

## HDH RAAC Services Relocation, Design & Eradication 23/24 Programme of Works Template Schemes sub-£5m

### SECTION 1: SCHEME OVERVIEW

#### SCHEME DETAILS

<b>PROJECT DESCRIPTION</b>	Region:	North East & Yorkshire
	STP / ICS Name:	Humber & North Yorkshire
	Lead Organisation for the Scheme:	Harrogate & District NHS FT (HDFT)
	Title of the Scheme:	HDH RAAC Services Relocation, Design & Eradication 23/24
	One Line Description of the Scheme:	To decant services and undertake failsafe works in areas with RAAC at Harrogate District Hospital (HDH)
	Specific Sites for Investment:	Harrogate District Hospital (HDH)
	Other Organisations Impacted by this Scheme:	None

#### BRIEF SCHEME OVERVIEW

Summarise the key dimensions of the scheme in terms of the outputs that will be enabled in service terms as a consequence of the investment.

HDFT has identified over 2500 RAAC panels which were used in the construction of flat roof sections at Harrogate District Hospital. The panels have been identified nationally as a significant safety risk which has the potential to adversely impact on the Trust's day to day business and increase safety risks for our patients staff and visitors.

Following a full inspection and deflection survey of all 2500 RAAC panels by [REDACTED] (our SME structural engineers), we want to undertake the following work by end of Mar 24:

1. To move all clinical services (and associated administration) out of HDH Block C, which has a RAAC flat roof, to new locations in the community or on the HDH site. The following services are currently provided in HDH Block C and will be relocated as described below:
  - Podiatry & Speec and Language Therapy (S)ALT: relocate to new building in the community. An existing building has been identified, owned by a private landlord, and the landlord is willing to lease it to the Trust on a 10 year lease. The building is located next to the GP Federation's premises (which provides clinical and administrative space) and has good access and parking. It is currently used as offices. The ground floor will be converted to clinical space to deliver podiatry and SALT services. The first floor will provide administrative and office space for the services. The cost of the conversion works and the estimated IFRS16 capital charge for the lease are included in the capital costs in this PoW. The revenue costs, including the revenue impact of the lease and the service charges, of this building are included in the revenue costs in this PoW.
  - Orthopaedic Outpatients, Fracture Clinic and MSK therapies: relocate to Littondale Ward on the HDH site. This will require enabling works to make the ward suitable to provide outpatient and therapy clinics, including provision of a modular building to provide a waiting area. This is a temporary (2-3 years) move while another area of the hospital

	<p>is made available and converted into a permanent home for these services.</p> <ul style="list-style-type: none"> <li>○ Dietetics and Pelvic Health therapies: convert unused bathrooms and storerooms on Briary Wing into additional clinic rooms.</li> <li>○ Neuro, amputee and cardio-respiratory therapies: relocate into existing space on Briary Wing, with some minor enabling works.</li> <li>○ CPEX (exercise testing for surgical pre-assessment): relocate into existing outpatient clinic room.</li> <li>○ Cataract One-Stop Pre-assessment Clinic: relocate into previous paediatric outpatients area (which has been released by moving paediatric outpatients out of our main outpatients area to space adjacent to the Child Development Centre (a much more appropriate space))</li> </ul> <p>While these moves will not eradicate the RAAC in HDH Block C, they will remove the risk to patients and staff in these services from RAAC. Block C contains 50% of the RAAC panels at HDH so this significantly reduces the overall risk from RAAC at HDH.</p> <p>Emptying Block C is also the key enabler for the demolition and rebuilding of Block C. This is not included in this Programme of Works because funding has only been offered for 23/24 and timescales do not allow demolition and rebuild in 23/24. Demolition and rebuild is planned for 24/25 (subject to funding) and will eradicate 50% of the RAAC panels at HDH.</p> <ol style="list-style-type: none"> <li>2. To eradicate RAAC from the B3 Corridor (Farndale Ward to ITU) on the HDH site. A failsafe solution was considered but the cost, time and impact on the site of installing the failsafe was similar to full eradication so eradication has been chosen as the preferred option.</li> <li>3. To develop failsafe and eradication designs for the other areas of RAAC on the HDH Site (estates &amp; stores, two corridors, two roof top plant rooms and two fire escapes) so we are fully prepared with designs and more accurate costs for further work in 24/25 (subject to funding).</li> </ol>
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LEAD ORGANISATION DETAILS		
<b>SENIOR RESPONSIBLE OFFICER (SRO) DETAILS</b>	Title	Director of Strategy
	Name	Matt Graham
	Organisation	HDFT
	Office tel.	
	Mobile tel.	
	e-mail	Matthew.graham3@nhs.net

APPENDICES CHECKLIST	
APPENDIX	COMPLETED / ATTACHED (Y/N)
Appendix 1 – Community Building Lease Heads of Terms	Confidential – available to NEDs on request
Appendix 2 – Schedule of Works	
Appendix 3 – OB Forms	Not applicable
Appendix 4 – Key Estates Information	Completed

## SECTION 2: PROGRAMME SPECIFIC INFORMATION REQUESTS (EXAMPLES BELOW)

### PROGRAMME TO REQUEST SPECIFIC REQUIREMENTS FROM PROVIDERS

	Number of Buildings from which RAAC Removed																																								
Building Name	2022/23	2023/24	2024/25	2025/26	2026/27 onward																																				
<p><b>RAAC Buildings Eradicated</b></p> <p>Please provide the numbers of buildings from which RAAC is to be eradicated through the scheme</p>	B3 Corridor	1																																							
	<ul style="list-style-type: none"> <li>RAAC is only eradicated from one area of the HDH site by this Programme of Works (PoW) – the B3 Corridor (ITU to Farndale Ward).</li> <li>The majority of the funding requested in this PoW is for the lease and conversion of an office building (already built, but a new building for the trust) and enabling works to several areas of the HDH site in order to relocate all clinical and administrative services out of HDH Block C (which has a RAAC roof with 1266 panels) into alternative community premises or alternative locations on HDH site (as described in section 1 above). This is to remove the risk to patients and staff in these services from RAAC.</li> <li>It also provides failsafe and eradication designs for the other areas of RAAC on the HDH Site (estates &amp; stores, two corridors, two roof top plant rooms and two fire escapes) to be developed in preparation for further work in 24/25 (subject to funding).</li> </ul>																																								
<p><b>Number of RAAC planks impacted</b></p> <p>Please set out the number RAAC planks impacted by the scheme(s) of works.</p>	<p>Eradication of RAAC panels:</p> <ul style="list-style-type: none"> <li>B3 Corridor – 35 panels (RAAC roof replaced)</li> </ul> <p>Removal of risk to patients and staff from RAAC panels</p> <ul style="list-style-type: none"> <li>Block C, Therapy Services - 1266 panels (all services relocated to non-RAAC areas)</li> </ul> <p>Failsafe &amp; Eradication Design</p> <ul style="list-style-type: none"> <li>All other RAAC areas - 1199 panels</li> </ul>																																								
<p><b>Value of Backlog Maintenance eradicated</b></p> <p>Please provide the value of reduction of cost to eradicate backlog maintenance. Works costs only as per the ERIC definitions.</p>	<table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th colspan="6">Backlog Maintenance Eradicated (£k)</th> </tr> <tr> <th style="text-align: left;">Current Rating</th> <th style="text-align: center;">2022/23</th> <th style="text-align: center;">2023/24</th> <th style="text-align: center;">2024/25</th> <th style="text-align: center;">2025/26</th> <th style="text-align: center;">2026/27 onward</th> </tr> </thead> <tbody> <tr> <td style="text-align: left;">High</td> <td style="text-align: center;">0</td> <td style="text-align: center;">£125k</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> </tr> <tr> <td style="text-align: left;">Significant</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> </tr> <tr> <td style="text-align: left;">Medium</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> </tr> <tr> <td style="text-align: left;">Low</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> <td style="text-align: center;">0</td> </tr> </tbody> </table> <p>This PoW only directly eradicates RAAC backlog maintenance to the B3 Corridor.</p> <p>The most recent (2022) 7 Facet Survey identified £2.1m of backlog maintenance required to HDH Block C. In addition the initial RAAC business case submitted to NHS England by the trust estimated the cost of replacing the RAAC roof on HDH Block C (ie the RAAC backlog maintenance cost) at approximately £7m (not including the cost of decanting all services out of Block C to allow replacement). This PoW does not include replacing the RAAC roof on HDH Block C or our preferred option of the demolition and rebuilding of Block C. Relocating all staff and services out of Block C would, however, be required to enable for both options.</p>					Backlog Maintenance Eradicated (£k)						Current Rating	2022/23	2023/24	2024/25	2025/26	2026/27 onward	High	0	£125k	0	0	0	Significant	0	0	0	0	0	Medium	0	0	0	0	0	Low	0	0	0	0	0
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Medium	0	0	0	0	0																																				
Low	0	0	0	0	0																																				
<p><b>m2 Cost for Failsafe</b></p> <p>Please set out the costs per m2 of the failsafe systems associated with the scheme</p>	<p>As explained above, this scheme does not include works to implement failsafe solutions for areas of RAAC at HDH.</p> <p>Previous work in 22/23 to deliver a failsafe solution to another corridor on HDH site cost £60.6k for 108sqm or £561/sqm.</p> <p>For this scheme:</p>																																								

### RAAC Risk reduction profile

Please set out the risk rating associated with the building as the scheme progresses.

- Eradication of RAAC on B3 Corridor has been quoted at £138k (including 20% contingency) for 60sqm, £2.3k/sqm
- Enabling works and lease costs for relocation of services out of Block C is estimated at £1.72m for 1766sqm, £973/sqm (but this does not include the cost to demolish and reprovide Block C which will be the subject of a future case)

Building Name	Building RAAC Risk Rating					
	Current Rating	2022/23	2023/24	2024/25	2025/26	2026/27 onward
Block C	High	High	High	Low	Low	Low
B3 Corridor	High	High	High	Eradicated	Eradicated	Eradicated

This PoW reduces the risk rating for Block C to low by removing patients and staff in the clinical services from a RAAC roofed building. It eradicates the risk on the B3 Corridor by replacing the RAAC roof completely.

All other areas of the site require further funding for failsafe or eradication work to reduce the risk, but this PoW enables this work by ensuring we have designs and more accurate costs in place for when funding becomes available.

### ACTIVITY PROFILE – Additional activity delivered as a result of this investment

EXPECTED INCREMENTAL ACTIVITY		
	Elective activity (000s)	Outpatient activity (000s)
H1 22/23	Not applicable – this Programme of Works does not increase activity, it enables us to continue to deliver current activity with reduced (or eliminated) risk to patients and staff from the failure of RAAC panels	Not applicable – this Programme of Works does not increase activity, it enables us to continue to deliver current activity with reduced (or eliminated) risk to patients and staff from the failure of RAAC panels
H2 22/23		
H1 23/24		
H2 23/24		
H1 24/25		
H2 24/25		
<b>Recurrent Full Year Impact (25/26 onwards)</b>		

### SECTION 3: PROJECT DELIVERY OVERVIEW

#### DELIVERABILITY ASSESSMENT

##### DELIVERY AND TIMETABLE

Please set out the anticipated commercial and procurement route, and provide a simple timeline with key milestones for the procurement and delivery of the scheme

HDH Block C services relocation:

- Relocation plans for each service in HDH Block C agreed: Dec 23
- Tender contractors for works to enable relocation: Dec 23 – Jan 24
- Works delivered to enable relocation: Feb-Mar 24
- Relocation of services: Apr 24

Failsafe & Eradication design works: Dec 23 - Mar 24

B3 Corridor RAAC Eradication:

- Design already completed
- Estimated cost already received.

	<ul style="list-style-type: none"> <li>• Quantity surveyor assurance of value for money of estimated cost – Dec 23 – Jan 24</li> <li>• Mobilise contractor: Jan 24</li> <li>• Eradication works: Feb – Mar 24</li> </ul>
<p><b>RISKS TO DELIVERY</b></p> <p>Please set out the potential risks to delivery and mitigating actions to address these.</p>	<p>HDH Block C services relocation:</p> <ul style="list-style-type: none"> <li>• Risk that unable to identify alternative locations for services – locations have already been identified and agreed with clinical/operational teams for most services.</li> <li>• Risk that winter or other operational pressures delay service moves or ability to complete the required enabling works – minimise the use of locations which are likely to be subject to significant winter/operational pressures; locations already identified include community site, administrative area on HDH site</li> <li>• Risk that works take longer than expected – works identified so far are not complex so risk of complications is assessed as low</li> <li>• Risk that unable to agree lease terms with landlord for community site – outline lease terms have already been developed with the landlord</li> </ul> <p>Failsafe and eradication desings – no significant risks</p> <p>B3 Corridor RAAC Eradication:</p> <ul style="list-style-type: none"> <li>• Risk that winter or other operational pressures prevent closure of the corridor to complete the works – alternative routes to access all areas of the hospital are available without using the corridor</li> </ul>
<p><b>PLANNING ASSUMPTIONS</b></p> <p>Please set out the current planning position, and the steps that will be taken to ensure appropriate planning permission is in place.</p>	<p>HDH Block C services relocation</p> <ul style="list-style-type: none"> <li>• No planning required for relocation of services within HDH site</li> <li>• Planning may be required for modular building but we expect it to be permitted development</li> <li>• No planning required for clinical use of the community building being leased as it is already Class E which includes clinical use.</li> </ul> <p>B3 Corridor RAAC Eradication</p> <ul style="list-style-type: none"> <li>• No planning permission required for these works within HDH site (building control will be notified)</li> </ul>
<p><b>PROVIDER CAPACITY AND CAPABILITY</b></p> <p>Please provide a brief overview of the experience of the SRO and Exec Team accountable for the project.</p>	<p>xxxxxxx is an experienced NHS Executive Director with good experience of oversight of major projects.</p> <p>The project will be managed by the Trust's estates team (part of our wholly owned subsidiary Harrogate Integrated Facilities). The estates team is led by an experienced engineer and estates professional who previously worked for the subsidiary of QE Hospital Gateshead.</p>

Financial tables redacted

### Notes to Capital Costs

- (1) Total works costs includes enabling works on the HDH site, modular building cost and cost to convert ground floor of new community site into clinical space
- (2) Cost of fees for failsafe and eradication design works, and legal fees for negotiation of the community site lease.
- (3) Non works costs are the estimated IFRS16 capital charge for the community site lease based on a 10 year lease (with a break clause for the trust at 5 years) with an annual charge of £xxxxxxx
- (4) IT costs for the community site
- (5) Planning contingency is 10% on top of the expected works and IT costs (not the lease cost) before VAT
- (6) VAT charge on the works, lease, IT and fees for the community site. All work managed by HIF, our wholly owned subsidiary, does not include VAT.

## Notes to SOCI

- (1) Operating expenses includes depreciation on the capital funding, plus rates, soft FM etc for the new community site. During the period when Block C is unused, but not yet rebuilt, there may be an opportunity to reduce rates and facilities charges which would offset the costs of the new community site. This has not yet been assessed so is not included in the figures above.
- (2) Finance expense is in relation to IFRS16 interest payable at xxxxxxxx
- (3) PDC dividend at xxxxxxxxxxxx on the capital funding
- (4) While this PoW results in a deficit, it is manageable within the trust's overall financial position and would not prevent us delivering a balanced financial plan in 2024/25.
- (5) While this PoW does not increase activity and so does not bring additional income to offset the increased costs, there are significant risks, which would have financial impact, of doing nothing. A failure of a RAAC panel in Block C would require the trust to stop some or all services currently provided in Block C which would have significant impact on patients due to treatment delays and would lead to a loss of income or payments to alternative providers. The financial impact would be significantly greater than the impact of this PoW.

SECTION 5: FIVE CASE MODEL PROJECT DETAIL	
ECONOMIC CASE	
a) Confirm inflation, VAT, depreciation, PDC are excluded from the economic analysis.	Yes
COMMERCIAL CASE	
a) Please set out the commercial and procurement route, e.g. P22.	<ul style="list-style-type: none"> <li>Failsafe and eradication design: we have appointed a structural engineering company, xxxxxxxx, through the NHS SBS Framework (Healthcare Planning, Construction Consultancy and Ancillary Services, Lot 3) to support management of RAAC for HDFT. xxxxxxxx has provided quotations for the additional design work set out in this PoW.</li> <li>B3 Corridor: direct award, following quotation, to contractor already working on another scheme in an adjacent area of the HDH site. Appointing a new contractor through competition would increase the risk of cost increases and delay due to the need for two different contractors to coordinate works in adjacent and linked areas. We will appoint a quantity surveyor to review the quotation to ensure it is value for money.</li> <li>Block C Services Relocation: direct award or mini competition for the enabling works on the HDH site and the conversion of the community building via the NHS SBS Framework (Public Sector Construction Works); modular building provision will also be via direct award or mini competition from the NHS SBS Framework (Modular Buildings).</li> </ul>
b) Set out the basis of the negotiated position, including the final price for the works.	<ul style="list-style-type: none"> <li>Failsafe and eradication design: firm prices, following quotation, from our in place structural engineers, xxxxxxxx, via NHS SBS Framework</li> <li>B3 Corridor: quotation for estimated price from contractor already working on another scheme in an adjacent area of the HDH site. Rates are based on those used in the competitive tender for the current scheme and will be assessed by a trust appointed quantity surveyor to ensure value for money.</li> <li>Block C Services Relocation: final price will be sought via direct award or mini competition via the NHS SBS Framework (Public Sector Construction Works) and, for the modular building, the NHS SBS Framework (Modular Buildings)</li> </ul>

<p>c) Confirm status of any legal documentation or processes required for the scheme to be delivered in full and what (if anything) remains to be agreed.</p>	<p>Lease for community site – to be finalised with private landlord. Heads of Terms agreed (attached as Appendix 1) and negotiations on the lease and licence to alter underway.</p> <p>Planning permission for the modular building will be sought once we have final designs. We anticipate it will be permitted development due to the location on site and because it is temporary.</p> <p>The capital assets will be on the group balance sheet. We are reviewing the treatment of capital assets between the trust and HIF</p>
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**FINANCIAL CASE**

<p>a) Please explain any incremental revenue consequences of the investment and how they can be mitigated.</p>	<p>The only significant additional revenue consequences of the scheme will be rates, utilities, hard/soft FM, IT line rental costs for the new community site which are estimated at £ <del>xxxxxx</del> (including VAT) per year. These are manageable within the Trust's financial plans.</p>
<p>b) Are there any cash flow issues, such as fees, enabling works, that require early funding?</p>	<p>All fees, enabling works etc are included in this PoW</p>
<p>c) Confirm that the project can be managed within existing funding envelopes.</p>	<p>The proposed works can be managed within the funding requested in this PoW</p>

**MANAGEMENT CASE**

<p>a) Confirm the arrangements for the management and delivery of the scheme.</p>	<p>The project will be overseen by the Trust's Capital Planning team as the senior user. The building works will be project managed by the Trust's wholly owned subsidiary, HIF, which manages all capital projects on the HDH site.</p>
<p>b) Confirm the key risks to delivery and measures to mitigate and manage these risks.</p>	<p>See Section 3 Risks to Delivery above.</p>



**Appendix 1 – [Programme Team to evaluate what data is required for collection, both for reporting and monitoring purposes, and to build necessary evidence for future SRs]**

**Appendix 2 – Schedule of Works – will be provided by Trust once funding is confirmed and final plans for enabling works for all service relocations agreed.**

**Appendix 3 – OB Forms**

**Appendix 4 – Key Estates Information [to be evaluated and adjusted for each individual programme]**

KEY ESTATE METRICS	
Total Area of Building m <sup>2</sup>	4702 sqm with RAAC at HDH
New build clinical GIA m <sup>2</sup> and % of total GIA	194sqm of clinical space on ground floor of new community site.  This is an existing building owned by a private landlord which will be leased by the trust; it is not a new build, but it is a new building to the trust (ie not a building the trust has previously leased or operated from). The ground floor is currently office space and will be converted to clinical, outpatient space.
New build non-clinical GIA m <sup>2</sup> and % of total GIA	210sqm of office and administrative space on first floor of new community site.  Same building as above. No works required.
Refurbishment clinical GIA m <sup>2</sup> and % of total GIA	Enabling works to 1600sqm of existing clinical space at HDH to relocate services currently provided in Block C into other areas of the site.
Refurbishment non-clinical GIA m <sup>2</sup> and % of total GIA	60sqm (B3 Corridor)
No. of beds and type	Not applicable
PFI Estate Implications <ul style="list-style-type: none"> <li>- Is the build on an existing PFI Estate?</li> <li>- Does the build interface with any PFI Estate?</li> <li>- Are there any other implications with the PFI Contract that need to be considered?</li> </ul>	Not on a PFI site
MMC (Modern Methods of Construction) Status. Percentage to be achieved and brief overview	Not applicable
Summary of any significant derogations and assurance (derogations template is available)	Not applicable
£ Reduction in BLM	See Section 2 Value of backlog maintenance eradicated (above)
Any temporary accommodation required – provide details	Some services will be relocated temporarily within HDH site while other works are completed before moving to their final location.
Is a land purchase required – provide details	No – but lease of new community site is required
Is this an owned or leased facility – provide details if leased	HDH is owned site; new community site is leased
Stage of design development and trust approval (please attach design drawings)	Block C service relocation – RIBA Stage 2 (but majority of new areas only require minor works) B3 Corridor - RIBA Stage 4
Estimated average lifecycle costs £/m <sup>2</sup> over asset life	To be calculated