00 has been a great benefit to all users.

Menu choice, product selection is reviewed weekly as we strive to get the balance right regarding customer's expectation and requirement. The first three months of trading has seen record levels of customer throughput, staff are happy and despite a couple of negative comments in the first few day of opening feedback has been extremely encouraging.

Sales are regularly exceeding expectations. As expected there has been a slight fall in vending income but vending continues to operate well and provides an important service outside the trading hours of the Café Bar-Plus.

Whilst providing an improved service for staff and hospital visitors the Café Bar is building up steady support from local residents who are "popping in" regularly during the week to enjoy a beverage and a chat with friends, this service to the local community is an unexpected bonus in terms of the "Friarage Community".

In terms of staff welfare the Catering staff are working in a vastly improved facility, now being able to work within the main building has improved staff morale and relationships with the rest of the hospital. The staff have been recognised and complimented for their commitment and support in both the lead up to opening including all the back of house preparations and the closure of the previous facilities.

5.2 **Cleaning**

Monthly audits continue to be carried out by the Domestic Supervisors and the results are shared with the domestic assistants with a request for them to carry out any remedial action, audits undertaken over the last 6 months indicate a score of 93% for the site.

The ward reconfiguration programme is well underway and terminal cleaning of all areas prior to relocation has taken place in line with the schedule.

5.3 **Car Parking & Security**

The replacement barrier has been installed as agreed and the process for access has been relatively smooth given the number of staff requiring access.

Work is still outstanding for the additional car parking bays following the removal of the kitchen portacabins, although signage has been purchased in order to allow car sharing at FHN once this work has been undertaken

5.4 **Portering**

The two new apprentice porters are now in post and to date the department has received a number of compliments in relation to each of the individuals. Their official training commenced on 6th June 2013 and they each have a 15 month contract.

5.5 **Laundry Services**

A further audit was undertaken in May to ensure that stock levels are appropriate for the service needs and these will continue throughout the year.

Service Level Agreements are now in place with both NEAS and YAS and invoices have been raised for the 2012/2013 period and will be raised quarterly going forward.

5.6 Ward Housekeeping

Ward Housekeeping has moved around the Hospital as the ward reconfigurations proceed. To endeavour to maintain the teamwork and keep teams intact and stable housekeepers are moved with wards wherever possible.

A number of the WHKs have on occasion worked in the new catering outlet as part of the generic role; all have enjoyed the experience as we build up a pool of staff that is able and importantly willing to work in a flexible role.

WHKs are supporting the work being undertaken with the Dementia working group and are key to its success as they are in reality our “front line”. An update will be available in the next report as the programme is not formally commencing until Monday 17th June.

5.7 Residences

Occupancy levels for the past three months

	March	April	May
Nurses	32%	50%	79%
Doctors	88%	94%	80%

5.8 Switchboard & Reception Services

There have been no operational issues during this period, there have however been some internal call out / bleep / out of hours communication issues raised when staff from JCUH are transferred to FHN where processes may differ. This has been addressed and a new and agreed algorithm produced to ensure that transferred staff are aware of any site to site differences where possible and appropriate all process will be “cross-site uniform”.

5.9 Estates & Maintenance (FHN)

Derek Barnes, maintenance supervisor retired from the department in May 2013. A highly valued and regarded member of the team left with over 10 years service with the trust. Recruitment of his replacement is being actively progressed.

Michael Atkinson successfully completed his 4 year estates craftsman (mechanical) apprenticeship

The routine generator test planned for May was cancelled following concerns raised by the ICT department over the short term reliability of parts of the IT infrastructure.

Planned maintenance programme continued with the following key tasks being undertaken:

- ITU medical gas pendant hose inspections;
- Medical air dryer service;
- Authorising Engineer medical gas pipeline annual audit;
- Fixed wire electrical testing – Rutson Ward
- Emergency Generators – Oil, Oil Filter and Fuel Filter Change

In addition to planned and routine responsive maintenance the following works were actioned:

- Replacement temperature Thermostat , Day Unit Theatre
- Replacement BMS controller for Day Unit Air Handling Unit
- Install new air conditioning unit in ISDX Room
- Redecoration – Rutson Ward
- Maintenance to Allerton Ward in support of ward reconfiguration works:
 - Redecoration
 - Suspended ceiling repairs
 - Flooring repairs / renewal
 - Renew defective domestic hot water pipework and insulation
 - Ventilation ductwork cleaning

6 SPECIALIST EQUIPMENT SERVICES

6.1 Equipment Replacement Programme

During the last quarter approximately £400K of medical equipment has been commissioned for various wards and departments across the Trust these are detailed below:

51 Infusion Devices.

40 Non-invasive blood pressure monitors.

31 Vital signs monitors.

16 ECG Machines.

16 Tourniquets.

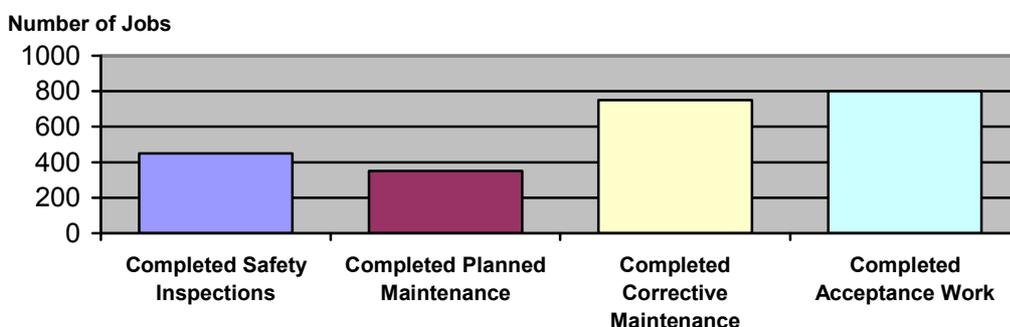
6.2 Replacement Monitoring Cardiothoracic Services

A range of cardiac monitoring and telemetry equipment has been selected to replace the existing units. A programme is being developed to install the new equipment and train relevant staff.

6.3 Maintenance Contracts

During the last quarter a total of 22 maintenance contracts have been let with a total value of £930K.

6.4 Overall Activity for Period



7 CAPITAL AND PROJECT MANAGEMENT

7.1 Feasibilities

The total number of feasibility applications received over the last three months total thirteen of which three have had feasibility studies carried out and costings forwarded to the Divisions for approval to progress; these costs amount to an estimated figure of £539,000 for the following:

F590 – Radiology – Patient Environment Sub Waiting Area/Centralised Report Area and Radiologist Office Accommodation
F588 – Ward 5 Alterations to Two Bed Bay
F587 – Two Resus Rooms in Trauma

Feasibility costs being prepared for the following:

F591 – Neuroradiology – Change of Use X-Ray Film Store to Office
F589 – Ward 25 Day Case
F587 – Change two rooms currently theatres within A&E Department to two Resus Rooms for mobile imaging use
F410 – Pharmacy Robotic Dispensing System

7.2 **Minor Capital Works**

The following feasibility request(s) has been issued as Minor Capital Works (< £25k) to Endeavour to procure:

F508 – Endoscopy Stoothing Wall/Partition
T131 – Ward 34 & 36 Enabling Works for Decant

Minor Capital Works Progressing:

VO 241 – Endeavour Unit Alterations to Seminar Room
VO 251 – MRI Doors Change of Access
VO 269 - Immunology Lab Create Doorway
VO 272 – Pharmacy Convert Store to Seminar Room
F508 – Endoscopy Stoothing Wall/Partition
T131 – Ward 34 & 36 Enabling Works for Decant

Minor Capital Works Complete:

VO 242 – Clinical Infection Department
VO 255 – Ward 22 Plastic Dressing Clinic

7.3 **P21+ Capital Small Works**

Following the transition from P21 to P21+ the Trust is progressing with a number of projects agreed as part of the 2012/13 capital programme of works. These include the following:

Works Progressing:

Task 101	Cath Lab 1 – enabling works for equipment replacement
Task 102	Cath Lab 2 – enabling works for equipment replacement
Task 110	Fluoroscopy - enabling works for equipment replacement
Task 111	Dental X-Ray - enabling works for equipment replacement
Task 112	General X-Ray Room 4 enabling works for equipment replacement
Task 113	General X-Ray Room 6 enabling works for equipment replacement
Task 114	General X-Ray Room 7 enabling works for equipment replacement
Task 118A	Ward 3 Enhancements
Task 122	FHN Ward Moves
Task 123A	Installation of Fire Suppression System in Main IT Computer Room at JCUH
Task 123B	Installation of Fire Suppression System in Main IT Computer Room at FHN
Task 126	Creation of a Theatre in existing Doctors' Mess
Task 129	Proposed HV Network at JCUH
Task 131	Ward 34 & Ward 36 Convert Offices back to Patient Bedrooms
Task 132	Development of Estates Strategy
Task 133	Neurology Angiography Equipment Replacement

Works Currently on Hold:

Task 124B	Provision of Modular Office Building on Bath & Wells Villa Site
Task 125	Creation of Doctors' Mess in existing IT Facility
Task 130B	FHN SSD Air Handling Units
Task 130A	FHN Template 1-2 Ward Block Air Handling Units

Works Complete:

Task 42A	JCUH Development of Endoscopy Reprocessing – schedule for handover 15/3/13
Task 103	Cath Lab 3 – enabling works for equipment replacement
Task 124A	Demolition of Bath & Wells Villa
Task 127	Creation of shower room in existing staff room Ward 5
Task 128	Ward 35 Provision of Additional Bed Spaces

8 PROCUREMENT

The procurement department has continued to work closely with divisions and directorates embedding the new procurement structure and actively developing relationships with key stakeholders across the Trust.

The significant contribution from procurement in 2012/13 has been recognised and this has been down to the unrelenting contribution from all staff within the department. However moving into 13/14 the department recognises that we still have a lot to do to continue to develop and support the organisation and the teams are working tirelessly to formulate and implement identified projects and savings initiatives.

In addition the departmental procurement strategy is in the very final stages of development and will be a key milestone for the department upon its publication.

Contracting/Savings

End of Year Position

At the end of the financial year 2012/13 the Procurement Department implemented contracts/projects which generated in year cash releasing savings of £1,767,465 with a full year effect of £2,516,900. This was against an annual target of £2,100,000. In addition the

procurement operations department supported clinical divisions and directorates to achieve approximately £200,000 worth of one off efficiency savings through robust materials management and stock optimisation processes.

Planning for 2013/14

For 2013/14 the procurement department have again been set a challenging target of £2,000,000 cash releasing savings.

Forward planning and identification of projects for the 2013/14 departmental work plan was undertaken within the final quarter of 12/13 and a number of key work streams and projects have been identified and agreed to be taken forward for 13/14 and the associated spend and potential savings calculated for each.

To date the projects identified make up a large proportion of the required 13/14 savings target however further projects are required to be identified to supplement the current work plan and ensure delivery of the overall department CIP.

In line with the procurement strategy commitment to develop and strengthen our working relationships with clinical divisions, key procurement meetings have taken place with all divisional managers in April and May to finalise and agree areas for procurement involvement, discuss 'stretch' targets and to implement potential P&E savings. To support this work the procurement department have formulated a procurement strategy for each division which will in turn be used and shared to collaboratively monitor progress against agreed objectives and projects, identify new areas for improvement in non-pay spend and to build a robust mechanism for delivering procurement related CIP.

Performance

At the end of May 2013 the procurement department have implemented cash releasing savings of £159,118 (In year) and work is on-going to implement current projects and identify new areas for improvement, rationalisation and savings.

Additionally the procurement department are also heavily involved in projects which may not deliver upfront cash releasing savings but which are necessary to maintain and improve quality of services and patient experience whilst also ensuring legal compliance for the trust with reference to its purchasing activity. Examples include supporting the procurement activities on the Transforming Care Project, supporting the implementation of new bed stock across the trust and as a key part of the Transforming Outpatients work streams, all of which are currently on-going.

Operations/Logistics

From an operations and logistical perspective the department is continually working closely with divisions and are releasing some substantial stock efficiency savings through stock rationalisation projects.

As detailed above in 2012/13 the operations and logistics team delivered approximately £200,000 worth of stock efficiency savings which in turn also ensured the optimisation of the trusts stock holdings.

This work has continued into 2013/14 with the operations team continuously working alongside clinical colleagues to rationalise and optimise products and stock and as such, at the end of May 13 stock efficiencies of £129, 392 have already been realised across the trust.

In addition the operations and logistics team are working tirelessly to continue to support the Trust improve quality of service by ensuring that wards and departments have the required

products available. The workloads within the team is ever increasing with there being substantially more orders being processed and received whilst work to optimise the processing times for orders has ensured they are at an all time low.

In May 2012 the team handled and processed a total of 8611 consignments of deliveries which in comparison to May 2013 whereby the team handled 11,111, this represents a significant increase year on year of 23%. This highlights the challenges facing the team particularly in times where resource and capacity has decreased however the management and leadership of the team continuously work to ensure maintenance of business critical functions and facilitate continuous improvement.

Capital

The department worked hard over the final quarter of 2012/13 to source and procure the capital equipment funded from the non recurring PCT monies. This represented a significant pressure and included the updating of the Trust bed stock and also the acquisition and introduction of new, fit for purpose bedside lockers for the Trust.

9 OTHER ISSUES

Compliance/Risk

During the last quarter there were a total of 21 recorded alarm actuations which represents a 14% reduction compared with the previous reporting period. The fire & rescue service attended site 9 times. A small but significant reduction in fire alarm actuations was noted at the staff residences although there was a rise in fire service attendances due to the policy of calling them as a matter of course between 17:00 and 09:00 if the alarm has originated in the residences. The reported causes of these events are:

Cooking/Burnt Food- 5

Call point operation (persons unknown)- 1

Environmental (steam/smoke from outside/paint fumes)-5

Unknown/System Fault-10

Each uwfs occurrence is investigated by Trust Fire Safety Advisor and although the number of incidents being reported as unknown/system fault remains high it has reduced to 47% from 60% over the last reporting period.

FERNO UK are currently carrying out a survey of the JCUH site with respect to emergency evacuation and it is anticipated their report will provide a number of recommendations to support improvements in evacuation procedures.

Medical gas training for 627 bleep holders at Friarage Hospital was successfully completed by the Trust Authorised Person (Medical Gas Pipeline Systems).