

# **Executive Summary**

## **Report to the Board of Directors**

## Being Held on 29 November 2022

Subject	2022/23 Capital Programme and 5 Year Plan – Quarter 2 Update
Supporting TEG Member	Neil Priestley
Author	Neil Priestley
Status <sup>1</sup>	A/N

### **PURPOSE OF THE REPORT**

To provide an update on the 2022/23 Capital Programme and 5 Year Capital Plan.

### **KEY POINTS**

- 1. The current 2022/23 Capital Programme shows a small over-commitment against available resources but, despite good progress in approving significant new schemes, there has already been significant slippage with the likelihood that this will increase further.
- 2 The PDC funding uncertainties noted in the Q1 Update have all been resolved.
- The position for the following 2 years looks very challenging on the basis of expected 3. expenditure on the proposed new Electronic Patient Record and other committed schemes.
- 4. Managing this will necessitate a combination of minimal new scheme approvals, reduced ringfenced budgets and attraction of additional funding.
- 5. Further major schemes related to the Weston Park Cancer Centre Upgrade and SYB Pathology Network IT schemes will require external funding solutions, with the latter provisionally in place.
- Capital planning/prioritisation and scheme "value engineering" continue to be crucial in securing 6. maximum value for money from constrained resources.

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

Aim of the	ne 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**

As per Section 7 of the report.

### APPROVAL PROCESS

Meeting	Date	Approved Y/N

<sup>&</sup>lt;sup>1</sup> Status: A = Approval

D = Debate

<sup>&</sup>lt;sup>2</sup> 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 29th NOVEMBER 2022**

## 2022/23 CAPITAL PROGRAMME AND 5 YEAR PLAN - QUARTER 2 UPDATE

# 1. INTRODUCTION

- 1.1 This report continues the process of monitoring progress on the Trust's 2022/23 Capital Programme and 5 Year Plan. This reflects the outcome of a major review during September/October and outlines the significant changes since the last update report in July 2022.
- 1.2 As previously noted, the application of Operational Capital Allocations (OCA) as the national capital framework has changed the capital planning and monitoring regime significantly with rigid annual capital allocations. As expected, there are considerable challenges to fully deliver the 2022/23 plans and fully utilise the available funding.
- 1.3 The current capital expenditure plan for 2022/23 stands at £53.2m (£58.1m in July). This is a small over-commitment against assumed funding but further slippage is very likely. PDC funding issues are largely resolved. The cumulative over-commitment to 2023/24 of £12.5m is a major concern.
- 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 following two financial years, 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 IT developments which will require separate external funding arrangements. Funding for the latter has been provisionally agreed nationally and considerable work is being undertaken to try to conclude the Full Business Case shortly.

# 2. OVERVIEW OF THE CAPITAL PROGRAMME AND PLAN

2.1 The capital plan for 2022/23 - 2026/27 as per Appendix A shows the following position:-

	2022/23 £m	2023/24 £m	2024/25 £m	2025/26 £m	2026/27 £m
Operational Capital Allocation (assumed for future years)	38.5	38.5	38.5	37.0	37.0
PDC (approved & assumed)	12.1	6.3	3.3		
Donations/Other Resources	1.2	0.6	0.7	0.9	0.9
Programmed Expenditure	(53.2)	(62.0)	(26.5)	(21.1)	(21.0)
Under/(Over) Commitment against OCA	(1.4)	(16.6)	16.0	16.8	16.9
Probable Further Schemes	(0.5)	6.0	(8.0)	(5.0)	(5.0)
Net Capital Plan Position	(1.9)	(10.6)	8.0	11.8	11.9
Cumulative Net Capital Plan Position	(1.9)	(12.5)	(4.5)	7.3	19.2

- 2.2 Whilst there is currently a £1.4m over-commitment on the 2022/23 Capital Programme, Appendix C identifies <u>quantified</u> risks of slippage and cost adjustments. This shows over £3m of slippage risks in addition to slippage already identified and reflected in the latest programme. Whilst business cases for all significant schemes have been signed-off, there remains a considerable amount of work required across the many areas of the programme to deliver a satisfactory position. Any under commitment will not be carried-forward leading to a loss of investment opportunity. Opportunities for advancement are being progressed but must be seen in the context of the expected challenges for 2023/24.
- 2.3 At the time of the Q1 Update the Trust was waiting for confirmation of NHSE Business Case approval and capital funding for the new Electronic Patient Record system, the RHH Elective Orthopaedics Hub and the RHH Endoscopy Expansion scheme. All 3 FBCs were supported and PDC capital funding totalling £21.1m was approved, exactly as assumed in the Capital Programme.
- 2.4 The Trust was also hoping for additional funding, linked to the implementation of IRFS 16, for the new Gamma Knife approved by the Board earlier this year. However, as the previous Gamma Knife lease was a Finance Lease, its replacement will not attract any national funding. Funding was not assumed in the Capital Programme and the £3.4m has been accommodated by slippage on other schemes.
- 2.5 As previously noted, the position for 2023/24 looks very difficult, currently showing a cumulative over-commitment of £12.5m. This reflects the cost of schemes already committed plus investment via the ring-fenced budgets in medical equipment, IT, estate infrastructure, etc. The current position already assumes £6m of slippage on the Major Medical Equipment plan and £5m reductions to other ring-fenced budgets. Clearly, this means that further scheme approvals for 2023/24 are very unlikely and there may also be requirements for further cuts to ring-fenced budgets. Further work will be undertaken on this as part of Business Planning in the coming months.
- 2.6 The 5 Year Plan continues to be over-committed for 2024/25 but does then have uncommitted resources for investment in subsequent years. However, this assumes that the Trust's Operational Capital Allocation is unchanged for future years which is not certain given possible funding and distribution issues.
- 2.7 It will continue to be challenging to drive full use of the current year funding whilst having to restrict capital spend for subsequent years.

# 3. **ASSUMED FUNDING**

- 3.1 The currently assumed funding in the 2022/23 Capital Programme consists of:
  - ♦ The OCA of £38.5m.
  - £12.1m of assumed Public Dividend Capital.
  - ◆ Assumed cover (outside of the OCA) for PFI Lifecycle costs of £0.6m.
  - ♦ £0.6m from donations/insurance claim.
- 3.2 The donations largely relate to the Sheffield Hospitals Charity funding of the NGH Secret Garden, work on which will complete shortly.
- 3.3 The only material changes to the resources since the Q1 Update relate to £518k of PDC funding for the RHH Elective Orthopaedic Hub which will now be received in 2023/24 and £268k of insurance claim proceeds.

- 3.4 The PDC funding relates to the EPR, RHH Elective Orthopaedic Hub and RHH Endoscopy schemes as noted above plus £500k for neonatal developments.
- 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.

# 4. CHANGES TO APPROVED PROGRAMMED EXPENDITURE

- 4.1 There have been various changes to approved expenditure since the Q1 Update 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:
  - ♦ Slippage of £2.0m from the cancellation of the Huntsman 7 ward refurbishment due to operational pressures.
  - ◆ Slippage of £2.3m on the RHH Emergency Generators due to supplier lead times.
  - ♦ An advancement of £1.3m on the JHW Theatres schemes due to good progress on the scheme.
  - ◆ A gain of £2.8m from additional VAT recovered, reduced costs on the RHH Washer Endoscopy Decontamination scheme and unutilised carry-forward of budgets from 2021/22.
  - ♦ Additional approvals of £0.8m, largely in respect of use of the insurance claim proceeds referred to above and new cycle storage facilities around the Trust.
- 4.3 It is also worth noting that final tenders for the Weston Park Cancer Centre have resulted in an increased cost of £3.2m, which will impact in 2023/24. The increased cost reflects changes to planning conditions, requirements and market conditions.

# 5. FURTHER RISKS AND CONTINGENCIES

- 5.1 Appendix C identifies the current <u>quantified</u> financial risks to the capital position.
- 5.2 Other risks to delivering the 2022/23 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
    - o Additional charitable donations/contributions
    - Reducing ring-fenced budgets
    - Restrictions to scheme approvals
  - 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 – **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 Prioritisation against the ring-fenced budgets for 2022/23 is well advanced but there is still considerable work required to progress all schemes.
- 5.4 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 remain a key issue.

# 6. BUSINESS CASES

- 6.1 The Capital Programme at Appendix B formally identifies the status of all current "approved" capital schemes.
- 6.2 Significant business cases have recently been developed in respect of the Maternity EPR and the Laboratory Information Management System. The former will be a commitment against the Trust's capital resources. The latter has national capital funding provisionally allocated but will require the approval of the Boards of the 5 Acute Trusts in South Yorkshire. Both will have significant revenue implications.
- 6.3 On the assumption that there will be funding available from 2025/26 for new schemes, work will be progressed following the coming Business Planning round to identify and prioritise those schemes. 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 2022/23 Capital Programme.
- 7.2 Note the significant slippage risk and the consequences of under-delivering against the Operational Capital Allocation.
- 7.3 Note the current large over-commitment for the following 2 years, which will need to be addressed via an appropriate combination of restrictions to scheme approvals, ring-fenced budget cuts and significant additional funding.
- 7.4 Note the likelihood of minimal further new scheme approvals in the coming years and the likely consequences of this.
- 7.5 Note the risks outlined in Section 5 above and, in particular, the need to identify opportunities to secure additional capital funding.
- 7.6 Note the importance of capital planning/prioritisation and "value engineering" in securing maximum benefits from limited capital and revenue funding.

Neil Priestley Chief Finance Officer November 2022

### 2022/23 - 2026/27 CAPITAL EXPENDITURE PLAN

		l l	2022/23	2023/24	2024/25	2025/26	2026/27	
			£	£	£	£	£	
Programmed Capital Expenditure Q2 Update			53,235,000	61,976,000	26,455,000	21,113,000	20,996,000	
Notified Operational Capital Allocation			37,007,000	37,007,000	37,007,000	37,007,000		23/24 Onwards - provisional.
Cap & Collar Protection			1,462,000	1,462,000	1,462,000	0		23/24 Onwards - provisional.
IFRS12/PFI Lifecycle		1	684,000	641,000	682,000	892,000	946,000	As per programme
PDC Funding PDC Funding	Anticipated Confirmed	1	12,089,000	6,261,000	3,269,000	0	0	RHH Orthopeadic Hub £5,469k total; RHH Endoscopy £4039k, Neonatology Capacity £500k; EPR £11,611k total
Donations	Committee		591.000	0,261,000	3,269,000	0		As per programme
Gross Expenditure Target			51,833,000	45,371,000	42.420.000		37.953.000	
Oroso Experientero Turgot			01,000,000	40,071,000	42,420,000	01,000,000	07,000,000	
Assumed available increase/(required reduction) to programmed								
spend achieve the OCA	31,701,000		-1,402,000	-16,605,000	15,965,000	16,786,000	16,957,000	
	Assumed		2022/23	2023/24	2024/25	2025/26	2026/27	
	Funding		£	£	£	£	£	
	Options	<u> </u>						
Other "Probable" Schemes								
Phamarcy WOS	Internal	U		0		ļ		£750k Concept in development/assume fund from Service Development envelope
Maternity EPR	Internal	В	-493,000	-1,585,000	-359,000			As per shared IT profile
Other	Internal	<b>!</b>		-3,415,000	-4,641,000	-5,000,000	-5,000,000	23/24 assumes Maternity EPR costs
Further reductions in Ringfence envelopes		<u> </u>		5,000,000	3,000,000			Cobia da Maja Madia I Sariana da Danasara Danisara
Projected Major Medical Equipment slippage		-		6,000,000	-6,000,000			Subject to Major Medical Equipment Programme Review
Total Approved and Probable Schemes	-12,493,000		-493.000	6,000,000	-8,000,000	-5,000,000	-5,000,000	
Total Approved and Probable Schemes	-12,493,000		-493,000	6,000,000	-0,000,000	-5,000,000	-5,000,000	
NET CAPITAL PLAN POSITION	19.208.000		4 905 000	-10.605.000	7.005.000	11.786.000	44 057 000	
NET CAPITAL PLAN POSITION	19,200,000		-1,095,000	-10,605,000	7,965,000	11,700,000	11,957,000	
Possible Schemes						+		
Hybrid (Endovascular) Theatre	Internal	U		-300,000	-3,900,000			Options and financial feasibility under consideration.
Firth 7/CCU Refurbishment	Internal/Charitable	В		-300,000	-3,950,000			Indicative OBC costs £4250k less £300k enabling works approved. Potential use of Ward Refurb funding.
Longley Lane	Internal	Ū		?	?	?	?	Work required to consider options
Ventilation Upgrades	Internal	Ü		?	?	?	?	Ventilation Group reviewing need/deliverability
Major Trauma Ward	Internal	В		-2,000,000				
SDEC/SAC/TAU changes	Internal	U		-100,000	-4,800,000			Concept in development: £4.9m indicative cost
A&E Frontdoor/NGH Assessment Developments	Internal	U		-500,000	-4,000,000	-6,000,000		Linked to reprovision of Fracture Clinic post and SDEC/SAC/TAU
JHW Ward Refurbishment	Internal	В	?	-2,400,000	-3,505,000	-2,595,000		£8.5m projected total cost Need for earlier work on LWAU re CQC action plan
NGH Radiology Outpatients	Internal	U				-7,400,000		SOC to CIT 5/9/22
Outpatient Facilities, RHH & NGH	Internal	U		-1,500,000	-1,000,000	-1,000,000		Trust Strategy (post COVID-19) to be developed including Blood Disorders.
Dermatology Facilties	Internal	U			-2,000,000	-3,000,000		Concept paper for upgrade to facilities produced but being reconsidered.
Critical Care Capacity	Internal	U				-5,000,000		Requirement unclear but potential requirement in 5 year period
Private Patient Facilities	External	U			-1,000,000	0.000.000		Scheme(s) dependent upon clinical opportunity/facility necessary.
Expansion/Upgrade of Bev Stokes Palliative Care Unit Upgrade	Internal Charitable	U		-2,500,000	-7.000.000	-3,000,000		Paused. Some refurbishment required. Likely smaller qualitative scheme  Consideration of options ongoing
Intra-Operative MRI Scanner (RHH A Floor)	Internal/Charitable	Ü		-4,864,000	-1,000,000	+		OBC to be refined. Potential for theatre area to be charitably funded
WPH MRI Simulator/MRI Linac	Internal	Ü	<del>                                     </del>	-4,004,000	-2,200,000	1		Case of need to be submitted but not supported.
Ophthalmology Reconfiguration	Internal	Ü	<del>                                     </del>	-950,000	-1,200,000	1		Emerging £2m+ scheme
Chesterfield Renal Satellite Unit	Internal	Ü		-1.500.000	1,200,000	<b>-</b>		Practical plan yet to be agreed
RHH Day Case Theatres	Internal	Ü		-2,000,000	-2,000,000	-1,000,000		Further phase of Theatre Refurbs Programme
NGH Endoscopy	Internal	Ü		-1.131.000	_,,	.,222,300		Outline cost as reported to CIT 25/4/22
RHH Histopathology Labs	Internal	Ü		?	?	i		Scheme could range between £3-£10m
Leased equipment not within MMEG plan	Internal	Ū		?	?	?		SVC lasers x2; Replacement MES
Other	?				?			New proposals likely, including proposal to revert PET-CT Scanning to STH facility
Total Possible Schemes	-85,295,000		0	-19,745,000	-36,555,000	-28,995,000	0	
Schemes requiring seperate funding source								
Other WPH Upgrades/Expansion		В			-5,000,000	-10,000,000	?	Transformation scheme at £60m being reconsidered. Further funding required in 26/27
SYB Pathology Reconfiguration		U		?	?	?		Requirement TBC - national funding indicated as available
	45.000.000	<u> </u>	_		# 000 CCC	10.000.555		
	-15,000,000		0	0	-5,000,000	-10,000,000	0	

### SHEFFIELD TEACHING HOSPITALS NHS FOUNDATION TRUST - 2022/23 - 2026/27 CAPITAL PROGRAMME

### SUMMARY OF APPROVED SCHEMES AGAINST RESOURCES AVAILABLE

CAPITAL PROGRAMME DETAILS	2022/23	2023/24	2024/25	2025/26	2026/27
Approved Scheme Details:					
Medical Equipment Modernisation	10,957,000	14,217,000	5,135,000	8,125,000	6,200,000
Information Technology	8,513,000	13,237,000	8,288,000	1,750,000	1,750,000
Service Development	17,809,000	14,250,000	3,550,000	3,550,000	3,550,000
Infrastructure	17,685,000	20,861,000	9,882,000	8,088,000	9,896,000
Leased Assets	0	0	0	0	0
Planned Rev-Cap Transfers	0	111,000	300,000	300,000	300,000
Funding for Unfunded Schemes	0	0	0	0	0
VAT Recovery	-1,729,000	-700,000	-700,000	-700,000	-700,000
Directly Donated Equipment	0	0	0	0	0
					·
Approved Scheme Total	53,235,000	61,976,000	26,455,000	21,113,000	20,996,000

APPROVED SCHEME DETAILS BY SITE			NGH					RHH				CCDH				
AFFROVED SCHEME DETAILS BY SITE	2022/23	2023/24	2024/25	2025/26	2026/27	2022/23	2023/24	2024/25	2025/26	2026/27	2022/23	2023/24	2024/25	2025/26	2026/27	
Medical Equipment Modernisation	1,904,000	0	0	0	0	5,330,000	1,917,000	0	18,000	0	162,000	0	C	0	0	
Information Technology	43,000	0	0	0	0	13,000	0	0	0	0	0	0	C	0	0	
Service Development	2,575,000	50,000	0	0	0	8,546,000	1,771,000	0	0	0	0	0	C	0	0	
Infrastructure	6,124,000	5,336,000	2,529,000	892,000	946,000	5,092,000	6,682,000	0	0	0	6,000	0		0	0	
Leased Assets	0	0	0	0	0	0	0	0	0	0	0	0	C	0	0	
APPROVED SCHEME TOTAL	10,646,000	5,386,000	2,529,000	892,000	946,000	18,981,000	10,370,000	0	18,000	0	168,000	0	C	0	0	

APPROVED SCHEME DETAILS BY SITE			JHW					WPH			CHS				
APPROVED SCHEME DETAILS BY SITE	2022/23	2023/24	2024/25	2025/26	2026/27	2022/23	2023/24	2024/25	2025/26	2026/27	2022/23	2023/24	2024/25	2025/26	2026/27
Medical Equipment Modernisation	435,000	0	0	0	0	972,000	0	0	0	0	33,000	0	0	0	0
Information Technology	0	0	0	0	0	0	0	0	0	0	132,000	0	0	0	0
Service Development	900,000	1,526,000	0	0	0	5,295,000	7,353,000	0	0	0	0	0	0	0	0
Infrastructure	2,522,000	2,300,000	403,000	0	0	725,000	0	0	0	0	238,000	0	0	0	0
Leased Assets	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
APPROVED SCHEME TOTAL	3,857,000	3,826,000	403,000	0	0	6,992,000	7,353,000	0	0	0	403,000	0	0	0	0

APPROVED SCHEME DETAILS BY SITE		ST	H UNALLOCATE	D	
APPROVED SCHEME DETAILS BY SITE	2022/23	2023/24	2024/25	2025/26	2026/27
Medical Equipment Modernisation	2,121,000	12,300,000	5,135,000	8,107,000	6,200,00
Information Technology	8,325,000	13,237,000	8,288,000	1,750,000	1,750,00
Service Development	493,000	3,550,000	3,550,000	3,550,000	3,550,00
Infrastructure	2,978,000	6,543,000	6,950,000	7,196,000	8,950,00
Leased Assets	0	0	0	0	
Planned Rev-Cap Transfers	0	111,000	300,000	300,000	300,00
Funding for Unfunded Schemes	0	0	0	0	
VAT Recovery	-1,729,000	-700,000	-700,000	-700,000	-700,00
Directly Donated Equipment	0	0	0	0	
APPROVED SCHEME TOTAL	12,188,000	35,041,000	23,523,000	20,203,000	20,050,00

Appendix B

PROGRAMMED EXPENDITURE 2022/23 - 2026/27

MEDICAL EQUIPMENT MODERNISATION

APPROVED SCHEME DETAILS													
	SITE	SCHEME STATUS	INITIAL APPROVED SUM	LATEST APPROVED SUM	CUMULATIVE SPEND TO 31/3/22	2022/23	2023/24	2024/25	2025/26	2026/27	TOTAL	PROJECT LEAD	BUDGET LEAD
Annual Upgrade Programme		Approved				991,000	0				991,000		CK
Annual Upgrade Programme	RHH	Approved				258,000	0				258,000		CK
Annual Upgrade Programme	CCDH	Approved				162,000	0				162,000	MDMG	CK
Annual Upgrade Programme	JHW	Approved				435,000	0				435,000		CK
Annual Upgrade Programme	WPH	Approved				9,000	0				9,000	MDMG	CK
Annual Upgrade Programme	CHS	Approved				33,000	0				33,000	MDMG	CK
Annual Upgrade Programme	STH	Approved				1,868,000	0				1,868,000	MDMG	CK
	STH	Planning Sum				188,000	3,200,000	3,200,000	3,200,000	3,200,000	12,988,000	MDMG	CK
Major Equipment Replacement Programme	STH	Planning Sum				0	9,100,000	1,935,000	4,907,000	3,000,000	18,942,000	MDMG	CK
Donated Medical Equipment	NGH	Approved				5,000	0				5,000	MDMG	CK
Donated Medical Equipment		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		Approved				0	0				0	MDMG	CK
		Approved				0	0				0	MDMG	CK
		Planning Sum					-				0	MDMG	CK
Clinical Skills Equipment	RHH	Planning Sum									0	MDMG	CK
Clinical Skills Equipment	JHW	Planning Sum									0	MDMG	СК
Clinical Skills Equipment	CCDH	Planning Sum									0	MDMG	СК
	WPH	Planning Sum									0	MDMG	СК
	CHS	Planning Sum									0	MDMG	СК
		Completed	2,094,000	2,089,000	2,004,670	84,000						S Tozer-Loft	DC
		FBC Approved	1,440,000	1,565,000	669,721	895,000						P Bailey	PBa
		FBC Approved	948,000	939,000	59,537	879,000						P Bailey	PBa
,		FBC Approved	1,789,000	2,611,000	2,379,879	231,000						P Bailey	PBa
-		FBC Approved	3,386,000	3,386,000	0	3,386,000					3,386,000		LW
		Approved	737,000	737,000	0	466,000	253,000		18,000			L Walton	LW
		Planning Sum	1,500,000	1,664,000	0	0	1,664,000				1,664,000		PBa
•		SOC Approved	735,000	908,000	0	908,000						L Johnson	LJ
		FBC Approved	264,000	309,000	309,000	0						L Johnson	LJ
	RHH	OBC Approved	500,000	701,000	607,000	94,000							SG
MRI Accelerator Software	STH	Approved	65,000	65,000	0	65,000					65,000	P Bailey	PBa
MEDICAL EQUIPMENT MODERNISATION TOTAL						10,957,000	14,217,000	5,135,000	8,125,000	6,200,000	44,634,000		
						,,	, ,550	-,,5	-,:,:	-,,300	, ,		

### INFORMATION TECHNOLOGY

							REM	IAINING PROGR	AMMED EXPEND	DITURE			
APPROVED SCHEME DETAILS	SITE	SCHEME STATUS	INITIAL APPROVED SUM	LATEST APPROVED SUM	CUMULATIVE SPEND TO 31/3/22	2022/23	2023/24	2024/25	2025/26	2026/27	TOTAL	PROJECT LEAD	BUDGET LEAD
General IT Systems/Telecoms Development	NGH	Approved				0	0				0	S Addy	MN
General IT Systems/Telecoms Development	RHH	Approved				0	0				0	S Addy	MN
General IT Systems/Telecoms Development	WPH	Approved				0	0				0	S Addy	MN
General IT Systems/Telecoms Development	JHW	Approved				0	0				0	S Addy	MN
General IT Systems/Telecoms Development	CHS	Approved				132,000	0				132,000	S Addy	MN
General IT Systems/Telecoms Development	STH	Approved				864,000	0	0			864,000	S Addy	MN
Informatics Strategic & Corporate - Unallocated	STH	Planning Sum				1,166,000	1,250,000	1,250,000	1,250,000	1,250,000	6,166,000	S Addy	MN
Informatics Infrastructure - Unallocated	STH	Planning Sum				271,000	500,000	500,000	500,000	500,000	2,271,000	S Addy	MN
Purchase to Pay Software	NGH	Approved	109,000	106,000	64,314	43,000					43,000	N Priestley	NP

PACS	STH	FBC Approved	242,000	4,430,000	3,734,180	696,000					696,000	S Addy	MN
Electronic Patient Record	STH	FBC Approved	20,999,000	23,223,000	0	5,198,000	11,487,000	6,538,000			23,223,000	D Black	CM
Ophthalmology MERGE System	RHH	Completed	535,000	276,000	262,946	13,000					13,000	L Walton	MN
Patient App Software	STH	Approved	1,128,000	1,254,000	1,200,361	54,000					54,000	N Thompson	MN
Cyber Security Immutability Backup	STH	Approved	398,000	398,000	322,000	76,000					76,000	S Addy	MN
Laboratory Information Management System	STH	Approved	510,000	92,000	91,740						0	P Bailey	MN
PACS Extension	STH	Planning Sum	877,000	0	0	0					0	S Addy	MN
INFORMATION TECHNOLOGY TOTAL						8,513,000	13,237,000	8,288,000	1,750,000	1,750,000	33,538,000		

SERVICE DEVELOPMENT

APPROVED SCHEME DETAILS	SITE	SCHEME STATUS	INITIAL APPROVED SUM	LATEST APPROVED SUM	CUMULATIVE SPEND TO 31/3/22	2022/23	2023/24	2024/25	2025/26	2026/27	TOTAL	PROJECT LEAD	BUDGET LEAD
New Business Planning Rounds/Service Developme	r STH	Planning Sum				456,000	3,550,000	3,550,000	3,550,000	3,550,000	14,656,000	CIT	CIT
A&E Decontamination Unit, NGH	NGH	Approved/On Hold	188,000	380,000	330,606	0	50,000				50,000	C Powell-Wiffen	CN
Bowel Cancer Screening Accommodation	RHH	Planning Sum	150,000	200,000	166,795	0	33,000				33,000	C Powell-Wiffen	CN
WPH Bunkers Expansion	WPH	FBC Approved	30,000	10,693,000	795,326	2,545,000	7,353,000				9,898,000	D Campbell	CN
Firth 7/CCU	NGH	Fees/Planning Sum	5,000	300,000	40,702	260,000					260,000	L Johnson	CN
Replacement of UoS 1.5T MRI	RHH	Fees	5,000	12,000	830	11,000						S Hindmarch	CN
NGH Secret Garden	NGH	Approved	292,000	292,000	827	291,000					291,000		CN
JHW Labour Ward Assessment Unit	JHW	Fees	1,679,000	2,426,000	0	900,000	1,526,000				2,426,000	P Bailey	CN
Pharmacy Outpatient Facilities	STH	Fees	5,000	5,000	0	5,000						G Marsh	CN
Pharmacy Quality Control Equipment	STH	Approved	32,000	32,000	0	32,000					32,000	G Marsh	CN
RHH Washer Disinfectors	RHH	FBC Approved	1,100,000	761,000	0	761,000					761,000	V Leckie	CN
Fracture Clinic/SDEC	NGH	Approved	1,500,000	1,986,000	0	1,986,000					1,986,000	B Brewis	CN
RHH Endoscopy, P Floor	RHH	Planning Sum	5,000,000	4,039,000	0	4,039,000					4,039,000	N Thompson	CN
RHH Orthopeadic Elective Hub	RHH	Planning Sum	5,469,000	5,660,000	207,640	3,714,000	1,738,000				5,452,000		CN
RHH Histpathology Reconfiguration	RHH	Fees	5,000	5,000	0	5,000					5,000	J Bury	CN
WPH Nuclear Medicine Department	WPH	FBC Approved	2,498,000	2,750,000	0	2,750,000					2,750,000	P Bailey	CN
RHH Angiography Suite Upgrade	RHH	Fees	5,000	5,000	0	5,000						P Bailey	CN
NGH Hip Fracture Ward (Huntsman 5)	NGH	Completed	3,000	2,805,000	2,780,471	25,000						S Gregory	CN
Ophathalmology Outpatient Facilities	RHH	Fees	5,000	5,000	0	5,000					-,	L Walton	CN
Ophathalmology Drug Fridge	RHH	Approved	6,000	6,000	9	6,000						L Walton	LW
Psychology and Neuro Psychotherapy Facilities	NGH	Fees	3,000	3,000	0	3,000			-			L Walton	CN
A&E Front Door	NGH	Fees	10,000	10,000	0	10,000				_	10,000	C Powell-Wiffen	CN
SERVICE DEVELOPMENT TOTAL						17,809,000	14,250,000	3,550,000	3,550,000	3,550,000	42,709,000		+

INFRASTRUCTURE

. <u></u>							REM	IAINING PROGR	AMMED EXPEN	DITURE			
APPROVED SCHEME DETAILS	SITE	SCHEME STATUS	INITIAL APPROVED SUM	LATEST APPROVED SUM	CUMULATIVE SPEND TO 31/3/22	2022/23	2023/24	2024/25	2025/26	2026/27	TOTAL	PROJECT LEAD	BUDGET LEAD
Facilities & Security Infrastructure	NGH	Approved				212,000	0				212,000	A Jones	AJ
Facilities & Security Infrastructure	RHH	Approved				11,000	0				11,000	A Jones	AJ
Facilities & Security Infrastructure	JHW	Approved				0	0				0	A Jones	AJ
Facilities & Security Infrastructure	CCDH	Approved				6,000	0				6,000	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		_		57,000	400,000	400,000	400,000	400,000	1,657,000	A Jones	AJ

Estates Infrastructure	STH	Planning Sum				1,824,000	3,400,000	3,400,000	3,400,000	3,400,000	15,424,000 S Hindmarch	SH
Ward Refurbishment Programme	STH	Planning Sum				0	2,343,000	2,750,000	2,750,000	2,750,000	10,593,000 K Jessop	SH
Non-Clinical Public Environments Programme	STH	Planning Sum				348,000	400,000	400,000	400,000	400,000	1,948,000 K Jessop	SH
Theatre Refurbishment/Expansion Programme	STH	Planning Sum				0	0	0	246,000	2,000,000	2,246,000 S Hindmarch	SH
Hadfield Lifecycle Assets	NGH	Approved				684,000	641,000	682,000	892,000	946,000	3,845,000 C Norman	CN
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i												
RHH Main Lifts	RHH	Approved	6,500,000	5,095,000	4,999,481	96,000					96,000 S Hindmarch	CN
CCTV Upgrade		OBC Approved	10,000	765,000	28,685	736,000					736,000 A Jones	AJ
Chesterman Theatres Refurbishment	NGH	FBC Approved	7,127,000	7,145,000	255,962	2,332,000	2,710,000	1,847,000			6,889,000 P Buckley	CN
JHW Theatre Refurbishment		FBC Approved	10,000	5,241,000	138,109	2,400,000	2,300,000	403,000	0		5.103.000 P Buckley	CN
		' '	,		,	, ,		,			-,,	
Jessops Wing Ward Refurbishment	JHW	Fees	5.000	177.000	55,601	122,000					122,000 S Hindmarch	CN
<u>-                                    </u>			,,,,,,,	,	,	,					, ,	
RHH Ward H1 & H2 Refurbishment	RHH	Approved	1,520,000	4,340,000	3,007,764	1,333,000					1,333,000 S Hindmarch	CN
RHH B Road Water Proofing		Approved	10,000	3,579,000	2,105,945	1,473,000					1,473,000 S Hindmarch	CN
Lab Benching - RHH/Medical School/JHW		Fees	10,000	10,000	83	10,000					10,000 S Hindmarch	CN
Ventilaton Works		Approved	350,000	350,000	0	350,000					350,000 S Hindmarch	CN
NGH Renal Pipework		Approved	385,000	875,000	574,795	300,000					300,000 S Hindmarch	CN
WPH Lifts		Approved	22,000	1,000,000	274.537	725.000					725.000 S Hindmarch	CN
MEC Lifts		Complete	200,000	150,000	96,980	53,000					53,000 S Hindmarch	CN
Huntsman Lifts		Approved	200,000	8,000	7,721	0					0 S Hindmarch	CN
Firth Chiller Replacement		Approved	613,000	693,000	69,139	624,000					624,000 S Hindmarch	CN
Chesterman Chiller Replacement		Approved	526,000	575,000	2,482	573,000					573.000 S Hindmarch	CN
		''	, ,		, -	,						
Laundry Modernisation	NGH	Approved	584,000	751,000	498,477	253,000					253,000 A Jones	AJ
RHH Generators		Planning Sum	7,047,000	7,982,000	0	1,300,000	6,682,000				7,982,000 C Norman	CN
Huntsman 7 Ward Refurbishment	NGH	Fees/Planning Sum	2.000.000	2.000.000	0	15.000	1.985.000				2,000,000 S Hindmarch	CN
Reconfiguration of SCBU	JHW	Withdrawn	40,000	0	0	0					0 S Gregory	CN
Relocation of NGH Vascular Angiography Suite	NGH	Fees	5,000	5,000	0	5,000					5,000 L Johnson	CN
Brearley NCPE works	NGH	Fees	3,000	3,000	0	3,000					3,000 S Hindmarch	CN
RHH B Floor NCPE works	RHH	Fees	2,000	2,000	0	2,000					2,000 S Hindmarch	CN
Theates 14/15 Upgrade	RHH	Aprpoved	485,000	485,000	0	485,000					485,000 S Hindmarch	CN
RHH LTHW		Approved	15,000	3,753,000	3,719,999	32,000					32,000 S Hindmarch	CN
Theatre 8 Lead Lining		Approved	243,000	319,000	0	319,000		j			319,000 S Hindmarch	CN
Wycliffe House Boiler		Approved	70,000	70,000	0	70,000		j			70,000 C Norman	CN
Michael Carlisle Centre Upgrade	CHS	Approved	238,000	238,000	0	238,000					238,000 C Norman	CN
Estates Vehicles		Approved	90,000	90,000	0	90,000					90,000 C Norman	CN
Solar PV Panels		Fees	5,000	5,000	0	5,000					5,000 C Norman	CN
Moving & Handling Equipment - Hoverjack	STH	Approved	8,000	8,000	0	8,000					8.000 L Walton	LW
NGH Cycle Storage		Approved	241,000	241,000	0	241,000					241,000 S Hindmarch	AJ
RHH Cycle Storage		Approved	260,000	260,000	0	260,000					260.000 S Hindmarch	AJ
RHH Ward I1 Refurbishment		Fees	90,000	90,000	0	90,000					90,000 S Hindmarch	CN
	+		22,300	22,200		22,300		Ì			22,222 22/16/19/1	
INFRASTRUCTURE TOTAL	+-					17.685.000	20.861.000	9.882.000	8.088.000	9.896.000	66.412.000	

LEASED ASSETS

								REM	IAINING PROGR	AMMED EXPEND	DITURE			
	APPROVED SCHEME DETAILS	SITE	SCHEME STATUS	INITIAL APPROVED SUM	LATEST APPROVED SUM	CUMULATIVE SPEND TO 31/3/22	2022/23	2023/24	2024/25	2025/26	2026/27	TOTAL	PROJECT LEAD	BUDGET LEAD
Į														
	LEASED ASSET TOTAL				•		0	0	0	0	0	0		
ſ								_		_				

**OTHER** 

							REM	IAINING PROGR	AMMED EXPEND	ITURE			
APPROVED SCHEME DETAILS	TE SCHEM	EME STATUS	INITIAL APPROVED SUM	LATEST APPROVED SUM	CUMULATIVE SPEND TO 31/3/22	2022/23	2023/24	2024/25	2025/26	2026/27	TOTAL	PROJECT LEAD	BUDGET LEAD

Planned rev-cap Transfers/Redefinition of Capital	STH	Planning Sum		0	111,000	300,000	300,000	300,000	1,011,000	N Priestley	NP
Funding for Unfunded Schemes	STH	Planning Sum							0	N Priestley	NP
VAT Recovery	STH	Planning Sum		-1,729,000	-700,000	-700,000	-700,000	-700,000	-4,529,000	N Priestley	NP
Directly Donated Equipment	STH	Planning Sum							0	N Priestley	NP

TOTAL PROGRAMMED EXPENDITURE 53,235,000 61,976,000 26,455,000 21,113,000 20,996,000 183,775,000

#### SHEFFIELD TEACHING HOSPITALS NHS FOUNDATION TRUST - CAPITAL PROGRAMME

### 2022/23 - 2026/27 CAPITAL PROGRAMME - RISKS AND CONTINGENCIES SUMMARY

h							
Known Risks:	22/23 Unallocated	2022/23	2023/24	2024/25	2025/26	2026/27	
Bing fenced Envelopes	Budget	£	£	£	£	£	
Ring fenced Envelopes:	188.000						
Medical Equipment	188,000						
Major Equipment	4.400.000						£1.136 uncommitted
Informatics Strategic & Corporate	1,166,000						
Informatics Infrastructure	271,000						VM Ware Infrastructure £121k, Flexpod Replacement phase 2 £1,968k = £1,818k over-commitment
Service Development	456,000						Assume £557k for Endoscopy P Floor equipt
Facilities & Security Infrastructure	57,000						
Estates Infrastructure	1,824,000						Further RHH LTHW?
Ward Refurbishment Programme	0						
Non Clinical Public Environments	348,000						JHW scheme at £300k in development
Theatre Refurbishment Programme	0						
Risks Expected to Emerge in Short-Term (not yet fully quantified/	confirmed):						
Cost Increases to approved schemes:-							
a) Schemes previously advised completed:							1. 1.0.10.10.10
- Unfunded schemes		80,000					As at 22/23 M6
							4
b) Ongoing Schemes/Schemes in development:							
- JHW Labour Ward Assessment Unit			110,000				Pressure notified Sept 22. Shell build to continue in 22/23 and costs re-assessed for completion 23/24
- Fracture Clinic/SDEC		284,000					Cost pressure to be confirmed following tender review
- RHH Endoscopy, P Floor		101,000	0				Equipment needs - funding source to be identified
- Refurbishment Wards H1/H2		240,000					Cost pressure confirmed at Q2
- Core Network Fibre		150,000					Scheme capital/revenue classification under review
- RHH SPEC-CT Gamma Camera		20,000					Potential estates cost pressure being assessed
- RHH Histpathology Reconfiguration		15,000					Fees expected to be higher than original requested sum
- RHH B Floor NCPE works		200,000	50,000				Final tender costs awaited; phased plan over two years with majority of cost incurred in 22/23
- CCTV Upgrade		?	?				Tender outcome being finalized; expectation of cost increase on OBC sum
0.48.4.6							
Cost Reductions to approved schemes:-		40.000					Linear Black to be subscription (linear property)
- Terrarecon Upgrade - Reversal Prior Year VAT provisions and liquidation claims		-40,000 -1,064,100	2				Licenses likely to be subscription (licenses may not be required)  HMRC discussions ongoing; Estates, COS14, Car Parking (Q floor released)
- Neversal Frior Teal VAT provisions and liquidation daints		-1,004,100					Titulive discussions origonity, Estates, 600 14, Car Faiking (Q noor released)
Subtotal - Expected Net Commitments/(Savings)		-14.100	160.000	0			
Cubicial - Expedica Net Communicator (Cuvings)		-14,100	100,000				
Slippage Risks:							
- Cath Lab B		?	?				Slippage risk flagged Estates Sept 22 & cost pressure from un-recognised pre-installation costs
- MDMG Unallocated		-188,000	188,000				Suppage tisk hagged Estates sept 22 & cost pressure from uni-recognised pre-installation costs
- MMEG Unallocated		7	?				Slippage risk re procurement/delivery timescales
- IT Strategic & Corporate		-1,136,000	1,136,000				Unplanned envelope
- IT Infrastructure		1.818.000	-1.818.000				Projected over-commitment as above
- WPH Bunkers Expansion		-200,000	200,000				Slippage risk arising from contractor conditions
- RHH Washer Disinfectors		200,000	200,000				Slippage risk flagged Estates Sept 22
- Fracture Clinic/SDEC		-100.000	100.000				Scheme due to complete 31/3/22 - slippage risk given closeness to year-end deadline
- WPH Nuclear Medicine Dept		-100,000	7				Scheme due to complete 31/3/22 - slippage risk given closeness to year-end deadline  Scheme due to complete 31/3/22 - slippage risk given closeness to year-end deadline
- Service Development Unallocated		ı					Endoscopy P Floor equipt shown separately above against P Floor scheme
- CCTV Upgrade		-736,000	736,000				Procurement recommenced; Expressions of interest received. Delivery/installation risks
- WPH Lifts		-730,000	730,000		1		r receivement recommended, Expressions of interest received. Deliverymistaliation risks
- Estates Infrastructure		-1.824.000	1.824.000		1		Offsetting options included in Advancement Opportunities
- Ventilation Works		-350,000	350.000		1		Options delayed
- WPH SPEC-CT Gamma Camera		-150,000	150,000				Possible delay due to radiation shielding survey requirments; revised programme awaited
- WPH SPEC-CT Gamma Camera - Estates Vehicles		-90,000	90,000		1		Plan/procurement in early stages
- Estates Venicles - Facilities Vehicles		-90,000	90,000		1		Possible supplier delay in delivery
- i dollidos Vetiloles		-99,000	99,000		1		i domino duppino dulay in delivery
		-3,055,000	3,055,000	0	0	0	5
		2,300,030	-,,		i		1
Advancement Opportunities:			<u> </u>				1
- MDMG Potential advance		96,000	-96.000				Cath Lab B EP recording system £96k
- MMEG Potential advance		?	?				
- Pharmacy WOS Fees		20.000	-20.000				Potential to be considered
Barrier placement to permanently shut B Road to public access vehi	cles	20,000	-20,000				Potential to be considered
- Electric Charging Facilities	OIC O	350,000	-350,000				Potential to be considered
- Solar PV Panels		680.000	-680,000				Potential to be considered  Potential to be considered
- Jessops Wing Ward Refurbishment		2	-000,000				Potential to be considered  Potential to be considered
- ocooppo wing ward Neidringlinglif		ſ	r		ı		r diomini to be definiteled

- RHH Orthopeadic Elective Hub	600,000	-600,000				Planned equipment purchases
- WPH Lower Ground Floor Refurbishment	?	?				Potential to be considered
Other Contingency Options:						
- Ultrasound Upgrade	60,000					Bid against NHS Resolution funds for improvement of maternity
- SVC lasers?	?					Unlikely; indications of 10 to 12 month lead time for equipment
	1,826,000	-1,766,000	0	0	0	

Possible Contingencies:	20	022/23	2023/24	2024/25	2025/26	2026/27	
		£	£	£	£	£	
Additional Income:							
Charitable/Donated Funds		?	?	?	?	?	
							Digital Maternity Systems, SYB Imaging Network (re Home Workstations, PACS/RIS Shared Image Platform),
National IT PDC Funding		?	?	?	?	?	SYB Pathology Network (LIMS, Digital Pathology)
National PDC Funding		?	?	?	?	?	£1.58m for SY Urgent & Emergency Care Mental Health Pathways over 22/23 - 24/25
National PDC Funding - NHS Resolution		60,000					Ultrasound Bid 1/6/22
Cancer Alliance		?					Potential re RHH Endoscopy
Other:							
Potential reduction to ring fenced capital budgets		?	?	?	?	?	
Removal prioritised schemes		?	?	?	?	?	
VAT recovery		?	?	?	?	?	
		60,000	0	0	0	0	