

Meeting:	Shetland NHS Board
Date:	27 th April 2021
Report Title:	Capital Programme Progress Report & Annual Fire Report
Reference Number:	Board Paper 2021/22/04
Author / Executive Lead/ Job Title:	Lawson Bisset – Head of Estates, Facilities & Medical Physics

Decisions / Action required:

The Board is asked to 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 Progress update
- 2021/22 Capital Programme Progress update
- 10 year Capital Programme
- Annual Fire Report

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 : *Identify any issues or aspects of the report that have implications under the following headings*

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.
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	

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 2021/22

1.0 Purpose

To provide the:

- **2020/21 Capital Programme Progress update**
- **2021/22 Capital Programme Progress update**
- **10 year Capital Programme**
- **Annual Fire Report**

2.0 Background

2.1 The Capital Management Group (CMG) agreed a Capital programme for 2021/22 at its meeting on the 3rd December 2020.

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 during 20/21 is summarised below. These reflect the impact of Covid-19 and Brexit.

3.1.1 Ambulatory Care

Phase 3 Completed.

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).

BDL Business Case for occupation approved by SIC.

Planning application submitted.

Works included in 21/22 Capital Programme.

3.1.4 AE Department

Project in abeyance due to Covid-19 and is included in 21/22 Capital Programme.

3.1.5 IG-IT System

Completed.

3.1.6 Lerwick Health Centre Doctors Practice

Completed.

3.1.7 Lithotomy Stirrups - medical equipment

Completed.

3.1.8 Myosure - medical equipment

No further requirement.

3.1.9 Replacement Dental chairs Montfield

Completed.

3.1.10 Ward 3 Ligature removal

Project in abeyance due to Covid-19 and is included in 21/22 Capital Programme.

3.1.11 Gynae Couch

Completed.

3.1.12 Podiatry

Completed.

3.1.13 LDU Washer Disinfectant

Completed.

3.1.14 Capital Projects (non-specific) (unallocated)

Completed.

3.1.15 Echo Cardiogram System

Completed.

3.1.16 Secure Doors

Completed.

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

Completed.

3.1.20 MS SQL License

Completed.

3.1.21 SAN Storage & Switches

Completed.

3.1.22 Server Auditing Tool

Completed.

Reactive Backlog-

3.1.23 HAI Rolling Program

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

Completed.

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.

20/21 works - Completed.

3.1.25 Legionella Rolling Program

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

Completed.

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

3.1.26 Electrical Rolling Program

5 yearly statutory testing Completed.

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

3.1.27 Roof Repairs Rolling Programme

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

3.1.28 Ventilation Rolling Programme

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

3.1.29 Drainage Rolling Programme

Works prioritised in conjunction with Estates Maintenance Team.
Completed.

3.1.30 GBH-Floor Rolling Programme

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

3.1.31 DDA Rolling Program

Works prioritised.
Completed.

3.1.32 Non Doctor Islands Rolling Programme

Programme established.
Completed.

3.1.33 RO Plant Replacement

Completed.

3.1.34 Road / Car Park repairs

Completed.

3.1.35 GBH Entrance Doors

Completed.

3.1.36 District Heating Repairs

Completed.

3.1.37 Contingency – Estates Backlog Maintenance

Completed.

3.1.38 Ultrasound Replacement

Completed.

3.1.39 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.

3.1.40 Thermometry

Completed.

3.1.41 Microscope

Detailed procurement ongoing.

Completed.

3.1.42 Defibrillators

On order and expect delivery during August 2020.

Completed.

3.1.43 Urology Equipment

Completed.

3.1.44 Renal

Completed.

3.1.45 BabyPac Ventilator

Completed.

3.1.46 Laser (National Eyecare WS)

Completed.

3.1.47 Endoeyes (National Eyecare WS)

Completed.

3.1.48 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;

- Procurement phase procure new scanner (20/21) Completed

3.1.49 Long Term Ambulatory ECG

Completed.

3.1.50 Ultrasound

Completed.

3.1.51 Portable Bladder Scanners

Completed.

3.1.52 Endoscope Replacement

Completed.

3.1.53 Scalp Cooling Machine

Completed.

4.0 2020/21 Covid Projects 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.

4.1 Covid Response Projects summary overview.

The following projects were completed during 20/21;

- 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, Lerwick Health Centre and Montfield sites
- 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).
- 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.
- Vaccination Centre - Independent Living Centre
- Vaccination Centre -Gilbertson Park Games Hall
- Vaccination Centre -Scalloway Games Hall
- Vaccination Centre –Montfield Occupational Health Department

5.0 2021/22 Projects Progress Report

5.1 Progress against the main projects during 21/22 is summarised below. These reflect the impact of Covid-19 and Brexit

5.1.1 Ambulatory Care

Scottish Government have approved the outline business case.

- Year 3 – 21/22 - £489k – Tender and Construction.
- Year 4 – 22/23 - £854k – Construction.

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 phased works will commence October 2021 with completion summer 2022.

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

5.1.2 Archived records scanning

Project to electronically scan archive records. Project Team to be established.

5.1.3 Ward 1 Bathroom Remedial Scoping

Feasibility study to improve facilities within Ward 1. Project Team to be established.

5.1.4 Bressay Consulting room

Conversion within old Bressay School to provide Consulting room.

Awaiting planning permission.

5.1.5 Capital Projects (non-specific) (unallocated)

Ongoing as required.

5.1.6 Datacentre UPS

Upgrade existing UPS system. Project Team to be established.

5.1.7 Secure Printing Platform

Centralise secure printing facility. Project Team to be established

5.1.8 Serve Rolling Programme

Upgrade serve network. Project Team to be established

5.1.9 Storage Rolling Replacement

Increase storage capacity. Project Team to be established

5.1.10 Access Switch Replacement

Replace switches. Project Team to be established

5.1.11 SAN Switch Replacement

Replace switches. Project Team to be established

5.1.12 IT Rolling Replacement

Allocated.

5.1.13 Revenue Transfer - Backlog Maintenance (RT)

Ongoing throughout 21/22.

5.1.14 Rolling Programme – Car Parks/Workplace Transport Regs

Works to be prioritised within 21/22 budget.

5.1.15 Rolling Programme – HAI Works (GBH)

Works to be prioritised within the 21/22 budget in conjunction with Infection Control.

5.1.16 Rolling Programme – Fire Safety

Works to be prioritised within the 21/22 budget in conjunction with Fire Committee.

5.1.17 Rolling Programme – Water Safety

Works to be prioritised within the 21/22 budget in conjunction with Water Group.

5.1.18 Rolling Programme – Electrical Systems

Works to be prioritised within the 21/22 budget in conjunction with Electrical Group.

5.1.19 Rolling Programme – Roofing Programme

Works to be prioritised within the 21/22 budget in conjunction with Water Ingress Group.

5.1.20 Rolling Programme – Ventilation

Works to be prioritised within the 21/22 budget in conjunction with Ventilation Group.

5.1.21 Rolling Programme – DDA Compliance

Works to be prioritised within the 21/22 budget.

5.1.22 Rolling Programme – Properties

Carryout a feasibility study to consider options in respect of Non Doctor Islands property portfolio.

5.1.23 Rolling Programme – HAI Works (Health Centres)

Works to be prioritised within the 21/22 budget in conjunction with Infection Control.

5.1.24 Rolling Programme - Nurse Call Systems upgrade– GBH

Upgrade of existing system.

Project Team to be established.

5.1.25 A&E – Consulting Space

Reconfiguration of A&E department.

Project Team to be established.

5.1.26 Ward 3 Anti-Ligature

Anti-ligature works required within Ward 3.

Project Team to be established.

5.1.27 Roof Remedials – Montfield

Roof repairs to Montfield. Works scheduled during summer 2021.

5.1.28 Walls HC Water Services

Improvement works to Walls Health Centre.

5.1.29 Laundry Infrastructure

Internal improvement works.

5.1.30 Lab Autoclave

Provision of new Autoclave.

Project Team to be established.

5.1.31 Contingency – Estates Backlog Maintenance

Ongoing as required.

5.1.32 Estates Backlog Maintenance Rolling Programme

Allocated.

5.1.33 CT Scanner Replacement

NHS Shetland have been awarded budget allocation to replace the existing CT scanner in the GBH which requires replacement.

This is programmed to be completed by May 2021.

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

The project is progressing in line with the above programme, including the alterations to the car park arrangements at the GBH.

5.1.34 Foetal Monitor

Scope to be developed.

5.1.35 Medical Equipment Rolling Programme

Allocated.

6.0 2021/22 Covid Projects

6.1 The following are the Covid Capital Projects for which allocation has been given by Scottish Government.

- C19 Vaccination Capital Costs
- GBH Bulk PPE Storage
- Office Accommodation
- Oxygen Resilience
- Covid-19 Decommissioning
- Respiratory Care Unit Ward 3
- Capsule Colonoscopy
- "Computer on Wheels"
- Laptops/Tablets
- Cytosponge Technology

- Rectoscope
- Endoscope Decontamination Washer

7.0 State of Assets and Facilities Report (SAFR)

7.1 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).

8.0 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 May.

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 PAMS is contained within the RAMP.

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

9.0 Energy Audit

9.1 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.

These targets are a consideration within the NHS Shetland Net Zero Route Map.

9.2 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).

- 9.3 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.

These Audits will be a consideration in the development of the NHS Shetland Net Zero Route Map.

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

10.0 Property Disposals

- 10.1 92 St Olaf Street disposal ongoing.

11.0 Property Update

- 11.1 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.

- 11.1.1 This updated survey information has been risk assessed and 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.

- 11.1.2 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 and Compliance Maintenance and associated costs.

12.0 Gilbert Bain Hospital - Strategic Assessment

12.1 Further to the Board approved report, at its meeting on 15th October 2019, a Project Board and Project Team has been established and a programme developed with a target submission for the Strategic Assessment, to the Capital Investment Group by January 2022.

Integral to the Strategic Assessment will be an updated Clinical Strategy and a Property and Asset Strategy (PAMS) (Item No 8 above).

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

12.2 The engagement, data gathering and collation have now been completed. Analysis and drafting of the revised Clinical and Care Strategy document is on-going with the final document planned to be included in the June cycle of meetings of the NHS Board and IJB after being passed through the Boards' internal governance and consultative processes.

13.0 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.

14.0 Financial Report

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

14.2 To date there is a satisfactory expenditure to report against the 2021/22 Capital Programme expenditure.

15.0 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.

- 15.1 Corporate Greencode – NHS Scotland Environmental Management System**
- 15.1.1 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.
- 15.1.2 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).
- 15.1.3 Actions will be prioritised and incorporated into the 2020/21 Estates Backlog Rolling programme (EAMS), within existing staffing resources and budget availability.
- 15.1.4 HFS is due to complete the procurement of the new Environmental Management System which is due to be piloted and training provided before role out to all Boards.
- 15.2 Mandatory Public Bodies’ Duties Climate Change Report**
Scottish Government has developed a Climate Change Reporting Template.
- 15.2.1 An annual submission is mandatory, to be returned for all public bodies.
- 15.2.2 NHS Shetland submitted their 2020 return during November.
- 15.2.3 NHS Shetland is awaiting feedback from SG 2020 return.
- 15.3 Sustainable Development Action Plan (SDAP)**
- 15.3.1 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.
- 15.3.2 SDAP is targeted to be reviewed during 2020/21. This review will reflect the NHS Scotland Sustainability Strategy.
- 15.3.3 Green Champion – NHS Shetland Chairman, Gary Robinson has agreed to be the Board representative.

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

15.3.5 NHS Shetland Sustainability Manager has been appointed the chair of the NHS Scotland National Sustainability and Environmental Group.

15.4 Climate Change Risk Assessment

15.4.1 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.

15.4.2 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. This is anticipated to be completed during 21/22.

15.5 eSight

15.5.1 Monthly data submissions for Energy and Water.

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

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

15.5.4 Data from e-Sight will assist in the production of the NHS Shetland Net Zero Plan.

15.6 Sustainability Assessment Tool

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

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

15.6.3 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.

15.7 Biodiversity Action Plans

15.7.1 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.

15.7.2 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.

15.7.3 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.

15.7.4 Biodiversity Plan submission (January) has been impacted by Covid-19 and a revised target for submission is May 2021.

15.8 Energy Performance Certificates

15.8.1 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.

15.8.2 Completion is being impacted by Covid-19 and the current target is for completion during 21/22.

15.9 Carbon Management Plan

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

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

15.9.3 The Carbon Management Plan will require to be updated to reflect the latest SG targets and NHS Shetland Net Zero Plan.

15.10 Net Zero Emissions Route Map Pilot

15.10.1 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.

15.10.2 A draft Net Aero Route Map has been produced and is currently being reviewed by NHS Shetland and Health Facility Scotland prior to presentation to the Board in due course.

16.0 Community Empowerment (Scotland) Act 2015

16.1 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.

16.2 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.

17.0 Heritable Asset Registration Programme

17.1 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.

17.2 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.

17.3 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.

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

17.5 NHS Shetland and the CLO's progress to date is impacted by Covid-19.

18.0 Waste

- 18.1 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, paper, cardboard, plastic and white goods, in conjunction with Shetland Island Council.

- 18.2 Since the untimely administration of the national clinical waste contractor in December 2018 NHS Scotland has implemented a Waste Contingency plan Scotland wide. This contingency plan is no longer applicable as the new contractor (TRADEBE) is firmly established.

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 and is now being included into NHS Grampian waste stream.

- 18.3 The new Waste contract requires that Waste Audits are required and the Waste Management Officer continues to carry these out with priority to the High risk areas. Carrying out these Audits is challenging within the constraints of Covid-19.
- 18.4 Zero Waste Scotland are due to engage with NHS Shetland to develop a Food Waste Action Plan.

In abeyance due to Covid-19 and the current target is August 2021.

19.0 Security

- 19.1 An inaugural Security Group has been established in conjunction with SIC to consider the relevant issues and develop risk assessments and action plans.
- 19.2 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.
- 19.3 A Security Audit in respect of Lockdown was targeted to be completed during 20/21 however this is in abeyance due to Covid-19.
- 19.4 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. This has been impacted by Covid-19.

20.0 Soft Facilities Management

The following are highlights of current work streams.

- 20.1 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.
- 20.2 Reviewing and updating the Accommodation Policy to reflect legislative changes.
- 20.3 Menu Harmonisation for NHS Scotland (with Regional variation).

An initial suite of menus is now available.
- 20.4 Consideration of the Zero Waste NHS Scotland Waste Report recommendations and develop a Food Waste Action Plan.
- 20.5 Collaboration opportunities with SIC in food procurement.
- 20.6 Trading Account – Carry out a review to reflect the impact of Covid-19 and catering recovery.

20.7 Healthy Living plus Award – in recognition of performance over the last 10 years NHS Shetland were awarded a Long Term Achieving Award.

20.8 Project Search - provide work place experience for young people with learning disabilities.

In abeyance due to Covid-19.

20.9 National Catering Information System – implementation ongoing.

20.10 Audit Tool for Food and Hospitals – NHS Shetland have been audited and an Action Plan developed.

20.11 Bottle Deposit Scheme – This is being developed in conjunction with SG, Zero Waste Scotland and local stakeholders.

In abeyance due to Covid-19.

20.12 National Cleaning Compliance – NHS Shetland continues to remain as one of the top performing Boards within NHS Scotland. This reflects the work of Facilities staff in respect of the additional challenges impacted by Covid-19.

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

21.0 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.

22.0 10 Year Capital Programme

22.1 The table attached illustrates the latest 10 Year Capital Programme agreed by CMG.

22.2 This is based on the medium term projections from IM&T, Medical Equipment, Capital Projects and Backlog Maintenance and reflects the anticipation that this funding level will be sustained over future years.

22.3 The 10 Year programme will require to be adjusted as future year's aspirations and needs are forthcoming.

23.0 Annual Fire Report 2020

The Nominated officer Fire (Head of Estates and Facilities) is required to present an Annual Fire Report for NHS Shetland.

23.1 The attached Appendix A is for noting.

24.0 Recommendations

The Board is asked to;

- i. Note the 2020/21 Capital Programme updates.
- ii. Note the 2021/22 Capital Programme updates.
- iii. Note the 10 Year Capital Programme
- iv. Note the Annual Fire Report

LAWSON BISSET

Head of Estates, Facilities and Medical Physics

14th April 2021

NHS Shetland Annual Fire Report 2020

NHS Shetland Nominated officer Fire (NoF) is required to present an Annual Fire Report to the Board.

1. Fire Incidents

1.1 There have been 10 reported incidents in 2020. These comprise of unwanted signals caused by, in summary;

- Faulty detectors.
- Staff awareness.

In order to mitigate these risks the NoF has encouraged staff to complete the mandatory Turas Fire awareness training module online.

Due to Covid-19 the following supplementary training; Annual Fire Lectures, Walk and Talk training, Fire Extinguisher and Fire Warden training has not been able to be delivered. As these require 'face to face' and access to the wards.

- It is anticipated these will return as Covid-19 restrictions ease.
- The NoF continues to engage with Scottish Fire and Rescue (SFRS) (Unwanted signals officer)
- Staff awareness campaign 'TAKE 5' in conjunction with SFRS has been completed.

2. Fire Safety Policy

2.1 The existing policy is currently being reviewed in conjunction with C S Todd (Fire Advisors), NHS Shetland Fire Committee and SFRS and will reflect to following;

- GBH – Fire Emergency Management Plan
- Fire Extinguisher Training
- Fire Warden Training
- Fire Evacuation Drill
- Annual Fire Training
- Fire Response Teams
- Communication

The Fire Safety Policy and GBH Fire Emergency Management can be found on the NHS Shetland internet page.

It is currently anticipated that the review will be carried out by October 2021.

3. Fire Evacuation Drills

3.1 Gilbert Bain Hospital

Fire Evacuation Drills have been discussed with the Scottish Fire and Rescue Service and it recognised that it is impractical to carry out a full Fire Evacuation Drill on these premises.

This is further exacerbated within the constraints of Covid-19.

The 'Walk and Talk' exercises has been impacted by Covid-19 and will resume subject to Covid-19 easing.

3.2 Health Centres

Covid -19 has affect the Health Centre managers liaising with their local fire service to carry out an annual fire evacuation drill.

3.3 Montfield / Breiwick sleeping accommodation

Discussions are ongoing with SFRS to effect appropriate drills which reflects the high turnover of staff accommodation.

4. Training

During 2020 the following Fire Training has been impacted by Covid-19;

- The Annual Fire Lectures (face to face) – not viable
- Turas Fire module – no impact as online
- Monthly Fire Inductions – no impact
- Walk and Talk (face to face) – not viable
- Fire Extinguisher Training (face to face) – not viable
- Fire Warden Training (face to face) - not viable.

Health Facility Scotland has developed updated guidance for the training requirements of NHS staff in respect of Fire however NHS Shetland training is anticipated to be generally in line with this.

In summary this requires;

- High risk (area) staff - Annually
- All other staff – 3 yearly

NoF is developing training deliverables to reflect the constraints of Covid-19.

5. Fire Risk Assessments (FRAs)

A Fire Risk Assessment Action Plan continues to be updated following visits from the Scottish Fire and Rescue Service (SFRS) and Fire Risk Assessments and is regularly updated at each Fire Committee.

The Actions are prioritised within the budget available.

5.1 Local Fire Plans (LFP's)

The Local Fire Plans are required to be updated annual by each department/unit manager.

6. Fire Precautions Improvements (20/21)

The prioritised works programme for 2020/21 has been completed.

A prioritisation will be required to be carried out for 2021/22 against the budget allocation using the Fire Risk Assessment Action plan.

Lawson Bisset
Nominated officer Fire
14 April 2021