

# SHEFFIELD TEACHING HOSPITALS NHS FOUNDATION TRUST

## EXECUTIVE SUMMARY

### REPORT TO THE BOARD OF DIRECTORS MEETING

HELD ON 25<sup>th</sup> JULY 2023

<b>Subject</b>	2023/24 Capital Programme and 5 Year Plan - Quarter 1 Update
<b>Supporting TEG Member</b>	Neil Priestley
<b>Author</b>	Neil Priestley
<b>Status<sup>1</sup></b>	A/N

#### **PURPOSE OF THE REPORT**

To provide an update on the 2023/24 Capital Programme and 5 Year Capital Plan.

#### **KEY POINTS**

1. A range of investments are progressing in 2023/24 with current available funding of £45.4m.
2. The current 2023/24 Capital Programme shows a £0.9m over-commitment against available resources but there are a range of risks in terms of additional schemes/costs and slippage.
3. It is likely again to be challenging to deliver the exact level of spend in the year to match available resources.
4. The new EPR and SYB Pathology Network schemes are major issues to be managed.
5. The current position for 2024/25 suggests little flexibility for new starts but there will be planning work done this autumn to review the Capital Programme and determine priorities, some of which may be able to start in 2024/25, for subsequent years when the funding position appears more promising.
6. Capital planning/prioritisation and scheme “value engineering” continue to be crucial in securing maximum value for money from constrained resources.

#### **IMPLICATIONS<sup>2</sup>**

<b>Aim of the STHFT Corporate Strategy</b>		<b>Tick as appropriate</b>
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**

As per Section 7 of the report.

#### **APPROVAL PROCESS**

<b>Meeting</b>	<b>Date</b>	<b>Approved Y/N</b>

<sup>1</sup> 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 25<sup>th</sup> JULY 2023

### 2023/24 CAPITAL PROGRAMME AND 5 YEAR PLAN – QUARTER 1 UPDATE

#### **1. INTRODUCTION**

- 1.1 This report starts the process of monitoring progress on the Trust's 2023/24 Capital Programme and 5 Year Plan. It considers the position at mid-July 2023 and outlines the major changes since the Capital Programme was approved by the Trust Board in March 2023.
- 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 2023/24 Capital Programme is currently broadly balanced, there will inevitably be challenges to land final expenditure very close to the OCA.
- 1.3 The current capital resources/expenditure plan for 2023/24 stands at £45.4m. There is currently a £0.9m over-commitment against assumed funding in the approved Capital Programme but there are a range of potential pressures plus some slippage risks. The cumulative position over 2023/24 and 2024/25 currently shows little flexibility for new starts but from 2025/26, subject to no changes to assumed funding, there is a normal level of uncommitted funding each year for new schemes.
- 1.4 Appendix A includes a list of "probable" and "possible" schemes which are not yet included in the Capital Programme but which will require further consideration at some point. There are minimal "probable" schemes, given the lack of available funding in the short-term, but there are a range of potential schemes which will need to be prioritised for subsequent years.
- 1.5 Appendix A also notes potential major schemes in respect of the Weston Park Cancer Centre (WPCC) Upgrade and SYB Pathology Network Estate and IT developments which will require separate, almost certainly external, funding arrangements. Funding for the SYBPN IT schemes has been agreed nationally but there are a number of issues around capital costs and funding still to resolve.

#### **2. OVERVIEW OF THE CAPITAL PROGRAMME AND PLAN**

- 2.1 The capital plan for 2023/24 – 2027/28 as per Appendix A shows the following programmed expenditure position (including donations, assumed IFRS 16 cover and PFI lifecycle costs) against the OCA:-

	<b>2023/24 £m</b>	<b>2024/25 £m</b>	<b>2025/26 £m</b>	<b>2026/27 £m</b>	<b>2027/28 £m</b>
Operational Capital Allocation (assumed for future years)	38.2	38.2	36.8	36.8	36.8
PDC (approved & assumed)	5.9	3.3			
Donations/Other Resources	1.2	0.8	1.0	1.1	0.9
Programmed Expenditure	(46.3)	(41.7)	(21.3)	(21.2)	(20.9)
<b>Under/(Over) Commitment against OCA</b>	<b>(0.9)</b>	<b>0.6</b>	<b>16.6</b>	<b>16.7</b>	<b>16.7</b>
<b>Cumulative Net Capital Programme Position</b>	<b>(0.9)</b>	<b>(0.3)</b>	<b>16.3</b>	<b>33.0</b>	<b>49.7</b>

- 2.2 Whilst there is currently a £0.9m over-commitment on the 2023/24 Capital Programme, Appendix C identifies a range of risks regarding slippage and cost adjustments. It is still early in the financial year and there is a considerable amount of work required across the many areas of the programme to deliver a satisfactory end of year position. At this stage the balance of risk feels marginally more in respect of programme pressures but slippage will inevitably be a factor.
- 2.3 PDC funding for 2023/24 is clear except for the Laboratory Information Management System (LIMS) and Digital Pathology projects which are considered further in section 6.4 below.
- 2.4 The original £6.1m over-commitment on the 2023/24 Capital Programme/Plan has largely been eliminated, subject to there being no major spend on new starts. This was due to additional VAT recovery, gains from the year-end/rollover process and the Replan of the EPR project.
- 2.5 The 5 Year Plan remains marginally over-committed for 2024/25, assuming that the Trust's OCA is unchanged. However, there is then a normal level of uncommitted funding for subsequent years. With a normal level of planned over-commitment in the 2024/25 Capital Programme it may be possible to have some new starts in 2024/25 to commence a programme of schemes over the remainder of the 5 Year Plan.
- 2.6 It should be noted that a number of the Ring-Fenced Budgets have had reduced funding in 2023/24 and, now that the rollover process from the 2022/23 Capital Programme is complete, there will be discussions with the relevant Budget Holders about any pressures and concerns.

### **3. ASSUMED FUNDING**

- 3.1 The currently assumed funding in the 2023/24 Capital Programme consists of:
- ◆ The OCA of £38.2m.
  - ◆ £5.9m of allocated Public Dividend Capital.
  - ◆ Assumed cover (outside of the OCA) for PFI Lifecycle costs of £0.8m.
  - ◆ £0.5m from donations and IFRS 16 funding cover.
- 3.2 The donations largely relate to pieces of medical equipment.
- 3.3 The PDC resources relate to the new EPR (£5.7m) and the RHH Elective Orthopaedic Hub (£0.5m) less an assumed contribution to the Yorkshire & Humber Care Record project (£0.4m).
- 3.4 There will be further PDC funding allocated in due course when the positions relating to LIMS and Digital Pathology are confirmed.
- 3.5 There will continue to be a significant cash gap to fund the proposed level of investment against recurrent internally generated resources (largely the annual depreciation charge). This can be sustained from existing cash balances if a breakeven position is achieved on the revenue position.
- 3.6 It is assumed that the OCA for 2024/25 will be as per 2023/24. The position for subsequent financial years is not known at this point and so, for planning purposes, it is assumed that it will remain at the same level as for 2023/24 but without the Cap & Collar Protection.

#### **4. CHANGES TO APPROVED PROGRAMMED EXPENDITURE**

- 4.1 There have been a modest number of changes to approved expenditure since the Capital Programme was approved in March due to scheme approvals, allocation of specific schemes from the ring-fenced envelopes and cost updates on planned schemes.
- 4.2 The changes worthy of note are:
- ◆ The Replan of the EPR which has reduced the 2023/24 spend by £1.7m.
  - ◆ Approval of the scheme to expand the NGH Discharge Lounge (£0.5m).
  - ◆ Approval of works to the previous NGH Fracture Clinic to provide fit for purpose facilities for the SDEC and to enable the transfer of the Minor Injuries and DVT Rule-Out services from the main A&E Department (£0.5m).
  - ◆ A cost increase related to the new NGH Fracture Clinic scheme (£0.1m).
- 4.3 Following completion of the rollover of the 2022/23 Capital Programme, plans for the Ring-Fenced Budgets will now be finalised with funding allocated to specific projects.

#### **5. FURTHER RISKS AND CONTINGENCIES**

- 5.1 Appendix C identifies the current specific financial risks to the capital position.
- 5.2 Key risks to delivering the 2023/24 Capital Programme and 5 Year Plan are:
- ◆ Unavoidable schemes, for which funding is not available (see Appendix A) – **High Risk**. Mitigating actions include:
    - Attracting PDC funding
    - Additional charitable donations/contributions
    - Reducing ring-fenced budgets
    - Restrictions to scheme approvals/profiling for when funding is available
  - ◆ Increased costs for existing schemes, particularly given current economic and supply chain issues – **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 – **Medium/High Risk**. Mitigating actions include early and robust planning of schemes in close conjunction with Directorates, tight planning and forecasting, prompt actions in developing and finalising schemes, effective procurement and identification/approval of options to advance schemes where slippage occurs.
- 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 Most of the significant schemes within the Programme, including the Replacement RHH 3T MRI Scanner, the WPCB Bunkers Expansion, the RHH Elective Orthopaedic Hub, the Chesterman and Jessop Hospital Theatre Upgrades and the Jessop Hospital Labour Ward Assessment Unit are progressing well. However, there are still some uncertainties around the scheme to replace the RHH Emergency Generators which has a planned spend of almost £8m in 2023/24.
- 6.3 Following the Replan, there is planned expenditure of £10.9m on the new EPR (including the Maternity module) in 2023/24. This is being closely monitored.
- 6.4 The LIMS and Digital Pathology schemes have yet to be fully reflected in the Capital Programme. The LIMS Full Business Case has been approved and national funding is available for both schemes. However, based on the current approvals there is insufficient funding in 2023/24, an excess of funding in 2024/25 and then further shortfalls in subsequent years. The Trust's share of SYB Pathology Network financial issues is 51% and the potential Trust impact is shown in Appendix C. However, there are a range of potential mitigations including lower than anticipated LIMS costs, a transfer of funding from the Digital Pathology scheme, revisions to the national funding plan and release of risk/optimism bias provisions from the scheme costs. The intention is to review the position fully by the end of September and to then agree the way forward with the other SY Acute Trusts.
- 6.4 On the assumption that there will be funding available from 2025/26 for new schemes (with the potential to make starts in 2024/25), work will be progressed this autumn to identify and prioritise those schemes. Potential schemes will be identified from Appendix A, the last Directorate Business Plan submissions and emerging themes from the work on the Clinical Blueprint and Estate Strategy. In advance of that there will be a review of potential funding; existing planning sums in the Programme (including the current Major Medical Equipment provision for 2024/25 and the Huntsman 7 scheme); and also Ring-Fenced Budgets, to review need and potential uplifts which will need to be considered alongside the potential new starts. 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 2023/24 Capital Programme.
- 7.2 Note the risks and mitigations on Appendix C and in Section 5 above.
- 7.3 Note the significant issues which will need to be managed in respect of the new EPR and the SYB Pathology Network IT schemes.
- 7.4 Note the need to start planning work for the Capital Programme in future years.
- 7.5 Note the on-going importance of capital planning/prioritisation and "value engineering" in securing maximum benefits from limited capital and revenue funding.

Neil Priestley  
Chief Finance Officer  
July 2023

## SHEFFIELD TEACHING HOSPITALS NHS FOUNDATION TRUST - CAPITAL EXPENDITURE PLAN

APPENDIX A

## 2023/24 - 2027/28 CAPITAL EXPENDITURE PLAN

		2023/24	2024/25	2025/26	2026/27	2027/28	
		£	£	£	£	£	
<b>Programmed Capital Expenditure as at 14/7/23</b>		46,261,000	41,720,000	21,267,000	21,160,000	20,944,000	
Notified Operational Capital Allocation		36,774,000	36,774,000	36,774,000	36,774,000	36,774,000	<b>23/24 Assumed no claw back of 22/23 OCA overspend of £88k. 25/26 Onwards - provisional</b>
Cap & Collar Protection		1,462,000	1,462,000	0	0	0	Ceases 24/25
IFRS12/PFI Lifecycle		753,000	801,000	1,046,000	1,110,000	894,000	As per programme
PDC Funding	Anticipated	5,910,000	3,269,000	0	0	0	EPR £5743k 23/24 and £3269k 24/25; RHH Orthopaedic Hub £518k 23/24; Y&H Care Record Cont'n £351k
PDC Funding	Confirmed		0	0	0	0	
IFRS16 Lease Cover		373,000		0	0	0	As per programme
Donations		118,000	0	0	0	0	As per resources
<b>Gross Expenditure Target</b>		<b>45,390,000</b>	<b>42,306,000</b>	<b>37,820,000</b>	<b>37,884,000</b>	<b>37,668,000</b>	
<b>Assumed available increase/(required reduction) to programmed spend achieve the OCA</b>	<b>49,716,000</b>	<b>-871,000</b>	<b>586,000</b>	<b>16,553,000</b>	<b>16,724,000</b>	<b>16,724,000</b>	

	Assumed		2023/24	2024/25	2025/26	2026/27	2027/28	
	Funding Options		£	£	£	£	£	
<b>Other "Probable" Schemes</b>								
Provision for new starts	N/A		-943,000	?				Potential re RHH Angio Suite and NGH Vascular Angio Suite; £2m reduced by £522k re SDEC Minor Injuries & DVT Services & £535k Discharge Lounge Brearley OPD
<b>Total Approved and Probable Schemes</b>	<b>-943,000</b>		<b>-943,000</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	
<b>NET CAPITAL PLAN POSITION</b>	<b>48,773,000</b>		<b>-1,814,000</b>	<b>586,000</b>	<b>16,553,000</b>	<b>16,724,000</b>	<b>16,724,000</b>	
<b>Possible Schemes</b>								
NGH Vascular Angio	Internal	B	-100,000	-3,000,000	-2,900,000			Costs in 2023/24 covered by provision for new starts above.
RHH Angiography	Internal	B	-750,000	-1,750,000				Costs in 2023/24 covered by provision for new starts above.
Longley Lane	Internal	U	?	?	?	?		Work required to consider options
SDEC/SAC/TAU changes	Internal	U	0	-1,000,000	-5,300,000			Concept in development: £4.9m indicative cost plus £500k cost pressure
A&E Frontdoor/NGH Assessment Developments	Internal	U			-500,000	-4,000,000	-6,000,000	Linked to re-provision of Fracture Clinic post and SDEC/SAC/TAU
JHW Ward Refurbishment	Internal	B	0	-2,000,000	-3,500,000	-3,500,000		£8.5m projected total cost plus £500k cost pressure.
Outpatient Facilities, RHH & NGH	Internal	U	0	-1,500,000	-1,500,000	-1,500,000		Trust Strategy (post COVID-19) to be developed including Blood Disorders (£2.3m)
Expansion/Upgrade of Bev Stokes	Internal	U		-500,000	-3,000,000			Paused. Some refurbishment required. Likely smaller qualitative scheme. £500k cost pressure
WPH MRI Simulator/MRI Linac	Internal	U			0	-2,500,000		Case of need to be submitted but not supported. £300k cost pressure
Ophthalmology Reconfiguration	Internal	U	-15,000	-700,000	-700,000			Case of need submitted; work required to consider options. Design work supported
Chesterfield Renal Satellite Unit	Internal	U	0	-1,500,000				Practical plan yet to be agreed
RHH Day Case Theatres	Internal	U		0	-2,000,000	-2,500,000	-2,500,000	Further phase of Theatre Refurbs Programme £3.0m cost pressure
NGH Endoscopy	Internal	U	0	-1,250,000				Outline cost as reported to CIT 25/4/22 £119k cost pressure
Firth 7/CCU Refurbishment	Internal/Charitable	U		0		-4,500,000		Indicative OBC costs £4250k less £300k enabling works approved. Likely cost pressure £450k.
Major Trauma Ward	Internal	U		0		-2,000,000		
NGH Radiology Outpatients	Internal	U			0			SOC to CIT 5/9/22
Dermatology Facilities	Internal	U		0	-500,000	-2,000,000		Concept paper for upgrade to facilities produced but being reconsidered.
Palliative Care Unit Upgrade	Charitable	U	0	0	0	-500,000		Consideration of options ongoing
CCDH RD2 Chair Replacement	Internal	U		-1,000,000	-2,500,000			
Leased equipment not within MMEG plan	IFRS16 Lease cover	U	?	?	?			SVC Excimer laser; Replacement MES. Likely national CDEL cover
Other	?	U	?	?	?			New proposals likely. Potential schemes PET-CT scanner (supplier contract end in 24/25) and WPH Lower Ground Floor Radiotherapy Accommodation
<b>Total Possible Schemes</b>	<b>-68,065,000</b>		<b>-865,000</b>	<b>-13,300,000</b>	<b>-24,900,000</b>	<b>-20,500,000</b>	<b>-8,500,000</b>	
<b>Schemes requiring separate funding source</b>								
Other WPH Upgrades/Expansion	External	U						Transformation scheme at £60m being reconsidered.
Pathology Network IT - LIMS & Digital Pathology	External	B	?	?	?			FBC Approved. National funding approved but issues to resolve re final cocts and funding profile
Pathology Network Lab Upgrades	?	U		?	?	?		Scheme could range between £3-£10m
	<b>0</b>		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	

**PROGRAMMED EXPENDITURE 2023/24 - 2027/28**

**Appendix B**

**MEDICAL EQUIPMENT MODERNISATION**

APPROVED SCHEME DETAILS	SITE	SCHEME STATUS	INITIAL APPROVED SUM	LATEST APPROVED SUM	CUMULATIVE SPEND TO 31/3/23	REMAINING PROGRAMMED EXPENDITURE					PROJECT LEAD	BUDGET LEAD	
						2023/24	2024/25	2025/26	2026/27	2027/28			TOTAL
Annual Upgrade Programme	NGH	Approved				290,000	0				290,000	MDMG	CK
Annual Upgrade Programme	RHH	Approved				123,000	0				123,000	MDMG	CK
Annual Upgrade Programme	CCDH	Approved				40,000	0				40,000	MDMG	CK
Annual Upgrade Programme	JHW	Approved				411,000	0				411,000	MDMG	CK
Annual Upgrade Programme	WPH	Approved				0	0				0	MDMG	CK
Annual Upgrade Programme	CHS	Approved				0	0				0	MDMG	CK
Annual Upgrade Programme	STH	Approved				466,000	0				466,000	MDMG	CK
Annual Upgrade Programme - Unallocated	STH	Planning Sum				271,000	3,200,000	3,200,000	3,200,000	3,200,000	13,071,000	MDMG	CK
Major Equipment Replacement Programme	STH	Planning Sum				179,000	10,380,000	4,907,000	3,000,000	3,000,000	21,466,000	MDMG	CK
Donated Medical Equipment	NGH	Approved				11,000					11,000	MDMG	CK
Donated Medical Equipment	RHH	Approved				87,000					87,000	MDMG	CK
Donated Medical Equipment	CCDH	Approved				0					0	MDMG	CK
Donated Medical Equipment	JHW	Approved				0					0	MDMG	CK
Donated Medical Equipment	WPH	Approved				0					0	MDMG	CK
Donated Medical Equipment	CHS	Approved				12,000					12,000	MDMG	CK
Clinical Skills Equipment	NGH	Planning Sum									0	MDMG	CK
Clinical Skills Equipment	RHH	Planning Sum									0	MDMG	CK
Clinical Skills Equipment	JHW	Planning Sum									0	MDMG	CK
Clinical Skills Equipment	CCDH	Planning Sum									0	MDMG	CK
Clinical Skills Equipment	WPH	Planning Sum									0	MDMG	CK
Clinical Skills Equipment	CHS	Planning Sum									0	MDMG	CK
WPH SPEC-CT Gamma Camera	WPH	FBC Approved	948,000	944,000	870,276	73,000					73,000	P Bailey	PBa
BrainLab	RHH	Approved	737,000	825,000	441,830	365,000		18,000			383,000	L Walton	LW
Replacement 3T MRI Scanner, RHH	RHH	OBC Approved	1,500,000	1,664,000	2,538	1,662,000					1,662,000	P Bailey	PBa
Electron Microscope	RHH	OBC Approved	364,000	364,000	1,859	362,000					362,000	P Bailey	PBa
Replacement RHH Angiography Facilities	RHH	Fees	30,000	30,000	0	30,000					30,000	P Bailey	PBa
<b>MEDICAL EQUIPMENT MODERNISATION TOTAL</b>						<b>4,382,000</b>	<b>13,580,000</b>	<b>8,125,000</b>	<b>6,200,000</b>	<b>6,200,000</b>	<b>38,487,000</b>		

**INFORMATION TECHNOLOGY**

APPROVED SCHEME DETAILS	SITE	SCHEME STATUS	INITIAL APPROVED SUM	LATEST APPROVED SUM	CUMULATIVE SPEND TO 31/3/23	REMAINING PROGRAMMED EXPENDITURE					PROJECT LEAD	BUDGET LEAD	
						2023/24	2024/25	2025/26	2026/27	2027/28			TOTAL
General IT Systems/Telecoms Development	NGH	Approved				6,000	0				6,000	S Addy	MN
General IT Systems/Telecoms Development	RHH	Approved				0	0				0	S Addy	MN
General IT Systems/Telecoms Development	WPH	Approved				31,000	0				31,000	S Addy	MN
General IT Systems/Telecoms Development	JHW	Approved				0	0				0	S Addy	MN
General IT Systems/Telecoms Development	CHS	Approved				44,000	0				44,000	S Addy	MN
General IT Systems/Telecoms Development	STH	Approved				22,000	0	0			22,000	S Addy	MN
Informatics Strategic & Corporate - Unallocated	STH	Planning Sum				262,000	1,250,000	1,250,000	1,250,000	1,250,000	5,262,000	S Addy	MN
Informatics Infrastructure - Unallocated	STH	Planning Sum				0	388,000	500,000	500,000	500,000	1,888,000	S Addy	MN
Purchase to Pay Software	NGH	Approved	109,000	106,000	64,314	43,000					43,000	N Priestley	NP
Electronic Patient Record	STH	FBC Approved	20,999,000	25,366,000	5,382,659	9,546,000	10,437,000				19,983,000	D Black	CM
Maternity EPR	STH	FBC Approved	2,503,000	2,672,000	139,301	1,369,000	1,164,000				2,533,000	D Black	CM
Laboratory Information Management System	STH	Planning Sum	510,000	905,000	96,203	809,000					809,000	P Bailey	MN
<b>INFORMATION TECHNOLOGY TOTAL</b>						<b>12,132,000</b>	<b>13,239,000</b>	<b>1,750,000</b>	<b>1,750,000</b>	<b>1,750,000</b>	<b>30,621,000</b>		

**SERVICE DEVELOPMENT**

**REMAINING PROGRAMMED EXPENDITURE**

APPROVED SCHEME DETAILS	SITE	SCHEME STATUS	INITIAL APPROVED SUM	LATEST APPROVED SUM	CUMULATIVE SPEND TO 31/3/23	2023/24	2024/25	2025/26	2026/27	2027/28	TOTAL	PROJECT LEAD	BUDGET LEAD
New Business Planning Rounds/Service Development	STH	Planning Sum				655,000	3,550,000	3,550,000	3,550,000	3,550,000	14,855,000	CIT	CIT
WPH Bunkers Expansion	WPH	FBC Approved	30,000	10,707,000	4,007,643	6,700,000					6,700,000	R Maxted	CN
JHW Labour Ward Assessment Unit	JHW	OBC Approved	1,679,000	2,426,000	1,416,369	1,009,000					1,009,000	P Bailey	CN
Pharmacy Outpatient Facilities	STH	OBC Approved	5,000	1,081,000	20,269	1,061,000					1,061,000	G Marsh	CN
RHH Washer Disinfectors	RHH	FBC Approved	1,100,000	800,000	707,192	93,000					93,000	V Leckie	CN
Fracture Clinic/SDEC	NGH	Approved	1,500,000	2,101,000	1,997,000	104,000					104,000	B Brewis	CN
RHH Endoscopy, P Floor	RHH	FBC Approved	5,000,000	4,199,000	4,076,532	122,000					122,000	N Thompson	CN
RHH Orthopaedic Elective Hub	RHH	FBC Approved	5,469,000	5,660,000	4,494,644	1,165,000					1,165,000	B Brewis	CN
WPH Nuclear Medicine Department	WPH	FBC Approved	2,498,000	2,753,000	1,945,352	808,000					808,000	P Bailey	CN
A&E Front Door	NGH	Fees	10,000	10,000	148	10,000					10,000	C Powell-Wiffen	CN
WPH Lower Ground Floor (Radiotherapy Accom)	WPH	Fees	10,000	10,000	0	10,000					10,000	R Maxted	CN
Digital Pathology	STH	Phase 1 Approved	235,000	235,000	136,487	98,000					98,000	J Bury	JB
Restorative Dentistry Refurbishment, CCDH	CCDH	Fees	5,000	5,000	0	5,000					5,000	L Walton	CN
SYB Pathology Estates Enabling	STH	Fees	10,000	20,000	0	20,000					20,000	J Bury	CN
Patient Discharge Lounge, Brearley OPD	NGH	Approved	535,000	535,000	0	535,000					535,000	S Jenkins	CN
A&E Expansion to old Fracture Clinic	NGH	Approved	522,000	522,000	0	522,000					522,000	C Powell-Wiffen	CN
High Consequences Infectious Diseases Unit	RHH	Fees	5,000	5,000	0	5,000					5,000	D Campbell	CN
<b>SERVICE DEVELOPMENT TOTAL</b>						<b>12,922,000</b>	<b>3,550,000</b>	<b>3,550,000</b>	<b>3,550,000</b>	<b>3,550,000</b>	<b>27,122,000</b>		

#### INFRASTRUCTURE

APPROVED SCHEME DETAILS	SITE	SCHEME STATUS	INITIAL APPROVED SUM	LATEST APPROVED SUM	CUMULATIVE SPEND TO 31/3/23	REMAINING PROGRAMMED EXPENDITURE					TOTAL	PROJECT LEAD	BUDGET LEAD
						2023/24	2024/25	2025/26	2026/27	2027/28			
Facilities & Security Infrastructure	NGH	Approved				139,000	0				139,000	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
Facilities & Security Infrastructure - Unallocated	STH	Planning Sum				0	61,000	400,000	400,000	400,000	1,261,000	A Jones	AJ
Estates Infrastructure	STH	Planning Sum				350,000	2,800,000	3,400,000	3,400,000	3,400,000	13,350,000	S Hindmarch	SH
Ward Refurbishment Programme	STH	Planning Sum				0	2,537,000	2,750,000	2,750,000	2,750,000	10,787,000	K Jessop	SH
Non-Clinical Public Environments Programme	STH	Planning Sum				0	400,000	400,000	400,000	400,000	1,600,000	K Jessop	SH
Theatre Refurbishment/Expansion Programme	STH	Planning Sum				0	0	246,000	2,000,000	2,000,000	4,246,000	S Hindmarch	SH
Hadfield Lifecycle Assets	NGH	Approved				753,000	801,000	1,046,000	1,110,000	894,000	4,604,000	C Norman	CN
CCTV Upgrade	STH	FBC Approved	10,000	2,492,000	1,191,580	947,000	353,000				1,300,000	A Jones	AJ
Chesterman Theatres Refurbishment	NGH	FBC Approved	7,127,000	7,095,000	2,258,437	2,989,000	1,847,000				4,836,000	P Buckley	CN
JHW Theatre Refurbishment	JHW	FBC Approved	10,000	5,218,000	2,763,474	2,052,000	403,000	0			2,455,000	P Buckley	CN
Lab Benching - RHH/Medical School/JHW	RHH	Fees	10,000	10,000	2,054	8,000					8,000	S Hindmarch	CN
WPH Lifts	WPH	Approved	22,000	859,000	822,457	36,000					36,000	S Hindmarch	CN
Service Block Redevelopment (RHH Generators)	RHH	FBC Approved	7,047,000	9,366,000	1,407,202	7,959,000					7,959,000	C Norman	CN
Huntsman 7 Ward Refurbishment	NGH	Fees/Planning Sum	2,000,000	2,000,000	50,934	0	1,949,000				1,949,000	S Hindmarch	CN
Solar PV Panels	NGH	Approved	5,000	288,000	251,927	36,000					36,000	C Norman	CN
RHH Ward I1 Refurbishment	RHH	Fees	90,000	90,000	27,239	63,000					63,000	S Hindmarch	CN
Radiopharmacy Isolator	NGH	Approved	157,000	157,000	198	157,000					157,000	P Bailey	PB
Relocation of NGH Vascular Angiography Suite	NGH	Fees	5,000	6,000	6,000	0					0	L Johnson	CN
Huntsman Lift Refurbishment	NGH	Planning Sum	1,200,000	1,200,000	0	600,000	600,000				1,200,000	C Norman	CN
Boiler House Switch Panel	NGH	Planning Sum	330,000	200,000	0	200,000					200,000	C Norman	CN
JHW Substation Upgrade	JHW	Fees/Planning Sum	750,000	100,000	0	100,000					100,000	C Norman	CN



Photovoltaic Installation	STH	Planning Sum	269,000	699,000	0	699,000						699,000	C Norman	CN
<b>INFRASTRUCTURE TOTAL</b>						<b>17,088,000</b>	<b>11,751,000</b>	<b>8,242,000</b>	<b>10,060,000</b>	<b>9,844,000</b>	<b>56,985,000</b>			

**LEASED ASSETS**

APPROVED SCHEME DETAILS	SITE	SCHEME STATUS	INITIAL APPROVED SUM	LATEST APPROVED SUM	CUMULATIVE SPEND TO 31/3/23	REMAINING PROGRAMMED EXPENDITURE					TOTAL	PROJECT LEAD	BUDGET LEAD
						2023/24	2024/25	2025/26	2026/27	2027/28			
Right of Use Assets	RHH	Approved	448,000	373,000	0	373,000					373,000	L Walton	LW
<b>LEASED ASSET TOTAL</b>						<b>373,000</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>373,000</b>		

**OTHER**

APPROVED SCHEME DETAILS	SITE	SCHEME STATUS	INITIAL APPROVED SUM	LATEST APPROVED SUM	CUMULATIVE SPEND TO 31/3/23	REMAINING PROGRAMMED EXPENDITURE					TOTAL	PROJECT LEAD	BUDGET LEAD
						2023/24	2024/25	2025/26	2026/27	2027/28			
Redefinition of Capital	STH	Planning Sum				64,000	300,000	300,000	300,000	300,000	1,264,000	N Priestley	NP
Funding for Unfunded Schemes	STH	Planning Sum									0	N Priestley	NP
Prospective schemes	STH	Fees									0	N Priestley	NP
VAT Recovery	STH	Planning Sum				-700,000	-700,000	-700,000	-700,000	-700,000	-3,500,000	N Priestley	NP
Directly Donated Equipment	STH	Planning Sum									0	N Priestley	NP
<b>TOTAL PROGRAMMED EXPENDITURE</b>						<b>46,261,000</b>	<b>41,720,000</b>	<b>21,267,000</b>	<b>21,160,000</b>	<b>20,944,000</b>	<b>151,352,000</b>		

## 2023/24 - 2027/28 CAPITAL PROGRAMME - RISKS AND CONTINGENCIES SUMMARY

Known Risks:	23/24 Unallocated Budget	2023/24 £	2024/25 £	2025/26 £	2026/27 £	2027/28 £	
<b>Ring fenced Envelopes:</b>							
Medical Equipment	271,000						Replacement Programme Plans for £700k Patient Monitors. £429k over-commitment
Major Equipment	179,000						£138k expected uplift to Electron Microscope cost; Ophthalmology Operating Microscope case awaited £155k/deferred to 24/25: £41k under-committed
Informatics Strategic & Corporate	262,000						£25k Cardiology ICE committed. Assumed balance virement to IT Infrastructure
Informatics Infrastructure	0						Priority ISE case at £545k capital and £2k NRR; Bandwith case at £8k, EUC Servers £25k £341k over-committed
Service Development	655,000						Video Wall Kit installation £25k. Longley Lane Disabled Toilet for Eye Clinic £12k, J Floor MDT £60k. TAU to Huntsman 3 proposal & JHW Entonox exposure proposals £TBC
Facilities & Security Infrastructure	0						
Estates Infrastructure	350,000						£350k cost pressure on RHH HV Generators; Potential fees order for RHH lifts
Ward Refurbishment Programme	0						
Non Clinical Public Environments	0						
Theatre Refurbishment Programme	0						
<b>Risks Expected to Emerge in Short-Term (not yet fully quantified/confirmed):</b>							
<b>Cost Increases to approved schemes:-</b>							
<b>a) Schemes previously advised completed:</b>							
- Unfunded schemes		114,000					As at 23/24 M3
<b>b) Ongoing Schemes/Schemes in development:</b>							
- WPH Bunkers Expansion		250,000					Cost pressure £100k plus Contractor claim re damage to public drainage system £150k
- RHH Orthopaedic Elective Hub		?					Lift lobby area works being considered/value engineered - £60k
- WPH Nuclear Medicine Dept		150,000					Cost pressures noted CIT 26/6/23 & Q1 update
- Pharmacy Outpatient Facilities		?					Potential cost pressure
- CCTV Upgrade		?					Potential cost pressure - additional PM & server costs
- Chesterman Theatres			45,000				Potential need for lead lining of Theatres 1&2 being investigated
- JHW Theatres		?	?				Potential £300k cost pressure being validated with cost advisor
							Cost pressure from Business Case to approved allocation to be addressed. Figures shown reflect STH only share at 51.4%, not full ICS pressure on the case. Contributions from partner organisations to STH are assumed in the relevant years.
- LIMS		2,151,000	-3,179,000	3,839,000			
- RHH Spec-CT Gamma Camera		50,000					Potential cost pressure
- RHH B Road		50,000					Minor additional works following closure to traffic
<b>Cost Reductions to approved schemes:-</b>							
- Electronic Patient Record		?	?				Risk/Optimism Bias included in programmed sums £1,294k for 23/24 and £1,378k for 24/25
- Maternity EPR		?	?				Risk/Optimism Bias included in programmed sums £235k for 23/24 and £209k for 24/25
- JHW Labour Ward Assessment Unit		-83,000					Indicative saving on Phases 1&2
- RHH Washer Disinfectors		-18,000					Indicative saving
- Reversal Prior Year VAT provisions and liquidation claims							£497k total; HMRC guidance clarification ongoing
<b>Subtotal - Expected Net Commitments/(Savings)</b>		<b>2,664,000</b>	<b>-3,134,000</b>	<b>3,839,000</b>	<b>0</b>	<b>0</b>	
<b>Slippage Risks:</b>							
- MMEG Unallocated		-41,000	41,000				Projected under-commitment as above
- Electronic Patient Record		?	?				Recruitment ongoing
- Maternity EPR		?	?				Recruitment ongoing
- LIMS		?	?				Plan against PDC still awaited
- Digital Pathology		?	?				Plan against PDC still awaited
- WPH Bunkers Expansion		?	?				Scheme delivery tight to end of March 24
- CCTV Upgrade		?	?				Works timescale/progression unclear
- Chesterman Theatres			?	?			Timescales being reviewed with cost advisor
- RHH HV Generator		?	?				Risk of delayed scheme completion from March 24 to May 24

- Huntsman Lift Refurbishment		-300,000	300,000				Potential slippage on second lift
		<b>-341,000</b>	<b>341,000</b>	<b>0</b>	<b>0</b>	<b>0</b>	
<b>Advancement Opportunities:</b>							
- MDMG Unallocated		429,000	-429,000				23/24 Replacement plans currently not affordable. Clinical risk implications to be reviewed.
- 3D Mapping							Potential lease cover
- IT Infrastructure		341,000	-341,000				Expected over-commitment from ISE, Bandwith, EUC Server cases
- JHW Labour Ward Assessment Unit		796,000					Potential Phase 3 scheme b/fwd to 23/24. Could be reduced by £147k if Phases 2&3 undertaken as a combined tender
- RHH Ward I1 Refurbishment		200,000	-200,000				Possible start Q4 23/24
- AV Procedural Skills Room		40,000	-40,000				TBCAT approval in principle Jan 23
		<b>1,806,000</b>	<b>-1,010,000</b>	<b>0</b>	<b>0</b>	<b>0</b>	

Possible Contingencies:	2023/24	2024/25	2025/26	2026/27	2027/28	
	£	£	£	£	£	
<b>Additional Income:</b>						
Charitable/Donated Funds	?	?	?	?	?	Approx £684k available for 23/24.
National IT PDC Funding		?	?	?	?	Digital Maternity Systems, SYB Pathology Network (LIMS, Digital Pathology)
National PDC Funding	?	?	?	?	?	Funding to support Brearley OPD Patient Discharge Lounge £535k being sought. High Consequence Infection Diseases funding being progressed. £2,296k bid for Bi-plane Thrombectomy in 24/25.
Cancer Alliance	?					
National NIHR Research Funding		?	?			£5m bid to be submitted
<b>Other:</b>						
Potential reduction to ring fenced capital budgets		?	?	?	?	
Removal prioritised schemes		?	?	?	?	
VAT recovery	?	?	?	?	?	
		<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>