

<b>Meeting:</b>	Shetland NHS Board
<b>Date:</b>	25 <sup>th</sup> June 2021
<b>Report Title:</b>	Capital Programme Progress Report
<b>Reference Number:</b>	Board Paper 2021/22/19
<b>Author / Executive Lead/ Job Title:</b>	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.
- ii. Consider and approve the Regional Asset Management Plan (RAMP) (Appendix Ai and Aii).
- iii. Consider and approve the NHS Shetland Net Zero Route Map (Appendix B).

#### **High Level Summary:**

The paper provides the Board with;

- 2021/22 Capital Programme Progress update
- North Region Regional Asset Management Plan
- NHS Shetland Net Zero Route Map

The paper provides an update on all elements of the Capital programme and Assets compliance, monitoring, sustainability 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 well-being, 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*

<b>Service Users, Patients and Communities:</b>	Specific projects within the Capital Programme support improved patient safety and quality of service.
<b>Human Resources and Organisational Development:</b>	Estates & Facilities staff will be impacted by the requirement of statutory reporting & compliance within limited workforce resources.
<b>Equality, Diversity and Human Rights:</b>	None.
• <b>Partnership Working</b>	Ongoing work with SIC supports efficiencies within the Estates & Facilities services.
<b>Legal:</b>	None.
<b>Finance:</b>	Within existing identified resources / budget.
<b>Assets and Property:</b>	The existing buildings will require to be maintained.
<b>Environmental:</b>	None.
<b>Risk Management:</b>	Estates and Facilities are continuing to manage Risk within resources impacted by Covid-19. Refer to SCART.

<b>Policy and Delegated Authority:</b>	The Board is being asked to note and approve the following reports.	
<b>Previously considered by:</b>	Capital Management Group	3 June 2021

<b>“Exempt / private” item</b>	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 2021/22

### **1.0 Purpose**

To provide the:

- **2021/22 Capital Programme Progress update**
- **Regional Asset Management Plan (RAMP)**
- **NHS Shetland Net Zero Route Map**

### **2.0 Background**

2.1 The Capital Management Group (CMG) agreed a Capital programme for 2021/22 at its meeting on the 3<sup>rd</sup> 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 2021/22 Projects Progress Report**

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

#### **3.1.1 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.

### **3.1.2 Archived records scanning**

Project to electronically scan archive records. Project Team has been established.

### **3.1.3 Ward 1 Bathroom Remedial Scoping**

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

### **3.1.4 Bressay Consulting room**

Conversion within old Bressay School to provide Consulting room.

Awaiting planning permission and building warrant.

Current target for completion and commencement of service October 2021.

### **3.1.5 Capital Projects (non-specific) (unallocated)**

Ongoing as required.

### **3.1.6 Datacentre UPS**

Upgrade existing UPS system. Project Team to be established.

### **3.1.7 Primary Care – Server Refresh**

Centralise secure printing facility. Project Team to be established

### **3.1.8 Secure Doors**

Upgrade server network. Project Team to be established

### **3.1.9 IT Rolling Replacement**

Allocated.

### **3.1.10 Revenue Transfer - Backlog Maintenance (RT)**

Ongoing throughout 21/22.

### **3.1.11 Rolling Programme – Car Parks/Workplace Transport Regs**

Works to be prioritised within 21/22 budget.

### **3.1.12 Rolling Programme – HAI Works (GBH)**

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

### **3.1.13 Rolling Programme – Fire Safety**

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

### **3.1.14 Rolling Programme – Water Safety**

Works prioritised within the 21/22 budget in conjunction with Water Group and the Authorising Engineer.

### **3.1.15 Rolling Programme – Electrical Systems**

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

### **3.1.16 Rolling Programme – Roofing Programme**

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

### **3.1.17 Rolling Programme – Ventilation**

Ventilation Group established. Works prioritised for 21/22 in conjunction with group and the Appointed Authorising Engineer.

### **3.1.18 Rolling Programme – DDA Compliance**

Works to be prioritised within the 21/22 budget.

### **3.1.19 Rolling Programme – Properties**

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

Project Team established.

### **3.1.20 Rolling Programme – HAI Works (Health Centres)**

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

### **3.1.21 Rolling Programme - Nurse Call Systems upgrade– GBH**

Upgrade of existing system.

Project Team established and systems prioritised.

### **3.1.22 A&E – Consulting Space**

Reconfiguration of A&E department.

Project Team to be established – project in abeyance, subject to Covid-19.

### **3.1.23 Ward 3 Anti-Ligature**

Anti-ligature works required within Ward 3.

Project Team to be established - project in abeyance, subject to Covid-19.

### **3.1.24 Roof Remedials – Montfield**

Roof repairs to Montfield. Works scheduled during summer 2021.

### **3.1.25 Walls HC Water Services**

Improvement works to Walls Health Centre.

### **3.1.26 Laundry Infrastructure**

Internal improvement works.

### **3.1.27 Lab Autoclave**

Provision of new Autoclave.

Project Team established and options under consideration.

### **3.1.28 Contingency – Estates Backlog Maintenance**

Ongoing as required.

### **3.1.29 Estates Backlog Maintenance Rolling Programme**

Allocated.

### **3.1.30 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

COMPLETED.

### **3.1.31 Foetal Monitor**

Scope to be developed.

### **3.1.32 Medical Equipment Rolling Programme**

Allocated.

## **4.0 2021/22 Covid Projects**

From the onset of the pandemic in early March 2020 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 & Remobilisation Plans to enable services to safely recommence.

4.1 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
- Ward Beds including Bariatric
- Cephid machine
- "Computer on Wheels"
- Laptops/Tablets
- Cytosponge Technology
- Rectoscope
- Endoscope Decontamination Washer

## **5.0 State of Assets and Facilities Report (SAFR)**

5.1 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).

5.2 The Regional Asset Management Plan (RAMP) 6.0 is utilized by Scottish Government for the preparation of the SAFR.

## **6.0 Regional Asset Management Plan (RAMP)**

The North RAMP for 2020 has been completed in conjunction with; NHS Orkney, NHS Highland, NHS Western Isles, NHS Grampian, NHS Tayside and NHS Shetland and is presented to the Board (Appendix Ai and Aii) for consideration and approval.

This is the 3<sup>rd</sup> 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 Property and Asset Management Strategy (PAMS) is contained within the RAMP.

NHS Shetland Scottish Government data returns 2020, Property, Medical Equipment, Fleet Asset and Smarter Offices is contained within the NHS Shetland PAMS.

## **7.0 Energy Audit**

7.1 Energy and CO<sup>2</sup> 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.

7.2 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).

7.3 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.



7.4 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.

## **8.0 Property Disposals**

8.1 92 St Olaf Street disposal ongoing.

## **9.0 Property Update**

9.1 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.

9.1.1 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.

9.1.2 The updated EAMS information is reported to the Board within the RAMP 6.0.

Backlog Maintenance Summary;

Low Risk - £1m

Moderate Risk - £1.2m

Significant Risk - £2m

High Risk - £0

## **10.0 Gilbert Bain Hospital - Strategic Assessment**

10.1 Further to the Board approved report, at its meeting on 15<sup>th</sup> 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.

- 10.2 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.

## **11.0 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.

## **12.0 Financial Report**

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

## **13.0 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](http://www.sustainabilityaction.scot.nhs.uk).

The group addresses the following deliverables.

### **13.1 NHS Scotland Environmental Management System (EMS)**

13.1.1 EMS 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.

13.1.2 HFS have completed the procurement of a new Environmental Management System which has been piloted and training is being rolled out to all Boards.

13.1.3 It is anticipated that this mandatory Tool will require extensive resources from within the Estates Department and this will be considered further on completion of the training.

13.1.4 Heads of Estates have been advised of the anticipated resource implication in respect of the use of this mandatory Tool.

### **13.2 Mandatory Public Bodies' Duties Climate Change Report**

Scottish Government has developed a Climate Change Reporting Template.

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

13.2.2 NHS Shetland submitted their 2020 return during November 2020.

13.2.3 NHS Shetland is awaiting feedback from SG 2020 return.

### **13.3 Sustainable Development Action Plan (SDAP)**

13.3.1 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.

13.3.2 SDAP is targeted to be reviewed during 2020/21. This review will reflect the NHS Scotland Sustainability Strategy which is due to be completed during 2021.

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

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

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

### **13.4 Climate Change Risk Assessment**

13.4.1 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.

13.4.2 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.

13.4.3 NHS Shetland return has been impacted by staff availability due to Covid-19.

### **13.5 eSight**

13.5.1 Monthly data submissions for Energy and Water.

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

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

13.5.4 Data from e-Sight has assisted in the production of the NHS Shetland Net Zero Plan.

### **13.6 National Sustainability Assessment Tool (NSAT)**

13.6.1 HFS issued a new tool (NSAT) which is evidence based.

13.6.2 NHS Shetland has completed the Tool which is currently being reviewed by HFS.

### **13.7 Biodiversity Action Plans**

13.7.1 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.

13.7.2 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.

13.7.3 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.

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

### **13.8 Energy Performance Certificates**

- 13.8.1 This is now required for all NHS sites with a gross internal floor area of 250m<sup>2</sup> or above. Previously 1000m<sup>2</sup> or above. Head of Estates is liaising with SIC to enable a joint update of the relevant properties.
- 13.8.2 Completion is being impacted by Covid-19 and the current target is for completion during 21/22.

### **13.9 Carbon Management Plan**

- 13.9.1 The NHS Shetland current plan was prepared in 2012 and required to be updated to reflect the anticipated target from Scottish Government.
- 13.9.2 The preparation of an updated Carbon Management Plan is ongoing and is anticipated to be finalised by April 2021 for consideration by the Board.
- 13.9.3 The Carbon Management Plan will require to be updated to reflect the latest SG targets and NHS Shetland Net Zero Plan.

### **13.10 Net Zero Emissions Route Map Pilot**

- 13.10.1 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.
- 13.10.2 A NHS Shetland Net Zero Route Map (Appendix B) has been developed in conjunction with external consultants (Ricardo) with engagement from Health Facility Scotland.
- 13.10.3 The Net Zero Route Map is the subject of a presentation to the Board at its meeting on 25 June 2021 for consideration and approval. As part of the Net Zero presentation context will be presented on the NHS Scotland Sustainability.

## **14.0 Community Empowerment (Scotland) Act 2015**

- 14.1 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.

- 14.2 Communication points and information in respect of the above is available on the Intranet/Internet. With no formal expressions of interest to NHS Shetland received to date.
- 14.3 An initial informal expression of interest has been received to explore the development of community gardens within NHS Shetland vacant/unused land. Discussions are ongoing and will be reported to the Board in due course.

## **15.0 Heritable Asset Registration Programme**

- 15.1 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.
- 15.2 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.
- 15.3 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.
- 15.4 Estates are liaising with CLO to progress this onerous task.
- 15.5 NHS Shetland and the CLO's progress to date is impacted by Covid-19.

## **16.0 Waste**

- 16.1 A Waste Monitoring Tool (RIO) 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.

16.2 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.

16.3 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.

16.4 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.

## **17.0 Security**

17.1 An inaugural Security Group has been established in conjunction with SIC to consider the relevant issues and develop risk assessments and action plans.

17.2 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.

- 17.3 A Security Audit in respect of Lockdown was targeted to be completed during 20/21 however this was in abeyance due to Covid-19, the current target is to complete a Security Audit of the Gilbert Bain Hospital by September 2021 (subject to Covid-19).
- 17.4 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.

## **18.0 Soft Facilities Management**

The following are highlights of current work streams.

- 18.1 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.
- 18.2 Reviewing and updating the Accommodation Policy to reflect legislative changes.
- 18.3 Menu Harmonisation for NHS Scotland (with Regional variation).  
  
An initial suite of menus is now available.
- 18.4 Consideration of the Zero Waste NHS Scotland Waste Report recommendations and develop a Food Waste Action Plan.
- 18.5 Collaboration opportunities with SIC in food procurement.
- 18.6 Trading Account – Carry out a review to reflect the impact of Covid-19 and catering recovery.
- 18.7 Healthy Living plus Award – in recognition of performance over the last 10 years NHS Shetland were awarded a Long Term Achieving Award.
- 18.8 Project Search - provide work place experience for young people with learning disabilities.

In abeyance due to Covid-19.

18.9 National Catering Information System – implementation ongoing.

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

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

This has been in abeyance due to Covid-19 however Scottish Government are in the process of awarding a lead organisation to role this out throughout Scotland.

Further updates in due course.

18.12 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.

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

## **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 2021/22 Capital Programme updates.
- ii. Consider and approve the Regional Asset Management Plan (RAMP) (Appendix Ai and Aii).

- iii. Consider and approve the NHS Shetland Net Zero Route Map (Appendix B).

**LAWSON BISSET**

**Head of Estates, Facilities and Medical Physics**

**2<sup>nd</sup> June 2021**