

Meeting:	Shetland NHS Board
Date:	16 February 2021
Report Title:	Capital Programme Progress Report 20/21
Reference Number:	2020/21/58
Author / Executive Lead/ Job Title:	Lawson Bisset – Head of Estates, Facilities & Medical Physics

Decisions / Action required:

The Board is asked to;

- i. Note the report attached to this paper titled, 'Capital Programme Progress Report 2020/21.

High Level Summary:

The paper provides the Board with

- 2020/21 Capital Programme

The paper provides an update on all elements of the Capital programme and Assets compliance, monitoring and reporting.

Corporate Priorities and Strategic Aims:

The NHS Shetland Boards corporate objectives demonstrates the desire it has to look after its patients in the most appropriate; safe, sustainable, resilient, setting, and perhaps along with the findings of this report need to be given due consideration as to what can, or should be done to meet those objectives :-

- Develop a single health and care system -
We will have in place seamless services, wrapped around the needs of individuals, their families and communities, which are not restricted by organisational or professional boundaries. Where possible we aim to deliver a 'one stop shop' approach to health and care.
- Maximise population health and wellbeing -
People will be supported to look after and improve their own health and wellbeing, helping them to prevent ill health and live in good health for longer.
- Develop a unified primary care service -
With multi-disciplinary teams working together to respond to the needs of local populations.
- Streamline the patient's journey in hospital -
We will work to make sure that people get the right care in the right place at the right time by maximising outpatient, ambulatory, day care services and minimising inpatient stays.
- Achieve a sustainable financial position by 2023

Key Issues:
None.

Implications : <i>Identify any issues or aspects of the report that have implications under the following headings</i>	
Service Users, Patients and Communities:	Specific projects within the Capital Programme support improved patient safety and quality of service.
Human Resources and Organisational Development:	Estates & Facilities staff will be impacted by the requirement of statutory reporting & compliance within limited workforce resources.
Equality, Diversity and Human Rights:	None.
<ul style="list-style-type: none"> Partnership Working 	Ongoing work with SIC supports efficiencies within the Estates & Facilities services.
Legal:	None.
Finance:	Within existing identified resources / budget.
Assets and Property:	The existing buildings will require to be maintained.
Environmental:	None.
Risk Management:	Estates and Facilities are continuing to manage Risk within resources impacted by Covid-19. Refer to SCART.

Policy and Delegated Authority:	The Board is being asked to note the following report.	
Previously considered by:	Capital Management Group	3 December 2020

“Exempt / private” item	N/A
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The main report is to be attached together with a list of the appendices and references to any background documents or material e.g. include web links.

Shetland NHS Board

CAPITAL PROGRAMME PROGRESS REPORT 2020/21

1.0 Purpose

To provide the:

- **2020/21 Capital Programme Progress update**

2.0 Background

2.1 The Capital Management Group (CMG) agreed a Capital programme for 2020/21 at its meeting on the 4th December 2019.

This follows a robust risk based prioritisation exercise based on presentations by the Project stake holders and a scoring matrix.

2.2 The Board approved 10 Year Capital Programme assumes an annual Capital allocation of £997k (excluding inflation). Early discussions with the Scottish Government indicates that Capital resources in future years will be limited.

3.0 2020/21 Projects Progress Report

3.1 Progress against the main projects is summarised below. These reflect the impact of Covid-19 and Brexit and are currently anticipated to be completed by the end of the financial year.

3.1.1 **Ambulatory Care**

Scottish Government have approved the outline business case.

- Year 2 - 20-21 - £369k – Design, Tender and Construct - Phase 3
- Year 3 - 21-22 - £1,252k – Tender and Construction - Phase 4 – to completion.

A revised programme has been developed which reflects the implications of the Covid-19 impact on the use of the current accommodation as a RCU.

Based on the current assumptions it is anticipated that the main works will commence August 202.

The programme will be the subject of an ongoing review to reflect any change in Covid-19 circumstances.

3.1.2 Jac packages - Pharmacy/Finance Management System
Completed.

3.1.3 Bressay Consulting room
Occupation Agreement agreed in principle with Bressay Development Ltd (BDL).

Planning application progressing.

BDL Business Case for occupation approved by SIC.

3.1.4 AE Department
Project in abeyance due to Covid-19.

3.1.5 IG-IT System
Installation phase due for completion mid March.

3.1.6 Lerwick Health Centre Doctors Practice
Due for completion March (subject to Covid-19 restrictions).

3.1.7 Lithotomy Stirrups - medical equipment
Completed.

3.1.8 Myosure - medical equipment
No further requirement.

3.1.9 Replacement Dental chairs Montfield
Programmed for installation February.

3.1.10 Ward 3 Ligature removal
Project in abeyance due to Covid-19.

3.1.11 Gynae Couch
Procurement commenced.

3.1.12 Podiatry

Procurement commenced.

3.1.13 LDU Washer Disinfector

Completed.

3.1.14 Capital Projects (non-specific) (unallocated)

Contingency ongoing.

3.1.15 Echo Cardiogram System

Awaiting delivery (due February).

3.1.16 Secure Doors

Project in abeyance due to Covid-19.

3.1.17 Hospital Pager System

Project in abeyance due to Covid-19.

3.1.18 Data Centre UPS

Project in abeyance due to Covid-19.

3.1.19 Maternity (BADGERNET) Modules

Procurement commenced. Due for completion March.

3.1.20 MS SQL License

Procurement commenced. Due for completion March.

3.1.21 SAN Storage & Switches

Procurement commenced. Due for completion March.

3.1.22 Server Auditing Tool

Procurement commenced. Due for completion March.

Reactive Backlog-

3.1.23 HAI Rolling Program

HAI Works are risk assessed and prioritised in conjunction with Estates and Infection Control.

Ongoing.

3.1.24 Fire Improvement Works Rolling Program

The 2020/21 allocation has been prioritised (within budget availability) following annual desktop inspection from CS Todd, and an inspection on site from Scottish Fire and Rescue Services.

Annual Fire Risk Assessment was carried out in February 2020.

A Fire Improvement Action Plan has been developed.
Ongoing.

3.1.25 Legionella Rolling Program

Works ongoing – prioritised (within budget availability) on Risk Assessments and Authorising Engineer feedback.

Authorised Person training and Competent Person training completed by the Authorising Engineer.

Ongoing.

3.1.26 Electrical Rolling Program

5 yearly statutory testing completed.

2020/21 remedial work prioritised (within budget availability).

Ongoing.

3.1.27 Roof Repairs Rolling Programme

Water Ingress Group established. Prioritised programme of works agreed with group.

Ongoing.

3.1.28 Ventilation Rolling Programme

Ventilation Group established. Works prioritised in conjunction with group and the Appointed Authorising Engineer.

Ongoing.

3.1.29 Drainage Rolling Programme

Works prioritised in conjunction with Estates Maintenance Team.

Ongoing.

3.1.30 GBH-Floor Rolling Programme

Works prioritised in conjunction with Estates Maintenance Team and Infection Control.

Ongoing

3.1.31 DDA Rolling Program

Works prioritised.

Ongoing.

3.1.32 Non Doctor Islands Rolling Programme

Programme established.

Ongoing.

3.1.33 RO Plant Replacement

Completed.

3.1.34 Road / Car Park repairs

Ongoing.

3.1.28 GBH Entrance Doors

Ongoing.

3.1.35 District Heating Repairs

Completed.

3.1.36 Contingency – Estates Backlog Maintenance

Unallocated to date.

3.1.37 Ultrasound Replacement

Anticipated delivery February.

3.1.38 Ward 3 Monitoring

A lot of groundwork yet to be done as linked to existing monitoring and additional Ward 1 and A&E monitoring. Narrow timeframe in which to accomplish before onset of winter pressures.

Completed.

3.1.38 Thermometry

Completed subject to roll out during February.

3.1.39 Microscope

Detailed procurement ongoing.

Completed.

3.1.40 Defibrillators

On order and expect delivery during August 2020.

Completed.

3.1.41 Urology Equipment

Completed.

3.1.42 Renal

Due to be completed by end of February.

3.1.43 BabyPac Ventilator

Completed.

3.1.44 Laser (National Eyecare WS)

Completed subject to final commissioning.

3.1.45 Endoeyes (National Eyecare WS)

Due to be completed end of February.

3.1.46 CT Scanner

NHS Shetland have been awarded budget allocation (£600,000) to replace the existing CT Scanner in the GBH which requires replacement.

The project is phased accordingly;

- Phase 1 provide temporary CT Scanner unit (GBH car park)
- Phase 2 remove existing CT Scanner
- Phase 3 carry out enabling works
- Phase 4 install new CT Scanner (including training and commissioning)
- Phase 5 remove temporary CT Scanner

This is programmed to be completed by May 2021.

3.1.47 Long Term Ambulatory ECG

Procurement ongoing due to be completed by end of March.

3.1.48 Ultrasound

Ongoing.

3.1.50 Portable Bladder Scanners

Procurement stage.

3.1.51 Endoscope Replacement

Completed subject to commissioning.

3.1.52 Scalp Cooling Machine

Due for completion end of March.

4.0 State of Assets and Facilities Report (SAFR)

4.1 The Annual State of NHS Scotland Assets and Facilities report is due to be issued but due to Covid-19 no date has been set by the Scottish Government (SG).

5.0 Regional Asset Management Plan (RAMP)

The North RAMP for 2020 is being prepared in conjunction with; NHS Orkney, NHS Highland, NHS Western Isles, NHS Grampian, NHS Tayside and NHS Shetland and is due to be completed end of February.

This is the 3rd Edition of the RAMP within which considers the investment needs of the North Region across the investment areas of equipment, information and communications technology (ICT), property and vehicles.

NHS Shetland have completed the Scottish Government returns for Property, Medical Equipment, Fleet Asset and Smarter Offices.

6.0 Energy Audit

6.1 Energy and CO² reduction targets have been issued by Scottish Government.

These targets (2018 baseline) will require to be considered by NHS Shetland however early indications are that these are very challenging and are likely to require considerable capital and revenue resources which may not represent value for money.

6.2 An Energy Group has been established and an Energy Policy is being developed in conjunction with the North Energy Group (NHS Shetland, NHS Orkney, NHS Western Isles, NHS Highland, NHS Grampian and NHS Tayside).

6.3 HFS in conjunction with Estates has carried out an Audit to identify any potential energy saving schemes and no major opportunities were identified at this stage.

6.4 NHS Shetland are liaising with NHS Scotland Boards to develop Net Zero reporting protocols for energy utilizing eSight (current reporting Tool).

6.5 NHS Shetland are participating in the development of Net Zero Route Map in conjunction with HFS. It is currently targeted to be completed by March 2021.

7.0 Property Disposals

7.1 92 St Olaf Street disposal ongoing.

8.0 Property Update

8.1 A 2019/20 review and update of the Property Conditions Survey of our Estate has been carried out in conjunction with external consultants (ThomsonGray) and Health Facility Scotland.

8.1.1 This updated survey information is being risk assessed and on completion the updated information has been imported into the national EAMS (Estates Asset Management System).

EAMS enables discussions in respect of the ongoing Service Strategy development in terms of the Estate and Risk Prioritised Backlog Maintenance.

8.1.2 The updated EAMS information will be reported to the Board in due course (PAMS).

This will reflect the latest information in respect of High, Significant, Moderate and Low risk Backlog Maintenance and associated costs.

9.0 Gilbert Bain Hospital - Strategic Assessment

9.1 Further to the Board approved report, at its meeting on 15th October 2019, a Project Team and programme is being considered in order to carry out the Strategic Assessment Phase, including the development of an updated Clinical Strategy.

Scottish Government have provided a budget allocation to assist NHS Shetland with completion of the Strategic Assessment and associated Clinical Strategy.

9.2 Strategic Assessment Project Board has been established.

9.3 The Clinical Strategy Project Team has been established and work is ongoing.

10.0 Statutory Compliance Audit and Risk Tool (SCART)

SCART (Statutory Compliance Audit and Risk Tool) is the web based risk assessment tool developed by Health Facilities Scotland (HFS) to allow NHS Boards to record and measure their level of compliance and ongoing development against a range of aspects of legal and best practice guidance measures.

The tool itself is based around 39 Estates and Facilities topics (for each property) each of these topics have question sets, which upon answering SCART indicates the risk associated with each answer to that question. Risks identified are amalgamated into action plans to help Boards monitor and manage their position. The action plans also identify costs in relation to those actions identified and allows Boards to prioritise expenditure where necessary to improve compliance.

The use of SCART can help with recording and provide evidence relating to Health Boards' current position with regard to statutory compliance, illustrating the severity of the risk associated with non-compliance, producing action plans to help manage or mitigate non-compliance risks and produce information which can be used to alert the NHS Board to statutory compliance risks and in turn enable them to prioritise tasks or pieces of work depending on the outstanding risk.

An Action Plan is being developed to reduce the compliance risks identified within SCART; the Action Plan will identify budget and resources that will be required to improve our compliance where practically possible.

It is intended that future Board reports on SCART will be presented as set out in the North of Scotland pro forma.

A North SCART Group has been established and supported by HFS in order to share knowledge, experience and policy and procedures. This group is making good progress within the North and supports the limited resources of NHS Shetland. The North SCART group has held a number of workshops to collaborate responses for the question sets.

Covid-19 continues to impact on the staff resources available to progress the SCART Tool.

11.0 Financial Report

To date there is a satisfactory expenditure to report against the 2020/21 Capital Programme expenditure.

12.0 Environmental and Sustainability

An Environmental and Sustainability Group has been established. This group liaises with relevant colleagues in Shetland Islands Council and the North Regional Group.

NHS Scotland are developing a NHS Scotland Sustainability Strategy to reflect the Scottish Government targets.

NHS Shetland will develop an Action Plan which reflects this strategy.

A NHS Scotland Sustainability website has been established, www.sustainabilityaction.scot.nhs.uk.

The group addresses the following deliverables.

12.1 Corporate Greencode – NHS Scotland Environmental Management System

12.1.1 Corporate Greencode is an NHS Scotland online tool that includes a list of environmental legislation applicable to NHS Shetland. Each item of legislation is to be assessed using a simple Red / Amber / Green basis.

12.1.2 A review of Corporate Greencode status was carried out by external Consultants in February 2015. The resulting Action Plan has been updated in conjunction with Health Facility Scotland and will be further reviewed when the new tool (NHS Scotland Environmental Management System) is available (2021).

12.1.3 Actions will be prioritised and incorporated into the 2020/21 Estates Backlog Rolling programme (EAMS), within existing staffing resources and budget availability.

12.1.4 HFS is due to complete the procurement of the new tool which is due to be piloted (February).before role out to all Boards

12.2 Mandatory Public Bodies' Duties Climate Change Report

Scottish Government has developed a Climate Change Reporting Template.

12.2.1 An annual submission is mandatory, to be returned for all public bodies.

12.2.2 NHS Shetland submitted their 2020 return during November.

12.3 Sustainable Development Action Plan (SDAP)

12.3.1 SDAP sets out NHS Shetland's contribution to the Scottish Government's sustainable development aims and objectives, and how these are being integrated into the delivery of core business. In addition, it is consistent with the North Regional Asset Management Plan (RAMP) 2020 to 2030.

12.3.2 SDAP is targeted to be reviewed during 2020/21. This review will reflect the NHS Scotland Sustainability Strategy.

12.3.3 Green Champion – NHS Shetland Chairman, Gary Robinson has agreed to be the Board representative.

12.3.4 NHS Scotland National Sustainability and Environmental Group are scheduled to convene bi-annual meetings of all NHS Scotland Green Champions.

12.4 Climate Change Risk Assessment

12.4.1 A Climate Change Risk Assessment Tool has been released by HFS, this will enable all boards to identify their significant risks in a number of criteria and to develop a resulting Climate Change Adaptation Plan.

12.4.2. An assessment team requires to be established to complete this Tool and develop an adaptation plan. The establishing of the Team is in abeyance due to Covid-19.

12.5 eSight

12.5.1 Monthly data submissions for Energy and Water.

12.5.2 These are quarterly analysed by Health Facility Scotland and Estates and any significant issues discussed for action.

12.5.3 Water meters have been installed at the Gilbert Bain Hospital and will enable consumption rates to be analysed.

12.6 Sustainability Assessment Tool

12.6.1 HFS issued a new tool which is evidence based and assessed by an external body.

12.6.2 Due to technical issues with the Tool NHS Shetland were unable to submit a 2019/20 assessment.

12.6.3 The Tool is currently being revised and due for re-issue. An interim Tool has been developed by HFS which is due for completion by the end of March 2021. Completion is likely to be impacted by Covid-19 resources.

12.7 Biodiversity Action Plans

12.7.1 NHS Shetland have previously submitted a plan (in conjunction with Health Improvement) in line with the Scottish Government deadline. This requires to be reviewed and updated during 20/21.

12.7.2 The plan should address site based improvements to enhance wildlife and Greenspace planning and management, to increase active use of the outdoor estate for patients, visitors, staff and community. A revised template is due to be issued by Health Facility Scotland.

12.7.3 NHS Shetland and Shetland Island Council have collaborated to obtain external funding from SG to appoint external consultants to develop a Shetland wide Active Travel Strategy.

12.7.4 Biodiversity Plan submission (January) has been impacted by Covid-19.

12.8 Energy Performance Certificates

12.8.1 This is now required for all NHS sites with a gross internal floor area of 250m² or above. Previously 1000m² or above. Head of Estates is liaising with SIC to enable a joint update of the relevant properties.

12.8.2 Completion is being impacted by Covid-19.

12.9 Carbon Management Plan

12.9.1 The NHS Shetland current plan was prepared in 2012 and required to be updated to reflect the anticipated target from Scottish Government.

12.9.2 The preparation of an updated Carbon Management Plan is ongoing and is anticipated to be finalised by April 2021 for consideration by the Board.

12.10 Net Zero Emissions Route Map Pilot

12.10.1 NHS Shetland has been selected as one of 3 NHS Scotland Boards to pilot the development of a Board Net Zero Route Map (Net Zero 2045). This Route Map will provide an Action Plan for NHS Shetland to achieve the Scottish Government Net Zero targets.

12.11 Climate Change Risk Assessment & Adaptation Plan

12.11.1 Due for completion by end of financial year 21/22.

13.0 Community Empowerment (Scotland) Act 2015

13.1 In summary this enables requests from certain community bodies to NHS Shetland for the use of land and buildings which are owned or leased by the Board.

13.2 Communication points and information in respect of the above is available on the Intranet/Internet. With no formal or informal expressions of interest to NHS Shetland received to date.

14.0 Heritable Asset Registration Programme

14.1 This is a policy requirement of Scottish Ministers for the land register of Scotland to be completed by 2024, including registering all Public land by end 2019. This timescale has been impacted by Covid-19.

14.2 All of Scotland's land will be registered for the first time which will provide a clear understanding of who owns our land. An efficient, effective and indemnified land registration system is recognised by the World Bank as one of the most important factors in achieving economic development and business growth.

14.3 In relation to NHS owned property, this will be effected by Health Boards working in conjunction with the NHS Central Legal Office (CLO) in order to complete a voluntary registration of those titles transferring from the existing General Register of Sasines onto the Land Register.

14.4 Estates are liaising with CLO to progress this onerous task.

14.5 NHS Shetland progress to date is impacted by Covid-19.

15.0 Waste

15.1 A Waste Monitoring Tool is being developed by HFS for use by all Boards and the Waste Manager is currently populating the Tool with our sites relevant Waste journey's both for non clinical and clinical waste.

This Tool is anticipated to enable Boards to reduce Waste in compliance with the current SG targets which will be challenging for NHS Shetland due to location and the economies of scale.

Targets outlined below

- 50% reduction
- Maximum waste to landfill by 2025 to be 5%
- Food waste reduced by 33% by 2025 (2013 baseline)
- Recycled waste at 70% by 2025
- Deposit Return Scheme

NHS Shetland already actively recycles cans, glass and white goods, in conjunction with Shetland Island Council.

During 2020, to enable full compliance with the Waste Scotland Regulations 2012, NHS Shetland in conjunction with Shetland Island Council introduced for the public sector - recycling of plastic and paper (including cardboard) which will present challenges for NHS Shetland in terms of onsite storage capacity, recycling charges and fire load risk.

- 15.2 Since the untimely administration of the national clinical waste contractor in December 2018 NHS Scotland has implemented a Waste Contingency plan Scotland wide. NHS Shetland has continued to dispose of low risk waste using the SIC incinerator with high risk waste continuing to be transported off island by boat but is now being included into NHS Grampian waste stream.
- 15.3 The new national clinical waste contractor (TRADEBE) have commence a service to Shetland in September 2020. NHS Shetland Waste Manager continues to monitor a seamless transition.

Prior to the commencement of the new Waste contract Waste Audits will be required and the Waste Management Officer is liaising with HFS to develop the Audit proforma and training for the appropriate Auditors. The timescales for the training and audits are being impacted by Covid-19.

- 15.4 Zero Waste Scotland are due to engage with NHS Shetland to develop a Food Waste Action Plan.

In abeyance due to Covid-19.

16.0 Security

- 16.1 An inaugural Security Group has been established in conjunction with SIC to consider the relevant issues and develop risk assessments and action plans.
- 16.2 NHS Scotland Lockdown Guidance has been issued during 2019/20 which will be considered in conjunction with the Violence and Aggression Policy, Management of Actual or Potential Aggression (MAPA) and the Security Policy.

A Security Audit in respect of Lockdown was targeted to be completed during 20/21 however this is in abeyance due to Covid-19.

- 16.3 MAPA training has been identified as a key resource. NHS Shetland staff have been trained to deliver the MAPA training which

is anticipated to be rolled out on a risk prioritised basis to NHS Shetland staff.

17.0 Soft Facilities Management

The following are highlights of current work streams.

- 17.1 A North Regional Catering Strategy has been completed and a Local Catering Strategy is being developed to reflect both the North Region and NHS Scotland Catering Strategy.
- 17.2 Reviewing and updating the Accommodation Policy to reflect legislative changes.
- 17.3 Menu Harmonisation for NHS Scotland (with Regional variation).
- 17.4 Consideration of the Zero Waste NHS Scotland Waste Report recommendations and develop an Action Plan.
- 17.5 Collaboration opportunities with SIC in food procurement.
- 17.6 Trading Account – Carry out a review.
- 17.7 Healthy Living Plus Award – in recognition of performance over the last 10 years NHS Shetland were awarded a Long Term Achieving Award.
- 17.8 Project Search - provide work place experience for young people with learning disabilities.
- 17.9 National Catering Information System – implementation.
- 17.10 Audit Tool for Food and Hospitals. This Tool is being developed on a National Basis and is anticipated to be rolled out by the end of 2020.
- 17.11 Bottle Deposit Scheme – This is being developed in conjunction with SG, Zero Waste Scotland and local stakeholders.
- 17.12 National Cleaning Compliance – NHS Shetland continue to remain as one of the top performing Boards within NHS Scotland which has recently been widely reported through the press.

17.13 Covid-19 continues to impact on the development of the above work streams.

18.0 Covid-19 Works – Progress Report

From the onset of the pandemic in early March to date, the Estates Department of NHS Shetland, along with support from local contractors, design engineers, consultants and relevant stakeholders, have been supporting the Board's response to Covid-19 and more latterly the Recovery Plans to enable services to safely recommence.

18.1 Covid Response summary overview

- Creation of a dedicated Respiratory Care Unit to support patients with severe respiratory compromise in a safe environment for staff;
- Repurpose and redesign of isolation side rooms on Ward 3 for intensive nursing of infected patients;
- Segregation of Theatre Suite to provide dedicated pathways for Covid and non-Covid patients;
- Creation of additional surge bed capacity on Ronas Ward with plans in place to scale this up to other areas within GBH and Montfield Hospital if required;
- Commissioning of Covid-19 Testing Hub initially in GBH Car Park and now relocated as a drive through facility on the site of Brevik House;
- Creation of PPE safe storage areas throughout GBH site;
- Created safe dedicated route for patients attending the Covid Assessment Centre initially in Outpatients at GBH and now located at Lerwick Health Centre.
- Relocation of staff (Accommodation Group).

18.2 Recovery Plans summary overview

- Creation of dedicated endoscopy unit to safeguard operating theatre capacity;
- Creation of new entrances to various hospital departments for vulnerable and shielding patients;
- Redesign of spaces to allow additional clinical workspace to better serve segregation of patient groups (outpatient cardiology, outpatient ultrasound and minor procedures, physiotherapy);
- Supporting Primary Care recovery with redesign of clinical spaces, patient flow and building entrances;

- Supporting clinical and non-clinical staff through minor works and temporary relocation to address social distancing issues;
- Supporting Infection Control Team in addressing Covid-related issues around all NHS Shetland sites;
- Providing clear and concise way-finder, social distancing and PPE signage to all clinical and non-clinical areas.

18.3 Vaccination Centres

- Independent Living Centre
- Gilbertson Park Games Hall
- Scalloway Games Hall

19.0 MRI Scanner

The project is progressing with multiple work streams working concurrently. In conjunction with NSS, we are exploring procurement options for the scanner and how that might fit in with other MRI procurement across the North Region. With colleagues at NHS Grampian, the detailed clinical scoping and specification for the service and the scanner is being undertaken. We are exploring the housing and location of the scanner with our architects, services consultants and NSS.

20.0 Recommendations

The Board is asked to;

- i. Note the 2020/21 Capital Programme updates.

LAWSON BISSET

Head of Estates, Facilities and Medical Physics

3rd February 2021