



Doncaster and Bassetlaw
Teaching Hospitals
NHS Foundation Trust

Estates and Facilities Operational Management Policy



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Amendment Form

Please record brief details of the changes made alongside the next version number. If the procedural document has been reviewed **without change**, this information will still need to be recorded although the version number will remain the same.

Version	Date Issued	Brief Summary of Changes	Author
Version 1	12 July 2022	This is a new procedural document, please read in full. Overarching policy to include Roles and Responsibilities, Processes and Procedures and Services relevant to Estates and Facilities	Sean Tyler

Contents

	Page No.
1 INTRODUCTION.....	5
2 PURPOSE	6
3 DUTIES AND RESPONSIBILITIES	7
3.1 The Trust Board.....	7
3.2 The Chief Executive.....	7
3.3 Director of Estates and Facilities	7
3.4 All Directors and Deputy Directors	8
3.5 Deputy Director of Estates and Facilities	8
3.6 Heads of Estates / Facilities / Capital / Compliance/ MTS.	8
3.7 Managers or Leads of Estates / Facilities / Capital / Compliance/ MTS.....	8
3.8 Estates and Facilities Officers and Supervisors	9
3.9 Sustainability and Energy Management	9
3.10 Estates Authorised/ Competent Persons	10
3.11 Authorising Engineers.....	10
3.12 Transport Manager	11
3.13 Service Contracts Managers.....	11
3.14 Other Staff	11
3.15 Health and Safety Adviser	11
3.16 Fire Safety Adviser	11
3.17 Local Security Management Specialist	12
3.18 Infection, Prevention and Control Team	12
3.19 Contractors.....	12
4 PROCEDURE	13
4.1 Service Delivery	13
4.2 Customer Services Helpdesk.....	13
4.3 Estates and Facilities Compliance Team	14
4.4 Facilities Services	14
4.5 Estates Operational Services	15
4.6 Estates Capital Services	16
4.7 Medical Technical Services (MTS)	16
4.8 Estates Reactive Maintenance	17

4.9 Planned Preventative Maintenance (PPM) 18

4.10 Performance Monitoring..... 19

4.11 Financial Management 19

5 TRAINING/SUPPORT 21

5.1 Trust Mandatory Training..... 21

5.2 Specialised Training 21

6 MONITORING COMPLIANCE WITH THE PROCEDURAL DOCUMENT 22

7 DEFINITIONS 24

8 EQUALITY IMPACT ASSESSMENT..... 24

9 ASSOCIATED TRUST PROCEDURAL DOCUMENTS..... 24

10 DATA PROTECTION 25

11 REFERENCES 25

APPENDIX 1 – ESTATES & FACILITIES MANAGEMENT STRUCTURE 27

APPENDIX 2 – KEY PERFORMANCE INDICATORS (KPI’S)..... 28

APPENDIX 3 - EQUALITY IMPACT ASSESSMENT PART 1 INITIAL SCREENING 29

1 INTRODUCTION

The Trust is required to clearly define policies and procedures for their premises under its control. Through this Estates and Facilities Operational Management Policy, Estates and Facilities contribute to providing a safe, high quality Healthcare environment for the Trust's patients, staff and visitors.

This policy is intended to represent a clear undertaking by the Estates, Facilities and the Medical Technical Services (MTS) for the Estates and Facilities Directorate to carry out a range of specified services to the standard and level detailed in this document.

This policy has been designed to reflect the working relationship that exists between the Estates and Facilities Directorate and its end users and stakeholders. It is anticipated that this document will supplement the Estates and Facilities activity and services to the Trust and act as assurance on the matters in which end users and stakeholders receive the activities and services.

This policy provides guidelines to cover: -

- A clearly defined Estates and Facilities Operational Management Policy (this Policy)
- Qualitative statements about the services to be provided.
- Programmes for continuing improvement in delivering those services.
- The framework, constraints and boundaries within which those services are delivered.
- The organisation, roles and responsibilities of Estates and Facilities directorate staff and resources to provide those services.
- The means of measuring and monitoring the efficacy and efficiency of the Estates and Facilities Department; and to assure value for money, to regularly review the scope and definition of provided Estates and Facilities Directorate services within a healthcare environment.

It also serves as a Policy detailing the Trusts requirements of those contracting companies employed under Service or Maintenance contracts. This document shall be issued to all contracting companies as a part of their approval process and available by request from the Trust in electronic format. Contracting companies are expected to ensure that all personnel under their employ who are to be engaged on Trust maintenance work are trained on the requirements of this policy. Non-compliance with Statutory Regulations or with Trust policies by a contracting company or any of its employees shall lead to the suspension of operations at no cost to the Trust.

Nothing within this Policy and Procedure is to be construed as relieving a Contractor of any of his Statutory obligations under the Health and Safety at Work Act 1974, the Management of Health and Safety at Work Regulations 1999, or any other current and relevant Legislation, Regulations or Approved Codes of Practice.

2 PURPOSE

This Policy will provide the Trust with clear statement of intent by the Estates and Facilities Directorate.

- Treat all end users and stakeholders (patients, visitors, staff and contractors) equally and with respect and courtesy.
- Inform end users and stakeholders promptly where service requirements or deadlines will not be met and the remedial action which will be taken.
- Employ or source sufficient staff to ensure that the services are always provided. Estates, Facilities and MTS regularly reviewed, and those sufficient resources are available to meet the service requirements.
- Employ such persons as are competent, skilled and capable of the duties required of them and must ensure that every such person is properly and sufficiently trained and instructed to carry out the services to be performed. Inform end users and stakeholders when work is to be carried out and provide a programme of works where applicable.
- Provide to the end users and stakeholders timely, accurate and up to date advice and information as and when required on all matters covered by this policy.
- Ensure that all staff are aware of and trained/instructed on all relevant rules,
- Policies, procedures, and standards of Doncaster & Bassetlaw Hospitals NHS Foundation Trust ("The Trust").
- Provide each member of Estates, Facilities and MTS staff with a form of identification, which staff shall always display on their clothing when they are at work.
- Ensure that its staff do not disclose to any person (other than a person authorised by the Trust) any personal information acquired by them in connection with the service.
- Protect personal data in accordance with the provisions and principles of Data Protection and the Caldicott Report and ensure compliance with the Trust's information security arrangements. It must also ensure the reliability of its staff who have access to any personal data held by the Trust. In addition, if Estates, Facilities and MTS are required to process personal data held by the Trust, all such personal data will be always kept secure.
- Ensure that Estates, Facilities and MTS staff do not disclose to any person any commercial in confidence information acquired by them in connection with the service.
- Ensure that Estates, Facilities and MTS staff are utilize personal protective equipment where appropriate.

Estates, Facilities and MTS is provided to deliver.

- The service is delivered using a mix of in-house skills, subcontract and specialist subcontract resource.
- Service support includes Helpdesk using bespoke Facilities Management Software (Planet FM) and a Computer Aided Facilities Management (CAFM) system.

- The service is provided from 0800hrs – 1600hrs Monday to Friday excluding bank holidays with 24-hour call-out facility for emergencies at all other times.
- Technical expertise is available from qualified professional staff from a range of construction, building, Technical and engineering backgrounds.
- The Estates, Facilities and MTS will manage all contractors on the trusts sites through policies and procedures, to enable good control and audit of contractors.
- Method statements and risk assessments will be in place when required and the contractor will be managed by an appropriate Estates Directorate Managers.

This policy outlines the guidelines, regulations, and duty of care for all Contractors undertaking service work on Trust property.

Nothing in these guidelines absolves Contractors or their respective Sub-Contractors, their employees and the self-employed from their duty to comply with all relevant Health and Safety legislation.

3 DUTIES AND RESPONSIBILITIES

A management structure with defined roles and responsibilities is in place. Single points of contact will be maintained for directors and premises managers. Regular on-going performance monitoring will be undertaken, designed to identify improvements to facilitate the service. The Management structure is provided in [Appendix 1](#).

3.1 The Trust Board

The Trust Board has a generic responsibility for all aspects of Health & Safety. Contractors working on Trust property pose a significant risk and the Trust Board, therefore, has a responsibility to ensure that there is an approved Policy for the Operational Management and is available to minimise that risk.

3.2 The Chief Executive

The Chief Executive is responsible for ensuring that there is a suitable management structure in place to manage the Estates & Facilities Operational Management Policy and its associated procedures. Responsibility for this is delegated to the Director of Estates and Facilities.

3.3 Director of Estates and Facilities

The Director of Estates and Facilities is accountable to the Chief Executive and Trust Board for ensuring that all who undertake work in connection with the maintenance of Trust's assets do so in accordance with the requirements set out within this policy. They are also responsible for ensuring services provided by external providers are appropriate, effective, efficient, safe and compliant with current statutory Legislation, Regulations and NHS Good Practice Guidance including Health and Safety and Infection Prevention and Control and that the risks are identified and managed as part of the Trust Governance Framework.

3.4 All Directors and Deputy Directors

All Directors and Deputy Directors have a responsibility for ensuring that their Care Group, wards and department managers are aware of the Policy & Procedures of the Trust and enforce their use within their own areas of responsibility.

3.5 Deputy Director of Estates and Facilities

The Deputy Director of Estates and Facilities is accountable to the Director of Estates and Facilities for ensuring that this policy and appropriate procedures and systems are in place to ensure that all staff and contractors' activities are conducted safely and in compliance with current legislation, regulations and good practice.

The Deputy Director shall ensure the Director of Estates and Facilities is kept informed at reasonable time intervals as to the effectiveness of the arrangements for the Management of Operational Services and shall report any serious deviations to and when they arise. The Deputy Director of Estates and Facilities shall ensure that regular audits are undertaken regarding the Estates and Facilities Operational Management Policy, including regular checks on adherence to the Trust Policies and Procedures.

The Deputy Director shall ensure an approved Contractors list is maintained, which will define all specific Contractors who provide services and maintain trust assets.

3.6 Heads of Estates / Facilities / Capital / Compliance/ MTS.

The Heads of Estates/ Facilities/ Capital/ Compliance are responsible to the Deputy Director of Estates and Facilities for ensuring that this policy and appropriate procedures and systems are in place to ensure that all staff and contractor's activities are conducted safely and in compliance with current legislation, regulations and good practice.

3.7 Managers or Leads of Estates / Facilities / Capital / Compliance/ MTS

The Estates / Facilities / Capital / Compliance/ MTS Managers and Leads are responsible to the Heads of Estates / Facilities / Capital / Compliance/ MTS for ensuring that this policy and appropriate procedures and systems are in place to ensure that all staff and contractors' activities are conducted safely and in compliance with current legislation, regulations and good practice.

Estates / Facilities / Capital / Compliance/ MTS Managers and Leads hold the day-to-day management responsibility for ensuring that all staff and contractors carry out their duties in the Trusts Service's and Maintenance activities and, as such, carry a responsibility to be aware of, and familiar with the Estates and Facilities Operational Management Policy. They should make every endeavour to ensure that they, and staff under their control, comply with the relevant documentation.

They all hold a responsibility to ensure that specific work undertaken by their Staff and Contractors under their control is undertaken safely and in accordance with applicable legislation regulations and good practice and will.

- Plan, organise, lead, monitor and control all activities undertaken by directly employed staff and service contractors.
- ensure that suitable and sufficient communication occurs between the Directorate's Operational function and service recipients and other key stakeholders, such as the Infection Prevention and Control Team (IPCT).

It is the responsibility of the person commissioning or managing the contractors to ensure that meetings are held prior to the start of any work. During the meeting the contractor must provide details of how they intend to carry out any work and the risks associated with that work, to ascertain whether any precautions need to be taken before or during the work. Permit to work systems may be required for some types of work, these methods of work must be agreed and documented prior to commencement of the work.

Each manager in areas where contractors are working must be made aware of any hazards and risks presented by the work and relevant safety measures, as well as ensuring contractors are made aware of risks that may be present in the area they are working.

Where there is the potential for the work to impact on the delivery of patient care or where the work takes place in the proximity of a clinical area, advice must be sought from the Trust Infection Control Team. Any deviations from planned work programmes or delays in reactive work, other than those of a minor nature, will be reported to the Deputy Director of Estates and Facilities and the Capital Projects Manager and, if appropriate, directly to the relevant specialist team (Fire officer, IPCT etc.). The Estates and Facilities Managers will review the program of work annually.

3.8 Estates and Facilities Officers and Supervisors

Estates and Facilities Officers and Supervisors hold the day-to-day responsibility for ensuring that all relevant Services and Maintenance is planned and satisfactorily completed, either by their direct staff team or by contractors under their control, in a timely manner. They will arrange all necessary actions to remedy any faults or deficiencies found during these activities. Where appropriate, the Estates and Facilities Managers will be notified and informed of any remedial action taken.

3.9 Sustainability and Energy Management

Sustainability and Energy Management is responsibility of the Deputy Director of Estates and Facilities and the Estates Management. They are responsible for monitoring and reporting of energy and utilities consumption, expenditure and for improving the operating efficiency of the estate in matters of site infrastructure, building fabric, and mechanical and electrical systems. The Energy Manager has direct overall responsibility and accountability for the Building Management Systems and any systems controls affecting the energy or utility consumption of a building facility.

Accountable to the Director of Estates and Facilities.

The Sustainability and Energy Manager is responsible for producing the Green Plan which includes the Energy and Carbon Management Strategy and forms part of Sustainable and Site Development Management Plans that are to be approved by the Board. The Green plan can be viewed on the trust intranet or in the d:/

The Sustainability and Energy Management will provide all necessary data for any NHS returns such as Estates Returns Information Collection (ERIC).

The Sustainability and Energy Management reviews all design and proposed changes to site infrastructure that affects Energy and Utility consumption, including insulation, heating and cooling systems and directs Estates BMS staff in the correct operation of the BMS and Energy controls and equipment.

3.10 Estates Authorised/ Competent Persons

Where a trust employee is deemed to be undertaking “Authorised Person” or “Competent Person” duties under the definition of either legal or Health Technical Memorandum (HTM) procedures, the individual will be suitably trained, qualified, experienced, knowledgeable and can demonstrate specific skills in the service being provided. The Authorised Person will be required to be assessed – or deemed to be competent by the Authorising Engineer. An Authorised or Competent Person could be appointment made to a contractor or contractor organisation. An Authorised or Competent Person is not simply deemed to be Authorised or Competent by virtue of being employed by an approved contractor organisation.

3.11 Authorising Engineers

Authorising Engineers (AEs) are independent of the Trust and are appointed by the Chief Executive. The AE will independently audit the effective implementation of the safe systems of work against identified within guidance Health Technical Memorandums (HTM) Suite of documentation and provide an annual audit report to Director of Estates & Facilities.

Included in the audit the AE will assess the suitable and sufficient adequacy of: -

- Staff competencies and training AP`s and CP`s
- Appropriate maintenance schedules and records (including drawings)
- Review the electronic operation and maintenance manuals
- Current Risk assessments and action plans
- Program of Improvement works
- Trust Safety procedures
- Permits to Work and Method Statements Suitability and state/condition of plant and equipment
- Reporting procedures and safety alerts actions and records
- Assessing and recommending appointments of APs
- Other fire Safety issues that are deemed relevant by the AE.

A list of AEs (where appropriate) against relevant disciplines can be obtained from the Deputy Director of Estates & Facilities.

3.12 Transport Manager

The Transport Manager is responsible to the Head of Compliance and Manages the Fleet and Logistics services on behalf of the Trust. The Transport Manager will ensure that all drivers and logistics staff activities are conducted safely and in compliance with current transport legislation, regulations, and good practice and that this Policy and appropriate procedures and systems are in place.

3.13 Service Contracts Managers

The service contracts Managers are responsible to the service Leads to monitor the performance of the contracts and contractors and report any deviations from the contract specification either Financial or Performance terms.

These contracts include the following services: -

- Catering Service Contract.
- Laundry Services Contract.
- Decontamination Services Contract.
- Security & Car Parking Services Contract.
- Waste Management.
- Pest Control.

3.14 Other Staff

All employees who may be required to organise, work alongside, or assist contractors have a responsibility to co-operate with their line manager in using the Trust's Estates and Facilities Operational Policy and to participate, where required in any relevant training.

All staff have a duty to look after their own safety and that of others affected by their acts or omissions, and therefore must co-operate with management in following agreed procedures when contractors are undertaking work on behalf of the Trust.

3.15 Health and Safety Adviser

The Health and Safety Manager will work closely with those responsible for the Estates and Facilities Operational Management Policy in the provision of advice and practical assistance in all matters for health and safety.

3.16 Fire Safety Adviser

The Fire Safety Advisor will work closely with those responsible for the Estates and Facilities Operational Management Policy in the provision of advice and practical assistance in all matters relating to Fire safety.

3.17 Local Security Management Specialist

The Local Security Management Specialist (LSMS) will work closely with those responsible for the Estates and Facilities Operational Management Policy in the provision of advice and practical assistance in all matters relating to Security Management.

3.18 Infection, Prevention and Control Team

The Infection, Prevention and Control Team is responsible for providing advice on matters relating to infection, prevention and control and the risks which could arise as a result of construction work in clinical areas. The Infection, Prevention and Control Team will be responsible for performing audits in clinical areas during the construction/alteration work to ensure that the highest standards of infection, prevention and control are maintained throughout the work.

3.19 Contractors

Contractors are responsible for ensuring compliance with all Health and Safety procedures and legislative requirements. Contractors working on premises, which are leased out, to another Trust must, in addition to the Trust procedures, set out in this policy, follow any relevant policies on Health and Safety Management that the occupying Trust has in place. Non-compliance with any of these policies may result in termination of the contract. The Contractor must also ensure that they do not interfere with the day-to-day operation of the departments or site.

All contractors either visiting or working on any of the Trust's properties will ensure all their employees on the Trusts site have either Reset Certification Scheme (RCS) ID badges or ID badges which includes company name, employees name and photograph and must have a Contractors pass or a Permit to Commence Work document supplied by the Trust. Additional permits are in existence to cover different types of work activities on various specialist / hazardous pieces of equipment or systems. The Trust's Representative who is responsible for a given project/work will under normal circumstances be the first person to contact in respect of any necessary Permits and any issues associated with the work.

Risk Assessments Method Statements and Safe Systems of Work are the responsibility of the Contractor unless work is being carried out jointly with Trust personnel. In such cases the safe system of work must first be approved by the Trust's representatives. Contractors working on behalf of the Foundation Trust must be registered on the Trusts "Approved list of Contractors" and appointed as competent for the task. They will comply with the Trusts Policy and Procedures for the Operational Management, Trust Policy and Procedure for the Management and Control of Contractors. Trusts Policy and Procedure for the Permit to Work Policy and all other trust policies for which they have been appointed.

If the Main Contractor intend to use any other sub-contractors or self-employed individuals to provide services to the Trust these must also be registered with RCS and follow all

instruction as required by the Trust for the Contractor and be approved by the Trust. They can register and subscribe themselves as companies or individuals.

The Contractor will also ensure that his activities will not endanger members of the public or Trust employees working in the location of the works and will ensure that all accidents or incidents are reported to the relevant member of the Estates and Facilities Compliance Team.

4 PROCEDURE

4.1 Service Delivery

Within Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust the Key area's to ensure the delivery of high-quality services which are as follows:

- Customer Services Helpdesk (see section 4.2 below).
- Service Contracts.
- Additional / Minor Works
- Delivery of monthly, quarterly and annual performance monitoring.
- Assist in the management of electronic filing of all estates technical service reports for all critical and key building services.
- Estates and Facilities Information, Labour and asset Management System (Planet FM)
- Reactive Maintenance, this element is a repair service actioned normally by Estates and Facilities Management staff or user departments and comprises of Emergency repairs (Priority 1), Urgent repairs (Priority 2) and Routine repairs (Priority 3)
- Planned Preventative Maintenance (PPM), this element avoids breakdown of crucial plant and equipment, maintains safety standards and statutory compliance and enables activities to be planned, thus keeping disruption to services to a minimum.

4.2 Customer Services Helpdesk

The Estates and Facilities infrastructure shall provide an effective, flexible and efficient Helpdesk Service which forms part of Customer Services through normal working hours. Monday to Friday 08:00 – 16:00hrs excluding Bank holidays. The helpdesk can be contacted by phone on 01302 643555 to log emergency and urgent job, giving details of exact location (which can be found on the door sticker) and giving as much information as possible.

The department has a 24/7 on-line helpdesk service for Non-Urgent Calls which can be accessed via the Hive intranet site by selecting [‘Log an Estates Job’](#).

Helpdesk can also be contacted via e-mail for Non-Urgent jobs to be logged or for general enquires at dbth.estateshelpdesk@nhs.net.

All Jobs logged on the Trust CAFM system 'Planet FM' will generate an e-mail to the caller confirming the call and again when the call has been closed. There is a link on this e-mail for callers to leave feedback regarding the service Estates & Facilities have provided.

The Trust operates an emergency 'on call' system for out-of-hours emergencies that is accessed via the switchboard. Switchboard will pass the call on to an Estates and Facilities on-call Manager for action.

4.3 Estates and Facilities Compliance Team

The Estates and Facilities Compliance Management team provide detail of the Performance and information for all sections within the Estates and Facilities function.

The Directorate has the responsibility to provide Health & Safety and Fire Safety advice to the other Directorates.

Transport Fleet and Logistics Management, Security and Car Parking contract are also managed under the Compliance Management Team.

The Compliance Management team are responsible for ensuring suitable systems and processes are in place to provide assurance to Trust Board of Directors of compliance with all Statutory, Regulatory and NHS requirements where appropriate.

The Compliance Management team is responsible for the completion of the Premises Assurance model (PAM) with co-operation and information provided from all functions within the Estates and Facilities Directorate and stakeholder.

The Compliance Management team is responsible for gathering and collating Estates and Facilities Estates Returns Information Collection (ERIC) Returns and submission to NHS England/Improvement (NHSE/I).

The Compliance Management team is responsible for the development of specialised policies and procedures for all compliance services for the Estates and Facilities Directorate following the Trust approved format, ensuring policy and procedure implementation following Trust policy approval.

4.4 Facilities Services

The Facilities Services Team manage the soft services within the Trust. The Facilities service is provided by an in-house team and external contracts. All services are monitored and reported in the quarterly Estates and Facilities performance report.

Catering Services are provided under a Service Level Agreement with Sodexo which is contractual monitored and reported under BDGH Facilities Lead.

Cleaning & deep cleaning services are provided with an in-house service under the control of a Facilities Lead. The service is monitored through cleanliness audits for each site and reported quarterly in the Estates and Facilities Performance report

An external provider is used to provide pest control services to the Trust which is managed internally by the Facilities Lead on each site.

The portering service are provided with an in-house service under the control of a Facilities Lead. This is controlled and monitored with the aid of the 'Tele-tracking automated system' which enables stakeholders to log movement requests onto the system and reports on the performance of patient movement tasks completed.

The laundry and linen service is provided by an external contractor and managed by the Facilities Lead. The service provider delivers fresh linen in bulk which is distributed to wards & departments by the in-house Facilities team. Soiled linen is collected from wards & department by the Facilities Staff and delivered to a central location on each site to enable collection by the external provider for reprocessing. The Facilities team have a laundry supervisor to ensure the users of the service have a point of contact and emergency supplies when required.

The post room services are provided by an in-house team managed by the Facilities Leads.

Estates and Facilities general administration services are managed under the Facilities Leads and Managers.

Waste disposal for confidential, clinical, domestic, sharps and cytotoxic waste streams is managed under a contract with Sharpsmart who provide all collection and delivery services and the equipment associated the service. The Facilities Team has a dedicated Waste Manager who monitors the contract.

The Trust accommodation booking service is provided through the Facilities Team via an accommodation officer. The occupancy is reported to the Trust board through the quarterly Estates and Facilities performance report.

Facilities Services input data into the Premises Assurance Model (PAM).

4.5 Estates Operational Services

The Estates Operational Services is provided in the following framework: -

- The service is delivered using a mix of in-house skills, subcontract, and specialist subcontract resource.
- Service support includes Helpdesk using bespoke Facilities Management Software (Planet FM).
- The service is provided from 08:00 to 16:00 hours Monday to Friday excluding bank holidays with 24-hour call-out facility for emergencies at all other times.

- Technical expertise is available from qualified professional staff from a range of construction, building, engineering and service backgrounds.
- The Estates Department will seek to manage all contractors on the trusts sites through policies and procedures, to enable good control and audit of contractors. Method statements and risk assessments will be in place when required and the contractor will be managed by an appropriate Estates Manager or Officer.
- Ensure systems and assets are maintained, meeting legislative requirements and in accordance with all HTM's HBN'S and any other relevant guidance issued by Department of Health.
- Estates Operational Services input data into the Premises Assurance Model (PAM).

4.6 Estates Capital Services

The Capital Projects Team is a project management function with no internal design capability. The team is therefore made up of project management personnel and other external advisor's dependent upon the stage of each project. The delivery of the service is provided through the following framework: -

- The Head of Capital Projects will author and implement the process and determine appropriate resourcing in order that the requirements of the process can be achieved within the overall mission statement and goals of the team and the wider Estates and Facilities function. To carry out a periodic review of the process in order to update in connection with changes in delivery or any other financial or quality related issues.
- The Head of Capital Projects will appropriate the requisite staffing in order to deliver the schemes to include the appropriate design delivery teams, which will be chargeable to each project, including architect, mechanical and electrical design, quantity surveyors, structural engineers, principal designers and clerk of works etc.
- Funding will be set aside annually to assist in the delivery of feasibilities in connection with approved Capital Project Initiation Documents (CPIDs) including architectural support and cost advice (QS) for budgetary purposes.
- Further QS support will also be required to assist with monthly cash flow and potentially accruals depending upon the volume of work at the time.
- Ensure systems are designed, constructed, commissioned and handover, meeting the most recent legislative requirements and in accordance with all HTM's HBN'S and any other relevant guidance issued by Department of Health.
- Capital Project Team will deliver capital schemes and carry out other support works, to deliver feasibility and cost advice to our Trust's Divisions and Departments.
- Estates Capital Services input data into the Premises Assurance Model (PAM).

4.7 Medical Technical Services (MTS)

Medical Technical Services manage the medical devices for the Trust. The MTS service is provided by an in-house team of Medical Engineers/ Technicians and external contactors for specialised medical equipment. The contract is managed in conjunction with the procurement department, the service provided is as follows:-

- Medical devices maintenance contracts via the Procurement department.
- Medical Equipment Library (MEL).
- Medical Equipment Planned Preventative Maintenance (PPM)
- Medical equipment Reactive Maintenance
- Procure/management of medical gases contracts.
- Manage the Trusts Medical Devices Safety Office and the flow of MHRA alerts and manufacturers Field Safety Action Notices throughout the Trust.
- De-contamination Services (Steris).

The Management of all medical device contracts are monitored via an Excel spreadsheet, this is managed on a continual basis by the departments Administrative Lead in close co-operation with Procurement.

All work that a contractor undertakes is recorded on Helpdesk using bespoke Facilities Management Software Planet Enterprise asset management system database and reported Quarterly in the Estates and Facilities Performance report.

Quarterly/annual review meetings are carried out with contractors where the contract is of a large value.

Note: Imaging devices are under the management of the Imaging department and come under their own management arrangements.

The MTS Chair and Co-chair a number of Management Groups within the Trust as follows: -

- Chair the Medical Devices Management Group (MDMG) that oversees the management/governance of medical devices and manage the standardisation of medical devices.
- Co-Chair the Medical Equipment Group (MEG) that oversees the capital spend on medical devices throughout the year.
- Co-Chair the Trusts Medical Devices Decontamination Group (MDDG) that oversees cleaning/decontamination of medical devices and provide the Trusts Approved Person (Decontamination) (AP(D)).

The MTS Management is the author of the Trust's Medical Devices Management policy, the Medical Gas Pipeline Policy and the Mobile Communications Policy.

MTS input data into the Premises Assurance Model (PAM) for medical devices and decontamination.

4.8 Estates Reactive Maintenance

The Trusts reactive Maintenance is recorded and managed through the Helpdesk using bespoke Facilities Management Software (Planet FM) and a Computer Aided Facilities Management (CAFM) system. It categorises activities on a priority basis. These priorities are as follows:

- Priority 1: Immediate (Emergency)
- Examples of Priority 1 response include but not limited to a breakdown or occurrence makes it impossible to adequately treat, look after, or maintain a safe environment for the patient (such as loss of electricity, or flood) or where it has a

high impact on health and safety or when delay in attending could cause serious damage, or endanger security.

- **Priority 2: Same Day Response (Urgent)**
Examples of Priority 2 response include but not limited to, Health and safety issues, Disruption to activity, Minor electricity supply failure, Fire alarm faults, Heating and hot water system failure, Minor floods, Drain/Macerator blockages, Roof leaks, Glazing and Vandalism and break-ins presenting safety or security risk.
- **Priority 4: Five Day Response**
Examples of Priority 4 response include but not limited to repairs which have a potential to affect the service not covered by priority 1 and 2.
- **Priority 5: More than Seven Day Response**
Examples of Priority 5 response include but are not limited to repairs than are of a more superficial nature or new work.

4.9 Planned Preventative Maintenance (PPM)

Planned Preventative Maintenance is managed via the Helpdesk using bespoke Facilities Management Software (Planet FM) and a Computer Aided Facilities Management (CAFM) system.

All Planned Preventative Maintenance (PPM) are assessed on a risk basis.

The PPM System enables agreed statutory obligations to be fulfilled and is designed to provide the most cost-effective method of maintaining buildings, existing plant, services and equipment for maximum economic life.

PPM is undertaken in line with all necessary Health Technical Memorandums and customer requirements. The main categories of PPM are:

- Mandatory (e.g. health and safety requirements)
- Statutory (legal, technical memorandums, MHRA) requirements
- Customer requirements

The categories of activities are based on priority. These priorities are: -

- **Priority 3:** PPM tasks to meet Statutory and Mandatory Regulations.
- **Priority 5:** PPM tasks that could affect service delivery and which are not covered by Priority 1 or 2.
- **Priority 6:** PPM tasks that will not affect service delivery but would compromise the safety of the sites if not done frequently.

The PPM program will be reviewed annually by the Estates, Facilities and Medical Technical Managers to ensure that necessary statutory, mandatory and customer requirements are

covered. Any gaps in the PPM program will be identified by the Estates, Facilities and Medical Technical Managers and added to the Departmental or Divisional Risk Register for adequate management of potential risks. If the risks are serious, these gaps may also be reported to the appropriate governance committee.

Estates, Facilities and MTS staff and/or contractors undertaking PPM or reactive work will ensure that safe systems of work are always adhered to. These systems will include all necessary infection prevention and control policies and procedures. In addition, the Estates, Facilities and MTS team will attend regular infection prevention and control training and be fully trained in safe systems of working in clinical environments. Records of training will be held on the individual's personal record and on an Estates and Facilities Personnel risk register

4.10 Performance Monitoring

The Estates, Facilities and MTS managers will monitor helpdesk activity and generate weekly activity and performance reports on calls logged and feedback received. These are accessible centrally on the Estates shared drive.

Performance monitoring is derived from a range of sources, primarily from the performance monitoring report compiled weekly but also via regular liaison meetings, departmental meetings, day-to-day contact with users in the execution of the service, and service-contractor meetings (normally quarterly).

Additionally, Estates, Facilities and MTS shall produce internal annual audits based on key performance indicators. These are identified in [Appendix 2](#).

Performance of Estates Functions will be monitored as a 'Key Performance Indicator' (KPI). It will be given as a percentage of work completed as in sections 4.8 and 4.9 against Priority Categories 4, 5 and 6. KPI reports also include any backlog and PPMs missed.

4.11 Financial Management

Estates and Facilities staff operates under the Trusts Standing orders CORP/FIN 1(A) and the Trust's Standing Financial Instructions CORP/FIN 1(B)

Authority and delegations

Capital Investment	Building work, equipment, software etc.
Up to £100k Executive Director or Divisional Director Must be approved by Capital Control Group or Medical Equipment Group	Equipment Group and be in accordance with the Capital Projects Framework

Tendering Process		
Organising tender	Head of Procurement, Director of Estates and Facilities, Head of Capital	
Receiving tenders	Director of Finance	
Opening and recording tenders	Executive Director designated by the Chief Executive. All tenders to be sent and received via the e-tendering platform "Atamis".	
Adjudication decision	Head of Procurement Director of Estates and Facilities, Head of Capital	The award should be based on Price and Quality of the compliant tender. The Amount (£) Delegated to Capital Project Manager. Adjudicating manager shall define decision criteria with approval from Head of Capital and/ or Head of Estates Services and document in tenders and Tender reviews.

Written quotations	
£5k to £50K	3 written quotations

Formal Tender process	
£50k – OJEU threshold	3 Formal Tenders via the e-portal "Atamis"
Above OJEU threshold	OJEU Tender – Legal requirements to publish in EU official journal – advice from the Head of Procurement

Single Tenders (Waiver)		
Single Tender/Quotation	£5k to OJEU	Director Estates & Facilities to approve Waiver Form (provided by Supplies) - for Building Works, Maintenance, Fixtures and Fittings.
In all cases a Waiver Form with a Supplies generated unique Waiver Reference code/number is to be completed and signed.		

Measured Term Contracts (MTC) Framework	
MTC Lite	£0 - £49,999
MTC Lot 1	£50,0000- £999,999
MTC Lot 2	£1,000,000 - £5,000,000

5 TRAINING/SUPPORT

The Standard Training Needs Analysis (TNA) – The training requirements of staff will be identified through a training needs analysis. Role specific education will be delivered by the service lead.

5.1 Trust Mandatory Training

Staff are required to undergo mandatory Trust induction and refresher training. These training records are held centrally by the ESR (Electronic Staff Records) administered by the Training Department.

All staff are subject to thorough a training program, including the following which is not exclusive:

Health & Safety – fire safety, Conflict resolution, Moving and Handling, SET Awareness, Fraud Awareness, Equality diversity and Human rights, Infection Prevention and control, Information Governance and Data Security, Safeguarding Adults, Safeguarding Children.

5.2 Specialised Training

In addition to general trade and professional qualifications, specific staff are required to have initial and refresher training appropriate to the systems or disciplines. This includes training on preparation and approval of risk assessments; method statements and permits to work.

Under Health & Safety the training can include for example lone working, working at heights, confined spaces, asbestos awareness, risk and COSHH assessments, manual handling, slips, trips and falls, Personal Protective Equipment, use of work equipment, noise and vibration, permits to work, hot work, confined space etc. The staff who require this specific training are identified and training is provided.

Estates and Facilities operates a Safe Systems of Work under the Health Technical Memorandums (HTM's) - Policies and principles of healthcare engineering, - that replicates the responsible/delegated person tasks and duties within Estates and Facilities as a named point of contact and lead for a particular discipline. This appointment also has an independent auditor/advisor (AE); and identifies Authorised and Competent Persons. Specialised training is given to those who carry out duties where appointment of Authorised Persons (AP's) and Competent persons (CP's) in accordance with HTM guidance for Electrical

systems, Medical Gas, Fire Safety, Heating and Ventilation, Passenger Lifts, Water Hygiene and Decontamination.

The training requirements of staff will be identified through a training needs analysis. Monitoring and planning of specific individuals training and skills development is discussed and agreed using the Trust's Appraisal Specific educational needs will be determined by the Heads of Service.

Each Department within the Estates and Facilities has a training Matrix which can be obtained from the Head of Service.

6 MONITORING COMPLIANCE WITH THE PROCEDURAL DOCUMENT

What is being Monitored	Who will carry out the Monitoring	How often	How Reviewed/ Where reported to
The Monitor and Compliance and Effectiveness of this Policy	Risk and Governance Facilitator	Annually	Action plan with timeline. To the Director of Estates & Facilities
Review of Policy	Deputy Director of Estates & Facilities	3 Yearly or when significant change to process	Approval from Estates & Facilities SMT and Estates and Facilities Committee
Monitor Approved Contractors Register.	Head of Estates & Facilities Compliance	Annually	Action plan with timeline. To the Director of Estates & Facilities
Monitoring of Facilities Service Contracts: - Catering, Waste, and Cleanliness	Head of Facilities	Monthly	Monthly Performance reviews with contractors, Quarterly KPI reports to the Finance and Performance Committee
Monitoring of Facilities Service Contracts: - Security and Parking,	Head of Estates & Facilities Compliance	Quarterly	Quarterly Performance reviews with contractors, Quarterly KPI reports to the Finance and Performance Committee
Monitoring of Maintenance Service Contracts	Head of Estates	Quarterly	Quarterly Performance reviews with contractors, Quarterly KPI reports to the Finance and Performance Committee

Monitoring of MTS Contracts: - Medical Devices	Head of MTS	Quarterly	Quarterly KPI reports to the Finance and Performance Committee
Monitoring of MTS. MHRA Alerts FSNA's	Head of MTS	Monthly /Quarterly	Monthly reports to the Director of Estates & Facilities, Quarterly KPI reports to the Finance and Performance Committee
Monitoring of MTS Contracts:- De-contamination (Steris)	Head of MTS	Monthly /Quarterly	Monthly Reports to the Head of MTS, Quarterly KPI reports to the Finance and Performance Committee
Monitor Competent Persons Register	Head of Estates & Facilities Compliance	Annually	Action plan with timeline. To the Operational Director of Estates & Facilities
Review of Planned Preventative Maintenance (PPM) Schedules	Head of Estates.	Annually	Action plan with timeline. To the Operational Director of Estates & Facilities
Audit of Labour Management System	Head of Estates & Facilities Compliance	Annually	Action plan with timeline. To the Director of Estates & Facilities.
ERIC Returns	Head of Estates & Facilities Compliance	Annually	Annual Submission to DoH. Director of Finance and Director of Estates and Facilities
Premises Assurance Model (PAM)	Head of Estates & Facilities Compliance	Annually	(PAM) Submission to the DoH. Action plan with timeline. To the Operational Director of Estates & Facilities

Design Consultants - Architects, Building Surveyors, Engineers, QS's and other consultants, should be registered with an appropriate Professional Institutions (RIBA, ICE, IMechE, RICS etc) and have appropriate quality assurance (e.g. ISO 9000).

Contractors – membership of a recognised trade body (ECA / NICEIC, Building & Engineering Services Association (formerly HVCA), Institute of Plumbing, FMB etc) and have membership of a trade safety organisation (e.g. CHAS). Contractors must be CIS registered.

Expenditure vs. Budgets are monitored monthly and discussed at the monthly Divisional Team Meeting with the Division's management accountant.

The Matrix for the Key Performance Indicators (KPI's) for Estates and Facilities can be seen in [Appendix 2](#).

7 DEFINITIONS

ERIC- Estates Returns Information Collection.
 HTM – Health Technical Memorandum.
 IG – Information Governance.
 IPCT – Infection Prevention and Control Team.
 MTS – Medical Technical Services.
 PDA – Appraisal.
 SET – Statutory and Essential Training

8 EQUALITY IMPACT ASSESSMENT

The Trust aims to design and implement services, policies and measures that meet the diverse needs of our service, population and workforce, ensuring that none are disadvantaged over others. Our objectives and responsibilities relating to equality and diversity are outlined within our equality schemes. When considering the needs and assessing the impact of a procedural document any discriminatory factors must be identified.

An Equality Impact Assessment (EIA) has been conducted on this procedural document in line with the principles of the Equality Analysis Policy (CORP/EMP 27) and the Fair Treatment for All Policy (CORP/EMP 4).

The purpose of the EIA is to minimise and if possible, remove any disproportionate impact on employees on the grounds of race, sex, disability, age, sexual orientation or religious belief. No detriment was identified. ([See Appendix 3](#))

9 ASSOCIATED TRUST PROCEDURAL DOCUMENTS

- [Health and Safety Policy Statement](#)
- [CORP/HSFS 3](#) – Lone Workers Policy
- [CORP/HSFS 4](#) – Manual Handling Policy
- [CORP/HSFS 7](#) – Control of Substances Hazardous to Health (COSHH) Guidance
- [CORP/HSFS 10 A](#) – Asbestos Policy
- [CORP/HSFS 10 B](#) – Asbestos Management Plan
- [CORP/HSFS 14](#) – Fire Safety Policy
- [CORP/HSFS 15](#) – Security Policy – incorporating Bomb Threat/Suspect Packages
- [CORP/HSFS 17 A](#) – Waste Management Policy
- [CORP/HSFS 21](#) – Ionising and Non-Ionising Radiations Safety Policy
- [CORP/HSFS 22](#) – Electronic Door Access Control and System Policy
- [CORP/HSFS 27](#) – Electrical Safety Policy
- [CORP/HSFS 28](#) – Window Management Policy
- [CORP/HSFS 30](#) – Management of Contractors Policy and Procedures

- [CORP/HSFS 31](#) – Permit to Work Policy and Procedures
- [CORP/HSFS 32](#) – Work at Height Policy
- [CORP/HSFS 33](#) – First Aid at Work Policy
- [CORP/HSFS 36A](#) – Water Safety Plan: Governance Policy
- [CORP/HSFS 36B](#) – DBTH Water Safety Plan Operations and Procedures Manual (WSP/Tech)
- [PAT/IC21](#) – Laundry Policy
- [CORP/HSFS15](#)- Security Policy
- [CORP/FIN 1\(A\)](#) – Finance Standing Orders
- [CORP/FIN 1 \(B\)](#)- Standing Financial Instructions
- [CORP/FAC 2](#) – Non-Emergency Trust Funded Transport (Internal Transportation)
- [CORP/FAC 3](#) – Medical Gas Systems Policy
- [CORP/FAC 7](#) – Hospital Catering Policy – Provision of Food to Patients, Staff and Visitors
- [CORP/FAC 11](#) – Use and Care of Trust Vehicles
- [CORP/FAC 13](#) – Capital Process, Procedure & Quality Policy (Estates & Facilities)
- [CORP/FAC 14](#) – Trust Accommodation Policy

This list is not exhaustive and is the responsibility of Staff and Contractor to ensure that they are conversant with all Trusts Policy's.

10 DATA PROTECTION

Any personal data processing associated with this policy will be carried out under 'Current data protection legislation' as in the Data Protection Act 2018 and the General Data Protection Regulation (GDPR) 2016).

For further information on data processing carried out by the trust, please refer to our Privacy Notices and other information which you can find on the trust website:

<https://www.dbth.nhs.uk/about-us/our-publications/uk-data-protection-legislation-eu-general-data-protection-regulation-gdpr/>

11 REFERENCES

The Management of Health and Safety at Work Regulations 1999
 Confined Space Regulations 1997
 Construction (Health, Safety & Welfare) Regulations 1996
 Control of Asbestos at Work Regulations 2012
 Health and Safety at Work act 1974
 Health and Safety (First Aid) Regulations 1981
 Electrical Safety, Quality and Continuity Regulations 2002
 Electromagnetic Compatibility Regulations 1992
 Provision & Use of Work Equipment Regulations 1998
 Health and Safety (first aid) Regulations 1981
 Personal Protective Equipment Regulations 2002
 Manual Handling Operations Regulations 1999

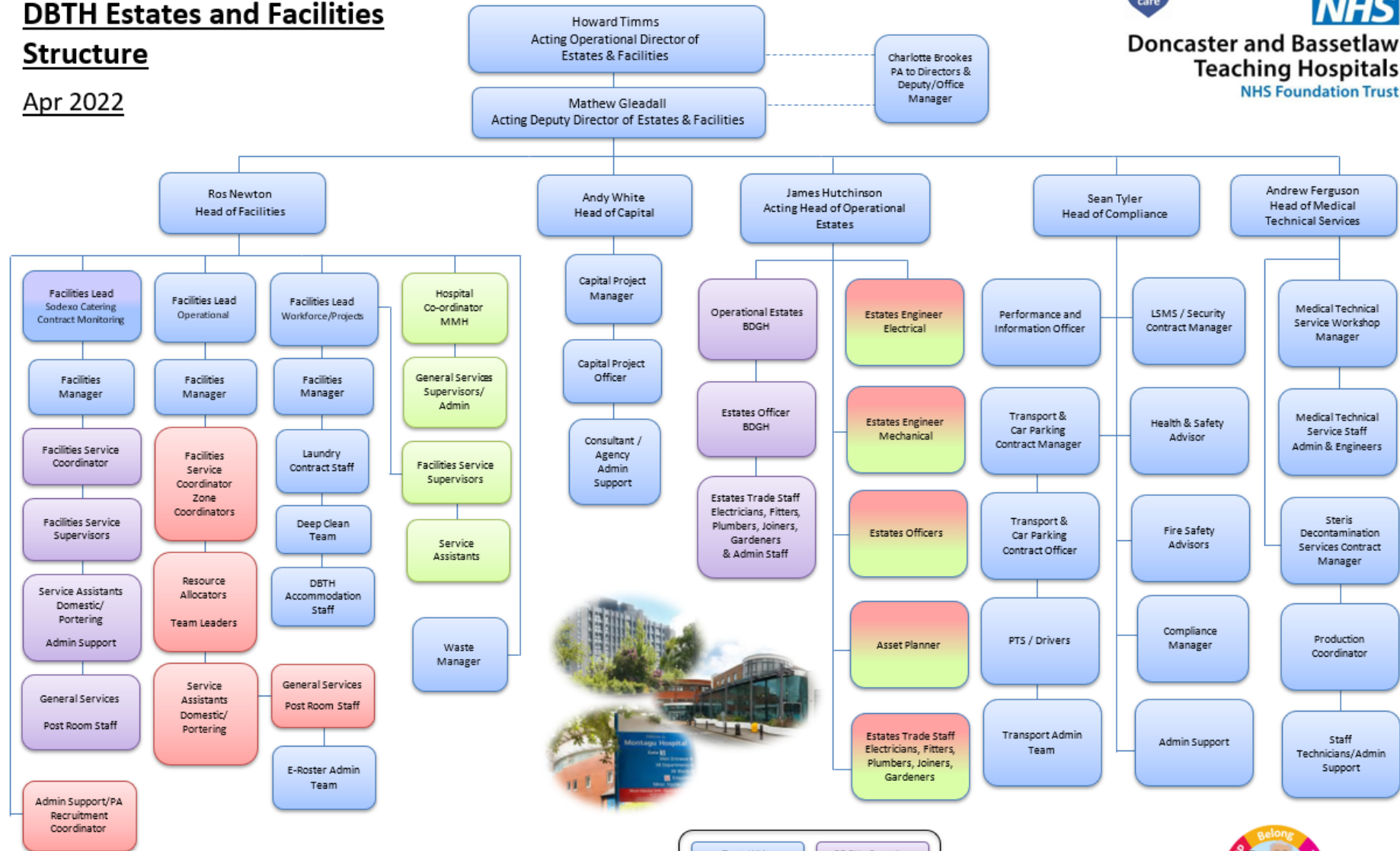
Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995
Confined Spaces Regulations 1997
Lifting Operations & Lifting Equipment Regulations (LOLER) 1998
Personal Protective Equipment at Work Regulations 1992
Provision and Use of Work/Equipment Regulations 1992
Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013
Pressure Systems Safety Regulations 2000
The Construction (Design and Management) Regulations 2015
The Electricity at Work Regulations 1989
The Noise at Work Regulations 1989
The Working at Height Regulations 2005
Mental Capacity Act (2005): Code of Practice, 2007 www.dca.gov.uk

This list is not exhaustive and is the responsibility of Staff and Contractor to ensure that they are conversant with all relevant legislation.

APPENDIX 1 – ESTATES & FACILITIES MANAGEMENT STRUCTURE

DBTH Estates and Facilities Structure

Apr 2022



APPENDIX 2 – KEY PERFORMANCE INDICATORS (KPI'S)

Key Performance Indicators (KPI's)

Performance Measure	KPI Target
Staff Appraisals	90%
Statutory and Essential Training (SET)	90%
Sickness Absence	3.5%
Catering Satisfaction	95%
Cleaning Audits DRI	90%
Cleaning Audits BDGH	90%
Cleaning Audits MMH	90%
Portering Response DRI	Complete within 30 mins
Portering Response BDGH	Complete within 30 mins
Portering Response MMH	Complete within 30 mins
Estates PPM DRI/ MMH	None
Estates PPM BDGH	None
Estates Reactive DRI/ MMH	90% Cat 1
Estates Reactive BDGH	90% Cat 1
MTS DRI	100%
MTS BDGH	100%
MTS MMH	100%
Security Contract	KPI's met to contract
Sterile Services Contract	KPI's met to contract
Waste Contract	KPI's met to contract
Accommodation Occupancy	80%

APPENDIX 3 - EQUALITY IMPACT ASSESSMENT PART 1 INITIAL SCREENING

Service/Function/Policy/Project/Strategy	Division	Assessor (s)	New or Existing Service or Policy?	Date of Assessment
Estates and Facilities Operational Management	Estates and Facilities	Sean Tyler	New Policy	12/07/2022
1) Who is responsible for this policy? Name of Division/Directorate: Estates and Facilities				
2) Describe the purpose of the service / function / policy / project / strategy? Who is it intended to benefit? What are the intended outcomes? This policy is intended to represent a clear undertaking by the Estates, Facilities and the Medical Technical Services (MTS) for the Estates and Facilities Directorate to carry out a range of specified services to the standard and level detailed in this document.				
3) Are there any associated objectives? Legislation, targets national expectation, standards: H&S at Work Act 1974, all associated Legislation, ACOPS, Health Technical Memorandum (HTM's) and Health Building Notes (HBN's)				
4) What factors contribute or detract from achieving intended outcomes? – Provision of suitable and sufficient financial resource to achieve intended outcomes.				
5) Does the policy have an impact in terms of age, race, disability, gender, gender reassignment, sexual orientation, marriage/civil partnership, maternity/pregnancy and religion/belief? Details: [see Equality Impact Assessment Guidance] - No				
<ul style="list-style-type: none"> • If yes, please describe current or planned activities to address the impact [e.g. Monitoring, consultation] – N/A 				
6) Is there any scope for new measures which would promote equality? [any actions to be taken] – N/A				
7) Are any of the following groups adversely affected by the policy?				
Protected Characteristics	Affected?	Impact		
a) Age	No	N/A		
b) Disability	No	N/A		
c) Gender	No	N/A		
d) Gender Reassignment	No	N/A		
e) Marriage/Civil Partnership	No	N/A		
f) Maternity/Pregnancy	No	N/A		
g) Race	No	N/A		
h) Religion/Belief	No	N/A		
i) Sexual Orientation	No	N/A		
8) Provide the Equality Rating of the service / function /policy / project / strategy – tick (✓) outcome box				
Outcome 1 ✓	Outcome 2	Outcome 3	Outcome 4	
*If you have rated the policy as having an outcome of 2, 3 or 4, it is necessary to carry out a detailed assessment and complete a Detailed Equality Analysis form – see CORP/EMP 27.				
Date for next review: 15/11/2025				
Checked by: Howard Timms		Date: 20/07/2022		

