

SHEFFIELD TEACHING HOSPITALS NHS FOUNDATION TRUST

EXECUTIVE SUMMARY

REPORT TO THE BOARD OF DIRECTORS MEETING

HELD ON 23rd JULY 2024

Subject	2024/25 Capital Programme and 5 Year Plan - Quarter 1 Update
Supporting TEG Member	Louisa Cowell, Chief Finance Officer
Author	Julie Wright, Deputy Chief Finance Officer (Financial Accounting)
Status¹	A/N

PURPOSE OF THE REPORT

To provide an update on the 2024/25 Capital Programme and 5 Year Capital Plan.

KEY POINTS

- The current funding available for the 2024/25 capital programme is £60.2m as at July 2024.
- The current forecast spend against this funding is £60.2m, therefore the programme is currently breakeven (with a minor £25k over commitment) against available resources.
- This compares to a £1.5m forecast over-commitment at plan stage, the change predominantly due to a reduction in the level of spend required to be included in the 2024/25 plan for schemes that have slipped from 2023/24 (largely made possible by the issue of late funding cover issued in 2023/24).
- The EPR and SYB Pathology Network LIMS schemes are major programmes to be managed with £20.3m of spend planned for 2024/25. These two schemes represent one third of the programme for the year. The schemes are complex and challenging and close management will be required throughout the year.
- It is again highly likely to be challenging to deliver the exact level of spend in the year to match available resources, with early indications of a reasonable level of slippage risks. Slippage management alongside contingency development will be crucial in ensuring an acceptable position for 2024/25 is achieved.
- The current position for 2025/26 to 2026/27 suggests little flexibility for new starts unless future funding opportunities are identified. However, work to review the longer-term Capital Plan and determine priorities for subsequent years when the funding position appears more promising is planned in the coming months.
- The one-off £5m capital allocation secured for 2024/25 is not yet reflected in the Capital Programme, although a bidding process for potential bids has recently been released.
- Capital planning/prioritisation and scheme “value engineering” continue to be crucial in securing maximum value for money from constrained resources in the short and long term.

IMPLICATIONS²

Aim of the STHFT Corporate Strategy		Tick as appropriate
1	Deliver the Best Clinical Outcomes	✓
2	Provide Patient Centred Services	✓
3	Employ Caring and Cared for Staff	✓
4	Spend Public Money Wisely	✓

5	Deliver Excellent Research, Education & Innovation	✓
6	Create a Sustainable Organisation	✓

RECOMMENDATIONS

The Board of Directors are asked to:

- Approve the latest 2024/25 Capital Programme and note the required actions to ensure available 2024/25 funding is fully utilised.
- Note the challenges for development of the 2025/26 Capital Programme and 5-year plan, which will be progressed through the Business Planning round.

APPROVAL PROCESS

Meeting	Date	Approved Y/N

¹ Status: A = Approval
D = Debate
N = Note

Against the six aims of the STHFT Corporate Strategy 'Making a Difference – The next Chapter 2022-27'.

SHEFFIELD TEACHING HOSPITALS NHS FOUNDATION TRUST

BOARD OF DIRECTORS 23rd JULY 2024

2024/25 CAPITAL PROGRAMME AND 5 YEAR PLAN – QUARTER 1 UPDATE

1. INTRODUCTION

- 1.1 This report commences the process of monitoring progress on the Trust's 2024/25 Capital Programme and 5 Year Plan. It considers the position at mid-July 2024 and outlines the major changes since the 2024/25 Capital Plan was considered by the Trust Board in March 2024.
- 1.2 The "new" capital regime remains in place with Operational Capital Allocations (OCA) and the requirement for capital planning and monitoring arrangements to operate within rigid annual capital allocations. Whilst the 2024/25 Capital Programme is currently breakeven, there will inevitably be many challenges to land final expenditure very close to the OCA and fully utilise the available funding.
- 1.3 The current capital resources/expenditure plan for 2024/25 stands at £60.2m. The programmed resources is also currently £60.2m therefore the plan is currently at a breakeven position.
- 1.4 The cumulative position to 2026/27 currently shows little flexibility for new starts but from 2027/28, subject to no significant changes to assumed funding, there is a reasonable level of uncommitted funding each year for new schemes.
- 1.5 There are several "probable" schemes which are not yet included in the Capital Programme detailed report but were included in the Board sign off of the plan in March 2024. Some national funding towards the probable schemes is expected and is included in the plan. There are further "possible" schemes, which will need to be considered and prioritised for future years, alongside any availability of national funding and/or ringfence budget contributions. These are shown in Appendix A.
- 1.6 Appendix A also notes potential major schemes which will require separate, external funding arrangements, including the Weston Park Cancer Centre (WPCC) Upgrade, SYB Pathology Network (SYBPN) Estate proposals and RAAC remediation work.

2. OVERVIEW OF THE CAPITAL PROGRAMME AND PLAN

- 2.1 The capital plan for 2024/25 – 2028/29 as per Appendix A shows the following programmed expenditure position (including donations, anticipated IFRS 16 cover and PFI lifecycle costs) against the OCA.
- 2.2 The over-commitment on the 2024/25 Capital Programme has reduced from £1.5m at plan stage to breakeven at Quarter 1. This is predominantly due to a reduction in the amount of spend that has slipped from 2023/24 into 2024/25 than was first anticipated (which was largely made possible by the issue of late funding cover issued in 2023/24). Whilst a breakeven position is where we would want to be at the end of the year, Appendix C identifies a range of risks regarding slippage and cost adjustments. Consequently, there remains a considerable amount of work required across the many areas of the programme to deliver a satisfactory end of year position.

- 2.3 Major PDC funding for 2024/25 is clear, with funds secured for EPR, LIMS and RAAC. Further opportunities are arising, and cases are being prepared in response to support proposed initiatives.
- 2.4 As in 2023/24, the SYBPN LIMS and Digital Pathology schemes are reflected in the Capital Programme, given the Trust will host the SYBPN and so will account for the schemes and assets created. The FBC costs from 2024/25 onwards are more than the agreed national funding (£2.6m) and the profile between years is also different between the receipt of funding and incurring of costs. There is an excess of funding for 2024/25 and then a significant shortfall in funding for 2025/26. The 5 SY Acute Trusts have agreed to share the variances pro-rata to the Risk/Gainshare agreement for SYBPN financial matters. The national funding, costs and other Trust contributions are reflected in the Capital Programme leaving a net STH pressure of circa £1.3m over the 2024/25 to 2026/27 period. No increase to future years national funding for the LIMS project shortfall is anticipated at this point. However, within the FBC there is an allowance for risk and optimism bias and there is the potential this will not be required, thus reducing this pressure.
- 2.5 The 5 Year Plan position for 2025/26 to 2026/27 suggests little flexibility for new starts, unless future funding opportunities are identified, ring-fence budgets reduced or probable investments deferred to the 2027/28 financial year. Work to review the longer-term Capital Plan and determine priorities for forthcoming years is planned in the coming months.
- 2.6 The new one-off £5m capital allocation secured for 2024/25 is not yet reflected in the Capital Programme, although a bidding process for potential bids has recently been commenced in the organisation.

3. ASSUMED FUNDING

- 3.1 The currently assumed funding in the 2024/25 Capital Programme consists of:
- ◆ The OCA of £33.2m.
 - ◆ £21.9m of allocated Public Dividend Capital.
 - ◆ Assumed cover (outside of the OCA) for PFI Lifecycle costs of £0.8m.
 - ◆ £4.3m from donations
 - ◆ There is not yet any funding cover for IFRS 16 investments.
- 3.2 The PDC resources relate to the new EPR (£3.3m), the LIMS/Digital Pathology schemes (£16.8m after contribution timing adjustments with other SY Trusts), and RAAC (£1.8m). The RAAC funding is a new addition in comparison to the Plan approved at Board in March.
- 3.3 The donations relate to an NIHR Research Grant (£4.1m) and medical equipment donations (£0.2m). The £0.2m is a new addition in comparison to the Plan approved at Board in March.
- 3.4 National guidance on OCA allocations for leases (IFRS16) remains in draft form although it is indicated that the Trust will receive an uplift in due course.
- 3.5 All opportunities to attract new funding into the Trust will be considered, alongside an appropriate case for investment, including an assessment of revenue consequences.
- 3.6 There will continue to be a significant cash gap given that the proposed annual level of investment exceeds recurrent internally generated resources (largely the annual

depreciation charge). This can be sustained from existing cash balances in the short-medium term if a breakeven position is achieved on the revenue position.

4. CHANGES TO APPROVED PROGRAMMED EXPENDITURE

- 4.1 There have been many changes to the approved expenditure since the Programme was approved in March, (see Appendix D), due to new scheme approvals, year-end re-profiling, some allocation of specific schemes from the ring-fenced budgets and cost updates on planned schemes.
- 4.2 In headline terms the planned expenditure is now £60.2m compared to a plan of £59.6m approved by Board in March. This movement is mainly due to new funding (£2m, from RAAC PDC and equipment donations) facilitating increased spend, and less scheme slippage from 2023/24 into 2024/25 than first anticipated (£1.4m).
- 4.2 A number of high priority schemes included in the plan taken to board in March have approval to commence procurement, including:
- ◆ Replacement Linear Accelerators LA2 and LA7 (£4.4m)
 - ◆ Neurosciences Operating Microscopes (£1.4m)
 - ◆ Replacement RHH Angiography equipment (£1.3m in each of 24/25 and 25/26)
 - ◆ WPH Plain Film Room replacement (£0.3m)
 - ◆ Digital Pathology equipment (£2.3m)
- 4.3 Plans for usage of the Ring-Fenced Budgets are generally firm but will need careful management to ensure full delivery as planned, and not create further pressure on next year's plan. Allocation of remaining Informatics and Service Development ring-fence sums will follow the approval of anticipated business cases.

5. FURTHER RISKS AND CONTINGENCIES

- 5.1 Appendix C shows the current proposed commitments against the ringfenced budgets and emerging overspend risks and slippage elsewhere in the programme. Currently there are some ringfenced budgets that are over committed that will need to be reduced or funded through a different allocation, and a number that are under committed giving flexibility. In terms of other emerging risks at this point the risk is more in respect of underspend and slippage rather than cost pressure for 2024/25, but this then has an impact on increasing pressure on future years of the programme.
- 5.2 Key risks to delivering the 2024/25 Capital Programme and 5 Year Plan are:
- ◆ Unavoidable schemes, for which funding is not available (see Appendix A, the five-year plan) – **High Risk**. Mitigating actions include:
 - Attracting PDC funding
 - Maximising OCA allocations and opportunities
 - Additional charitable donations/contributions
 - Loans/leases where appropriate (and funding cover available)
 - Restrictions to scheme approvals/profile to when funding is available.
 - ◆ Increased costs for existing schemes (and generally pressure on ring-fence budget levels), particularly given current economic and supply chain issues – **Medium/High Risk**. Mitigating actions include robust case scrutiny, tight management of scheme specifications and firm cost control as schemes progress.

- ◆ Major slippage on schemes, due to operational and logistical barriers inherent in managing such a major programme with challenged internal and external environments – **High Risk**. Mitigating actions include early and robust planning of schemes in close conjunction with Directorates/ICB partners, tight planning and forecasting, prompt actions in developing and finalising schemes, effective procurement and identification/approval of options to advance schemes where slippage occurs.
 - ◆ Diversion of Trust resources (particularly Information Services, IT, and Nursing) onto management of EPR priorities thereby compounding the slippage risk – **Medium Risk**. Mitigating actions will include ensuring return to BAU as soon as possible and highlighting the importance of delivering the capital plans across the organisation.
 - ◆ EPR and SYB Pathology Network schemes - Risks including funding, scheme progression/delivery, alignment of financial and operational planning, operational change and transition – **Medium Risk**. Mitigating actions will include strong governance arrangements, developing knowledge and skills within the organisation, excellent planning and good communication.
- 5.3 Robust business planning/capital prioritisation; strong links to external funding sources; logistical and practical scheme co-ordination; good forecasting; and “value engineering” will be critical in order to secure maximum value for money from constrained capital funding. Revenue affordability will also be a key issue.

6. **BUSINESS CASES/PLANNING**

- 6.1 The Capital Programme at Appendix B formally identifies the status of all current “approved” capital schemes.
- 6.2 Approval to commence procurement of equipment/fees have been allocated for work in developing business cases for the following schemes:
- ◆ Replacement RHH Angiography Facilities
 - ◆ Replacement Linear Accelerators (LA2 & LA7)
 - ◆ Replacement WPH Plain Film room
 - ◆ Replacement Neurosciences Operating Microscopes
 - ◆ A&E Front Door/ED & Relocation of SDEC
 - ◆ WPH Lower Ground Floor (Radiotherapy Facilities)
 - ◆ SYB Pathology Estates Enabling
 - ◆ High Consequences Infectious Diseases Unit
 - ◆ RHH Chaplaincy Refurbishment
 - ◆ Palliative Care Garden Room
 - ◆ Osborn 4 Patient Garden
 - ◆ Respiratory Support Unit
 - ◆ RHH Ward I1 Refurbishment
 - ◆ Relocation of NGH Vascular Angiography Suite
 - ◆ NGH Mortuary/Fridges Expansion
 - ◆ RAAC Eradication
 - ◆ JHW Ward Refurbishment – Rivelin Ward

This does not necessarily mean that all of these schemes will be progressed where fees are approved, but allows the Trust to understand potential developments it may wish to invest in. It also ensures there are costed proposals available for when national money ringfenced for specific priorities is made available.

- 6.3 A small number of the significant schemes within the 2024/25 programme have now completed, including the:
- ◆ Replacement RHH Surgical Robot
 - ◆ RHH Washer Disinfectors
 - ◆ Entonox Safety Mobile Units
 - ◆ RHH Crucible Pharmacy Facilities
- 6.4 Other significant schemes within the current year programme including the EPR, LIMS and Digital Pathology schemes and the Chesterman and Jessop Hospital Theatre Upgrades are progressing well. Some attention to the WPH Bunkers Expansion/Linear Accelerators replacements, NHIR Research Grant schemes and the next Ward Refurbishment priority is required, and support will be given to reach an acceptable solution.
- 6.5 As at plan, progress on the expected new starts for the Vascular Angiography developments remains delayed. This is due to the reconsideration of the previously proposed solutions. Conclusions need to be reached on the final solutions with some urgency for service reasons and to enable the scheduled replacement of angiography equipment. A project group including clinical representation has been set up, and the Chief Finance Officer and Chief Strategy Officer are overseeing progress of the group.
- 6.4 Given the difficult plan position for 2025/26 and 2026/27 too, further long-term planning work will be undertaken in the coming months. Potential schemes will be identified from Appendix A, Directorate Business Plan submissions and any emerging themes from the work on the Clinical Blueprint and Estates Strategy.
- 6.5 The Trust will also need to be agile to respond to any opportunities to bid for additional external funding in the coming years.

7. RECOMMENDATIONS

The Board of Directors is asked to: -

- 7.1 Approve the latest 2024/25 Capital Programme.
- 7.2 Note the risks and mitigations outlined on Appendix C and in Section 5 above, and the need to identify opportunities to secure additional capital funding.
- 7.3 Note the careful managing that will be required in respect of the EPR and the SYB Pathology Network schemes.
- 7.4 Note the on-going importance of capital planning/prioritisation and “value engineering” in securing maximum benefits from limited capital and revenue funding.

Louisa Cowell
Chief Finance Officer
July 2024

SHEFFIELD TEACHING HOSPITALS NHS FOUNDATION TRUST - CAPITAL EXPENDITURE PLAN

APPENDIX A

2024/25 - 2028/29 CAPITAL EXPENDITURE PLAN

		2024/25	2025/26	2026/27	2027/28	2028/29	
		£	£	£	£	£	
Programmed Capital Expenditure as at 12/7/24		60,192,000	33,997,000	30,176,000	26,978,000	21,837,000	
Notified Operational Capital Allocation		-33,193,000	-33,193,000	-33,193,000	-33,193,000	-33,193,000	25/26 Onwards - provisional and assumes no gain from performance element (max £3.6m)
Cap & Collar Protection							Spending review indicates £1,462k for 24/25; Planning guidance indicates to exclude.
24/25 OCA uplifts							
IFRS12/PFI Lifecycle		-819,000	-1,069,000	-1,134,000	-914,000	-827,000	As per programme
PDC Funding	Anticipated	-21,847,000	-3,795,000	-240,000			24/25: LIMS/DP £19,570k, EPR £3,269k LIMS tfr to Partners £(2,792)k, £1,800 RAAC
CDEL only cover	Anticipated						25/26 & 26/27: LIMS tfr from Partners
IFRS16 Lease Cover							As per resources
Donations & Capital Grants		-4,308,000					As per resources
Gross Expenditure Target		-60,167,000	-38,057,000	-34,567,000	-34,107,000	-34,020,000	
Assumed (available increase)/required reduction to programmed spend achieve the OCA	-27,738,000	25,000	-4,060,000	-4,391,000	-7,129,000	-12,183,000	

		Assumed Funding	2024/25	2025/26	2026/27	2027/28	2028/29	
		£	£	£	£	£	£	
Options								
Other "Probable" Schemes								
RHH Angiography	Internal	B	300,000	1,500,000				Development of RHH angiography solution is unclear/TBC. £1.8m works costs only per EMG report 18/12/23. Potential £800k national contribution to Bi-plane functionality
RHH BiPlan National funding			-300,000	-500,000				
PACS replacement	Internal	B			2,819,000			Contractual end in 25/26, but option to extend to 26/27
Total Approved and Probable Schemes		3,819,000	0	1,000,000	2,819,000	0	0	
Planned Capital Expenditure as at 12/7/24			60,492,000	35,497,000	32,995,000	26,978,000	21,837,000	
NET CAPITAL PLAN POSITION		-23,919,000	25,000	-3,060,000	-1,572,000	-7,129,000	-12,183,000	
Possible Schemes								
NGH Vascular Angio	Internal	B	150,000					Option costs being reviewed - £150k reflects fees only
Uplift to Major Medical Envelope	Internal	B		961,000				Requirement as per current programme
High Consequence Infectious Diseases Facilities	Internal/External	B		100,000	5,400,000			£200k national funding available towards £5.5m cost
JHW Ward Refurbishment	Internal	B		1,000,000	3,500,000	3,500,000	1,000,000	Labour Ward and Pre/Post natal
Longley Lane	Internal	U						Work required to consider options including demolition (£1.5m cost)
ED Improvements (formerly A&E Frontdoor/NGH Assem't Devels)	Internal/External	U			100,000	5,000,000	5,000,000	Assume refurbishment option
Additional IP Wards (formerly SDEC/SAC/TAU changes)	Internal/External	U				500,000	8,500,000	Concept in development
Outpatient Facilities, RHH & NGH	Internal	U		2,000,000				Trust Strategy (post COVID-19) to be developed including Blood Disorders
Expansion/Upgrade of Bev Stokes	Internal	U					500,000	Paused. Some refurbishment required but also options to expand - costs beyond 28/29
WPH MRI Simulator/MRI Linac	Charitable	U		500,000	3,000,000			Case of need to be submitted but not supported.
Ophthalmology Reconfiguration	Internal	U		1,500,000				Case of need submitted; work required to consider options. Design work supported
Chesterfield Renal Satellite Unit	Internal	U					1,500,000	Practical plan yet to be agreed
RHH Day Case Theatres	Internal	U		200,000	1,000,000	4,000,000	5,000,000	Further phase of Theatre Refurbs Programme
NGH Endoscopy	Internal	U		500,000	750,000			
Firth 7/CCU Refurbishment	Internal/Charitable	U				5,000,000		No recent progress from Directorate
Major Trauma Ward	Internal	U				2,500,000		No recent progress from Directorate
Dermatology Facilities	Internal	U			500,000	2,000,000		Concept paper for upgrade to facilities produced but being reconsidered. No recent progress from Directorate
Palliative Care Unit Upgrade	Charitable	U		500,000	1,500,000	-		Consideration of options ongoing; initial proposals for a Garden Room
CCDH RD2 Chair Replacement	External/Internal	U	50,000	500,000	2,000,000	2,000,000		
Leased equipment not within MMEG plan	IFRS16 Lease cover	U						SVC Excimer laser; Replacement MES. Likely national CDEL cover
Radiology Expansion	Internal	U				2,500,000		
WPH LG Floor	Internal	U	20,000	500,000	2,500,000			Staff facilities, compliance and radiotherapy
NGH Mortuary/Fridge	Internal	U	50,000	1,500,000	1,000,000			Concept to CIT 27/11/23
Robotic Assisted Thoracic Surgery, NGH	Internal/Charitable	U		3,000,000				Concept to CIT 27/11/23 - £2m equipment/£1m works cost indicative only
8th MRI, NGH	Internal	U				3,100,000		Concept to CIT 26/2/24 - earliest likely 26/27
Other	?							New proposals likely.
Total Possible Schemes		84,770,000	120,000	11,800,000	21,250,000	30,100,000	21,500,000	

MEDICAL EQUIPMENT MODERNISATION

						REMAINING PROGRAMMED EXPENDITURE								
APPROVED SCHEME DETAILS	SITE	SCHEME STATUS	INITIAL APPROVED SUM	LATEST APPROVED SUM	CUMULATIVE SPEND TO 31/3/24	2024/25	2025/26	2026/27	2027/28	2028/29	TOTAL	PROJECT LEAD	BUDGET LEAD	COMMENTS
Annual Upgrade Programme	NGH	Approved				1,121,000	0				1,121,000	MDMG	CK	
Annual Upgrade Programme	RHH	Approved				976,000	0				976,000	MDMG	CK	
Annual Upgrade Programme	CCDH	Approved				0	0				0	MDMG	CK	
Annual Upgrade Programme	JHW	Approved				417,000	0				417,000	MDMG	CK	
Annual Upgrade Programme	WPH	Approved				26,000	0				26,000	MDMG	CK	
Annual Upgrade Programme	CHS	Approved				18,000	0				18,000	MDMG	CK	
Annual Upgrade Programme	STH	Approved				1,290,000	0				1,290,000	MDMG	CK	
Annual Upgrade Programme - Unallocated	STH	Planning Sum				-182,000	3,972,000	4,160,000	4,160,000	4,160,000	16,270,000	MDMG	CK	Inflationary uplift from 24/25 to £4,160k pa envelope
Major Equipment Replacement Programme	STH	Planning Sum				57,000	7,754,000	10,540,000	8,054,000	3,000,000	29,348,000	MDMG	CK	Inflationary uplift from 25/26 to £4m envelope and from 28/27 to £5m pa envelope
Donated Medical Equipment	NGH	Approved				85,000	0				85,000	MDMG	CK	
Donated Medical Equipment	RHH	Approved				0	0				0	MDMG	CK	
Donated Medical Equipment	CCDH	Approved				0	0				0	MDMG	CK	
Donated Medical Equipment	JHW	Approved				0	0				0	MDMG	CK	
Donated Medical Equipment	WPH	Approved				0	0				0	MDMG	CK	
Donated Medical Equipment	CHS	Approved				0	0				0	MDMG	CK	
Clinical Skills Equipment	NGH	Approved				0	0				0	MDMG	CK	
Clinical Skills Equipment	RHH	Approved				0	0				0	MDMG	CK	
Clinical Skills Equipment	JHW	Approved				0	0				0	MDMG	CK	
Clinical Skills Equipment	CCDH	Approved				0	0				0	MDMG	CK	
Clinical Skills Equipment	WPH	Approved				0	0				0	MDMG	CK	
Clinical Skills Equipment	CHS	Approved				0	0				0	MDMG	CK	
BrainLab	RHH	Complete	737,000	825,000	806,736		18,000				18,000	L.Walton	LW	Agreed CIT 28/2/22: £24k saving in 22/23; £5k VAT increase; £5k saving in 23/24
Replacement 3T MRI Scammer, RHH	RHH	Approved	1,500,000	2,681,000	2,518,989						163,000	P.Bailey	P.Ba	Concept agreed CIT 28/3/22; Cost uplifted to Refurb Option 2 in OBC to CIT 23/5/22. New equip would be a further £365k; £2k advance from 23/24 to 24/25; £996k uplift agreed CIT 24/7/23. Includes £14k LED Lighting PDC funding; £163k slippage from 23/24 to 24/25 for 3T; CIT 27/3/23: £14k slippage from 23/24 to 24/25
Replacement RHH Angiography Facilities	RHH	Feas/Planning Sum	30,000	2,700,000	16,327						2,684,000	P.Bailey	P.Ba	Agreed CIT 27/3/23: £14k slippage from 23/24 to 24/25
NHR Proton CT Scanner	RHH	OBC/Enabling Approved	2,585,000	2,585,000	591						2,585,000	D.Black	DB	Funding receipt agreed TEG 10/10/23; £1k spent in 23/24 funded by Serv Dev; £1k enabling order with Cannon approved July 24
NHR Other Research Equipment	STH	Planning Sum	1,560,000	1,560,000	0						1,560,000	D.Black	DB	Funding receipt agreed TEG 10/10/23
Cardiac MRI analysis software	STH	Complete	104,000	104,000	56,640						47,000	P.Bailey	P.Ba	Approved CIT 27/11/23: £47k slippage from 23/24 to 24/25
Replacement Linacs - LA2 & LA7	WPH	Feas/Planning Sum	3,400,000	4,400,000	0						4,400,000	R.Maxted	RM	Agreed to progress procurement via NHS SC. Indicative cost pressure v MMEG prog sum £100k per machine plus all desired extras. Reflects equipment costs only, works TBC. £5k fees for works; £800k works total
Replacement Surgical Robot	RHH	Complete	2,261,000	2,261,000	2,165,717						95,000	C.Turner	CT	Agreed TEG 21/2/24: £95k slippage from 23/24 to 24/25
WPH Plain Film Rooms	WPH	OBC Approved	5,000	274,000	4,494						270,000	R.Maxted	RM	Feas agreed CIT 4/9/23; £1k saving in 23/24
Neurosciences Operating Microscopes x3	RHH	OBC Approved	225,000	1,380,000	0						1,380,000	L.Walton	LW	
Ophthalmology Operating Microscopes	RHH	Planning Sum	155,000	155,000	0						155,000	L.Walton	LW	
MEDICAL EQUIPMENT MODERNISATION TOTAL						15,797,000	13,094,000	14,700,000	12,214,000	7,160,000	62,965,000			

INFORMATION TECHNOLOGY

						REMAINING PROGRAMMED EXPENDITURE								
APPROVED SCHEME DETAILS	SITE	SCHEME STATUS	INITIAL APPROVED SUM	LATEST APPROVED SUM	CUMULATIVE SPEND TO 31/3/24	2024/25	2025/26	2026/27	2027/28	2028/29	TOTAL	PROJECT LEAD	BUDGET LEAD	COMMENTS
General IT Systems/Telecoms Development	NGH	Approved				93,000	50,000				143,000	S.Addy	SN	
General IT Systems/Telecoms Development	RHH	Approved				0	0				0	S.Addy	SN	
General IT Systems/Telecoms Development	WPH	Approved				12,000	0				12,000	S.Addy	SN	
General IT Systems/Telecoms Development	JHW	Approved				69,000	0				69,000	S.Addy	SN	
General IT Systems/Telecoms Development	CHS	Approved				0	0				0	S.Addy	SN	£18k VAT recovery 22/23
General IT Systems/Telecoms Development	STH	Approved				69,000	0	0			69,000	S.Addy	SN	
Informatics Strategic & Corporate - Unallocated	STH	Planning Sum	1,006,000	1,246,000	0		1,246,000	1,250,000	1,250,000	1,250,000	6,002,000	S.Addy	SN	Project Team: £7k overspend in 21/22. Yr 1 of MOU agreed 20/2/23; £1k VAT recovery; £809k slippage from 22/23 to 23/24; £438k slippage from 23/24 to 24/25. £200k CCN to move Bridge Blood
Informatics Infrastructure - Unallocated	STH	Planning Sum	0	391,000	0		391,000	500,000	500,000	500,000	1,891,000	S.Addy	SN	Transfused from EPR to LIMS
Purchase to Pay Software	NGH	Approved	109,000	106,000	69,677						37,000	J.Wright	JW	£109k Agreed CIT 30/9/13. £2k VAT recovery; £18k slippage from 18/19 to 19/20; £3k slippage from 21/22 to 22/23; £1k saving in 23/24
Electronic Patient Record	STH	FBC Approved	20,999,000	23,530,000	13,456,388						9,829,000	D.Black	CM	Initial £148k implementation costs. EPR planning estimate £20,999k. EPR approved Trust Board 24/6/22 £23,223k. £271k OB/Risk released; Potential £675k cost release Jan 23; £531k advance from 23/24 to 22/23. Scheme increase £2414k to March 23 replan agreed sum & re-profile as at June 23. £204k saving in 22/23 & £1,472k saving in 23/24. £160k CCN to move Bridge Blood Transfusion to LIMS
Maternity EPR	STH	FBC Approved	2,503,000	1,829,000	665,139						1,164,000	D.Black	CM	Approved TEG Nov 22: £295k saving in 22/23. Scheme increase £464k to March 23 replan agreed sum and re-profile as at June 23; £843k saving in 23/24
Laboratory Information Management System	STH	FBC Approved	510,000	22,841,000	4,345,349						18,496,000	P.Bailey	CM	Project Team: £7k overspend in 21/22. Yr 1 of MOU agreed 20/2/23; £1k VAT recovery; £809k slippage from 22/23 to 23/24; £438k slippage from 23/24 to 24/25. £200k CCN to move Bridge Blood
Catering Information System	STH	Planning Sum	60,000	60,000	0						60,000	A.Jones	MN	Approved in principle CIT 25/3/24 - subject to TEG agreement
INFORMATION TECHNOLOGY TOTAL						22,533,000	9,488,000	2,242,000	1,750,000	1,750,000	37,763,000			

SERVICE DEVELOPMENT

						REMAINING PROGRAMMED EXPENDITURE								
APPROVED SCHEME DETAILS	SITE	SCHEME STATUS	INITIAL APPROVED SUM	LATEST APPROVED SUM	CUMULATIVE SPEND TO 31/3/24	2024/25	2025/26	2026/27	2027/28	2028/29	TOTAL	PROJECT LEAD	BUDGET LEAD	COMMENTS
New Business Planning Rounds/Service Developm	STH	Planning Sum				3,473,000	3,550,000	3,550,000	3,550,000	3,550,000	17,673,000	CIT	CIT	
WPH Bunkers Expansion	WPH	FBC Approved	30,000	11,360,000	11,310,386						50,000	R.Maxted	CN	Agreed CIT 27/3/17: £65k top up for 4th Floor Works; £84k slippage to 18/19; £56k overspend in 18/19; £29k overspend in 19/20; £1k VAT Recovery; £630k for VIE plant and Cooling Systems; £20k 21/22 other; FBC at £7521k approved TEG 23/3/22; advance £293k from 22/23 to 21/22; uplift by £3,172k for revised tender costs TEG agreement 26/10/23. £4k VAT recovery; £35k overspend on VIE plant in 22/23; £653k advance from 23/24 to 22/23; £30k VAT recovery; £683k overspend in 23/24
RHH Washer Disinfectors	RHH	Complete	1,100,000	801,000	783,080						18,000	V.Lackie	CN	£5k fees Agreed CIT 29/2/22; £1.1m 22/23 Planning sum; CIT agreed OBC 25/7/22 £279k; FBC agreed CIT 26/9/22 £761k; £39k overspend on B Floor Changing Rooms (NCPE) in 22/23 and £3k advance from 23/24 to 22/23 for main scheme Uplift £18k agreed CIT 29/1/24 re Semi-automated EDU cleaning aids x3; £11k VAT recovery; £6k NCPE savings in 23/24
A&E Front Door	NGH	Feas	10,000	10,000	613						10,000	C.Powell-Wiffen	CN	Feas agreed as per NP 26/10/22; £10k slippage from 22/23 to 23/24; £1k slippage from 23/24 to 24/25
WPH Lower Ground Floor (Radiotherapy Accom)	WPH	Feas	10,000	10,000	0						10,000	R.Maxted	CN	Feas agreed CIT 24/10/22; £10k slippage from 22/23 to 23/24
Digital Pathology	STH	FBC Approved	0	2,484,000	152,310						2,332,000	J.Bury	JB	Case agreed CIT 25/3/24 and TEG 10/4/24
Digital Pathology - unallocated	STH	Planning Sum	235,000	2,016,000	0						2,015,000	J.Bury	JB	Agreed CIT 19/12/22: £98k slippage from 22/23 to 23/24; FBC Requirement £4500k; £16k advance from 24/25 to 23/24; Case approved by CIT/TEG shown above. Remainder uncommitted
SYB Pathology Estates Enabling	STH	Feas	10,000	35,000	34,552						0	J.Bury	CN	Feas agreed CIT 27/3/23; £7k overspend in 23/24
High Consequences Infectious Diseases Unit	RHH	Feas	5,000	17,000	16,828						0	D.Campbell	CN	Agreed CIT 26/6/23; £12k overspend in 23/24
Chapelroyal Refurbishment, RHH	RHH	Feas	5,000	5,000	8,132						0	H.Kay	CN	Feas agreed CIT 4/9/23 - SHC funded; £3k temp cover in 23/24 from service development, £5k to be refunded in 24/25
Palliative Care Unit - Garden Room	NGH	Feas	2,000	2,000	232						2,000	H.Kay	CN	Funding from SHC. Feas agreed CIT 23/10/23
Antonox Safety Mobile Units x10	JHW	Complete	356,000	353,000	105,973						247,000	S.Gregory	SG	Agreed CIT 18/12/23 & NP/MT 20/12/23; £247k slippage from 23/24 to 24/25
Antibermix Machine (TQE disinfection)	NGH	Approved	50,000	45,000	0						45,000	V.Lackie	VL	Agreed in principle CIT 26/2/24; Scheme approved LC 10/9/24
Oxton 4 Patient Garden	NGH	Feas	5,000	5,000	0						5,000	D.Campbell	SH	Feas from Sheffield Hospitals Charity confirmed CIT 28/4/24
Respiratory Support Unit, Brearley	NGH	Feas	5,000	5,000	0						5,000	N.Thompson	CN	Agreed CIT 24/6/24
ED - Relocation of SDEC	NGH	Feas	202,000	202,000	0						202,000	C.Powell-Wiffen	CN	Feas £2k; NGH Huntsman LV Electrical Riser £200k
SERVICE DEVELOPMENT TOTAL						8,364,000	3,600,000	3,550,000	3,550,000	3,550,000	22,614,000			

INFRASTRUCTURE

						REMAINING PROGRAMMED EXPENDITURE								
APPROVED SCHEME DETAILS	SITE	SCHEME STATUS	INITIAL APPROVED SUM	LATEST APPROVED SUM	CUMULATIVE SPEND TO 31/3/24	2024/25	2025/26	2026/27	2027/28	2028/29	TOTAL	PROJECT LEAD	BUDGET LEAD	COMMENTS
Facilities & Security Infrastructure	NGH	Approved				0	0				0	A.Jones	AJ	
Facilities & Security Infrastructure	RHH	Approved				0	0				0	A.Jones	AJ	
Facilities & Security Infrastructure	JHW	Approved				0	0				0	A.Jones	AJ	
Facilities & Security Infrastructure	CCDH	Approved				0	0				0	A.Jones	AJ	
Facilities & Security Infrastructure	WPH	Approved				0	0				0	A.Jones	AJ	
Facilities & Security Infrastructure	STH	Approved				0	0				0	A.Jones	AJ	

Medical Equipment Modernisation					4,696,000	0	0	0	0	4,696,000
Information Technology					12,000	0	0	0	0	12,000
Service Development					60,000	0	0	0	0	60,000
Infrastructure					30,000	0	0	0	0	30,000
Leased Assets					0	0	0	0	0	0
Total WPH					4,798,000	0	0	0	0	4,798,000

COMMUNITY HEALTH SERVICE					2024/25	2025/26	2026/27	2027/28	2028/29	TOTAL
Medical Equipment Modernisation					18,000	0	0	0	0	18,000
Information Technology					0	0	0	0	0	0
Service Development					0	0	0	0	0	0
Infrastructure					0	0	0	0	0	0
Leased Assets					0	0	0	0	0	0
Total CHS					18,000	0	0	0	0	18,000

STH WIDE					2024/25	2025/26	2026/27	2027/28	2028/29	TOTAL
Medical Equipment Modernisation					2,715,000	11,726,000	14,700,000	12,214,000	7,160,000	48,515,000
Information Technology					22,322,000	9,438,000	2,242,000	1,750,000	1,750,000	37,502,000
Service Development					7,929,000	3,550,000	3,550,000	3,550,000	3,550,000	22,029,000
Infrastructure					4,091,000	7,146,000	8,950,000	8,950,000	8,950,000	38,087,000
Leased Assets					0	0	0	0	0	0
Total STH					36,948,000	31,860,000	29,442,000	26,464,000	21,410,000	146,124,000

SHEFFIELD TEACHING HOSPITALS TOTAL					2024/25	2025/26	2026/27	2027/28	2028/29	TOTAL
Medical Equipment Modernisation					15,797,000	13,094,000	14,700,000	12,214,000	7,160,000	62,965,000
Information Technology					22,533,000	9,488,000	2,242,000	1,750,000	1,750,000	37,763,000
Service Development					8,364,000	3,600,000	3,550,000	3,550,000	3,550,000	22,614,000
Infrastructure					13,382,000	8,215,000	10,084,000	9,864,000	9,777,000	51,322,000
Leased Assets					0	0	0	0	0	0
Redefinition of Capital					300,000	300,000	300,000	300,000	300,000	1,500,000
Funding for Unfunded schemes					0	0	0	0	0	0
VAT Recovery					-700,000	-700,000	-700,000	-700,000	-700,000	-3,500,000
Directly Donated Equipment					0	0	0	0	0	0
Establishment of Crucible Pharmacy Limited					516,000	0	0	0	0	516,000
Total STH					60,192,000	33,997,000	30,176,000	26,978,000	21,837,000	173,180,000
					60,192,000	33,997,000	30,176,000	26,978,000	21,837,000	173,180,000
					0	0	0	0	0	0

2024/25 - 2028/29 CAPITAL PROGRAMME - RISKS AND CONTINGENCIES SUMMARY

Known Risks:	24/25 Unallocated	2024/25	2025/26	2026/27	2027/28	2028/29	
Ring fenced Envelopes:	Ring-fence Budget	£	£	£	£	£	Current view on commitments against Ring Fenced Budgets
Medical Equipment	-182,000						Currently no contingency reserve
Major Equipment	0						
Informatics Strategic & Corporate	1,006,000						Pharmacy Robot System Upgrade £40k, Viewpoint upgrade/migration £127k, ICENET Infection Control £10k, Interface for Molditof £10k = £819k under-committed
Informatics Infrastructure	0						Data Protection/CommVault Infrastructure Refresh £650k, ACI leaf switches £15k, NGH Fibre Capacity increase £30k, Superna Golden Copy £15k, Network Circuit Replacements £562k = £1272k over-committed
Service Development	3,473,000						Vessel Navigation software £25k, J39 MDT Room £180k, Stones/HOLEP 2nd laser £200k, Omnicell £150k, Radioactive seed £85k, = £640k. Possible: Lab Medicine Autoclaves £453k, Respiratory Support Unit £113k, MERIT Fund equipment £50k, WPH Plain Film DDA works £406k, WPH Lower Ground Accommodation £400k?, Paediatric Dentistry Cooling ? = £1411k uncommitted. Others: Estates Rationalisation re Clocktower & Estates Yard
Facilities & Security Infrastructure	58,000						JHW Level 1 viewing area access control; Regeneration Trolleys, Replacement Combi Ovens
Estates Infrastructure	717,000						£33k contribution to Fireworks at WPH Plain Film Room? £50k DX Chillers; £634k uncommitted, Spinal Injuries Nurse Call, Tower Group Lift Refurbishment or T Floor Chiller Expansion (£340k uplift)?
Ward Refurbishment Programme	2,512,000						Brearely 1 (£700k), Rivelin Ward (£2.5m), RHH Ward I1 (£2.65m)
Non Clinical Public Environments	400,000						Brearely B Floor Corridor £200k, Chesterman Reception Toilets £80k SIU Reception Toilets £60k, WPH Lower Ground Toilets £60k
Theatre Refurbishment Programme	0						Possible £50k fees for NGH or RHH Day Surgery planning
Risks Expected to Emerge in Short-Term (not yet fully quantified/confirmed):							Comentary
Cost Increases to approved schemes:-							
a) Schemes previously advised completed:							
- Unfunded schemes		95,000					As at M3
b) Ongoing Schemes/Schemes in development:							
- Replacement RHH Angiography Facilities		?					Works cost pressures expected £1.8m on 5yr plan
- NIHR Photon Counting CT Scanner		235,000					Cost pressure to preferred option presented to CIT 28/5/24. Potential to offset v ATRU underspend to be explored
- Replacement Linacs x2		1,345,000	?	?	?		List of additional extras indicated by WPH. Future/routine need to be established
- WPH Plain Film Room		?					Possible £33k from Estates re Fire, £406k from SD re DDA changing, £25k MMEG cost
- IT Strategic & Corporate/Infrastructure		453,000	-453,000				Current net over-commitment on envelopes, subject to business case progression
- WPH Bunkers Expansion		500,000					Projected cost pressure/contractor claim, up to £800k/£900k
Cost Reductions to approved schemes:-							
- EPR		-297,000					Risk/Optimism Bias included in programmed sum £1,408k for 24/25. M3 potential saving against FOT+ Risk/OB sums £541k in 24/25)
- Maternity EPR		-327,000					Risk/Optimism Bias included in programmed sum £212k for 24/25. M3 potential saving against FOT + Risk/OB sums £327k in 24/25
- LIMS/Digital Pathology		-1,416,000	-2,084,000	-44,000	?		Risk & OB profile as £2,553k less forecast o/spend £638k less £499k spend v OB in 24/25 = £1416k, Risk & OB profile £2,295k - £211k = £2084k 25/26, £72k - £28k = £44k 26/27
- LIMS/Digital Pathology		-438,000					23/24 under-commitment
Subtotal - Expected Net Commitments/(Savings)		150,000	-2,537,000	-44,000	0	0	

Slippage Risks:						
- MDMG		182,000	-182,000			Envelope currently over-committed
- RHH Angiography Equipment		-1,334,000	1,334,000			Slippage & costs increase likely/risks from roof ventilation plant
- NIHR Photon Counting CT Scanner		?	?			Enabling order approved; Case to CIT July 24. Grant will be withdrawn if not delivered by March 25
- NIHR Other Research Equipment		?	?			Case yet to be presented to CIT; Procurement yet to commence. Grant will be withdraw if not delivered by March 25
- Replacement Linear Accelerators		?	?			Procurement progress slow/delivery at risk
- WPH Plain Film Room		-406,000	406,000			Likely works slippage
- Neurosciences Operating Microscopes		?	?			Procurement in progress, trials underway
- Ophthalmology Operating Microscope		?	?			Procurement yet to commence; specification not yet in place
- Electronic Patient Record		?	?			Major scheme; Timescales challenging
- LIMS		?	?			Major scheme; Recruitment ongoing
- Service Development Unallocated		-1,411,000	1,411,000			Possible Paediatric Dentistry Cooling not yet quantified
- Service Development pending cases		-1,001,000	1,001,000			Stones/HOLEP 2nd laser £200k, Omnicell £150k, Radioactive seed £85k, Lab Medicine Autoclaves £453k,RSU £113k =£1001k. Cases awaited/procurement not yet commenced
- Digital Pathology		?	?			Order in negotiation
- Digital Pathology unallocated		?	?			Option to return unspent PDC
- Estates Infrastructure		?	?			£634k 24/25 Unallocated envelope - re-utilisation being prioritised
- Ward Refurbishment		-2,000,000	2,000,000			Option yet to be confirmed. Assumes £500k spend on Rivelin if Breatly not to be progressed
- CCTV Upgrade		?	?			Current contract under termination. New works timescale/progression unclear
		-5,970,000	5,970,000	0	0	0
Advancement Opportunities:						
- MDMG:		150,000	-150,000			Re-establishment of contingency reserve for emergency bids
- MDMG:		?	?			Planned replacement re-profiling to be explored
- WPH Plain Film Room		25,000	-25,000			Equipment cost pressure
- FRDR/ATS NGH Office Accommodation		?	?			Advancement to be considered £150k
- CT Guided Liver Abalation		?	?			Advancement to be considered £250k
- Eyesi Simulator		?	?			Advancement to be considered £180k cost
- Low Energy Radiotherapy Machine		?	?			Advancement to be considered £235k cost - potential equipment rationalisation
- Tower Group Lift Refurbishment		?	?			Option being investigated
- Robotic Assisted Surgery, NGH		?	?			£2m equipment, £1m works scheme. 6 month lead time for charity funding of equip.
- 3D Mapping		?	?			Potential lease cover
		175,000	-175,000	0	0	0

Possible Contingencies:						
	2024/25	2025/26	2026/27	2027/28	2028/29	
	£	£	£	£	£	
Additional Income:						
Charitable/Donated Funds	?	?	?	?	?	WPHCC re MRI/SIM? SHC re Palliative Care Ultrasound £25k, SHC re RHH Chaplaincy, SHC re Palliative Care Garden Room, SHC re Osborn 4 Garden
National IT /Front-line Digitisation PDC Funding	?	?	?	?	?	SYB Pathology Network (LIMS, Digital Pathology for future years)
National PDC Funding	800,000	?	?	?	?	High Consequence Infection Diseases funding being progressed. £2,296k bid for Bi-plane Thrombectomy in 24/25 - possible £800k funding
Cancer Alliance	?					
Public Sector Decarbonisation Scheme	?	?				Potential £30m bid, but requires £3.6m investment from STH
UEC Winter Incentive	650,000					Potential £650k
RAAC Funding		?	?	?		24/25 £1.8m national funding, but potential investment far higher/not yet determined
Additional Imaging	180,000					Potential £180k for ultrasound x3
Endoscopy Transformation	?					Potential bid being explored
Other:						
Potential reduction to ring fenced capital budgets		?	?	?	?	
Removal prioritised schemes		?	?	?	?	
VAT recovery	?	?	?	?	?	
	1,630,000	0	0	0	0	

SUMMARY OF APPROVED ADJUSTMENTS TO CAPITAL PROGRAMME FROM 24/25 PLAN TO 24/25 Q1 UPDATE

APPENDIX D

APPROVED SCHEMES	Site	Category	2024/25 Programme £	2025/26 Programme £	2026/27 Programme £	2027/28 Programme £	2028/29 Programme £	Comment
As per Capital Programme as at March 24 plan			56,711,000	29,064,000	21,652,000	20,944,000		
24/25 Planning Assumptions:								
Minor Medical Equipment	STH	Medical Equipment					3,200,000	24/25 Planning Assumptions
Major Medical Equipment	STH	Medical Equipment					3,000,000	24/25 Planning Assumptions
IT Strategic & Corporate	STH	Information Technology					1,250,000	24/25 Planning Assumptions
IT Infrastructure	STH	Information Technology					500,000	24/25 Planning Assumptions
Service Development	STH	Service Development					3,550,000	24/25 Planning Assumptions
Facilities & Security Infrastructure - Unallocated	STH	Infrastructure					400,000	24/25 Planning Assumptions
Estates Infrastructure	STH	Infrastructure					3,400,000	24/25 Planning Assumptions
Ward Refurbishment Programme	STH	Infrastructure					2,750,000	24/25 Planning Assumptions
Non-Clinical Public Environments Programme	STH	Infrastructure					400,000	24/25 Planning Assumptions
Theatre Refurbishment/Expansion Programme	STH	Infrastructure					2,000,000	24/25 Planning Assumptions
Hadfield Lifecycle Assets	STH	Infrastructure					808,000	24/25 Planning Assumptions
Redefinition of Capital	STH	Other					300,000	24/25 Planning Assumptions
VAT recovery	STH	Other					-700,000	24/25 Planning Assumptions
CIT Approvals:								
MSD-ECL-ELISA Multiplex Reader	RHH	Medical Equipment	64,000					Funded by SHC - confirmed CIT 24/6/24
Other Approvals:								
24/25 Plan Uplift to Major Medical envelope	STH	Medical Equipment	1,155,000					Agreed Board 26/3/24 re Neurosciences Microscopes
24/25 Plan Uplift to Major Medical envelope	STH	Medical Equipment	200,000	200,000	100,000	100,000		Agreed Board 26/3/24 re Linear Accelerators
24/25 Plan Uplift to Major Medical envelope	STH	Medical Equipment						Agreed Board 26/3/24 re Vascular Angiography equipment
24/25 Plan Uplift to Major Medical envelope	STH	Medical Equipment	550,000	550,000				Agreed Board 26/3/24 re RHH Angiography equipment
24/25 Plan Uplift to MDMG envelope - inflationary	STH	Medical Equipment	960,000	960,000	960,000	960,000	960,000	Agreed Board 26/3/24 re 30% inflationary uplift
24/25 Plan Uplift to MMEG envelope - inflationary	STH	Medical Equipment		1,000,000	2,000,000	2,000,000	2,000,000	Agreed Board 26/3/24 re 30% inflationary uplift
24/25 Plan Uplift to Major Medical envelope - underlying volume as at 8/3/24	STH	Medical Equipment	-2,565,000	2,238,000	5,440,000	2,954,000	-2,000,000	Agreed Board 26/3/24 re underlying programme volume (based on MMEG programme at 8/3/24)
Osborn 4 Patient Garden	NGH	Service Development	5,000					Fees funded by SHC confirmed CIT 29/4/24
CIU Portable Diagnostic Ultrasound Scanner	RHH	Medical Equipment	21,000					Funded by SHC - confirmed 23 April 24
RAAC funding	STH	Infrastructure	1,800,000					National funding confirmed 5/7/24
Intra Cardiac Echocardiography machine	NGH	Medical Equipment	35,000					Biosense vouchers - agreed LC 12/7/24
Hadfield Lifecycle Assets	STH	Infrastructure	18,000	23,000	24,000	20,000	19,000	Update to Lifecycle following 24/25 indexation
EPR spend reduction	STH	Information Technology	-244,000					As per approved plan at Board March 24
Cost Adjustments to Existing Schemes:								
Service Development unallocated	STH	Service Development	6,000					Contribution to Chaplaincy Refurbishment 23/24 costs - covered by SD in 23/24
Chaplaincy Refurbishment RHH	RHH	Service Development	-5,000					Remove donated spend slipped to 24/25 in error and covered by SD in 23/24
Digital Pathology - FBC	STH	Service Development	2,332,000					FBC agreed CIT 25/3/24 and TEG 10/4/24
Digital Pathology - unallocated	STH	Service Development	-2,332,000					Applied to approved FBC March/April 2024
Catering Information System	STH	Information Technology	-56,000	4,000				Case approved in principle CIT 25/3/24
Informatics Strategic & Corporate	STH	Information Technology	-56,000	-4,000				Applied to Catering Information System
Neurosciences Operating Microscopes x3	RHH	Medical Equipment	1,380,000					As per case to CIT Feb 24
Major Medical Equipment Programme	RHH	Medical Equipment	-1,380,000					Applied to Neurosciences Operating Microscopes x3
Replacement RHH Angiography Equipment	RHH	Medical Equipment	1,320,000	1,350,000				As per MMEG plan approved April 24 CIT (including cost uplift)
Major Medical Equipment Programme	STH	Medical Equipment	-1,320,000	-1,350,000				As per MMEG plan approved April 24 CIT (including cost uplift)
WPH Plain Film Room	WPH	Medical Equipment	270,000					As per MMEG plan approved April 24 CIT
Major Medical Equipment Programme	STH	Medical Equipment	-270,000					As per MMEG plan approved April 24 CIT
Replacement Linear Accelerators	WPH	Medical Equipment	200,000					As per MMEG plan approved April 24 CIT (including cost uplift)
Major Medical Equipment Programme	STH	Medical Equipment	-200,000					As per MMEG plan approved April 24 CIT (including cost uplift)
Ophthalmology Operating Microscope	RHH	Medical Equipment	155,000					As per MMEG plan approved April 24 CIT
Major Medical Equipment Programme	STH	Medical Equipment	-155,000					As per MMEG plan approved April 24 CIT
Annual Upgrade MDMG	STH	Medical Equipment	25,000					Palliative Care Unit Ultrasound - approved CIT 29/4/24
Service Development unallocated	STH	Service Development	-25,000					Applied to PCU Ultrasound
Pharmacy Quality Control System (MRS)	STH	Information Technology	6,000					Agreed MN 29/4/24
Informatics Strategic & Corporate	STH	Information Technology	-6,000					Applied to Pharmacy Quality Control System (MRS)
Spectrum Software	NGH	Information Technology	38,000					Agreed MN 4/6/24
Informatics Strategic & Corporate	STH	Information Technology	-38,000					Applied to Spectrum Software
Antigermix Machine (TOE disinfection)	NGH	Service Development	-5,000					£5k savings identified; LC approved 10/5/24
Service Development unallocated	STH	Service Development	5,000					Savings returned from Antigermix Machine
Estates Vehicle	NGH	Infrastructure	27,000					Kubota vehicle
Estates Infrastructure unallocated	STH	Infrastructure	-27,000					Approved CN 10/5/24
Huntsman Lifts	NGH	Infrastructure	-300,000					Application of Estates Infrastructure 24/25 plan - as confirmed 23/5/24
RHH Tower Lifts	RHH	Infrastructure	144,000					Application of Estates Infrastructure 24/25 plan - as confirmed 23/5/24
JHW LV Upgrade	JHW	Infrastructure	400,000					Application of Estates Infrastructure 24/25 plan - as confirmed 23/5/24
NGH Solar Panels (CPU)	NGH	Infrastructure	270,000					Application of Estates Infrastructure 24/25 plan - as confirmed 23/5/24
RHH LTHW	RHH	Infrastructure	342,000					Application of Estates Infrastructure 24/25 plan - as confirmed 23/5/24
WPH LV Electrical Upgrade	WPH	Infrastructure	30,000					Application of Estates Infrastructure 24/25 plan - as confirmed 23/5/24
ED - Relocation of SDEC: NGH Huntsman LV Electrical Riser	NGH	Infrastructure	150,000	50,000				Application of Estates Infrastructure 24/25 plan - as confirmed 23/5/24
RHH T Floor Chiller Expansion	RHH	Infrastructure	80,000					Application of Estates Infrastructure 24/25 plan - as confirmed 23/5/24 re Q FloorDHW
RHH T Floor Chiller Expansion	RHH	Infrastructure	500,000					Application of Estates Infrastructure 24/25 plan - as confirmed 23/5/24
Estates Infrastructure unallocated	STH	Infrastructure	-1,616,000	-50,000				Application of Estates Infrastructure 24/25 plan - as confirmed 23/5/24
Informatics Strategic & Corporate	STH	Information Technology	-45,000					Virement to cover NGH Fibre Capacity increase
Informatics Infrastructure	STH	Information Technology	45,000					Virement to cover NGH Fibre Capacity increase
NGH Fibre Capacity increase	NGH	Information Technology	45,000	50,000				Agreed TBCAT 13/6/24

Informatics Infrastructure	STH	Information Technology	-45,000	-50,000			Applied to NGH Fibre Capacity increase
Replacement Linear Acceleators	WPH	Medical Equipment	5,000				Fees agreed LC 30/5/24
Service Development unallocated	STH	Service Development	-5,000				Applied to Replacement Linear Accelerators
Respiratory Support Unit	NGH	Service Development	5,000				Fees agreed CIT 24/6/24
Ward Refurbishment Programme	STH	Infrastructure	-5,000				Applied to Respiratory Support Unit
JHW Ward Refurbishment	JHW	Infrastructure	10,000				Fees agreed CIT 24/6/24 re Rivelin Ward
Ward Refurbishment Programme	STH	Infrastructure	-10,000				Applied to JHW Rivelin Ward
ED - Relocation of SDEC	NGH	Service Development	2,000				National bid submitted 20/6/24
Service Development unallocated	STH	Service Development	-2,000				Applied to ED -Relocation of SDEC
Estates Digital Mobile Radio	STH	Infrastructure	120,000				Agreed CN 21/6/24
Estates Infrastructure unallocated	STH	Infrastructure	-120,000				Applied to Digital Mobile Radio
EPR	STH	Information Technology	-204,000				Recognition 22/23 saving
Replacement Linear Acceleators	WPH	Medical Equipment	795,000				Estates planning sum
Major Medical Equipment Programme	STH	Service Development	-795,000				Estates planning sum replacement linacs
EPR	STH	Information Technology	-160,000				CCN for Bridge Blood Transfusion
LIMS	STH	Information Technology	200,000				CCN for Bridge Blood Transfusion
Approved Re-profiling:							
Major Medical Equipment Programme	STH	Medical Equipment	91,000	-91,000			Advance for Linac enabling works
Year End Re-profiling							
Critical Care Stimulation Equipment	NGH	Medical Equipment	5,000				SHC slippage to 24/25
Hoverjack, SYRS,	NGH	Medical Equipment	17,000				SHC slippage to 24/25
Lab Benching	RHH	Infrastructure	8,000				Year end slippage
Chaplaincy Refurbishment, RHH	RHH	Service Development	5,000				Year end slippage
Palliative Care Garden Room	NGH	Service Development	2,000				Year end slippage
MDMG - Unallocated	STH	Medical Equipment	-55,000				2023/24 Advance - NGH ultrasound (general radiology)
MDMG - Unallocated	STH	Medical Equipment	-322,000	-188,000			2023/24 Advance - JHW ultrasound (OGN)
MDMG - Unallocated	STH	Medical Equipment	-60,000				2023/24 Advance - RHH ultrasound (general radiology)
MDMG - Unallocated	STH	Medical Equipment	-62,000				2023/24 Advance - CCDH ultrasound (general radiology)
MDMG - image intensifier NGH	NGH	Medical Equipment	-137,000				2023/24 Year End Advance
TRUS Biopsy Ultrasound Machine	RHH	Medical Equipment	87,000				2023/24 Slippage
Ophthalmology Microscope	RHH	Medical Equipment	29,000				2023/24 Slippage
Ophthalmology Ultrasound	RHH	Medical Equipment	19,000				2023/24 Slippage
Replacement 3T MRI Scanner, RHH	RHH	Medical Equipment	163,000				2023/24 Slippage
Replacement RHH Angiography Facilities	RHH	Medical Equipment	14,000				2023/24 Slippage
Cardiac MRI analysis software	STH	Medical Equipment	47,000				2023/24 Slippage
Replacement Surgical Robot	RHH	Medical Equipment	95,000				2023/24 Slippage
Laboratory Information Management System	STH	Information Technology	438,000				2023/24 Slippage
Server Virtualisation Expansion (Flexpod Replacement)	STH	Information Technology	54,000				2023/24 Slippage
Aria Upgrade and Virtualisation	STH	Information Technology	12,000				2023/24 Slippage
JHW Viewpoint v6	STH	Information Technology	69,000				2023/24 Slippage
AEM Training Mannequin Simulation Room	STH	Information Technology	10,000				2023/24 Slippage
Pharmacy Outpatient Facilities	STH	Service Development	143,000				2023/24 Slippage
A&E Front Door	NGH	Service Development	1,000				2023/24 Slippage
Digital Pathology	STH	Service Development	-16,000				2023/24 Advance
Entonox Safety Mobile Units x10	JHW	Service Development	247,000				2023/24 Slippage
CCTV Upgrade	STH	Infrastructure	-69,000				2023/24 Advance
Chesterman Theatres Refurbishment	NGH	Infrastructure	380,000				2023/24 Slippage
JHW Theatre Refurbishment	JHW	Infrastructure	271,000				2023/24 Slippage
Service Block Redevelopment (RHH Generators)	RHH	Infrastructure	89,000				2023/24 Slippage
RHH Ward II Refurbishment	RHH	Infrastructure	55,000				2023/24 Slippage
Radiopharmacy Isolator	NGH	Infrastructure	-2,000				2023/24 Advance
Huntsman Lift Refurbishment	NGH	Infrastructure	-2,000				2023/24 Advance
NGH Mortuary/Fridges Expansion	NGH	Infrastructure	3,000				2023/24 Slippage
RAAC Eradication	NGH	Infrastructure	6,000				2023/24 Slippage
MDMG - Unallocated	STH	Medical Equipment	-18,000				2023/24 Advance
Major Medical Equipment Programme	STH	Medical Equipment	34,000				2023/24 Slippage
IT Strategic & Corporate	STH	Information Technology	10,000				2023/24 Slippage
IT Infrastructure	STH	Information Technology	-13,000	-59,000			2023/24 Advance
Facilities	STH	Infrastructure	-3,000				2023/24 Advance
Forecast Probable spend:							
RHH Angiography	RHH	Medical Equipment	300,000	1,500,000			
PACS	STH	Information Technology			2,819,000		
As Per Current Plan			60,492,000	35,497,000	32,995,000	26,978,000	21,837,000
Check -plan summary			60,492,000	35,497,000	32,995,000	26,978,000	21,837,000