



### **Board of Directors**

# SUMMARY REPORT Meeting Date: 25<sup>th</sup> September Agenda Item: 20

Report Title:	Estates Strategy 2021-2026 - Annual review/ progress update					
Author(s):	Liam Casey – Associate Director of Estates and Facilities					
Accountable Director:	James Drury – Director of Strategy					
Other meetings this paper	Committee/Tier 2	Executive Management Team (EMT)				
has been presented to or previously agreed at:	Group/Tier 3 Group	Finance and Performance Committee (FPC)				
	Date:	EMT- 4/7/24				
		FPC- 11/7/24				
Key points/ recommendations from those meetings	<ul> <li>Strengthen reference to improvement of compliance systems in estates and facilities to support identification and prioritisation of proactive maintenance programme.</li> </ul>					
	Make clear the interdependence of the Estates Strategy refresh the overall Trust Strategy refresh					

#### Summary of key points in report

This report provides an update on the Trusts Estates Strategy, highlighting progress in areas such as ligature anchor point removal, dormitory eradication, and the implementation of ensuite facilities. However, challenges remain, particularly in securing funding for the new inpatient facility. Additionally, the report outlines plans for an Estates strategy refresh, including the importance of ensuring this is aligned with the Digital and People strategies.

The Estates and Facilities key objectives for 2024/25 are detailed within the report, including the development of an outline business case for a new facility, creating a five-year infrastructure capital plan, and improving space management and financial controls. The committee is asked to note the progress made, the ongoing challenges, and support the proposed strategy refresh process.

#### Recommendation for the Board/Committee to consider:

Consider for Action	Approval	X	Assurance	Information	X	

The Board is asked to note the progress made, the ongoing challenges, and support the proposed estates strategy refresh.

Please identify which strategic priorities will be impacted by this report:							
Effective Use of Resources	Yes	X	No				
Deliver Outstanding Care	Yes	X	No				

Great Place to Work								X	No
Ensuring our services are inclusive						inclusive	Yes	X	No
						Į.		l l	
Is this report relevant to cor	Is this report relevant to compliance with any key standards ? State specific standard								
Care Quality Commission	Yes	Χ	No		Fundamental				nd
Fundamental Standards					Equipment				
Data Security and	Yes		No	Х					
Protection Toolkit									
Any other specific									
standard?									
Have these areas been cons	sidered	? Y	ES/NO		If Yes, what If no, please			or th	e impact?
Service User and Care Safety, Engagement an Experienc	d	es .	x N	0					
Financial (revenue &capita	V	es .	x N	0					
Organisational Developmer /Workforc		es	x N	0					
Equality, Diversity & Inclusio	n Ye	es	x N	0	Please complete section 4.3 in the content report				
Lega	al Ye	es	x N	0					
Environmental sustainabilit	Y Ye	es .	x N	0					

# **Estates Strategy 2021-2026 Progress Update**

#### 1. Introduction

#### 1.1. Background

The Sheffield Health and Social Care (SHSC) Estates Strategy, launched in 2021, aims to provide high-quality, fit-for-purpose estate to deliver safe, comfortable and dignified environments. It is an enabling strategy, supporting the Trust's Clinical and Social Care Strategy and People Plan, focusing on improving facilities to enhance patient recovery and staff wellbeing.

#### 1.2. Purpose

This report serves three main purposes:

- a) To provide an update on seven key investments identified in the original strategy, assessing their progress, challenges, and next steps.
- b) To outline our plans for revising the Estate strategy in alignment with the Trust's evolving needs and strategic goals.
- c) To detail the Directorate's strategic objectives for 2024/25.

# **Section 2: Estates Strategy Update**

#### 2. Investment and Project Progress

# 2.1. Investment one - Ligature Anchor Points, De-escalation Rooms, and Dormitory Eradication

Significant progress has been made in enhancing safety through the removal of ligature anchor points (LAPs) and dormitory eradication. As of the latest assessment, 100% of LAPs identified in the June 2021 Section 29a notice have been addressed in inpatient acute wards. Efforts continue across non-acute inpatient services, with 64.1% of LAPs removed since June 2021. Key achievements include:

- Complete eradication of dormitories from all SHSC inpatient areas by August 2022.
- Successful removal of LAPs on Stanage ward, Burbage ward, and the closure of Maple ward, eliminating associated risks.
- Implementation of the new Health Based Place of Safety (HBPoS), a crucial enabling project for overall LAP removal work.
- Several upgrades to Dovedale 2 since 2021, facilitating LAP removal across all inpatient acute wards.

Work will continue to remove ligatures across non-acute inpatient services. In 2024/25 our capital plan provides for G1 ward to receive new bedroom doors, and to commence work at Forest Lodge to remove and replace various LAPs, including furniture, radiators, and lights.

#### 2.2. Investment two - New Headquarters Facilities

This has been successfully completed with the move to new headquarters at Centre Court and Distington House.

#### 2.3. Investment three - Inpatient Accommodation (New Hospital)

Progress on this investment has faced some challenges. Key developments include:

- Submission of an application to the New Hospital Programme for funding in September 2021.
- Development of a draft Strategic Outline Case (SOC), including a brief, accommodation schedule, patient pathway, and high-level demand details.
- Unfortunately, our funding bid was rejected in June 2023, which led to a pause in progress.

#### Next steps:

- Develop a new strategic outline case for the new facility by January 2025. To support this work a programme of visits to other mental health hospital build projects has commenced, learning from their business cases and approach adopted.
- Engage with key stakeholders, including clinical teams, patients, and community representatives, to ensure the new proposal addresses current and future needs.

#### 2.4. Investment four - Improved Accommodation for Community Services

Initial progress has been made in enhancing community service facilities:

- Successful relocated services to Sidney Street and Fitzwilliam Street.
- Moved Talking Therapies services to Wainwright Crescent

#### Next steps:

- Place based community estates opportunity analysis, through the Sheffield Health and Care Partnership.
- Evaluation of opportunities for relocation in local LIFT buildings, in conjunction with SY ICB

#### 2.5. Investment five - Increase Access to Ensuite Facilities

Significant progress has been made in this area:

- 66% of adult acute beds on SHSC sites now have ensuite facilities.
- Ensuites have been successfully implemented on Burbage, Stanage, Maple Ward, Forest Close, G1 and part of Woodland View.

However, gaps remain in our provision:

 Dovedale 1, Dovedale 2, part of Woodland View and Forest Lodge still lack ensuite facilities.

#### 2.6. Investment six - Modular Decant Ward

This investment hasn't progressed as initially planned. We explored and proposed options as potential solutions, but these proposals weren't taken forward at this time.

# 2.7. Investment seven - Statutory Compliance, Risk Management, and Backlog Maintenance

Progress in this area has been limited. However, plans have been formulated and work has commenced to move this forward:

- Work is underway to define key performance indicators (KPIs) within the directorate. These KPIs will be used to develop a comprehensive performance scorecard.
- A review of governance processes is ongoing, with plans to introduce a new risk management framework.

While a holistic framework has not yet been fully embedded, these efforts represent crucial steps towards improving our approach to statutory compliance, risk management, and backlog maintenance.

#### Next Steps:

- Finalise and implement the new KPI metrics and performance scorecard.
- Complete the review of governance processes and roll out the new risk management framework.
- Develop a prioritised action plan to address backlog maintenance issues, informed by comprehensive condition surveys.
- Establish a regular reporting mechanism to track progress against compliance requirements and maintenance targets.

### Section 3: Estates Strategy Refresh & 24/25 Priorities

#### 3.1. Strategy Refresh

A review of the Estates strategy is planned for this year to ensure it remains aligned with the Trust's strategic aims. This review will allow us to adapt our plans to meet ever-changing needs, priorities, and regulatory requirements, ensuring that our investments and projects continue to support the Trust's strategic objectives. By conducting this refresh, we can identify areas for improvement and realign resources where required. Additionally, we can address emerging challenges and assess any new opportunities.

The process for this strategic refresh will involve key stakeholders, including representatives from clinical services, finance, digital and people etc. This engagement will also be supplemented by data analysis of our current estate utilisation and performance, ensuring that our revised strategy is both evidence-based and forward-looking.

The review of our estate strategy will be undertaken at the same time and aligned with the refresh of our overall trust strategy.

#### 3.2. Alignment with Digital & People Strategy

When reviewing the Estates Strategy, we will consider alignment with the Trust's Digital and People strategies, particularly regarding space utilisation and remote/hybrid working. Our aim is to equip facilities with smart technologies that provide meaningful data, supporting the creation of adaptable spaces that meet the evolving needs of healthcare.

Aligning with the People Strategy, particularly regarding hybrid/agile working, is crucial for promoting flexible work environments. This not only supports employee well-being and productivity but also optimises the use of our estate by reducing the need for fixed workspaces. By fostering a flexible work culture and leveraging digital tools, we can create more dynamic and efficient community estate, enhancing the overall effectiveness of our properties.

#### 3.3. Partnership Initiatives

It is also important that the Estates Strategy review considers a neighbourhood approach to integrated care in Sheffield to provide comprehensive and coordinated healthcare services. Working in collaboration with our healthcare partners will ensure that care is seamless and patient-centred, effectively addressing community health needs and ultimately improving local health, care, and wellbeing. Currently, we are actively engaged in various partnership initiatives assessing joint estate opportunities.

#### 3.4. South Yorkshire ICS Infrastructure Strategy

On 27 March 2024, NHS England issued guidance requesting that each Integrated Care System (ICS) produced a ten-year infrastructure strategy to establish a nationally agreed set of infrastructure priorities informed by local needs and requirements. SHSC is part of a small task and finish group, consisting of estates leads from seven provider organisations, responsible for drafting the updated strategy. The plan has now been submitted.

The strategy is supported by a prioritised capital pipeline template outlining the ICS capital priorities. SHSC has participated in the working group to test prioritisation principles and develop a framework for comparison of priorities.

SHSC has incorporated our proposal for a new mental health facility within Sheffield into this strategy to formally document our intentions at a national level and bolster the case for establishing this new hospital. Furthermore, a strategic outline case is currently under development and is anticipated to be finalised by the start of January 2025

#### 3.5. Strategic Objectives 2024/25

The following section provides a brief overview of the directorate's strategic objectives for the year.

#### 3.6. New Hospital - Outline Business Case

The development of the outline business case for a new mental health facility is being progressed. A dedicated working group has been established to support this with a target date for completion set as January 2025.

#### 3.7. 5 Year Infrastructure Capital Plan

We will utilise the data from our six-facet survey to develop a five-year infrastructure capital plan. A six-facet survey provides a detailed assessment of our estate across six critical areas: building fabric, compliance, functional suitability, space utilisation, quality and environmental management. By analysing this data, we can identify and prioritise areas that require immediate attention, ongoing maintenance, and future capital investment. This will allow the Trust to make informed decisions regarding the allocation of capital resources effectively.

#### 3.8. Space Management Group

By implementing a Space Management Group, we aim to ensure effective space management to support operational efficiency. Through the planning and monitoring of the Space Management Group we can ensure the efficient and effective use our Trust Estate.

#### 3.9. PLACE

We aim to deliver the 2023/24 PLACE action plan and achieve improved results in 2024/25. Planning for the 24/25 PLACE assessments is currently underway, and a multidisciplinary team is being recruited.

#### 3.10. Fire Safety

A comprehensive review of fire safety arrangements will be conducted to ensure the Trust is complying with the updated HTM standards introduced in April 2024.

#### 3.11. Staff Survey

As discussed in section 2.4.3 we are creating targeted staff survey action plans and aim to deliver improved results in 2024/25.

#### 3.12. Financial Controls – Minor Schemes Maintenance Spend

The current 'Minor Schemes' budget lacks adequate financial grip. We are creating a transparent process which will improve this and ensure we have budgetary control. This process will include exceptions for safety issues and ensure that these are delivered in a timely manner.

#### 3.13. Compliance and proactive intervention

This year we are strengthening our systems of compliance checks and our processes for recording and reporting of the findings. This will inform the prioritisation of our programme of proactive maintenance.

#### 3.14. VIP

The directorate is committed to achieving its VIP targets for the year, focusing on identifying efficiencies and cost-saving opportunities across operations. Regular monitoring and evaluation of VIP initiatives will be conducted to track progress towards targets and adjust strategies as necessary.