

State of the DoH Estate Report

2016



The Linenbridge Day Centre and Banbridge Health and Care Centre



Holywell Hospital, Antrim

	Page
1.0 FOREWARD	2-3
2.0 EXECUTIVE SUMMARY	4-12
3.0 PROFILE AND DESCRIPTION OF THE CURRENT DoH ESTATE	13-17
4.0 ESTATE PERFORMANCE	18-49
5.0 RISK MANAGEMENT	50-53
6.0 INDIVIDUAL ARMS LENGTH BODIES REPORTS	54-149
7.0 LIST OF DoH ARMS LENGTH BODIES	150
8.0 ACKNOWLEDGEMENTS	150

1.0 FOREWORD

- 1.1 This is the fourth State of the Estate report (SOTER) completed for the Department of Health (DoH) which provides stakeholders with a snapshot of the performance data used to monitor the efficiency and effectiveness of buildings and associated risk in our estate.
- 1.2 This report is an important tool used to measure performance of property assets over time. By optimising the efficiency of the estate and reducing costs, resources can be directed to areas of greatest need.
- 1.3 The information contained in the report will be used in the annual DoH Asset Management Plan (AMP) to comply with the minimum information requirements contained in the NICS AMP Guidance (issued Nov 2016) and the Executive's Asset Management Strategy (AMS).
- 1.4 The report compares performance in 2016 with years 2013 and 2015 and includes information on the individual estate of the five main healthcare Trusts, Northern Ireland Ambulance Service Trust (NIAS) and the Northern Ireland Fire & Rescue Service (NIFRS).
- 1.5 This year the report has been extended to include:
- property targets agreed with the HSC Trusts and NIFRS (page 53)
 - individual freehold property asset values (refer to page 15)
 - individual operational maintenance costs (refer to page 15)
 - KPIs relating to the HSC estate by category (refer to pages 41 to 46)
- 1.6 The DoH property asset strategy is to maintain an asset base that is effectively and efficiently managed and capable of supporting the department's vision, aims and objectives. In doing so, it is important to seek optimum use of our existing buildings by reducing and improving underperforming assets; identifying opportunities to improve efficiency and exploit latent value from our property assets; reduce costs; manage risk; identify and dispose of surplus assets.

- 1.7 The ultimate responsibility of the service provider is to provide a safe environment for patients, clients and staff. Therefore it is essential that prioritised investment continues to be made in the replacement of old and development of new facilities, the management and maintenance of existing buildings and in the recruitment and training of staff in specialist estate roles.
- 1.8 This information will also be used to inform work streams which review the strategic location and delivery of services, inform budget allocations and ensure that property solutions support the transformational change included in 'Delivering Together'. It will also continue to be used to inform progress against property related targets and monitor performance in the Key Performance Indicators (KPI).
- 1.9 I would like to express my thanks to those staff within HSC Trusts and NIFRS for providing the required information which has enabled production of this report.

PAULA JONES (MRICS)

Head of Assets & Estate Management Branch, Investment Directorate, Resources and Performance Management Group, Department of Health

2.0 EXECUTIVE SUMMARY

Background to the report

- 2.1 This report provides a snapshot of the condition and performance of the freehold estate which is referred to as the Department of Health (DoH) estate.
- 2.2 This is the fourth SOTER report to be completed by the department's Assets & Estate Management Branch (AEMB) located in Investment Directorate.
- 2.3 This report is based on mandatory data submitted to the centralised property management database (3i) in June 2016 by the 6 Health and Social Care Trusts and NIFRS in relation to their freehold property interests.
- 2.4 The data has been collated in relation to individual healthcare and public safety sites, broken down by block unit within those sites and is based on floor area by square metre (m²).
- 2.5 The Trusts and NIFRS also hold individual portfolios of leased properties which are reported on in individual annual Asset Management Plans (AMPs).
- 2.6 In July 2014 HSC Trusts and NIFRS were advised of the mandatory requirement to populate the 3i database with current key information on the estate; this requirement includes the leasehold estate.
- 2.7 Under a Service Level Agreement between DoH and DoF CPD Construction Division-Health Projects (CPD), CPD has a role to manage the 3i Contract with the Provider, and the 3i database with HSC Trusts and NIFRS. CPD continues to work with the department's HSC Trusts and NIFRS to ensure estate information is current on the 3i database.

- 2.8 CPD will download key mandatory data on the estate on 27 June 2017 to provide performance data on the cost and space efficiency of the DoH estate (freehold and leasehold) to inform the 2017 SOTER.

Purpose, format and scope of the report

- 2.9 The report is intended to serve the following functions:

- assist DoH ALBs in managing the totality of their estates including the development of rationalisation and/or disposal strategies.
- identify inefficiency and target areas for improvement by ALBs.
- assist ALBs (along with ALB's individual Estate Control Plans) in strategic planning, enabling prioritised and informed investment decisions.
- provide the department with current high level data to be used to inform (i) the governance role, (ii) the strategic planning process and prioritisation of the allocation of capital resources in line with 'Delivering Together'.
- provide information on the condition of the estate enabling comparison between ALBs and to encourage sharing of information on best practice to effectively and efficiently improve underperformance.
- provide information to the department's AMP to meet the minimum requirements of the NICS AMP Guidance and NICS AMS.

- 2.10 The report will consider the age, performance and condition of the estate under the following Key Performance Indicator (KPI) headings:

- **Age Profile**
- **Overall Condition**
- **Physical Condition**
- **Functional Suitability**
- **Space Utilisation**
- **Statutory Standards**

2.11 It also includes comparisons charts for the KPIs identified by grouping the healthcare facilities in the HSC estate into the following main categories:

- Acute Hospital sites
- Local and Enhanced Local Hospital sites
- Non-Acute Hospital sites and Community facilities
- Other Major Healthcare sites

Energy Performance (provided by Medical Devices and Estate Safety Policy Branch, Safety Strategy Unit - DoH)

2.12 The energy consumption of the HSC Trust estate is now recorded on the Estate Asset Management Environmental module on the 3i database. The system currently records the billed energy supplied to the Trusts who are the major energy consumers of the Health and Social care sector.

2.13 The system continues to be developed to provide further reporting and performance capability to record self-supply sources such as CHP, Solar PV and renewable including biomass. HSC Trusts can utilise the system to calculate a site's energy performance in kWh/m² for regional benchmark comparison with other sites and Trusts.

2.14 The energy consumed by HSC Trusts varies year on year as factors including; weather patterns, service activity, operational breakdowns, plant deterioration, poor energy practice and energy saving and efficiency measures affect the baseline consumption of the Trust. It is for this reason that the energy efficiency of the estate is used as a performance measure, rather than consumption, to indicate ongoing trends in energy use.

2.15 The 3i database now has data entered for 2014/15 and 2015/16; however this is insufficient information for ongoing trend analysis. Further, as 2014/15 was the first year of the data upload there are some inaccuracies that need to be clarified with the

HSC Trusts before this data can be utilised in future ongoing analysis and reporting of the energy use of the estate.

Estate Ownerships

- 2.16 The DoH freehold estate falls into two ownerships i.e. Department owned and ALB owned.

Department

The DoH property portfolio consists of a diverse range of property assets which are either:

- leased from third parties;
- held on long term leases, often to Housing Associations;
- held on short term leases, often to the Voluntary & Community Sector;
- properties occupied by other HSC bodies;
- vacant properties;
- occupied and vacant land.

Departmental ALBs

Land and buildings owned, occupied and managed by the relevant ALB in line with current policy.

Context of the report

- 2.17 Modern Health, Social Care and Public Safety services require property assets to be in the right place, in the right condition, of the right type and able to respond appropriately to existing and future service needs.
- 2.18 In relation to the HSC estate, the physical environment plays an important role in the patient/client care experience. It is therefore essential the condition of the estate is actively managed in terms of suitability, physical condition, safety, quality and efficiency.

2.19 The DoH property asset strategy has four main guiding principles:

- (i) having the right size and type of property assets in the right place;
- (ii) optimisation of the use of existing property assets;
- (iii) provision of functionally effective, environmentally appropriate, safe and resilient facilities;
- (iv) identification of surplus or underperforming property assets; reduction and/or improvement of same via rationalisation, re-use and/or disposal.

2.20 It is recognised that historically the level of funding has been insufficient to address the level of capital investment required to facilitate the reshaping and modernisation of the health, social care and public safety estate. This position has resulted in an accumulated backlog maintenance liability estimated at £739m (2016); the largest proportion of which, almost £346m, is located in the Acute sector.

2.21 Whilst there has been some level of improvement in the KPIs associated with performance and condition of the estate (refer to chart on page 52), the current level of funding to deliver the replacement of major elements of the estate is challenging. It is necessary to divert a significant percentage of available capital on interim measures to secure the maintenance of existing services and provide a safe environment for the delivery of services in buildings, many of which have almost reached the end of their useful lives.

Key Facts

2.22 The current DoH freehold estate comprises 1.814 million square metres in floor area and includes a network of 10 Acute Hospitals, 6 Local and Enhanced Local Hospitals, 7 Other Major Healthcare Sites and 415 blocks of Community Facilities.

2.23 The report includes a number of key facts relating to the overall estate including:

Age

16% of the current estate is less than 10 years old while just over a third is over 50 years old. 17% is over 75 years old. The design and standard of accommodation built

in that period was for a significantly different service to the needs of modern healthcare today.

Overall Condition

28% of the current estate is in Overall Condition “Red” indicating that services are, or are becoming, increasingly untenable as points of delivery for DoH services. This score remains unchanged from 2012/13 and this continues to cause concern in relation to risk and the ability of those facilities to deliver effective services into the future.

Functional Suitability

57% of the current estate requires investment to upgrade functional suitability. From 2012/13 to 2016 there has been a 1% improvement in this category scoring A or B (satisfactory) due in the main to continuing capital development replacing poorer functionally unsuitable buildings.

Statutory Standards

51% of the current estate requires investment to upgrade statutory standards and a further 13% requires replacement as it is considered either impractical or too expensive to upgrade. From 2012/13 to 2016 there has been a 3% improvement in estate which has become compliant with statutory standards.

Space Utilisation

6% of the current estate is vacant, 9% is underused, which is a reduction of 3% since 2012/13. 12% of the estate remains overcrowded.

ALBs have confirmed in individual AMPS that there is a proactive process in place to identify and reduce underperforming property assets.

2.24 The data shows:

Acute Hospitals:

22% of the total floor area attributed to the Acute Hospital category has had new facilities built within the last 10 years.

44% of the total floor area attributed to Acute Hospital facilities is scored as new or in good physical condition while 56% is in need of investment to improve condition or needs to be replaced.

41% of the total floor area attributed to Acute Hospital facilities is scored as functionally suitable.

Local and Enhanced Local Hospitals:

20% of the total floor area attributed to the Local and Enhanced Local Hospital sites have had new facilities built within the last 10 years.

49% of the total floor area attributed to the Local and Enhanced Local Hospital sites is scored as in good physical condition. 51% is in need of investment to improve condition or needs to be replaced.

55% of the total floor area attributed to Local and Enhanced Local Hospital facilities is scored as functionally suitable.

Non Acute Hospitals and Community facilities:

12% of the total floor area attributed to the Non Acute Hospital sites and Community facilities category has had new facilities built within the last 10 years.

47% of the total floor area attributed to the Non Acute Hospital sites and Community facilities category is considered operational but in need of investment to effect significant repairs.

46% of the total floor area attributed to the non Acute Hospital sites and Community facilities category requires investment to upgrade for functional suitability and 8% needs replaced.

Other Major Healthcare sites:

3% of the total floor area attributed to the Other Major Healthcare sites category, which comprises mainly of mental health and learning difficulty facilities, has been built within the last 10 years. 42% of this category is over 75 years old.

18% of the total floor area attributed to the Other Major Healthcare sites category is considered new or in relatively good physical condition.

37% of the total floor area attributed to the Other Major Healthcare sites category is considered functionally suitable while 12% needs replaced.

Backlog Maintenance Liability

- 2.25 Backlog maintenance liability relates to property assets which need to be upgraded to achieve a score of “B” in physical condition and statutory standards. Based on the information provided by the HSC Trusts and NIFRS, the percentage floor area of each ALB’s individual estate requiring investment to reduce backlog is as follows:
- Belfast HSC Trust - **69%**
 - Northern HSC Trust - **42%**
 - Northern Ireland Ambulance Service Trust - **78%**
 - Northern Ireland Fire & Rescue Service - **48%**
 - Southern HSC Trust - **63%**
 - South Eastern HSC Trust - **56%**
 - Western HSC Trust - **58%**
- 2.26 Based on the information provided by the Trusts and NIFRS in current AMPs (2016/17), the backlog maintenance for the DoH estate is estimated at £739 million. Of this total backlog liability, almost £346m is located in the Acute sector.
- 2.27 To facilitate the implementation of the department’s strategic direction, reform and to provide a fully integrated health and social care service, the information in this report is available to decision makers.
- 2.28 The report also provides departmental ALBs the opportunity to compare their estate performance, identifying areas of underperformance to be addressed and hopefully encourages sharing of information between ALBs on best practice to effectively and efficiently improve underperformance.
- 2.29 Comparison of data from 2012/13 (refer to page 52) shows that more investment is required along with planned maintenance programmes to make a significant improvement across all KPIs.
- 2.30 The HSC Trusts and NIFRS should continue to utilise their information to inform investment decisions which ensure (i) that limited resources are prioritised and

targeted to areas of greatest need, (ii) efficient and effective Healthcare and Public Safety estates are achieved and (iii) the safety of patients and staff is protected.

3.0 PROFILE AND DESCRIPTION OF THE CURRENT DoH ESTATE

Key statistics of the DoH estate

- 3.1 The current DoH estate is one of the largest public sector estates in Northern Ireland comprising a wide range of properties of varying type, age and condition.
- 3.2 The following key characteristics of the current estate illustrate the scale and complexity of the DoH property asset base and confirm the need for both the department and its 17 ALBs to ensure that the property asset management function is appropriately applied and resourced to meet the recommendations in 'Delivering Together', the Executive's Asset Management Strategy and the DoH Property Asset Strategy.

The property portfolio for the HSC Trusts and NIFRS comprises:

- a diverse range of freehold and leasehold facilities including major hospital complexes, local hospitals, residential accommodation, day centres, health clinics, ambulance stations, fire stations, warehouses, storage and administrative buildings;
- approximately 1,364 blocks of freehold buildings;
- approximately total floor area of 1.814 million m²;
- 49 listed historic buildings;
- approximately 273 leased properties

Additional Information on the DoH estate

- 3.3 **Chart A – DoH Freehold Estate Floor Area by ALB (m²)** (page 15).

- 3.4 **DoH HSC Freehold Estate 2016**

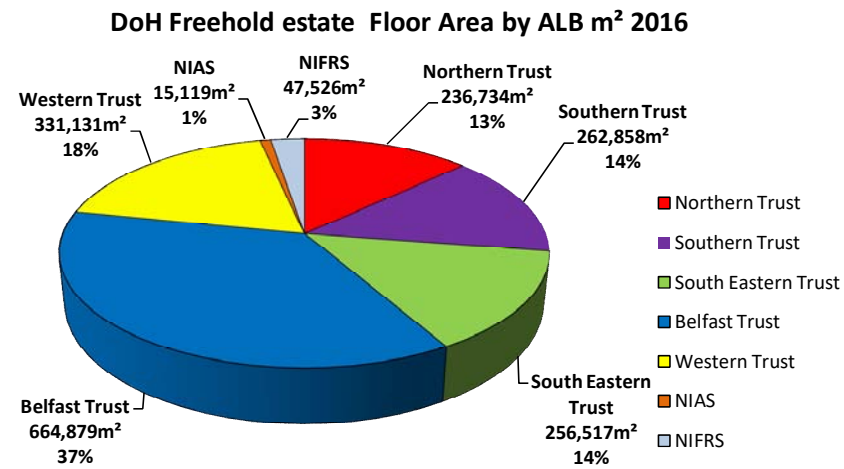
This chart (page 16) provides details of facilities and health categories.

3.5 Total Asset Value and Operational Maintenance costs for DoH 2015/16

The first chart (page 17) shows the individual freehold asset values of the 6 HSC Trusts, NIFRS and the department owned estate which totals £2,614.12 million.

3.6 The second chart (page 17) shows the range of operational maintenance costs £/ m² for the 6 HSC Trusts and NIFRS (figures obtained from each ALB in January 2017).

Chart A: DoH freehold estate Floor Area by ALB m²

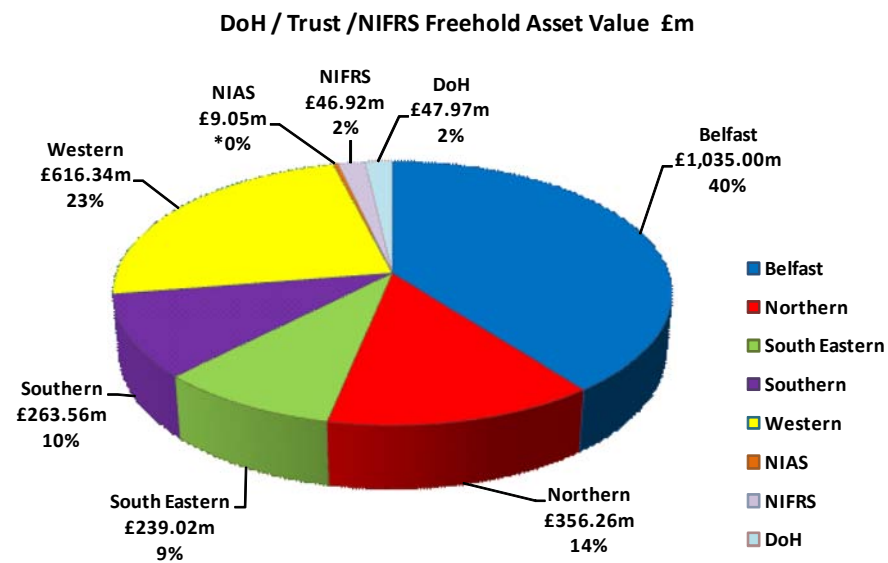


Results from the June 2016 Estate Returns

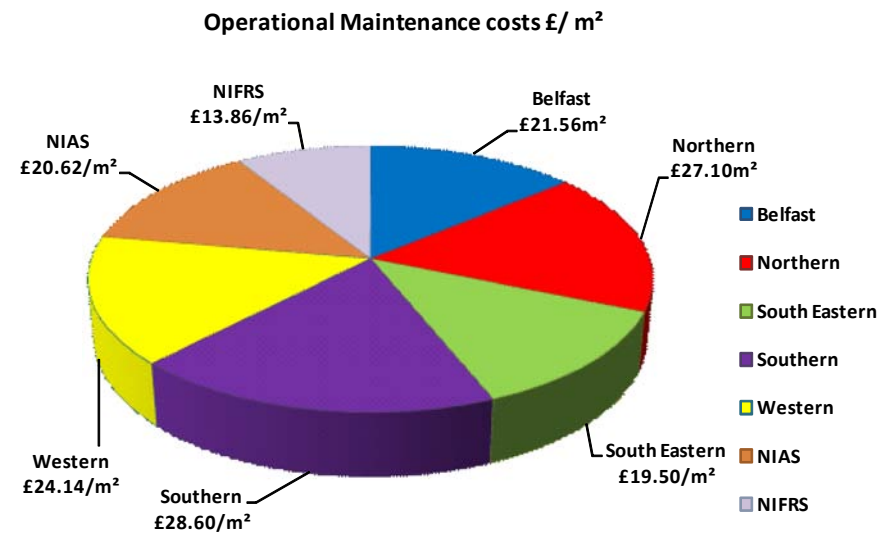
DoH Freehold Estate (2016)

Trust	Blocks of freehold buildings	Approx Floor Area m ²	Nr of Listed Historic Buildings	Nr of Dept. Owned property assets (Trust area)	Acute Hosps	Nr of Local/ Local enhanced Hosps	Non- Acute Hospital Sites and Community facilities	Other Major Healthcare Sites
BHSCT	366	664,879	21	12	BCH.RVH.Mater	None	MPH, Forster Green & 83 Community facilities	Knockbracken HCP& Muckamore
NHSCT	257	236,734	5	11	Antrim Area & Causeway	Mid- Ulster & Whiteabbey	Moyle, Robinson, Daraida, Route, Braid Valley& 80 Community facilities	Holywell
SEHSCT	139	256,517	2	14	Ulster Hospital	New Downe Lagan Valley Hospital	Ards, Bangor & 66 Community facilities	Downshire
SHSCT	223	262,858	17	6	Craigavon Area & Daisy Hill	South Tyrone	Armagh Community, Lurgan Hospital & 92 Community facilities	St. Lukes
WHSCT	251	331,131	4	27	Altnagelvin & SW Acute	Tyrone County	83 Community facilities	Gransha, Tyrone & Fermanagh
NIAS	56	15,119	0	0				
NIFRS	72	47,526	0	0				
Totals	1364	1,814,764	49	70				

Total Freehold Asset Value and Operational Maintenance costs for DoH 2015/16



DoH/ Trust/ NIFRS Total Asset Value £2,614.12m



4.0 ESTATE PERFORMANCE

Summary

4.1 The report considers the age, performance and condition of the estate under the following KPI headings:

- Age Profile
- Overall Condition
- Physical Condition
- Functional Suitability
- Space Utilisation
- Statutory Standards

Condition definitions

Age Profile

	Less than 10 yrs old
	10- 30 yrs old
	30- 50 yrs old
	50- 75 yrs old
	Over 75 yrs old

Overall Condition

Red	Indicates that services are currently being provided out of buildings which are, or are becoming largely untenable as points of delivery for DoH services.
Amber	Indicates that, if managed appropriately, buildings may have a significant remaining life, but which will need major refurbishment/ re-planning within 5 to 10 years.
Green	Indicates that buildings are new, or relatively new, and capable of delivering a satisfactory DoH service for the foreseeable future, subject to appropriate management.

Physical Condition

A	As new and can be expected to perform adequately for its full normal life.
B	Sound - some elements could be unacceptable.
C	Operational, but the need for significant repairs has been identified - some elements could be in an unacceptable state.
D	Unacceptable.
X	Appended to 'C' or 'D' to indicate that it is impossible to improve without replacement.

Functional Suitability

A	Either in full compliance with or exceeds the appropriate nationally published guidance and has a “full life” expectation. No expenditure, except for routine maintenance, is required.
B	Reasonable and adequate even though it does not have a “full life” expectation or does not fully comply with national guidance. In most cases, this marking will be perfectly acceptable for the provision of health care. No capital expenditure would be required to improve the building. Repair and normal maintenance would be adequate to sustain at “B” rating.
C	Below ‘B’ standard and would require capital expenditure to upgrade to ‘B’.
D	Below ‘C’ standard and major capital expenditure required to achieve ‘B’.

Space Utilisation

Yellow	Vacant, or grossly underused.
Blue	Underused.
Green	Adequate, in both provision and use.
Red	Overcrowded.

Statutory Standards

A	Conforms to statutory legislation and is a new building.
B	Conforms to statutory legislation.
C	Does not conform to statutory legislation but is capable of being upgraded to that level with minor expenditure.
D	Does not conform to statutory legislation but is capable of being upgraded to that level with major expenditure.
DX	Does not conform to statutory legislation and improvements are either impractical or too expensive to be tenable.

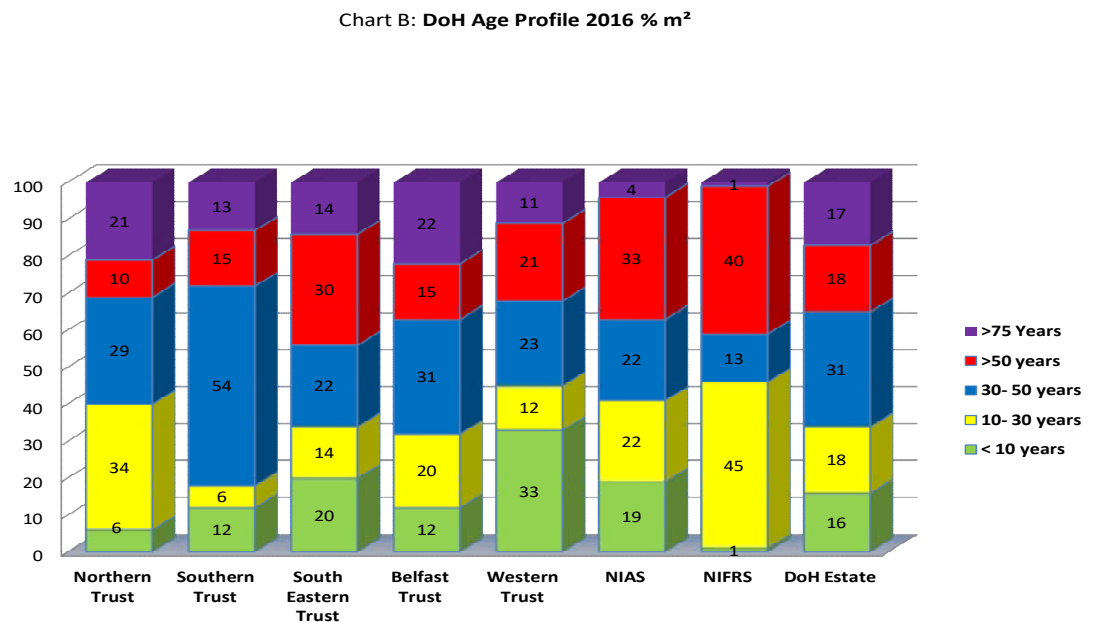
- 4.2 As various factors can influence the ability of each property asset to effectively facilitate delivery of services, all KPI scores should be considered collectively.

Age of the Estate

- 4.3 The age profile of the estate has a major impact on the suitability, physical condition and safety of facilities.
- 4.4 Whilst some older buildings, through good management, can prove effective for a limited range of uses, many are no longer fit for purpose in terms of providing

accommodation suitable for the delivery of modern day health, public safety and social services.

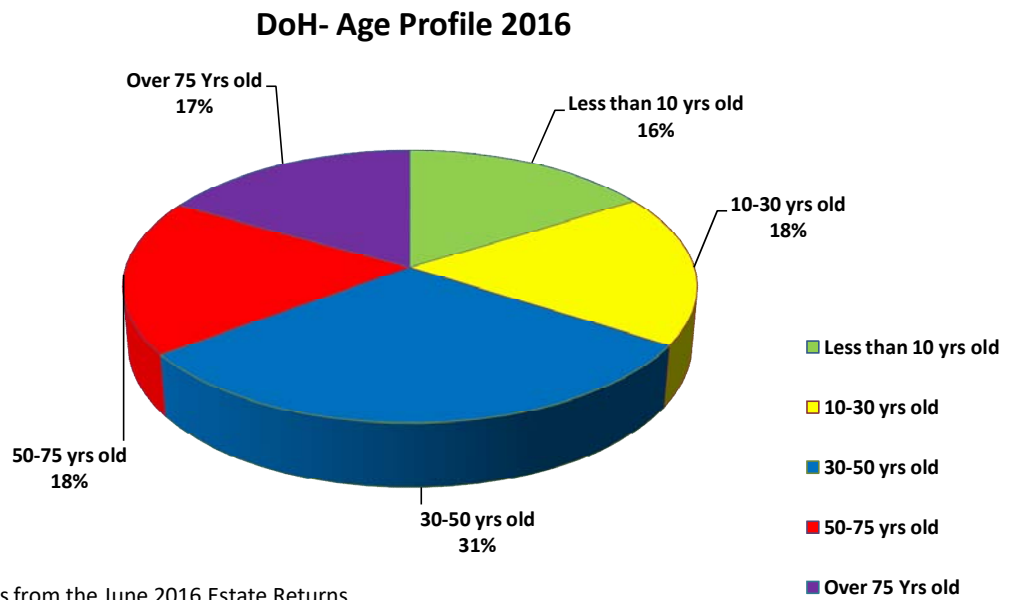
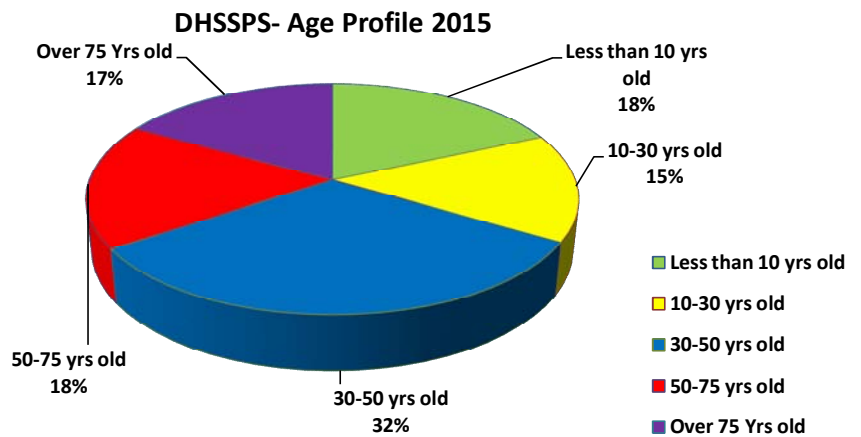
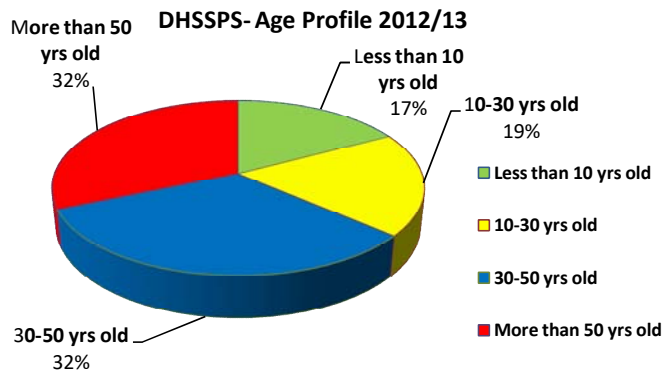
- 4.5 **Chart B – DoH 2016 Age Profile % m²** - shows that only 16% of the current DoH estate is less than 10 years old whilst 66% is in excess of 30 years old. Almost a third of the estate is in excess of 50 years old and 17% is over 75 years old.



Results from the June 2016 Estate Returns

- 4.6 **Chart C – DoH Age Profile comparison with previous reports** (page 21) - shows the comparison between the returns for this report (2016), the 2015 and 2012/13 SOTERS.
- 4.7 The comparison chart shows that two thirds of the estate remains over 30 year old with perhaps some shortfalls associated with functionality for a modern service and often more investment required for backlog maintenance.
- 4.8 The 2016 chart also highlights that 17% of the estate is over 75 years old.

Chart C- DoH Age Profile comparison with previous reports



Overall Condition

4.9 This category describes the assessed condition of property assets using three colour categories to visually express the Overall Condition and to highlight the challenge faced by ALBs to improve estate performance in all KPIs. To consistently inform the rating in this category the Physical Condition score should be the main driver to rate buildings unless ALBs are aware of other key factors, which in their opinion should change that key rating for the Overall Condition.

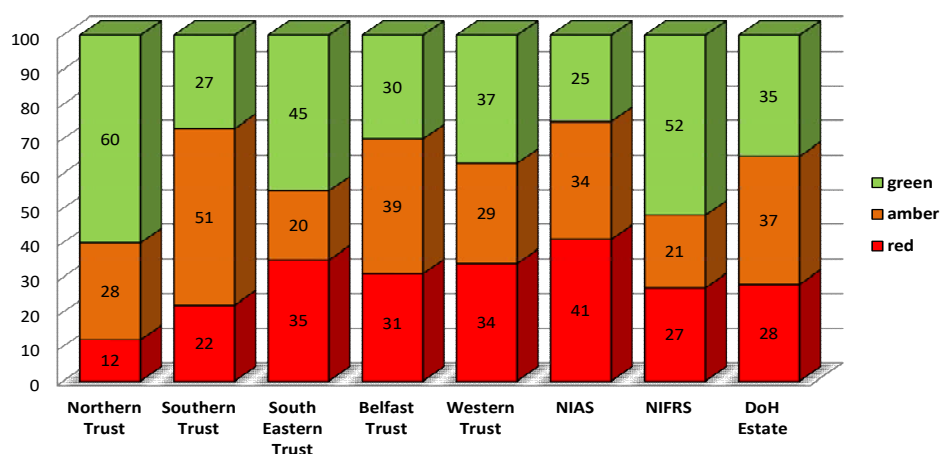
4.10 The categories are:

Red - indicating that services are, or are becoming, increasingly untenable as points of delivery for HSCPS services.

Amber - indicating that, if managed appropriately, buildings may have a significant remaining life but will need major refurbishment/ re-planning within 5-10 years.

Green - indicating that buildings are new or relatively new and capable of delivering a satisfactory DoH service, for the foreseeable future, subject to appropriate management.

Chart D: DoH Overall Condition 2016 % m²

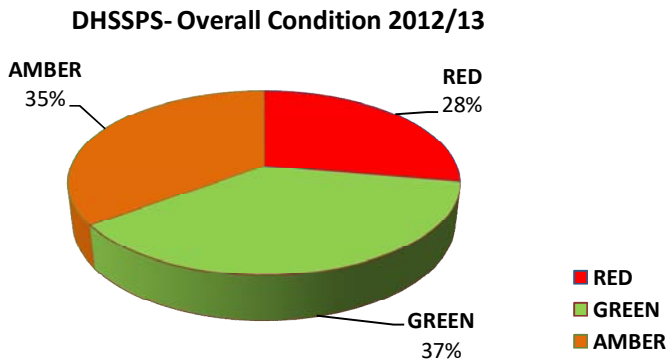


Results from the June 2016 Estate Returns

- 4.11 **Chart D – DoH Overall Condition 2016 % m²** - shows that the majority of the estate is in either red or amber categories reflecting the need for new replacement facilities and/or considerable investment in existing facilities over the next few years.
- 4.12 The 28% of the DoH estate in condition “red” causes particular concern in relation to the ability of these facilities to safely deliver effective services into the future.
- 4.13 The strategic planning process undertaken by individual ALBs should lead to the development of timed action plans which prioritise property assets where KPIs are highlighted as “red”.
- 4.14 37% of the DoH estate is in “amber” condition and will also require targeted investment. However, these property assets will generally be treated as a second priority to those identified as “red”, except when functional use takes priority.

- 4.15 35% scored “green”, which reflects those areas of the estate which are in an acceptable condition. These property assets are not free from the requirements of ongoing investment to ensure that both the building condition and asset value is maintained.
- 4.16 ALBs ongoing process of rationalisation, including replacement and refurbishment of poor quality essential facilities and/or disposal of non-essential assets, will help reduce the need for investment in sub-standard estate and subsequently reduce the level of risk and associated backlog maintenance liability.
- 4.17 **Chart E - DoH - Overall Condition comparison with previous reports** (page 25)
- shows the comparison between the returns for this report (2016), the 2015 and 2012/13 SOTERS.
- 4.18 The comparison chart shows that even with continuing targeted investment over the last two years there has been no change in Overall Condition scores across the whole estate in the sub-standard “amber” and “red” categories. This demonstrates the level of investment required to improve the condition of the estate.

Chart E- DoH **Overall Condition** comparison with previous reports

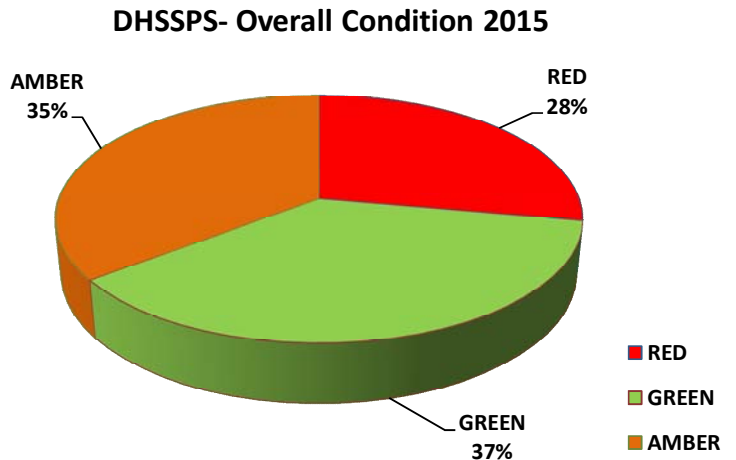


Overall Condition Definition;

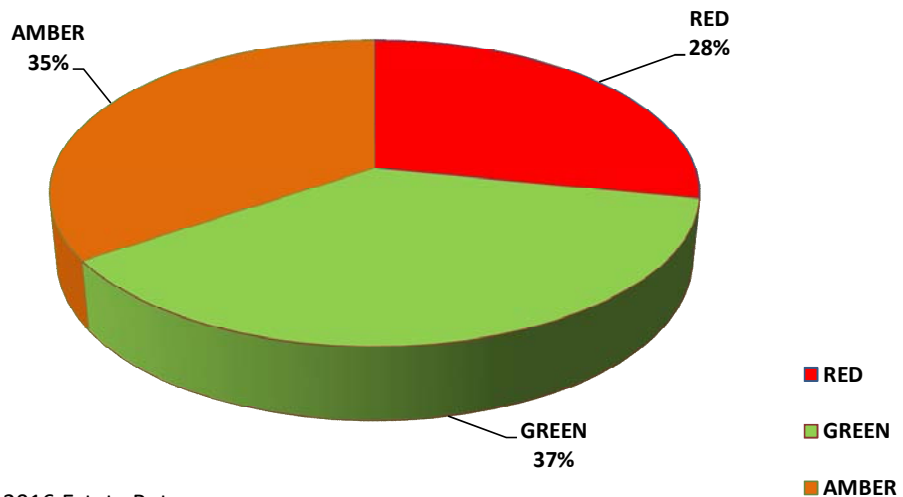
Red-Will reflect a building that is, or is becoming largely untenable as a point for the delivery of an HSS service or contains serious inherent risks to life.

Amber-Will reflect a building that may have a significant remaining useful life, subject to appropriate management, but which will need major refurbishment/re-planning within 5-10 years.

Green-Will reflect new and relatively new buildings, the standards of which continue to be largely current, and which can be expected to deliver a service for the foreseeable future, subject to appropriate management.



DoH- Overall Condition 2016

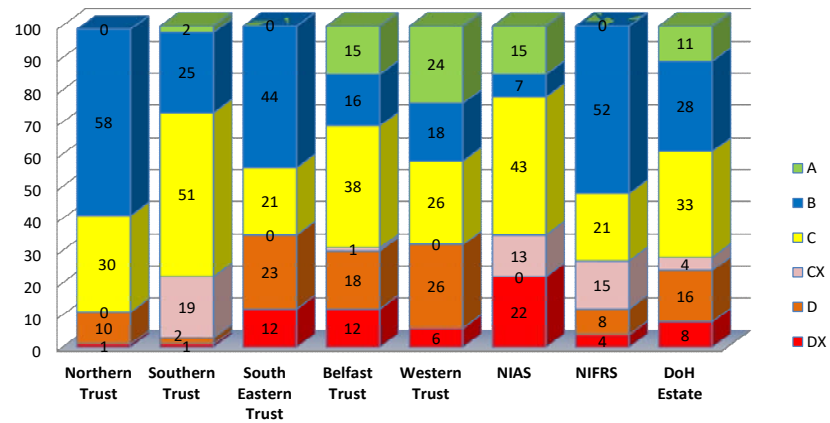


Results from the June 2016 Estate Returns

Physical Condition

- 4.19 This category describes the physical condition of buildings within the DoH estate.
- 4.20 Physical Condition definitions:
- A:** As new and can be expected to perform adequately for its full normal life
 - B:** Sound - some elements could be unacceptable
 - C:** Operational, but the need for significant repairs has been identified- some elements could be in an unacceptable state
 - D:** Unacceptable
 - X:** Appended to 'C' or 'D' to indicate that it is impossible to improve without replacement
- 4.21 The data shown in **Chart F – DoH Physical Condition % m² 2016** (page 27) - demonstrates that the DoH estate contains many buildings which, due to age and underinvestment, are in need of upgrading in order to deliver the quality of services required in a safe environment.

Chart F: DoH Physical Condition 2016 % m²

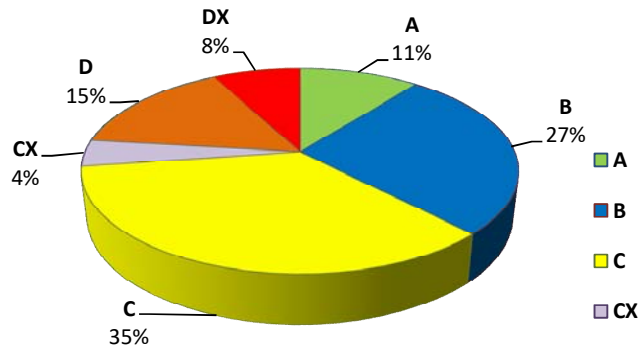


Results from the June 2016 Estate Returns

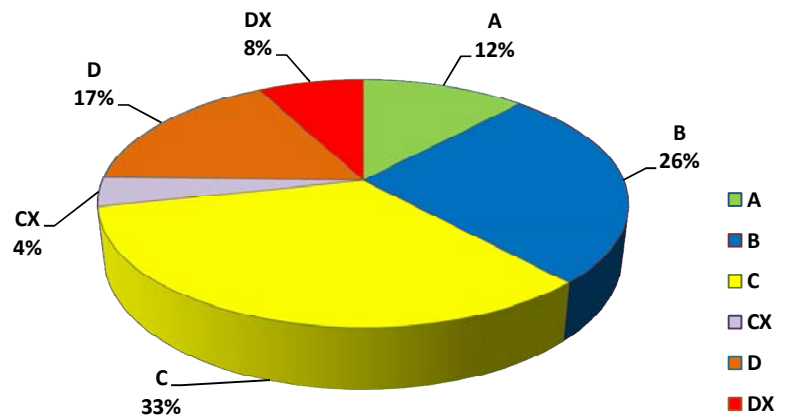
- 4.22 61% of the DoH estate falls below Category B standard (which is the acceptable standard required for all the estate). Of this 61%, 12% requires replacement as it cannot be improved by refurbishment or maintenance.
- 4.23 **Chart G – DoH Physical Condition comparison with previous reports** (page 28)
- shows the comparison between the returns for this report (2016), the 2015 and 2012/13 SOTERS.
- 4.24 The comparison chart shows a 1% increase in buildings with condition A & B scores, due to continuing targeted investment in providing more modern and suitable facilities.

Chart G- DoH Physical Condition comparison with previous reports

DHSSPS- Physical Condition 2012/13



DHSSPS- Physical Condition 2015



Physical Condition Definition:

A- As new and can be expected to perform adequately for its full normal life.

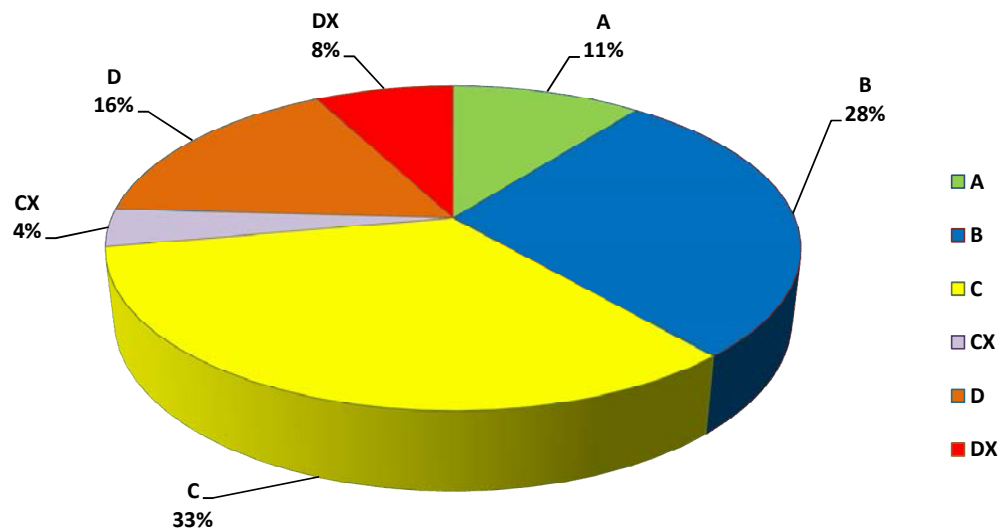
B-- Sound – some elements could be unacceptable.

C-- Operational, but the need for significant repairs has been identified – some elements could be in an unacceptable state.

D- Unacceptable.

X- Appended to 'C' or 'D' to indicate that it is impossible to improve without replacements.

DoH- Physical Condition 2016



Results from the June 2016 Estate Returns

Functional Suitability

4.25 Functional suitability demonstrates how effectively a building (or part of a building) supports the delivery of specific DoH services.

4.26 Functional Suitability definitions:

A: either in full compliance with or exceeds the appropriate, nationally published guidance and has a 'full life' expectation. No expenditure, except for routine maintenance, is required.

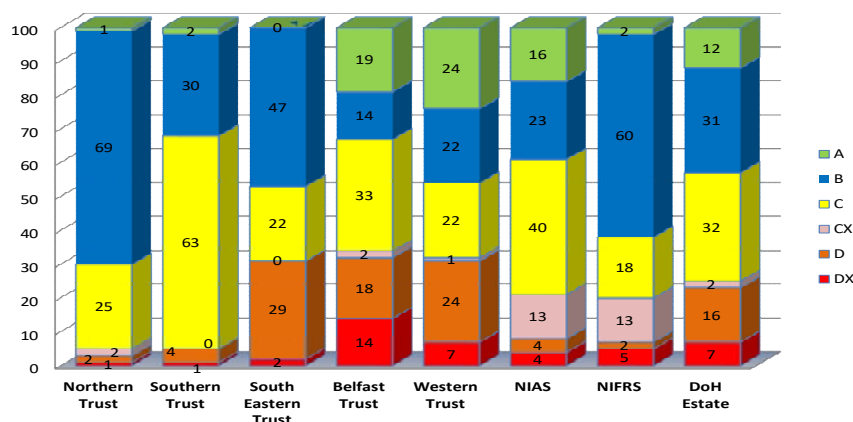
B: reasonable and adequate, even though it does not have a 'full life' expectation or does not fully comply with national guidance. In most cases, this marking will be perfectly acceptable for the provision of healthcare or public safety services. No capital expenditure would be required to improve the building. Repair and normal maintenance would be adequate to sustain at 'B' rating.

C: below 'B' standard and would require capital expenditure to upgrade to 'B'.

D: below 'C' standard and major capital expenditure required to achieve 'B'.

X: Appended to 'C' or 'D' to indicate that this building is impossible or impractical to improve.

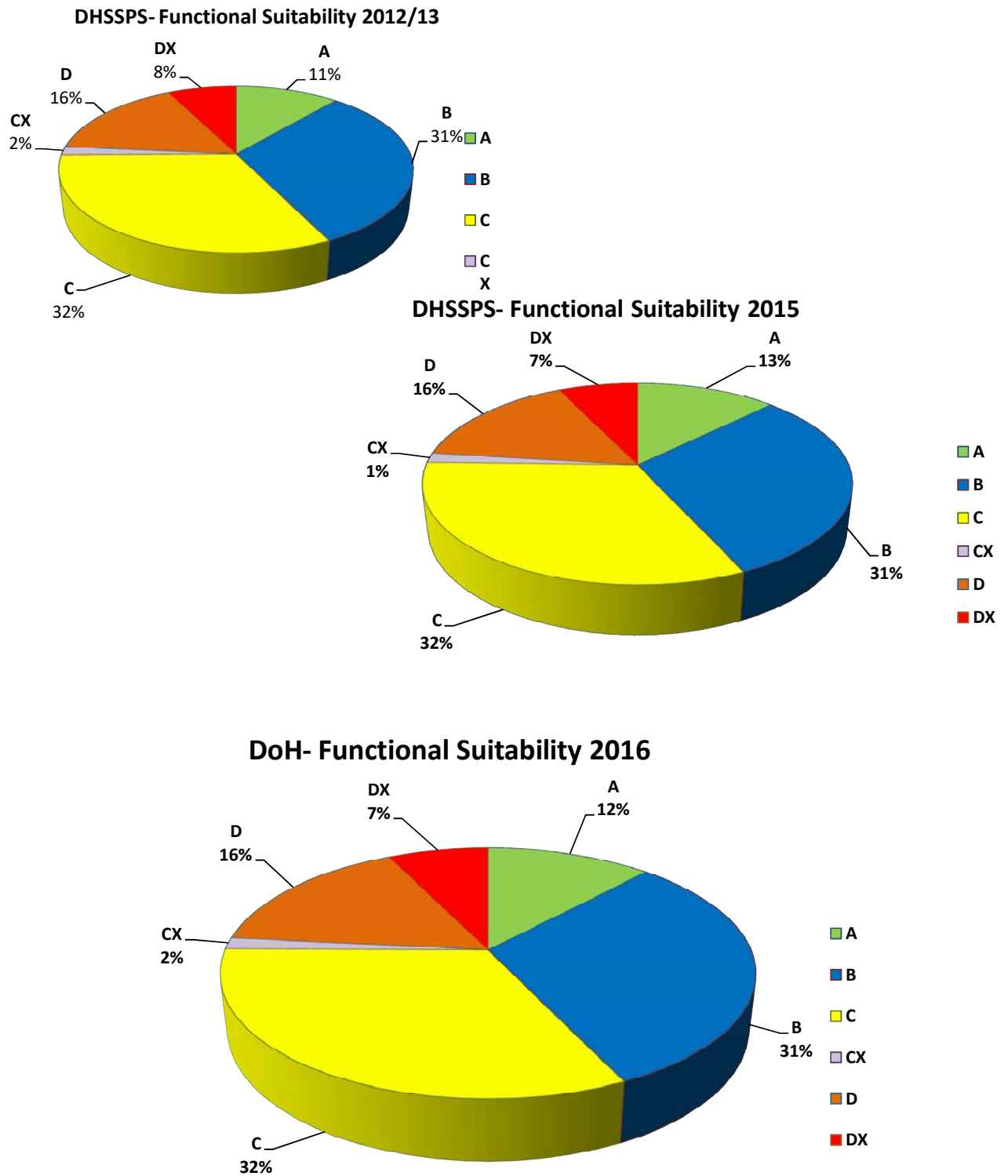
Chart H: DoH Functional Suitability 2016 % m²



Results from the June 2016 Estate Returns

- 4.27 The data in **Chart H – DoH Functional Suitability 2016 % m²** - demonstrates that 57% of the DoH estate requires investment to upgrade functional suitability. 9% of the DoH estate is considered either impossible or impractical to improve.
- 4.28 ALBs should always consider the functional suitability of buildings, firstly in respect of individual Estate Control Plans and then on an individual building basis before committing investment to upgrade buildings for physical condition. To provide and improve the quality of service it may be prudent to consider relocating services from buildings scoring poorly for functional suitability, to other good quality buildings more suitable for adaptation.
- 4.29 **Chart I – DoH Functional Suitability comparison with previous reports** (page 31) - shows negligible change between the returns for this report (2016), the 2015 and 2012/13 SOTERS.

Chart I- DoH **Functional Suitability** comparison with previous reports

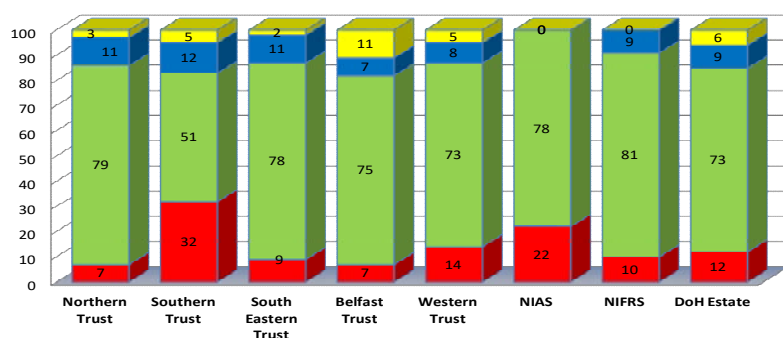


Results from the June 2016 Estate Returns

Space Utilisation

- 4.30 Space utilisation explores how well the DoH estate is being used. Vacant and underused estate are defined as underperforming assets as they do not demonstrate value for money. ALBs are reminded of their requirement to review property portfolios annually to ensure property assets have a foreseeable need and are put to optimum use.
- 4.31 Space Utilisation definitions:
- 1 Empty, or grossly underused
 - 2 Underused
 - 3 Adequate, in both provision and use
 - 4 Overcrowded
- 4.32 The department requires its ALBs to proactively dispose of surplus assets in compliance with the DoH property asset strategy and policy contained in Central Advisory Unit Guidance and Managing Public Money Northern Ireland.
- 4.33 All public bodies are required to manage all assets efficiently and effectively and in doing so, demonstrate that assets provide value for money.
- 4.34 ALBs are required to provide annual updates, in individual AMPs, on vacant and underused property assets to ensure that **only** those assets which have a clear foreseeable and deliverable need are retained and all other vacant land and buildings have a timed action plan in place to reduce. Underused property assets should also have a timed action plan in place to achieve optimum use. ALBs have agreed targets in place to reduce vacant and underused assets. All improvement targets are shown on page 53 of this report.

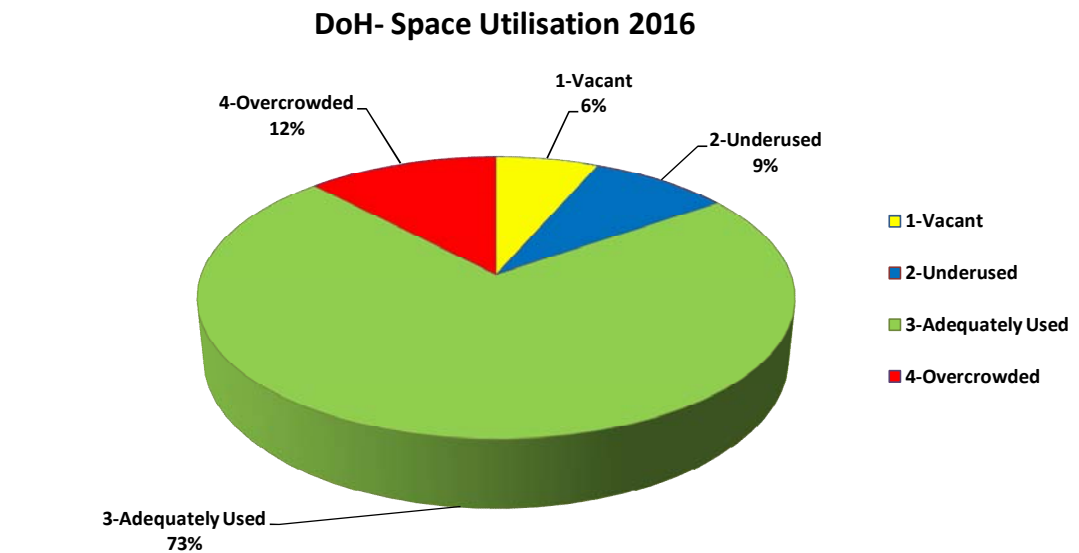
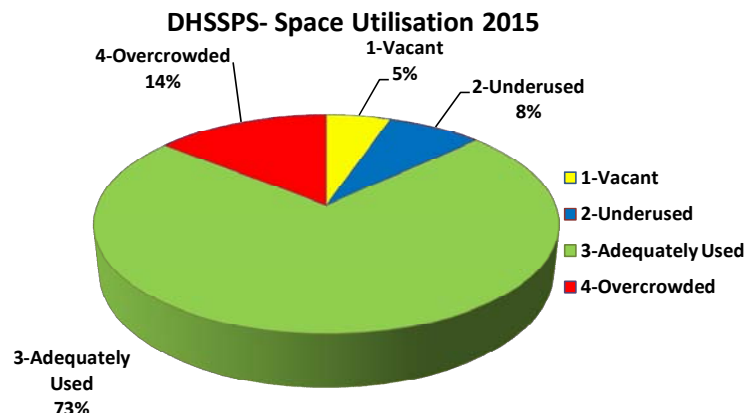
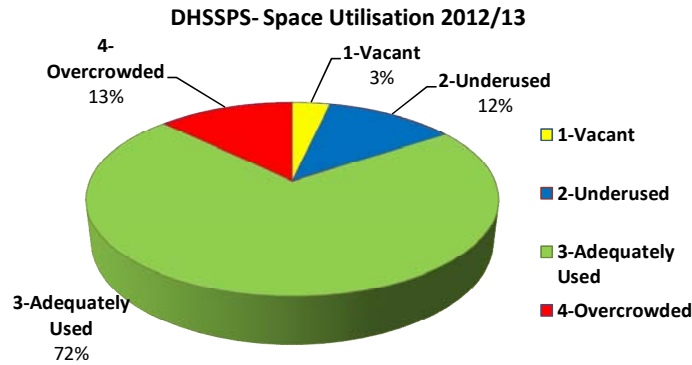
Chart J: DoH Space Utilisation 2016 % m²



Results from the June 2016 Estate Returns

- 4.35 The data in **Chart J – DoH Space Utilisation 2016 % m²** - demonstrates that 73% of the DoH estate is adequately used.
- 4.36 9% of the estate is classified as underused. This may be due to buildings being unsuitable in terms of condition and/or functional suitability to deliver a service.
- 4.37 Conversely, 12% of the DoH estate is classified as overcrowded. ALBs should review the potential to make better use of underused estate to ease overcrowding, where appropriate. This is likely to require investment but may lead to significant efficiencies.
- 4.38 Whilst 6% of the DoH estate is classified as vacant, ALBs must have timed and deliverable action plans in place for re-use, demolition (subject to business case approval) and/or disposal of these property assets.
- 4.39 **Chart K – DoH Space Utilisation comparison with previous reports** (page 34) - shows the comparison between the returns for this report (2016), the 2015 and 2012/13 SOTERS.

Chart K- DoH **Space Utilisation** comparison with previous reports



Results from the June 2016 Estate Returns

4.40 Comparison Chart K shows that vacant estate has increased from 3% to 6% since 2012/13. This may be due to ALBs vacating estate for some of the following reasons:

- the estate no longer provides a safe or functionally suitable environment for the service provision
- it may be temporarily vacant at the time of scoring due to refurbishment
- it may be planned for disposal or demolition

Statutory Standards

4.41 All buildings are subject to ongoing inspection and regulation by statutory authorities. New buildings must comply with Health and Safety Standards and relevant Codes of Practice. However, services can continue to be safely and satisfactorily delivered from existing buildings, which predate current standards, if risks are identified and proactively managed by ALBs.

4.42 ALBs are required to proactively manage such risks to provide a safe environment for the delivery of services and provide assurances under the department's Controls Assurance Standards process.

4.43 Plans to improve compliance of such buildings, or move services to more suitable premises should always be a priority for ALBs.

4.44 Some examples of the main health and safety requirements that ALBs have to comply with include:

Electricity at Work Regulations

Control of legionella

Firecode

Control of Substances Hazardous to Health (COSHH)

Health and safety at Work

Asbestos

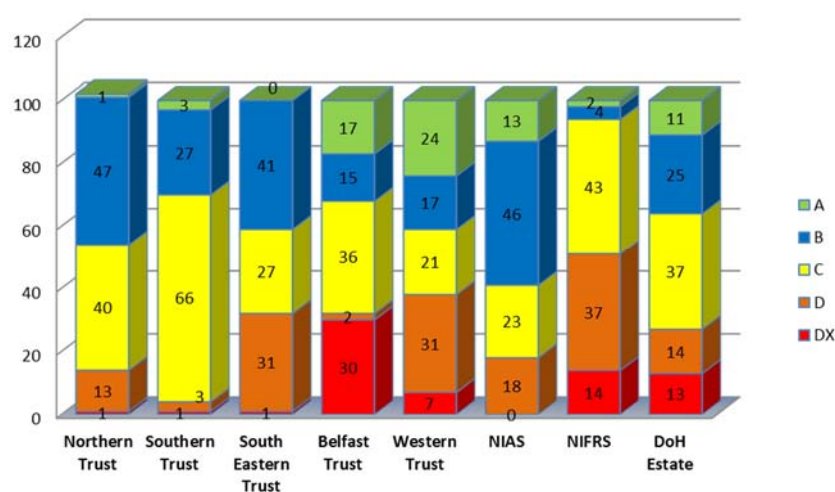
Disability Discrimination Act (DDA)

4.45 This list is not exhaustive; there are many other statutory requirements that ALBs must comply with in order to protect the safety of staff, patients and visitors on DoH sites.

4.46 Statutory Standards definitions:

- A:** Conforms to statutory regulations and is a new building
- B:** Conforms to statutory regulations
- C:** Does not conform to statutory legislation but is capable of being upgraded with minor expenditure
- D:** Does not conform to statutory legislation but is capable of being upgraded with major expenditure
- DX:** Does not conform to statutory legislation and improvements are either impractical or too expensive to be tenable

Chart L: DoH Statutory Standards 2016 % m²



Results from the June 2016 Estate Returns

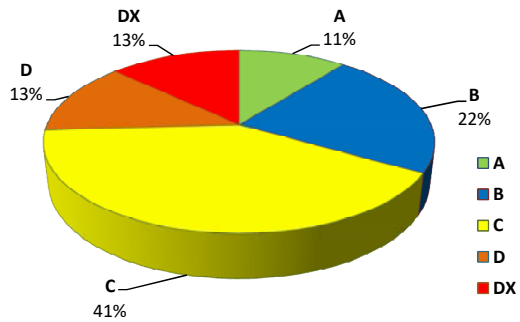
4.47 The data in **Chart L – DOH Statutory Standards 2016 %m²** - demonstrates that 64% of the DoH estate, much of which predates the current regulations and

standards, is not fully compliant with statutory regulations and requires investment to upgrade.

- 4.48 13% of the estate falls into category DX i.e. is either too expensive or impractical to improve.
- 4.49 The 14% in category D would require major expenditure to be upgraded to current standards. These buildings require additional stewardship by ALBs to ensure that any associated risks are appropriately managed to provide a safe environment for the delivery of services.
- 4.50 **Chart M - Statutory Standards comparison with previous reports** (page 38) - shows the comparison between the returns for this report (2016), the 2015 and 2012/13 SOTERS.
- 4.51 This comparison chart shows an improvement of 3% since 2012/13. However 64% of the estate still needs investment to upgrade for statutory standards.

Chart M- DoH **Statutory Standards** comparison with previous reports

DHSSPS- Statutory Standards 2012/13



Statutory Standards Definition:

A-Conforms to statutory legislation and is a new building.

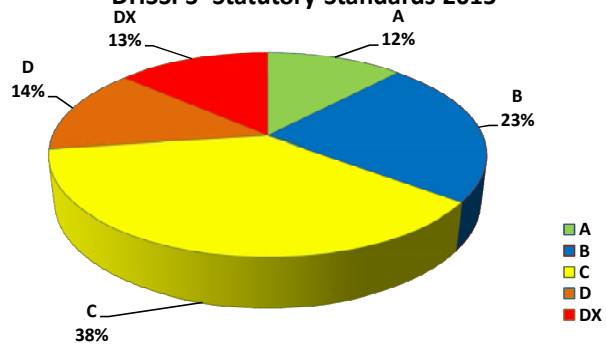
B-Conforms to statutory legislation.

C-Does not conform to statutory legislation but is capable of being upgraded to that level with minor expenditure.

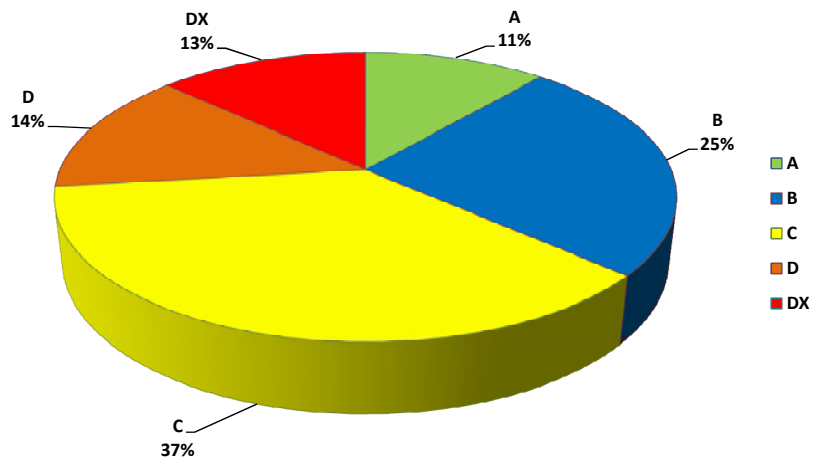
D-Does not conform to statutory legislation but is capable of being upgraded to that level with major expenditure.

DX-Does not conform to statutory legislation and improvements are either impractical or too expensive to be tenable.

DHSSPS- Statutory Standards 2015



DoH- Statutory Standards 2016



Results from the June 2016 Estate Returns

Estate Performance analysis specifically Acute & Community sectors of the HSC estate

- 4.52 For the purposes of this analysis only, the HSC estate comprises the five HSC Trusts and excludes NIAS and NIFRS. As previously noted, due to the implications associated with an ageing estate, there are significant constraints to be overcome and managed by ALBs to deliver the transformational change included in 'Delivering Together'. The consequential capital and revenue investment needs will become clear over time and may be considerable. However, the primary objective remains - to continue to provide an estate that, in the most effective and efficient manner, facilitates the delivery of health and social care services in line with 'Delivering Together' and quality standards.
- 4.53 Many of the existing buildings in the health estate, due to their form, structure and space limitations are incapable of being economically adapted to meet current space standards and facilitate modern clinical practice; new build facilities may provide the only effective solution.
- 4.54 The Categorisation of Health Facilities chart on page 41, groups Healthcare facilities into 4 main categories:
- Acute Hospital sites
 - Local Hospitals & Enhanced Local Hospital sites
 - Non-Acute Hospital sites and Community facilities
 - Other Major Healthcare sites
- 4.55 Additional estate performance information relating to each of the categories listed above covering specific KPIs i.e. age profile, physical condition and functional suitability, are available as follows:

Chart N - Age Profile (page 42)

Chart O - Physical Condition (page 43)

Chart P - Functional Suitability (page 44)

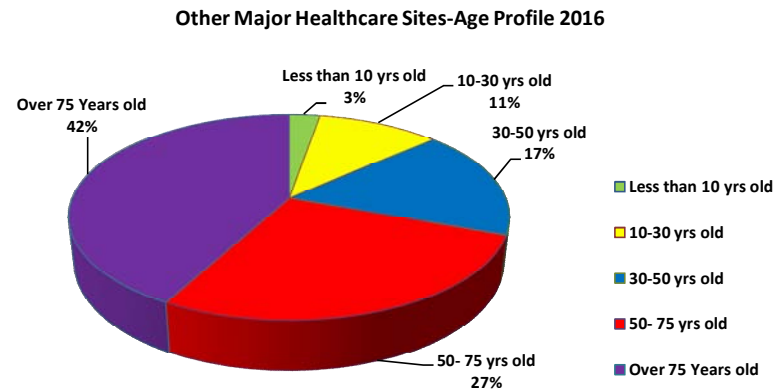
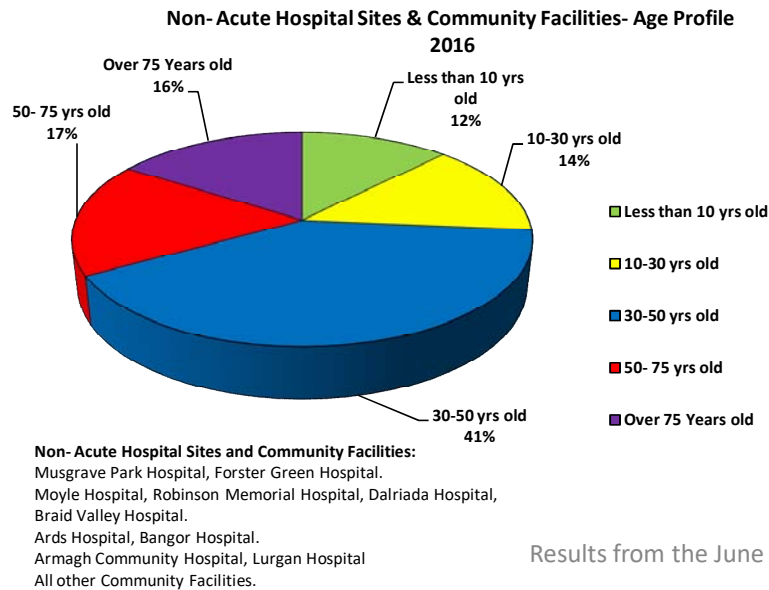
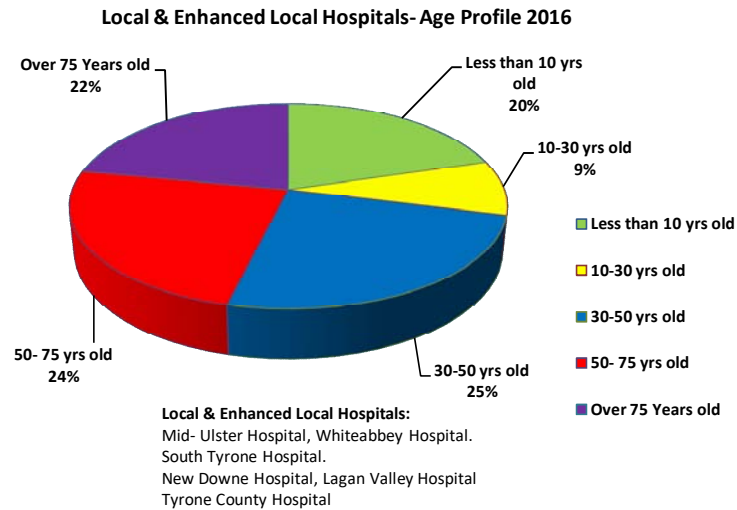
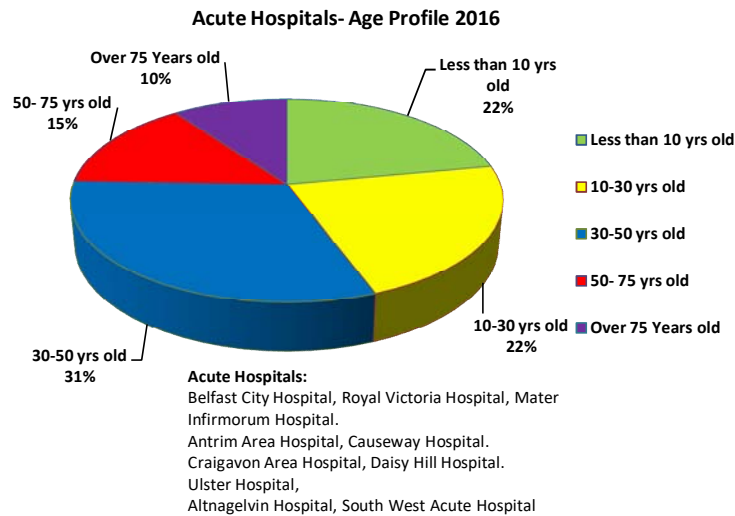
Chart Q - Space Utilisation (page 45)

Chart R - Statutory Standards (page 46)

Categorisation of Health Facilities 2016:

Category	Belfast	Northern	Southern	South Eastern	Western
ACUTE HOSPITAL SITES	BCH RVH Mater	Antrim Causeway	Craigavon Daisy Hill	Ulster	Altnagelvin SW Acute
LOCAL HOSPITALS & ENHANCED LOCAL HOSPITALS		Mid- Ulster Whiteabbey	South Tyrone	Downe Lagan Valley	Tyrone County
NON- ACUTE HOSPITAL SITES & COMMUNITY FACILITIES	MPH Forster Green & All other Community Facilities	Moyle, Robinson, Daraidda, Route, Braid Valley & All other Community Facilities	Armagh Community Hospital (Tower Hill), Lurgan Hospital & All other Community Facilities	Ards, Bangor, & All other Community Facilities	All Community Facilities
OTHER MAJOR HEALTHCARE SITES	Knockbracken Muckamore	Holywell	St. Luke's	Downshire	Gransha Tyrone & Fermanagh

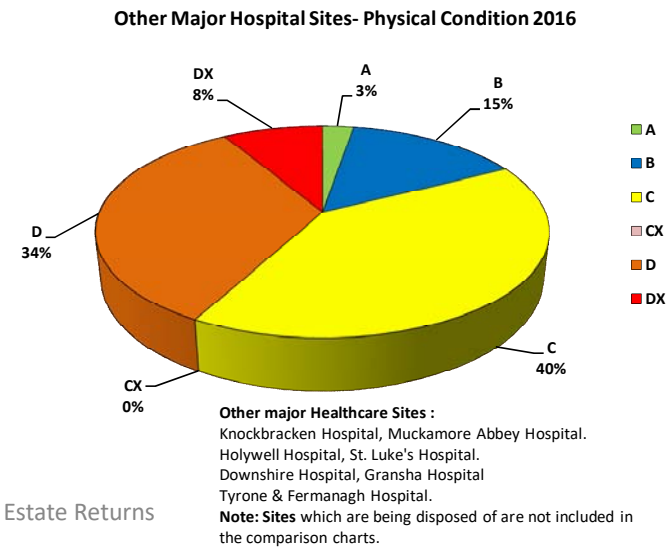
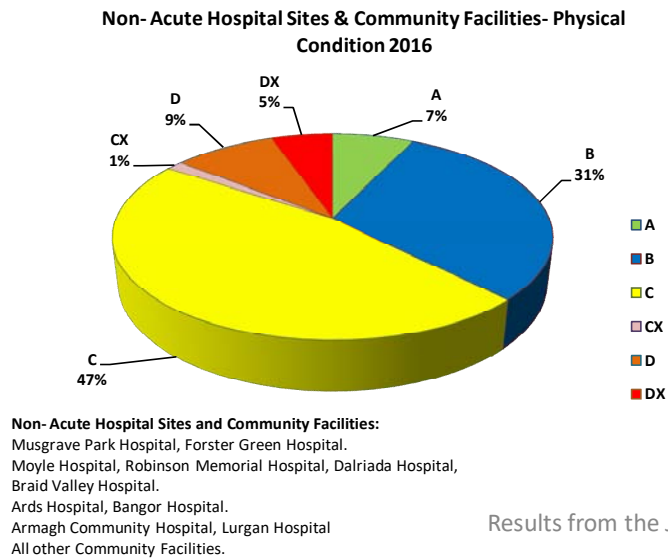
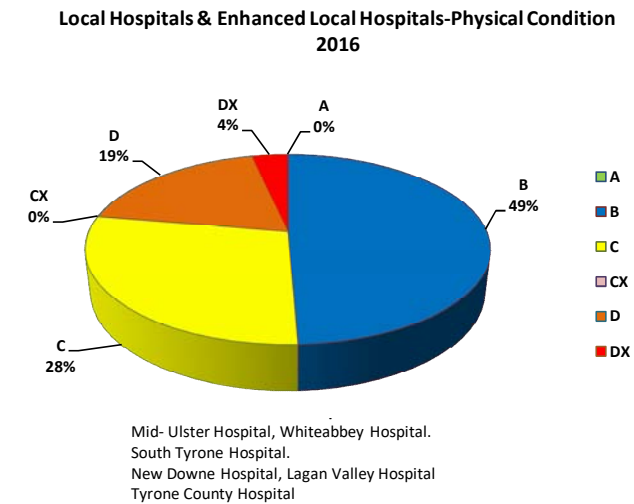
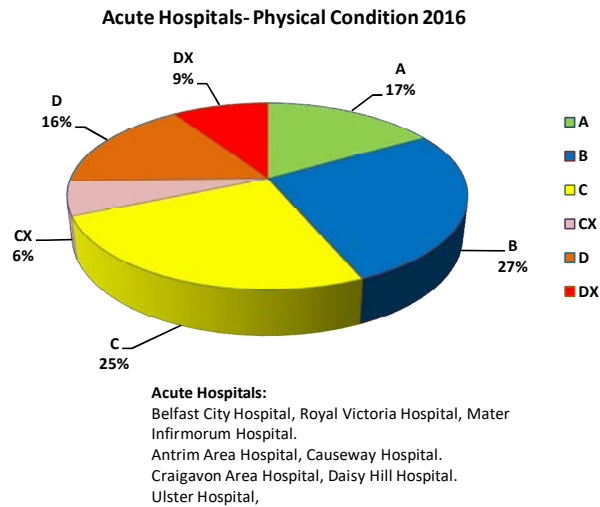
Chart N: Age profile of the HSC estate by Category



Note: Sites which are being disposed of are not included in the comparison charts.

Results from the June 2016 Estate Returns

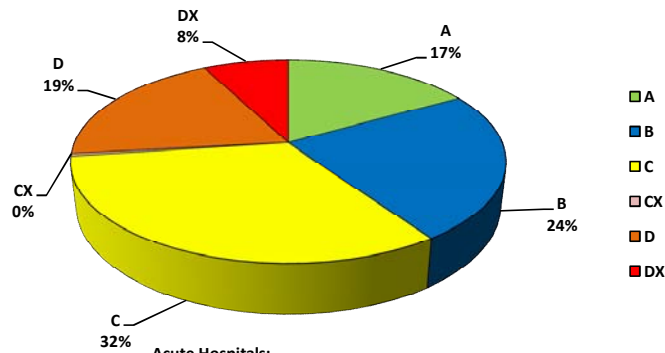
Chart O: Physical Condition of the HSC estate by Category



Results from the June 2016 Estate Returns

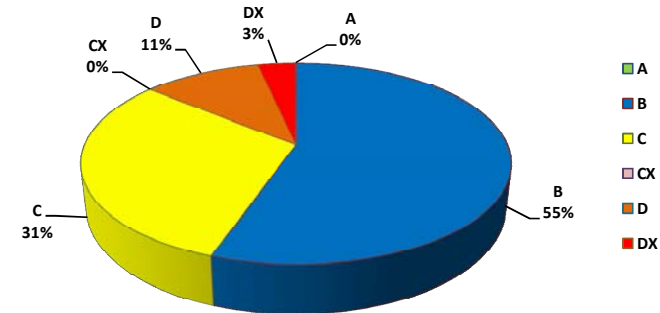
Chart P: Functional Suitability of the HSC estate by Category

Acute Hospitals- Functional Suitability 2016



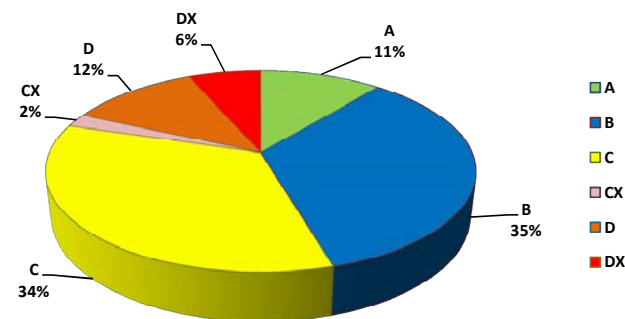
Acute Hospitals:
Belfast City Hospital, Royal Victoria Hospital, Mater Infirmary Hospital.
Antrim Area Hospital, Causeway Hospital.
Craigavon Area Hospital, Daisy Hill Hospital.
Ulster Hospital,
Altnagelvin Hospital, South West Acute Hospital

Local & Enhanced Local Hospitals- Functional Suitability 2016



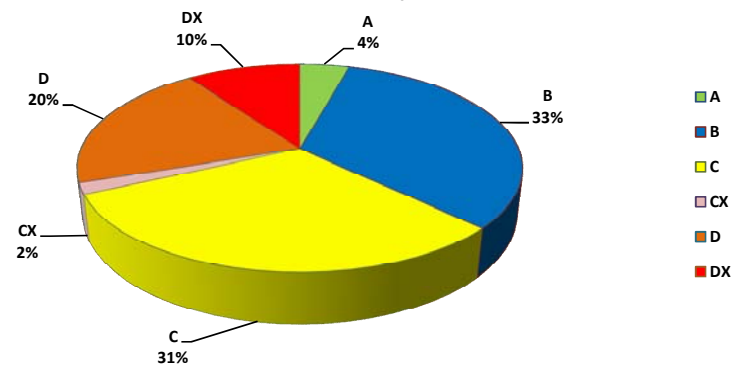
Local & Enhanced Local Hospitals:
Mid- Ulster Hospital, Whiteabbey Hospital.
South Tyrone Hospital.
New Downe Hospital, Lagan Valley Hospital
Tyrone County Hospital

Non- Acute Hospital Sites & Community Facilities- Functional Suitability 2016



Non- Acute Hospital Sites and Community Facilities:
Musgrave Park Hospital, Forster Green Hospital.
Moyle Hospital, Robinson Memorial Hospital, Dalriada Hospital,
Braid Valley Hospital.
Ards Hospital, Bangor Hospital.
Armagh Community Hospital, Lurgan Hospital
All other Community Facilities.

Other Major Healthcare Sites- Functional Suitability 2016

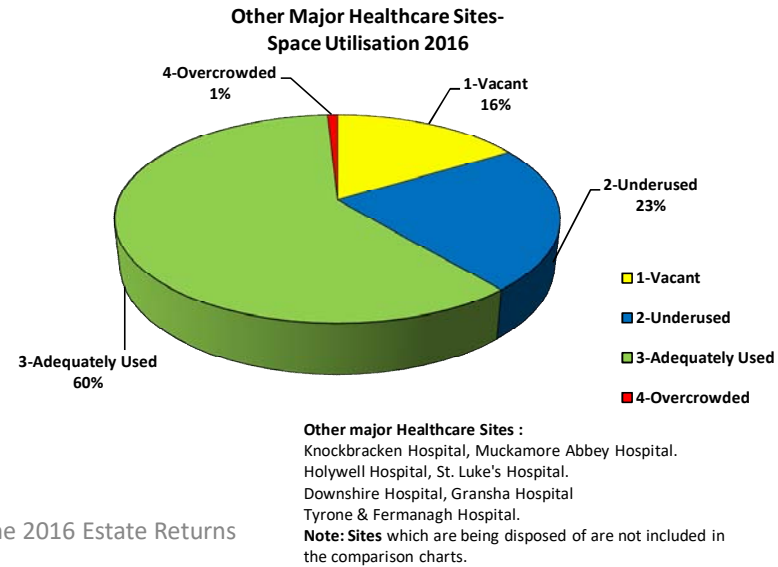
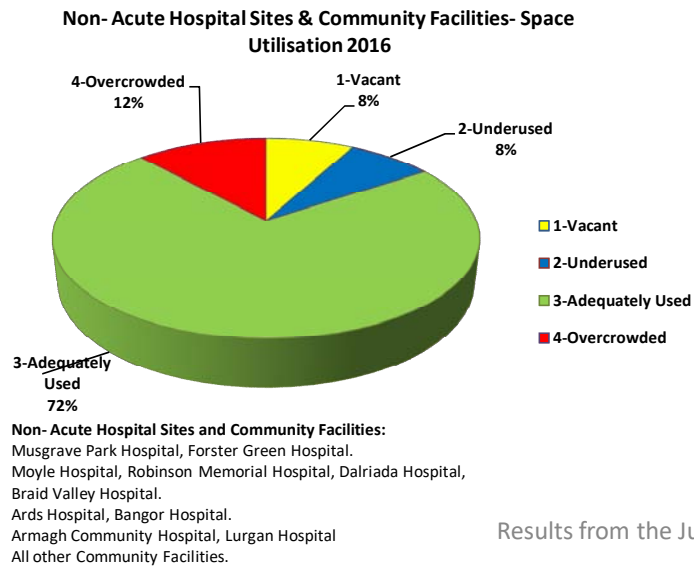
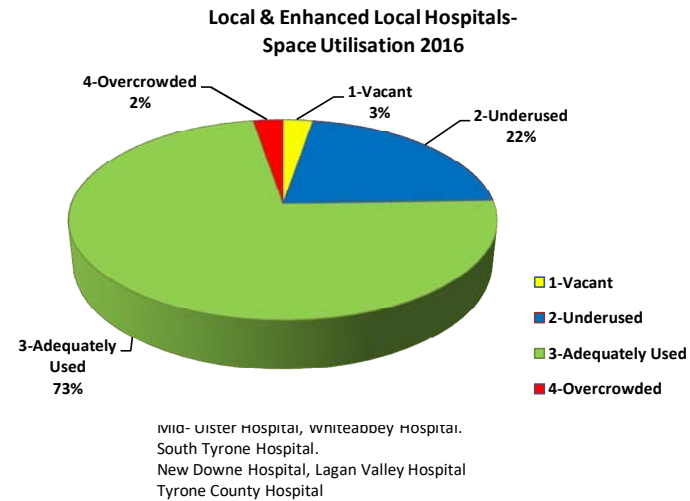
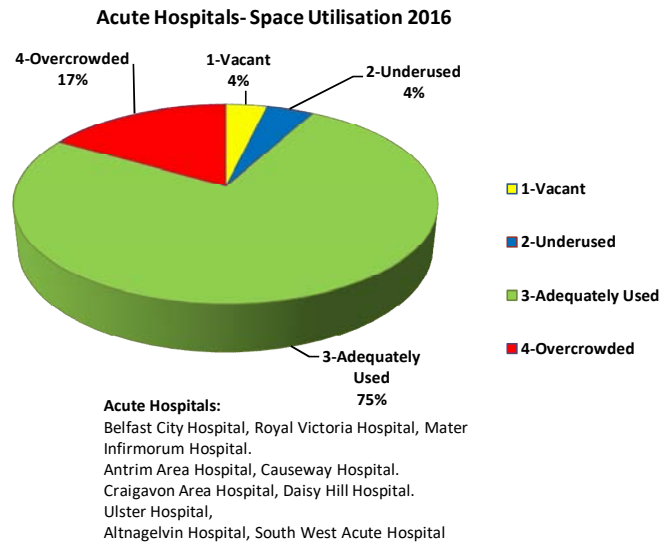


Other major Healthcare Sites :
Knockbracken Hospital, Muckamore Abbey Hospital.
Holywell Hospital, St. Luke's Hospital.
Downshire Hospital, Gransha Hospital
Tyrone & Fermanagh Hospital.

Note: Sites which are being disposed of are not included in the comparison charts.

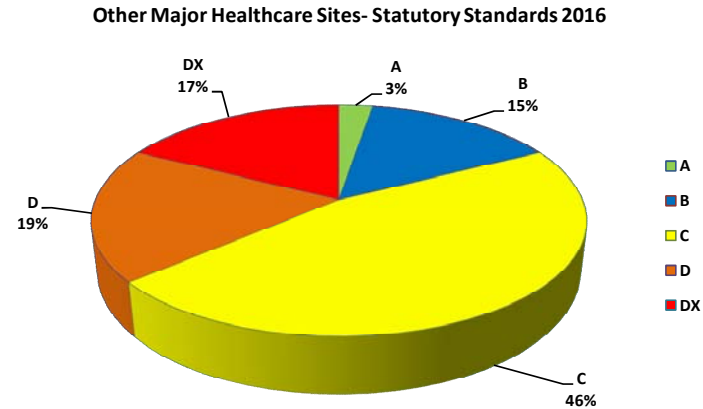
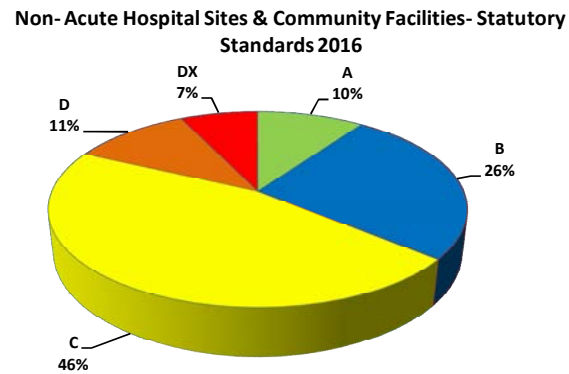
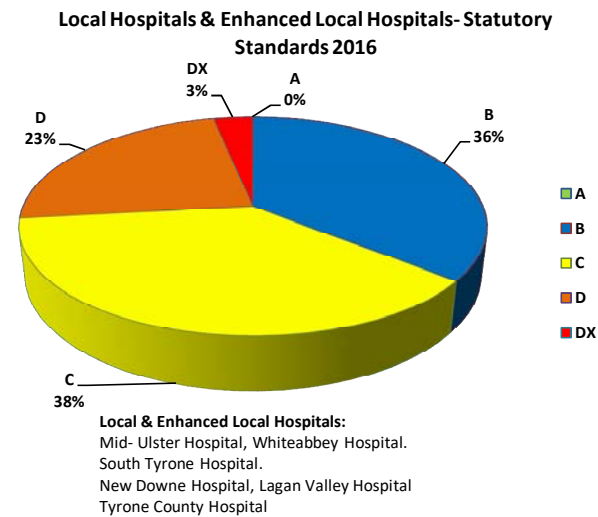
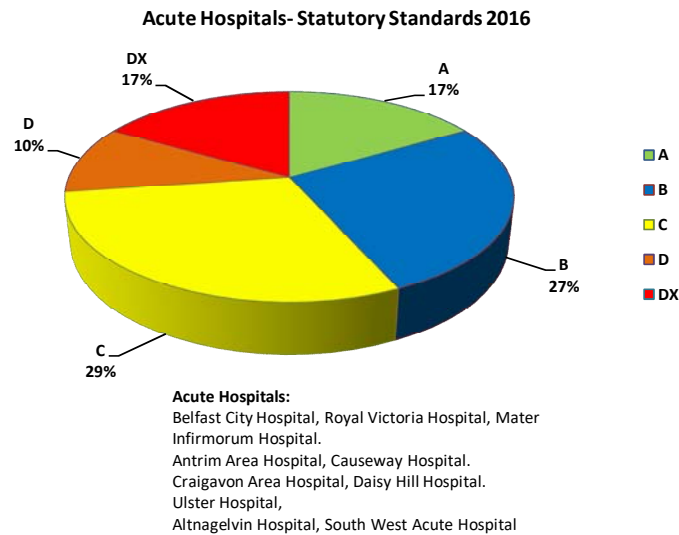
Results from the June 2016 Estate Returns

Chart Q: Space Utilisation of the HSC estate by Category



Results from the June 2016 Estate Returns

Chart R: Statutory Standards of the HSC estate by Category



Note: Sites which are being disposed of are not included in the comparison charts.

Results from the June 2016 Estate Returns

Age Profile of the HSC estate by Category

- 4.56 Chart 'N' (page 42) shows that just over a fifth (22%) of the Acute Hospitals category have had new facilities commissioned and built within the last 10 years, while in the Non Acute Hospitals and Community facilities category, new build makes up only 12% of the total floor area. Local & Enhanced Local Hospitals have had some 20% of their total floor area replaced with new facilities over the same period.
- 4.57 In the 'Other Major Healthcare sites' category only 3% of this estate has been built in the last 10 years, whilst some 42% of the facilities on these sites are over 75 years old. These sites are generally large sites which comprise mental health and learning difficulty facilities, and where a number of the larger buildings are listed. The layout and condition of these buildings present a significant challenge to enable them to be used for the provision of modern healthcare services. 'The Protocol for the Care of the Government Estate', issued by the Northern Ireland Environment Agency (NIEA) means that ALBs have a responsibility to preserve these Historic buildings. Such buildings may also be difficult to dispose of due to location, limited commercial use and high conversion costs.

Physical Condition of the HSC estate by Category

- 4.58 Chart 'O' (page 43) shows that continuing investment in Acute Hospital facilities means that 44% are currently in new or good physical condition. However, 25% is in need of investment to improve condition and 31% is in unacceptable physical condition or needs replaced.
- 4.59 Non Acute Hospital sites and Community facilities category - almost half of the total area (47%) is operational but still requires investment to effect significant repairs.
- 4.60 Local Hospital sites - 51% of the area occupied requires investment to upgrade Physical Condition and of that figure 23% is in unacceptable condition or needs replaced.

- 4.61 Some 18% of the total floor area on 'Other Major Healthcare sites' category is in new or relatively good physical condition; this lower score is due to the type and age of most buildings on these sites.

Functional Suitability of the HSC estate by Category

- 4.62 With several major schemes completing on Acute Hospital sites, across Trusts over the last few years, Chart 'P' (page 44) shows that 41% of assets in this category are now functionally suitable. However, 59% still requires either minor or major investment to bring them up to an acceptable functional standard to provide modern healthcare.
- 4.63 Scores on Non Acute Hospital sites & Community facilities category show that 46% of the estate is functionally suitable; 54% requires investment for upgrading or needs replaced.
- 4.64 The returns show that 51% of 'Other Major Hospital sites' facilities require either minor or major investment to upgrade functional suitability while 12% needs replaced.

Space Utilisation of the HSC estate by Category

- 4.65 Chart 'Q' (page 45) shows that in the Acute sector of the HSC estate 75% is adequately used but 17% continues to be designated as overcrowded.
- 4.66 The highest percentage of underused estate is in the "Other Major Healthcare sites" sector at 23%. This may be attributed to the number of large Historic buildings located on these sites which are not usually functionally suitable for modern healthcare.

Statutory Standards of the HSC estate by Category

- 4.67 Due to continuing investment and good management, Chart 'R' (page 46) shows that some 44% of the Acute HSC estate now complies with statutory obligations;

however 56% is non-compliant, of which 17% is either impractical or too expensive to improve.

- 4.68 Scores on Non Acute and Community sites show that some 57% of that estate is not fully compliant with statutory standards and needs investment to improve.

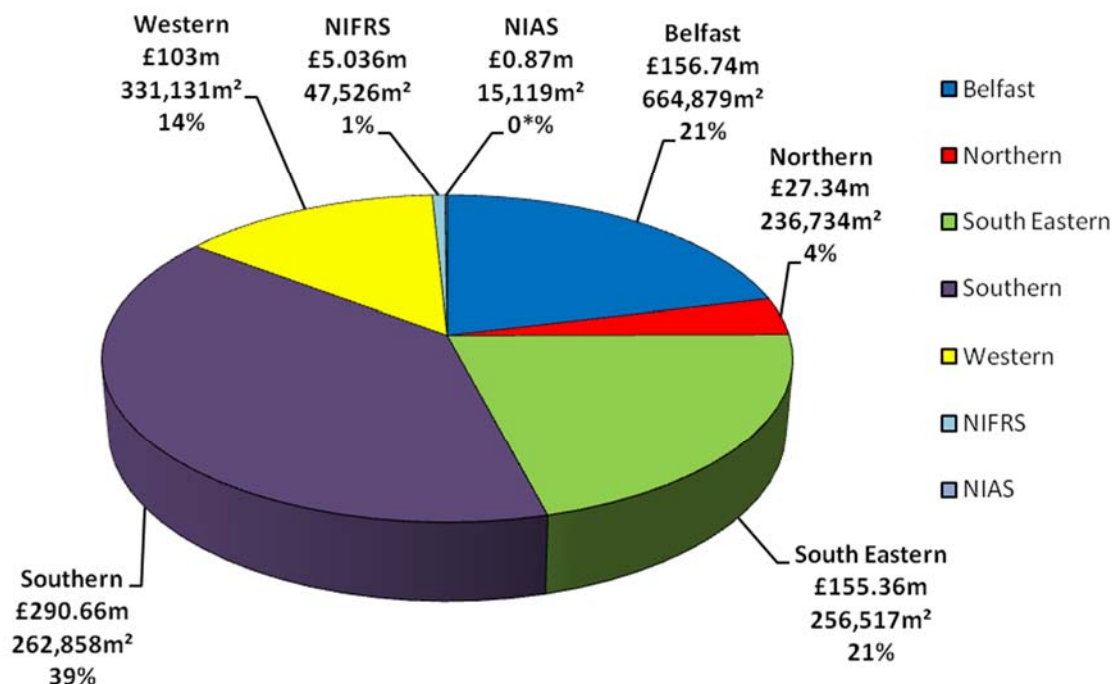
5.0 RISK MANAGEMENT

- 5.1 Responsibility for the ongoing operational maintenance of the DoH estate lies with departmental ALBs. ALBs are required to have suitably skilled staff, robust systems and processes in place which give assurance that all risks are managed appropriately to ensure safe delivery of services.
- 5.2 This report clearly shows that the existing estate is characterised by a significant suitability gap, in terms of fitness for purpose, to meet current and future needs for delivery of services.

Backlog Maintenance in the DoH estate

- 5.3 Backlog maintenance costs relate to property assets which need to be upgraded to achieve a score of “B” in physical condition, fire safety and statutory standards.
- 5.4 Based on the information provided by the Trusts and NIFRS in current AMPs, the backlog maintenance for the DoH estate is estimated at £739m. The majority of the total backlog liability, almost £346m, is located in the Acute sector. Chart S on page 51 shows the overall backlog liability for the DoH estate, broken down by ALB, total floor area and individual backlog liability.
- 5.5 The current level of funding to deliver the replacement of major elements of the estate is challenging and it is necessary to divert a significant percentage of available capital on interim measures to secure the maintenance of existing services and provide a safe environment for the delivery of services in buildings, many of which have almost reach the end of their useful lives.

Chart S- Total DoH Backlog £739m for 2016



5.6 The key strategies which should be taken forward by ALBs to reduce backlog maintenance are (i) rationalisation of the estate including demolition and/or disposal of poor quality surplus buildings, (ii) targeted and prioritised investment in good quality and suitable building stock including the provision of new high quality facilities to replace unsuitable and inefficient buildings within the capital investment programme and (iii) a planned, cyclical maintenance programme for all existing buildings.

5.7 Each HSC Trust and NIFRS has included a “mitigation strategy” to reduce and manage backlog maintenance in individual AMPs. Agreed improvement targets for 2016/17 and 2021/22 are shown on page 53.

5.8 A chart showing percentage changes in KPIs from 2013 to 2016 is shown on page 52 – **KPI Performance Change from 2013**

KPI Performance Change from 2013

KPI	Key Performance Indicator	2016 Performance	2015 Performance	2013 Performance	Percentage Change from 2013
Age Profile	Percentage of properties under 50 years old	65	65	62	3%
Overall Condition	Percentage of properties categorised as 'red' for Overall Condition KPI	28	28	28	0%
Physical Condition	Percentage of properties categorised as either A or B for Physical Condition KPI	39	38	38	1%
Functional Suitability	Percentage of properties categorised as either A or B for Functional Suitability KPI	43	44	42	1%
Space Utilisation	Percentage of properties categorised as Adequately Used for Space Utilisation KPI	73	73	72	1%
Statutory Standards	Percentage of properties categorised as either A or B for Statutory Standards KPI	36	35	33	3%

1%	Denotes Performance Improvement
1%	Denotes Performance Deterioration
0%	Denotes no change in performance

5.9 Whilst there has been some level of improvement in the KPIs, there remains a level of unfitness. ALB performance against agreed targets will be reviewed annually and included in future SOTERs.

Property Related Targets for HSC Trusts and NIFRS		
Target 1	Space- reduction in vacant freehold estate	
	% of total freehold GIA which will be reduced/ improved via disposal, demolition or re- use in 2016/17	% of total freehold GIA which will be reduced/ improved via disposal, demolition or re- use by 2021/22
	%	%
Belfast Trust	3.60%	12.30%
Northern Trust	1.29%	11.88%
South Eastern Trust	1.00%	3.00%
Southern Trust	14.70%	90.00%
Western Trust	4%	100%
NIAS	none	none
NIFRS	none	none
Target 2	Space- reduction in underused freehold estate	
	% of organisation's total freehold underused which will be reduced/ improved via disposal, or re- use in 2016/17	% of organisation's total freehold underused which will be reduced/ improved via disposal, or re- use by 2021/22
	%	%
Belfast Trust	5.90%	59.40%
Northern Trust	5.99%	5.99%
South Eastern Trust	1.40%	3.00%
Southern Trust	8.00%	90.00%
Western Trust	0.00%	100.00%
NIAS	none	none
NIFRS	45.00%	100.00%
Target 3	Disposal Targets	
	Freehold disposal target for 2016/17	Freehold disposal target up to 2021/22
Belfast Trust	None planned	2 planned
Northern Trust	None planned	5 planned
South Eastern Trust	None planned	3 planned
Southern Trust	1 property	16 planned
Western Trust	1 property	8 planned
NIAS	None planned	None planned
NIFRS	None planned	None planned
Target 4	Improvement in Functional Suitability score	
	% of organisation's total freehold property assets GIA, currently scoring C,CX,D &DX which will be improved in 2016/17	% of organisation's total freehold property assets GIA, currently scoring C,CX,D &DX which will be improved by 2021/22
	%	%
Belfast Trust	0.00%	4.69%
Northern Trust	0.00%	6.00%
South Eastern Trust	8.00%	20.00%
Southern Trust	3.00%	13.00%
Western Trust	1.00%	3.00%
NIAS	10.00%	15.00%
NIFRS	8.50%	41.50%
Target 5	Improvement in compliance with Statutory Standards score	
	% of organisation's total freehold property assets GIA, currently scoring C,D &DX which will be improved in 2016/17	% of organisation's total freehold property assets GIA, currently scoring C,D &DX which will be improved by 2021/22
	%	%
Belfast Trust	0.00%	4.85%
Northern Trust	0.00%	12.00%
South Eastern Trust	10.00%	25.00%
Southern Trust	3.00%	15.60%
Western Trust	2.50%	20.00%
NIAS	10.00%	15.00%
NIFRS	4.50%	34.50%
Target 6	Improvement in Backlog Maintenance Liability	
	% of organisation's total freehold estate which will be improved in 2016/17	% of organisation's total freehold estate which will be improved by 2021/22
	%	%
Belfast Trust	0.00%	2.90%
Northern Trust	0.00%	13.40%
South Eastern Trust	0.30%	20.00%
Southern Trust	1.30%	8.00%
Western Trust	2.00%	2.50%
NIAS	10.00%	15.00%
NIFRS	8.00%	53.00%

6.0 INDIVIDUAL ARMS LENGTH BODIES REPORTS

Belfast HSC Trust (BHSCT) State of the Estate Report

- 6.1 This report is based on estate returns received from BHSCT in June 2016.
- 6.2 The information contained in this report, along with individual Estate Control Plans, should assist the Trust in prioritising investment decisions across all areas of estate management.

Description of the BHSCT estate

- 6.3 The BHSCT serves a population of approximately 340,000 and covers a land area of approximately 200 km².
- 6.4 The following key characteristics of the Trust's estate describe the property asset base:
- 399 blocks of freehold buildings;
 - approximate floor area of 664,879 m²;
 - 3 Acute Hospital Facilities at the Royal Group of Hospitals, Belfast City Hospital and the Mater Hospital;
 - 2 Non Acute Hospital sites at Musgrave Park Hospital and Forster Green Hospital and some 87 Blocks of Community facilities;
 - 2 Other Major Healthcare facilities at Knockbracken Healthcare Park and Muckamore Abbey Hospital;
 - 23 leased properties (information from current AMP). CPD has confirmed that the Trust currently have up to **25%** of their lease information populated on the 3i system.
 - 21 Listed Historic buildings - these buildings include the Queen Victoria statue, perimeter walls and ventilation duct at the Royal Victoria Hospital and the water tower at Knockbracken Healthcare Park);

- 21 “department owned” properties – including land and 8 buildings at Knockbracken Healthcare Park, land and 1 building at Musgrave Park hospital and one other Health Centre (Cherryvalley);
- a land area of approximately 229.4 hectares (excluding Community facilities).

6.5 In the Trust area there are seven main Hospital sites:

- Royal Group of Hospitals
- Belfast City Hospital
- Mater Hospital
- Musgrave Park Hospital
- Knockbracken Healthcare Park
- Muckamore Abbey Hospital (located in Antrim outside Trust Area)
- Forster Green Hospital

Estate Performance Report

6.6 The data used to produce this report is based on the June 2016 estate returns received from the Trust. BHSCT is required to validate the quality of their data before it is uploaded to the 3i database.

6.7 This report focuses on the current condition and performance of the Belfast Trust estate and provides comparison with 2015 data against the following categories:

- Overall Condition
- Physical Condition
- Functional Suitability
- Space Utilisation
- Statutory Standards

The Age Profile of the Trust estate is also included.

- 6.8 Comparative charts across the six Trusts and NIFRS for each category are shown in Section 4 of this report.

Age of the BHSCT estate

- 6.9 The Trust's return shows that:

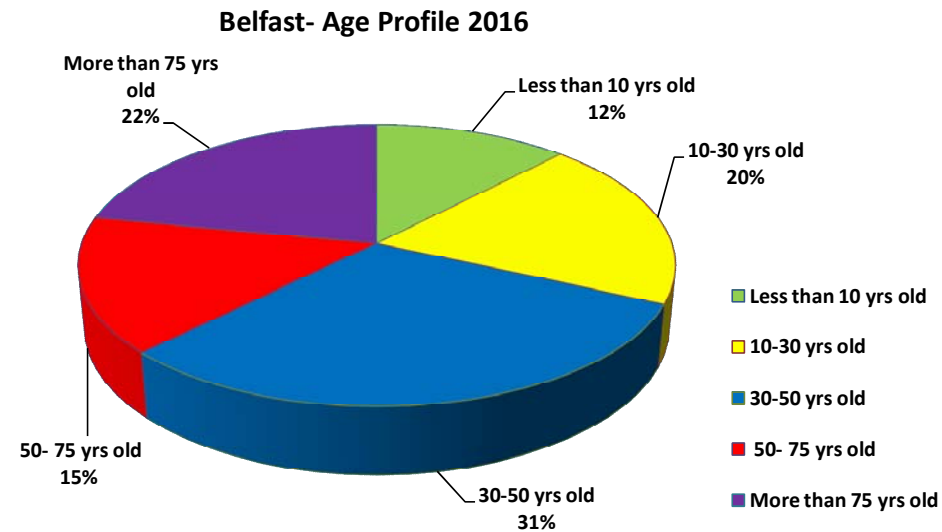
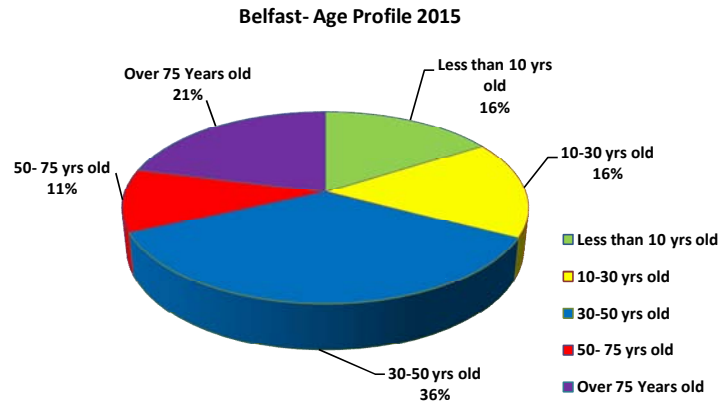
12% of the estate is less than 10 years old.

68% of the estate is over 30 years old.

22% of the estate is over 75 years old.

- 6.10 **Chart A: Age Profile Comparison with previous report** is shown on page 57.

Chart A: Belfast Trust **Age Profile** comparison with previous report 2015

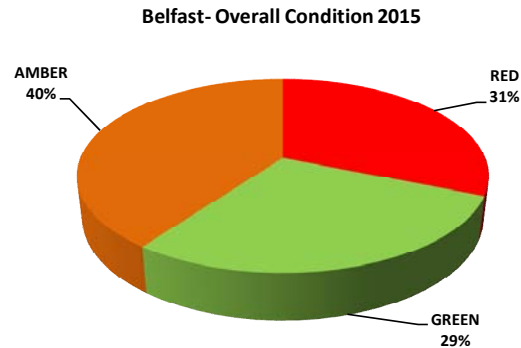


Results from the June 2016 Estate Returns

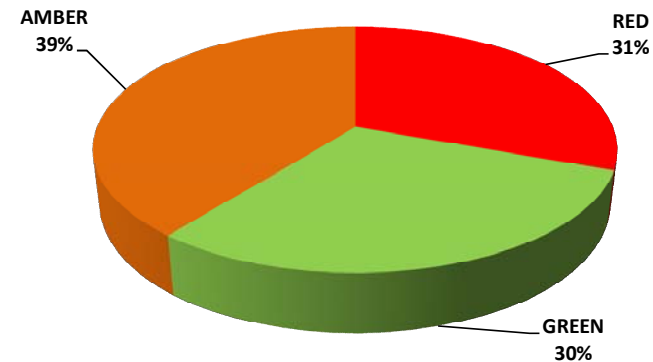
Overall Condition

- 6.11 This category describes the assessed condition of the BHSCT property assets using three colour categories to visually express the Overall Condition and to highlight the challenges faced by the Trust to improve estate performance.
- 6.12 The Trust's return shows that:
- 31% of the estate is in "Red" condition.
39% of the estate is in "Amber" condition.
30% of the estate is in "Green" condition.
- 6.13 **Chart B: Overall Condition comparison with previous report** is shown on page 59.

Chart B: Belfast Trust **Overall Condition** comparison with previous report 2015



Belfast- Overall Condition 2016



Overall Condition Definition;

Red-Will reflect a building that is, or is becoming largely untenable as a point for the delivery of an HSS service or contains serious inherent risks to life.

Amber-Will reflect a building that may have a significant remaining useful life, subject to appropriate management, but which will need major refurbishment/re-planning within 5-10 years.

Green-Will reflect new and relatively new buildings, the standards of which continue to be largely current, and which can be expected to deliver a service for the foreseeable future, subject to appropriate management.

Results from the June 2016 Estate Returns

Physical Condition

6.14 This category describes the physical condition of buildings within the BHSCT estate.

6.15 The Trust's return shows that:

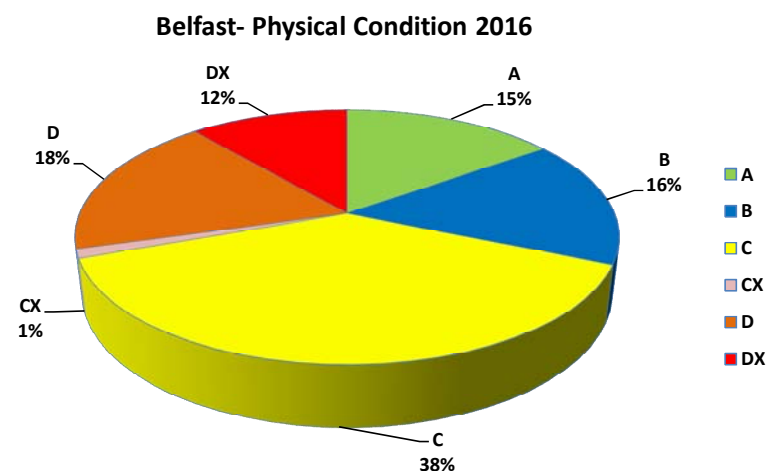
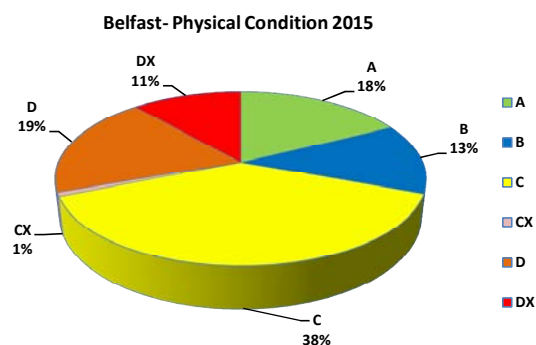
69% of the estate requires investment for physical condition.

12% of the estate needs replaced at an early date.

6.16 Within the BHSCT there are 21 Listed Historic buildings. These buildings present a challenge due to space standards and structure and can be unsuitable for the delivery of modern day healthcare. Disposal can be difficult and these buildings can be costly to retain. However, the Trust has a responsibility to maintain these properties in line with Government policy contained in 'The Protocol for the Care of the Government Estate' issued by the Northern Ireland Environment Agency (NIEA).

6.17 **Chart C: Physical Condition comparison with previous report** is shown on page 61.

Chart C: Belfast Trust **Physical Condition** comparison with previous report 2015



Physical Condition Definition:

A- As new and can be expected to perform adequately for its full normal life.

B-- Sound – some elements could be unacceptable.

C-- Operational, but the need for significant repairs has been identified – some elements could be in an unacceptable state.

D- Unacceptable.

X- Appended to 'C' or 'D' to indicate that it is impossible to improve without replacements.

Results from the June 2016 Estate Returns

Functional Suitability

6.18 This category demonstrates how effectively a building (or part of a building) supports the delivery of specific Trust services.

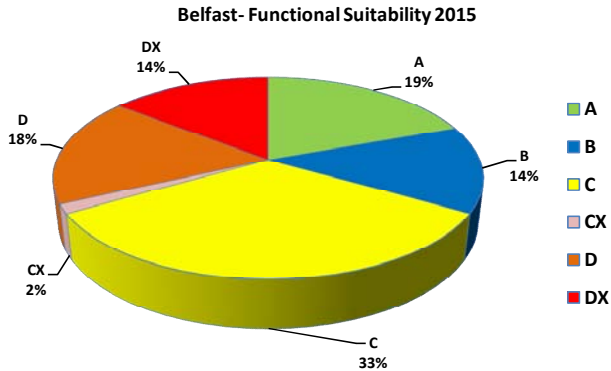
6.19 The Trust's return shows that:

51% of the estate requires investment for upgrading for functional suitability.

16% of the estate is either impractical or impossible to improve.

6.20 **Chart D: Functional Suitability comparison with previous report** is shown on page 63.

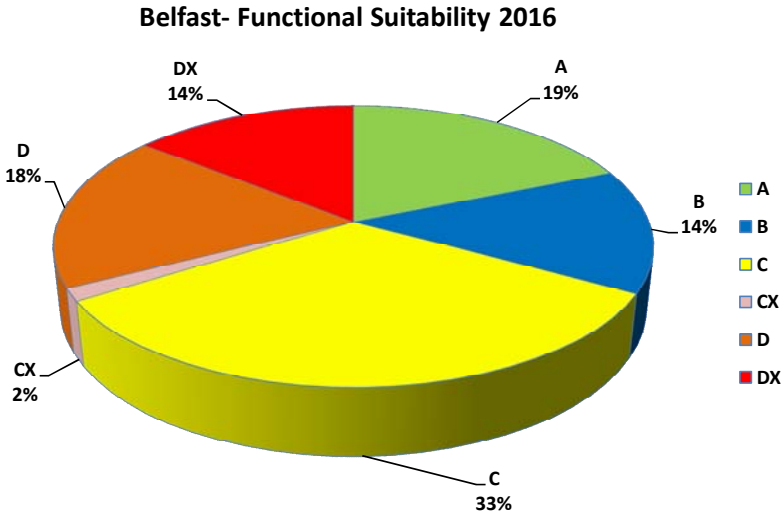
Chart D: Belfast Trust **Functional Suitability** comparison with previous report 2012/13



Functional Suitability Definition:

- A**-Either in full compliance with or exceeds the appropriate nationally published guidance and has a “full life” expectation. No expenditure, except for routine maintenance, is required.
- B**-Reasonable and adequate even though it does not have a “full life” expectation or does not fully comply with national guidance. In most cases, this marking will be perfectly acceptable for the provision of health care. No capital expenditure would be required to improve the building. Repair and normal maintenance would be adequate to sustain at “B” rating.
- C**-Below ‘B’ standard and would require capital expenditure to upgrade to ‘B’.
- D**-Below ‘C’ standard and major capital expenditure required to achieve ‘B’.
- X**-Appended to ‘C’ or ‘D’ to indicate that this department is impossible or impractical to improve.

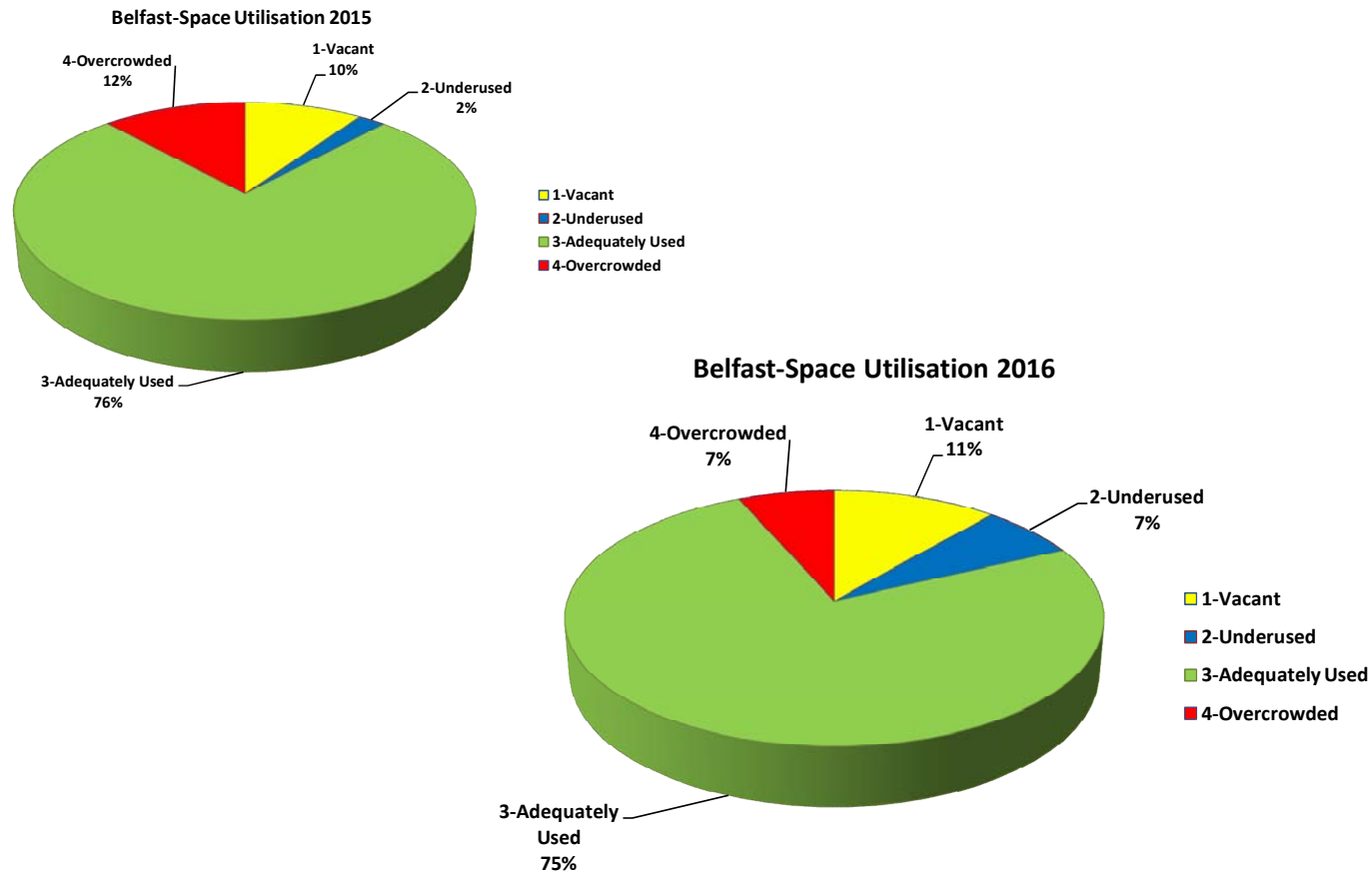
Results from the June 2016 Estate Returns



Space Utilisation

- 6.21 Space Utilisation explores how well property assets are being used.
- 6.22 The department requires all ALBs to proactively dispose of vacant property assets for which there is no deliverable foreseeable need. All public bodies are required to manage their land and buildings efficiently and effectively and in doing so, demonstrate that property assets and associated costs provide value for money. Buildings which are either vacant or not fully utilised do not demonstrate value for money.
- 6.23 The BHSCT has agreed reduction targets for vacant freehold estate of 3.6% and for underused estate of 5.9% in 2016/17. All agreed improvement targets are shown on page 53 and performance against these targets will be detailed in future SOTERs.
- 6.24 The Trust's return shows that:
- 75% of the estate is adequately used in terms of space utilisation.
11% of the estate is vacant.
7% of the estate is overcrowded.
- 6.25 **Chart E: Space Utilisation comparison with previous report** is shown on page 65.

Chart E: Belfast Trust **Space Utilisation** comparison with previous report 2015

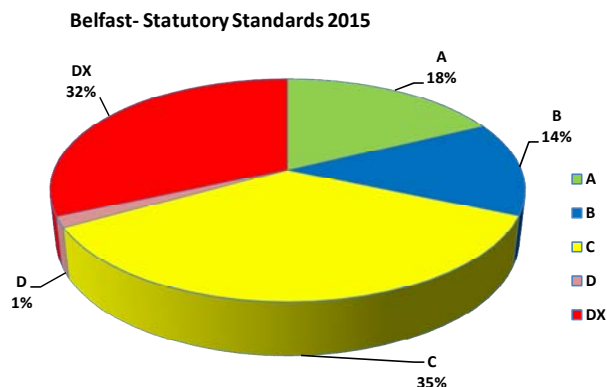


Results from the June 2016 Estate Returns

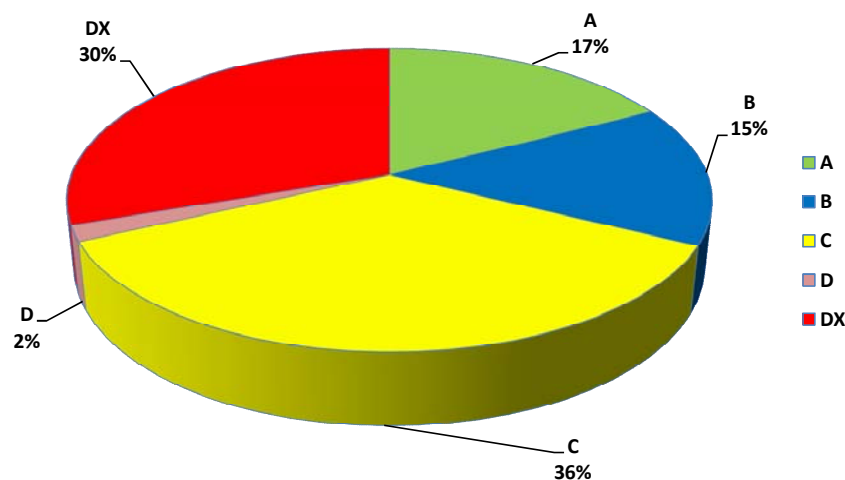
Statutory Standards

- 6.26 All healthcare buildings are subject to ongoing inspection and regulation by statutory authorities. New buildings must comply with Health and Safety Standards and Codes of Practice. However, health services can continue to be safely and satisfactorily delivered from existing buildings, which predate current standards, if all risks are identified and are proactively managed. HSC Trusts are required to proactively manage such risks to provide a safe environment for the delivery of services. Plans to improve compliance of such buildings, or move to more suitable premises, must always be a priority in the Estate Control Plan for the HSC estate.
- 6.27 The Trust's return shows that:
- 36% of the estate, much of which pre-dates the current regulations and standards, is not fully compliant and requires minor investment for upgrading for statutory standards.
- 32% of the estate is either impractical or too expensive to improve.
- 6.28 **Chart F: Statutory Standards comparison with previous report** is shown on page 67.

Chart F: Belfast Trust **Statutory Standards** comparison with previous report 2015



Belfast- Statutory Standards 2016



Statutory Standards Definition:

A-Conforms to statutory legislation and is a new building.

B-Conforms to statutory legislation.

C-Does not conform to statutory legislation but is capable of being upgraded to that level with minor expenditure.

D-Does not conform to statutory legislation but is capable of being upgraded to that level with major expenditure.

DX-Does not conform to statutory legislation and improvements are either impractical or too expensive to be tenable.

Results from the June 2016 Estate Returns

Northern HSC Trust (NHSCT) State of the Estate Report

- 6.29 This report is based on estate returns received from NHSCT in June 2016.
- 6.30 The information contained in this report, along with individual Estate Control Plans, should assist NHSCT in prioritising investment decisions across all areas of estate management.

Description of the NHSCT estate

- 6.31 The NHSCT serves a population of approximately 436,000 and covers a land area of approximately 4085 km².
- 6.32 The following key characteristics of the Trust's estate describe the property asset base:
- 257 blocks of freehold buildings;
 - approximate floor area of 252,056 m²;
 - 2 Acute Hospital facilities at the Antrim Hospital and Causeway Hospital;
 - 2 Local Enhanced Hospital sites at Mid Ulster Hospital and Whiteabbey Hospital.
 - 5 Non Acute Hospital sites at Moyle Hospital, Robinson Hospital, Dalraida Hospital, Route Hospital Braid Valley Hospital and 80 blocks of Community facilities;
 - one Other Major Healthcare facility located at Holywell Hospital;
 - 76 leased properties (information from current AMP). CPD has confirmed that the Trust currently have up to **90%** of their lease information populated on the 3i system.
 - 5 Listed Historic buildings;
 - 6 "department owned" property assets - including land at Whiteabbey Hospital and Mid Ulster Hospital;
 - a land area of approximately 138.04 hectares (excluding Community facilities).

6.33 In the Trust area there are nine Hospital sites:

- Antrim Area Hospital
- Causeway Hospital
- Whiteabbey Hospital
- Mid Ulster Hospital
- Braid Valley Hospital
- Moyle Hospital
- Dalraida Hospital
- Robinson Hospital
- Holywell Hospital

Estate Performance Report

6.34 The data used to produce this report is based on the June 2016 estate returns received from the Trust. NHSCT is required to validate the quality of their data before it is uploaded to the 3i database.

6.35 This report focuses on the current condition and performance of the NHSCT estate and provides comparison with the 2015 data against the following categories:

- Overall Condition
- Physical Condition
- Functional Suitability
- Space Utilisation
- Statutory Standards

The Age Profile of the Trust estate is also included.

6.36 Comparative charts across all the six Trusts and NIFRS for each category are shown in Section 4 of this report.

Age of the NHSCT estate

6.37 The Trust's return shows that:

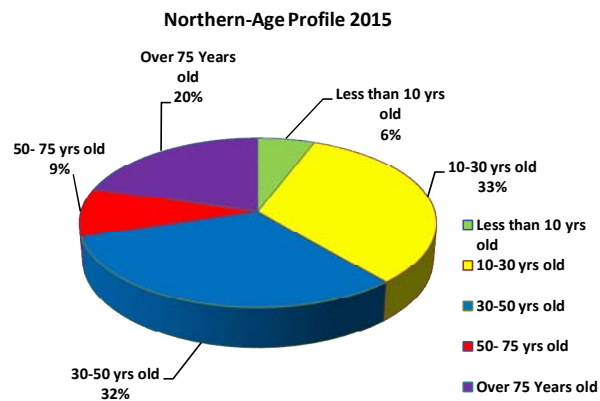
5% of the estate is less than 10 years old.

62% of the estate is over 30 years old.

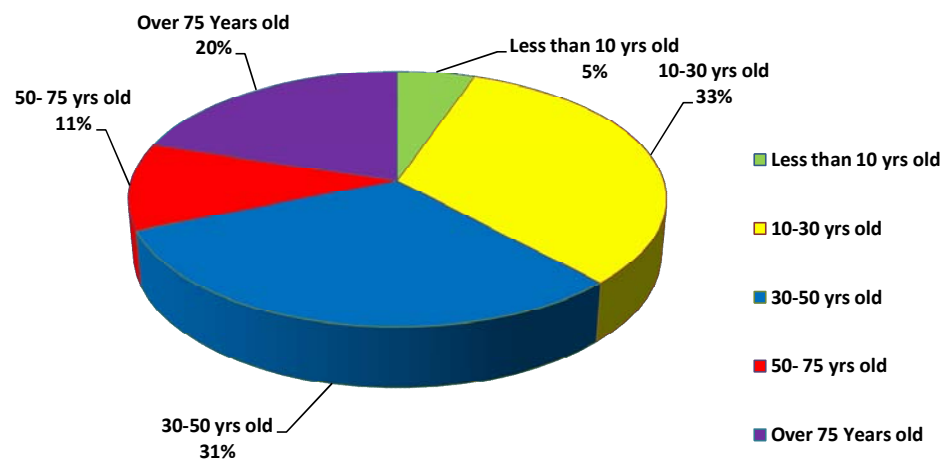
20% of the estate is over 75 years old.

6.38 **Chart A: Age Profile comparison with previous report** is shown on page 71.

Chart A: Northern Trust **Age Profile** comparison with previous report 2015



Northern-Age Profile 2016

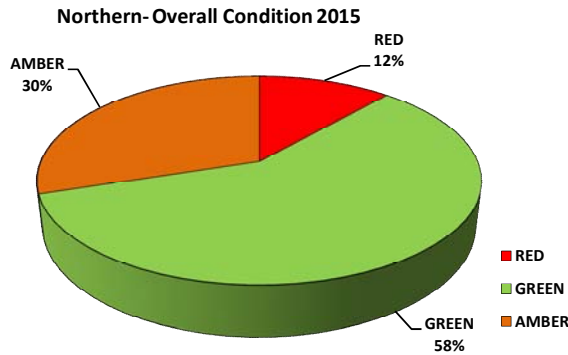


Results from the June 2016 Estate Returns

Overall Condition

- 6.39 This category describes the assessed condition of the NHSCT property assets using three colour categories to visually express the Overall Condition and to highlight the challenges faced by the Trust to improve estate performance.
- 6.40 The Trust's return shows that:
- 11% of the estate is in "Red" condition.
31% of the estate is in "Amber" condition.
58% of the estate is in "Green" condition.
- 6.41 **Chart B: Overall Condition comparison with previous report** is shown on page 73.

Chart B: Northern Trust **Overall Condition** comparison with previous report 2015

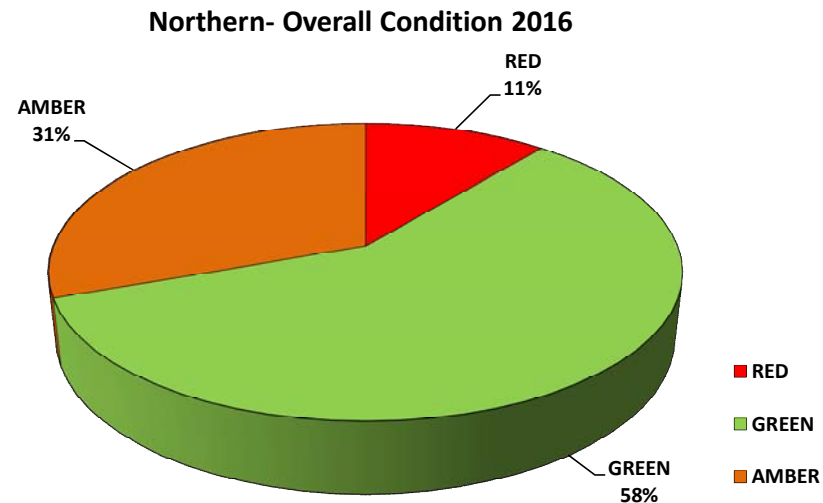


Overall Condition Definition;

Red-Will reflect a building that is, or is becoming largely untenable as a point for the delivery of an HSS service or contains serious inherent risks to life.

Amber-Will reflect a building that may have a significant remaining useful life, subject to appropriate management, but which will need major refurbishment/re-planning within 5-10 years.

Green-Will reflect new and relatively new buildings, the standards of which continue to be largely current, and which can be expected to deliver a service for the foreseeable future, subject to appropriate management.

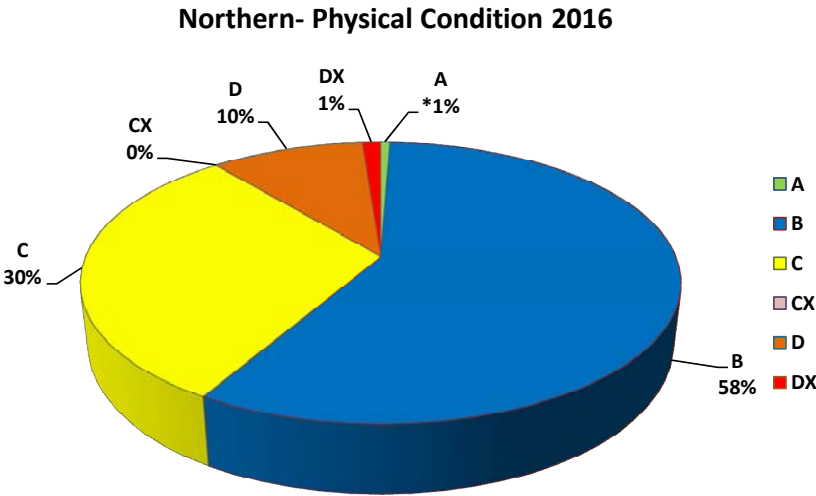
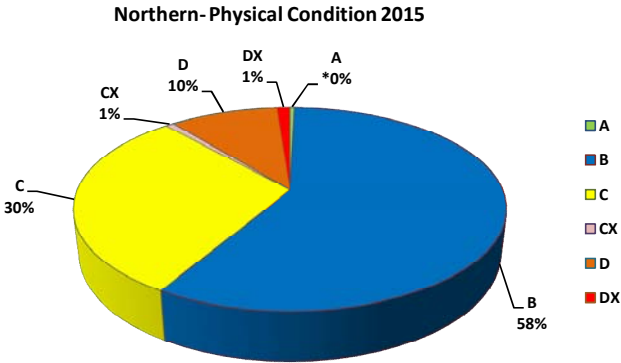


Results from the June 2016 Estate Returns

Physical Condition

- 6.42 This category describes the physical condition of buildings within the NHSCT estate.
- 6.43 The Trust's return shows that:
- 40% of the estate requires investment for physical condition.
1% of the estate needs replaced at an early date.
- 6.44 Within the NHSCT there are 5 Listed Historic buildings. These buildings present a challenge due to space standards and structure and can be unsuitable for the delivery of modern day healthcare. Disposal can be difficult and these buildings can be costly to retain. However the Trust has a responsibility to maintain these properties in line with Government policy contained in 'The Protocol for the Care of the Government Estate' issued by the Northern Ireland Environment Agency (NIEA).
- 6.45 **Chart C: Physical Condition comparison with previous report** is shown on page 75.

Chart C: Northern Trust **Physical Condition** comparison with previous report 2015



Physical Condition Definition:
A- As new and can be expected to perform adequately for its full normal life.
B-- Sound – some elements could be unacceptable.
C-- Operational, but the need for significant repairs has been identified – some elements could be in an unacceptable state.
D- Unacceptable.
X- Appended to 'C' or 'D' to indicate that it is impossible to improve without replacements.

Results from the June 2016 Estate Returns

Functional Suitability

6.46 This category demonstrates how effectively a building (or part of a building) supports the delivery of specific Trust services.

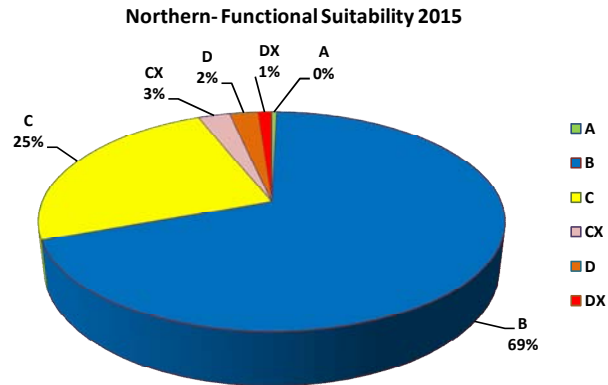
6.47 The Trust's return shows that:

27% of the estate requires investment for upgrading for functional suitability.

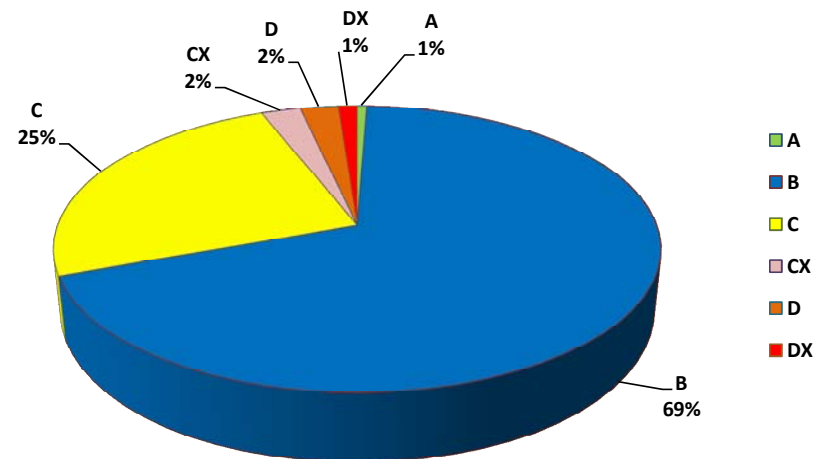
4% of the estate is either impractical or impossible to improve.

6.48 **Chart D: Functional Suitability comparison with previous report** is shown on page 77.

Chart D: Northern Trust **Functional Suitability** comparison with previous report 2015



Northern- Functional Suitability 2016



Functional Suitability Definition:

A-Either in full compliance with or exceeds the appropriate nationally published guidance and has a “full life” expectation. No expenditure, except for routine maintenance, is required.

B-Reasonable and adequate even though it does not have a “full life” expectation or does not fully comply with national guidance. In most cases, this marking will be perfectly acceptable for the provision of health care. No capital expenditure would be required to improve the building. Repair and normal maintenance would be adequate to sustain at “B” rating.

C-Below ‘B’ standard and would require capital expenditure to upgrade to ‘B’.

D-Below ‘C’ standard and major capital expenditure required to achieve ‘B’.

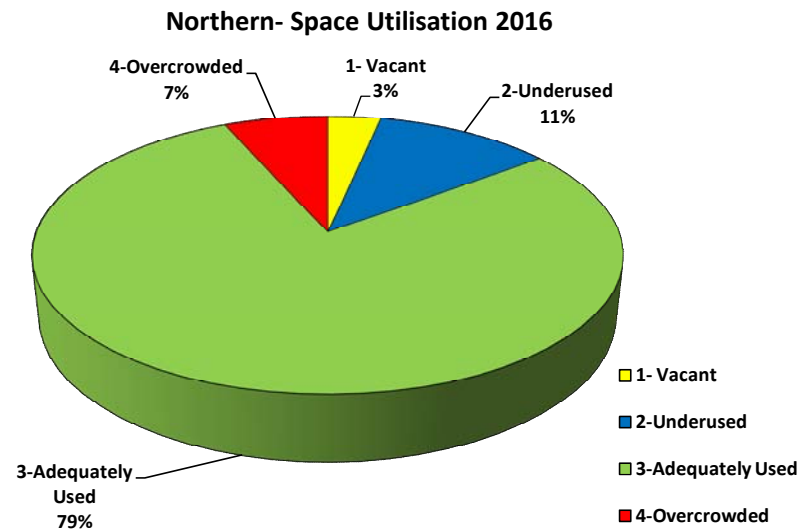
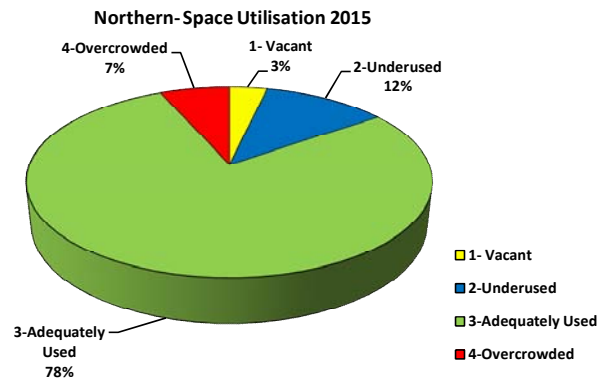
X-Appended to ‘C’ or ‘D’ to indicate that this department is impossible or impractical to improve.

Results from the June 2016 Estate Returns

Space Utilisation

- 6.49 Space Utilisation explores how well the property assets are being used.
- 6.50 The department requires all its ALBs to proactively dispose of vacant property assets for which there is no deliverable foreseeable need. All public bodies are required to manage their land and buildings efficiently and effectively and in doing so, demonstrate that property assets and associated costs provide value for money. Buildings which are either vacant or not fully utilised do not demonstrate value for money.
- 6.51 The NHSCT has agreed reduction targets for vacant freehold estate of 1.29% and for underused estate of 5.99% for 2016/17. All agreed improvement targets are shown on page 53 and performance against these targets will be detailed in future SOTERS.
- 6.52 The Trust's return shows that:
- 79% of the estate is adequately used in terms of space utilisation.
11% of the estate is underused.
7% of the estate is overcrowded.
- 6.53 **Chart E: Space Utilisation comparison with previous report** is shown on page 79.

Chart E: Northern Trust **Space Utilisation** comparison with previous report 2015

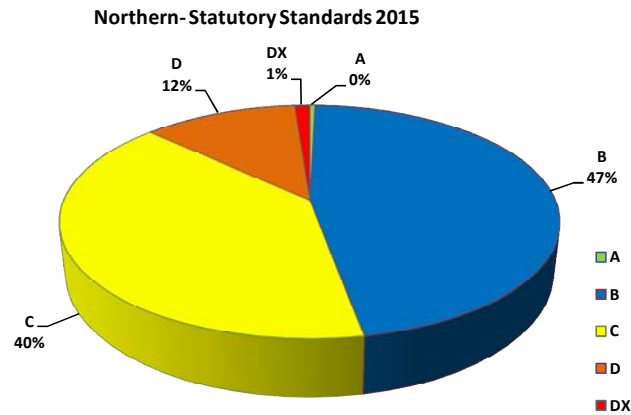


Results from the June 2016 Estate Returns

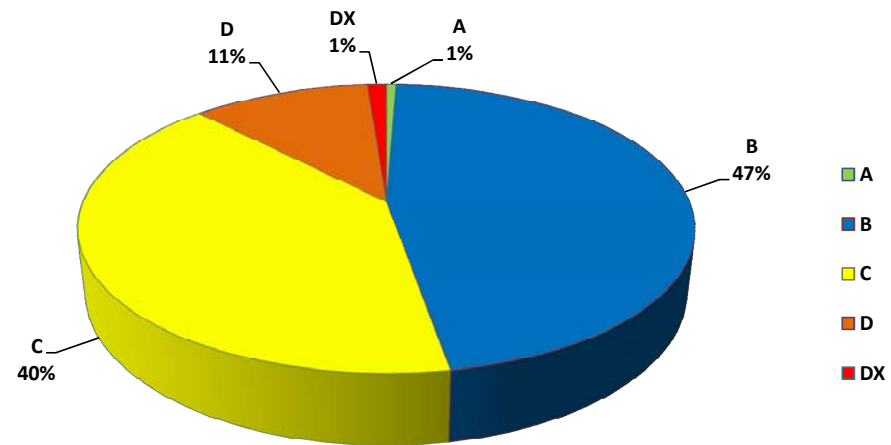
Statutory Standards

- 6.54 All healthcare buildings are subject to ongoing inspection and regulation by statutory authorities. New buildings must comply with Health and Safety Standards and Codes of Practice. However, health services can continue to be safely and satisfactorily delivered from existing buildings, which predate current standards, if all risks are identified and are proactively managed. HSC Trusts are required to proactively manage such risks to provide a safe environment for the delivery of Services. Plans to improve compliance of such buildings, or move to more suitable premises, must always be a priority in the Estate Control Plans for the HSC estate.
- 6.55 The Trust's return shows that:
- 40% of the estate requires minor investment for upgrading for statutory standards, while 11% requires major expenditure.
- 1% of the estate is either impractical or too expensive to improve.
- 6.56 **Chart F: Statutory Standards comparison with previous report** is shown on page 81.

Chart F: Northern Trust **Statutory Standards** comparison with previous report 2015



Northern- Statutory Standards 2016



Statutory Standards Definition:

A-Conforms to statutory legislation and is a new building.
B-Conforms to statutory legislation.
C-Does not conform to statutory legislation but is capable of being upgraded to that level with minor expenditure.
D-Does not conform to statutory legislation but is capable of being upgraded to that level with major expenditure.
DX-Does not conform to statutory legislation and improvements are either impractical or too expensive to be tenable.

Results from the June 2016 Estate Returns

South Eastern HSC Trust (SEHSCT) State of the Estate Report

6.57 This report is based on estate returns received from SEHSCT in June 2016.

6.58 The information contained in this report, along with individual Estate Control Plans, should assist the SEHSCT in prioritisation investment decisions across all areas of estate management.

Description of the SEHSCT estate

6.59 The SEHSCT serves a population of approximately 340,000 and covers a land area of approximately 1550 km².

6.60 The following key characteristics of the Trust's estate describe the property asset base:

- 139 blocks of freehold buildings;
- approximate floor area of 256,517 m²;
- 1 Acute Hospital facility at the Ulster Hospital;
- 2 Local Enhanced Hospitals at Downe Hospital and Lagan Valley Hospital;
- 2 Non Acute Hospital sites at Ards Hospital and Bangor Hospital and some 65 Blocks of Community facilities;
- one Other Major Healthcare facility at Downshire Hospital;
- 25 leased properties (information from current AMP). CPD has confirmed that the Trust currently have up to **90%** of their lease information populated on the 3i system.
- 2 Listed Historic buildings;
- 5 "department owned" properties – including lands at Knock Golf Club, Downshire Hospital and a graveyard (St. Dymnpha's Cemetery);
- a land area of approximately 153.4 hectares (excluding Community facilities).

6.61 In the Trust area there are six main Hospital sites:

- Ulster Hospital;
- Downe Hospital;
- Lagan Valley Hospital;
- Downshire Hospital;
- Ards Hospital;
- Bangor Hospital.

Estate Performance Report

6.62 The data used to produce this report is based on the June 2016 estate returns received from the Trust. SEHSCT is required to validate the quality of their data before it is uploaded to the 3i system.

6.63 This report focuses on the current condition and performance of the SEHSCT estate in 2016 and provides comparison with 2015 data against the following categories:

- Overall Condition
- Physical Condition
- Functional Suitability
- Space Utilisation
- Statutory Standards

The Age Profile of the Trust estate is also included.

6.64 Comparative charts across the six Trusts and NIFRS for each category are shown in Section 4 of this report.

Age of the SEHSCT estate

6.65 The Trust's return shows that:

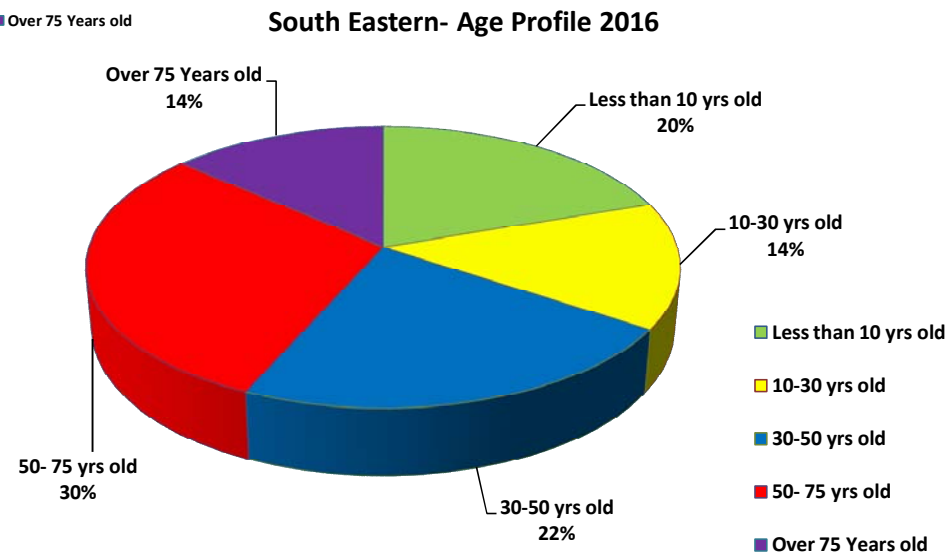
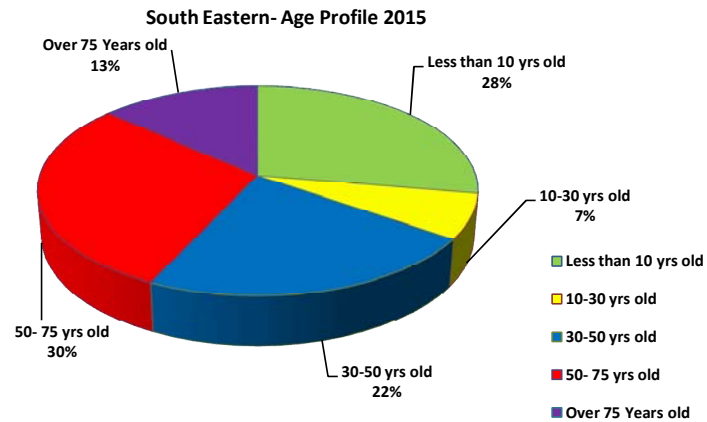
20% of the estate is less than 10 years old.

66% of the estate is over 30 years old.

14% of the estate is over 75 years old.

6.66 **Chart A: Age Profile comparison with previous report** is shown on page 85.

Chart A: South Eastern Trust **Age Profile** comparison with previous report 2015

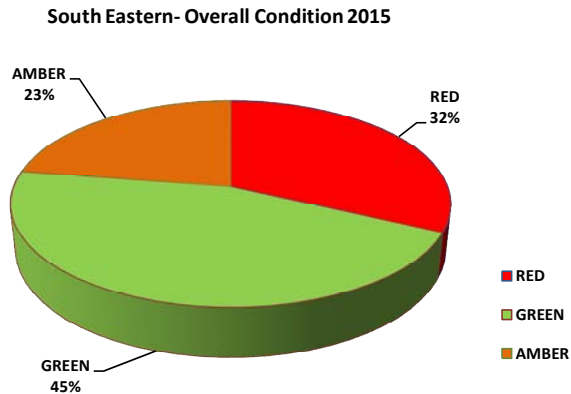


Results from the June 2016 Estate Returns

Overall Condition

- 6.67 This category describes the assessed condition of the SEHSCT property assets using three colour categories to visually express the Overall Condition and to highlight the challenges faced by the Trust to improve estate performance.
- 6.68 The Trust's return shows that:
- 35% of the estate is in "Red" condition.
20% of the estate is in "Amber" condition.
45% of the estate is in "Green" condition.
- 6.69 **Chart B: Overall Condition comparison with previous report** is shown on page 87 (overleaf).

Chart B: South Eastern Trust **Overall Condition** comparison with previous report 2015

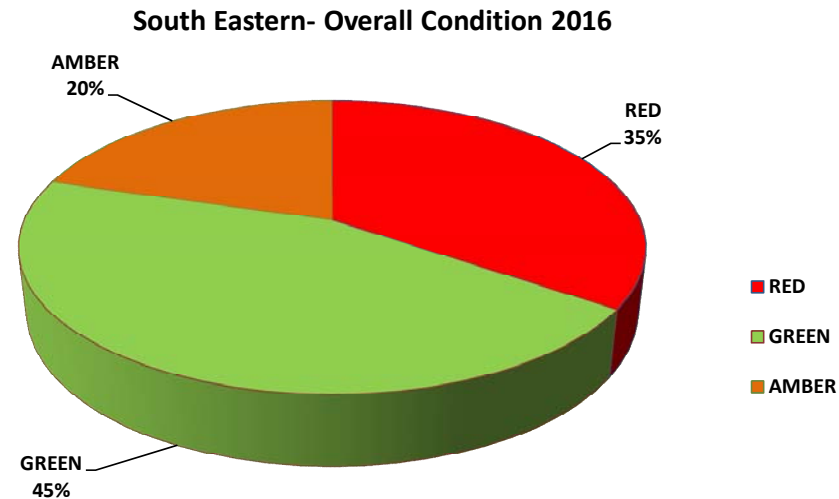


Overall Condition Definition;

Red-Will reflect a building that is, or is becoming largely untenable as a point for the delivery of an HSS service or contains serious inherent risks to life.

Amber-Will reflect a building that may have a significant remaining useful life, subject to appropriate management, but which will need major refurbishment/re-planning within 5-10 years.

Green-Will reflect new and relatively new buildings, the standards of which continue to be largely current, and which can be expected to deliver a service for the foreseeable future, subject to appropriate management.

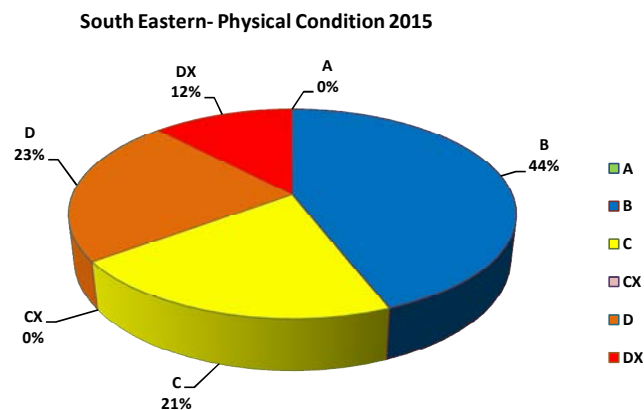


Results from the June 2016 Estate Returns

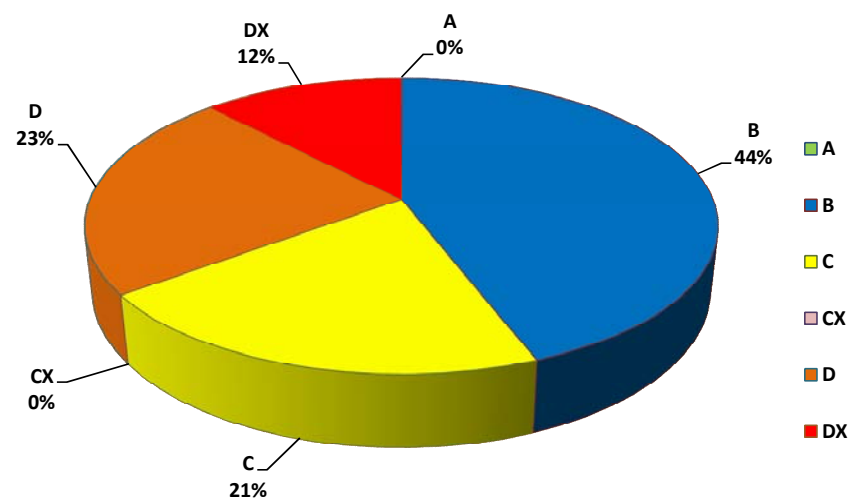
Physical Condition

- 6.70 This category describes the physical condition of buildings within the SEHSCT estate.
- 6.71 The Trust's return shows that:
- 44% of the estate requires investment for physical condition.
12% of the estate needs replaced at an early date.
- 6.72 Within the SEHSCT area there are 2 Listed Historic buildings. These buildings present a challenge due to space standards and structure and can be unsuitable for the delivery of modern day healthcare. Disposal can be difficult and these buildings can be costly to retain. However the Trust has a responsibility to maintain these properties in line with Government policy contained in 'The Protocol for the Care of the Government Estate' issued by the Northern Ireland Environment Agency (NIEA).
- 6.73 **Chart C: Physical Condition comparison with previous report** is shown on page 89.

Chart C: South Eastern Trust **Physical Condition** comparison with previous report 2015



South Eastern- Physical Condition 2016



Physical Condition Definition:

A- As new and can be expected to perform adequately for its full normal life.

B-- Sound – some elements could be unacceptable.

C-- Operational, but the need for significant repairs has been identified – some elements could be in an unacceptable state.

D- Unacceptable.

X- Appended to 'C' or 'D' to indicate that it is impossible to improve without replacements.

Results from the June 2016 Estate Returns

Functional Suitability

6.74 This category demonstrates how effectively a building (or part of a building) supports the delivery of specific Trust services.

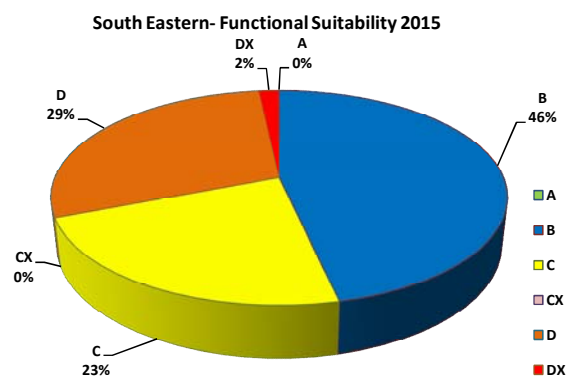
6.75 The Trust's return shows that:

51% of the estate requires investment for upgrading for functional suitability.

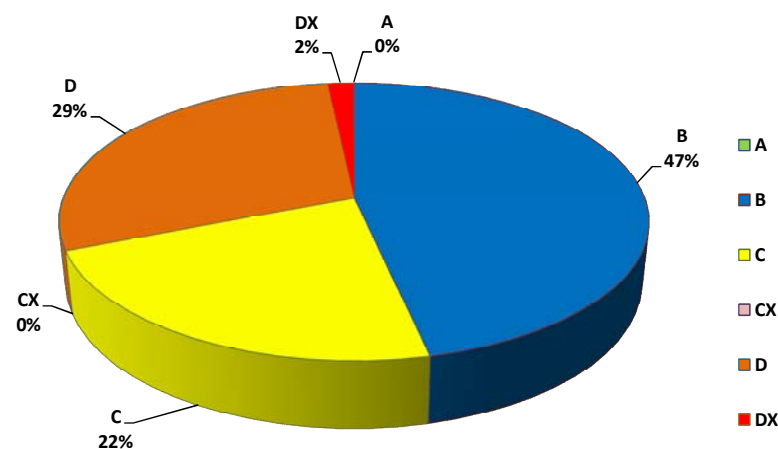
2% of the estate is either impractical or impossible to improve.

6.76 **Chart D: Functional Suitability comparison with previous report** is shown on page 91.

Chart D: South Eastern Trust **Functional Suitability** comparison with previous report 2015



South Eastern- Functional Suitability 2016



Functional Suitability Definition:

A-Either in full compliance with or exceeds the appropriate nationally published guidance and has a “full life” expectation. No expenditure, except for routine maintenance, is required.

B-Reasonable and adequate even though it does not have a “full life” expectation or does not fully comply with national guidance. In most cases, this marking will be perfectly acceptable for the provision of health care. No capital expenditure would be required to improve the building. Repair and normal maintenance would be adequate to sustain at “B” rating.

C-Below ‘B’ standard and would require capital expenditure to upgrade to ‘B’.

D-Below ‘C’ standard and major capital expenditure required to achieve ‘B’.

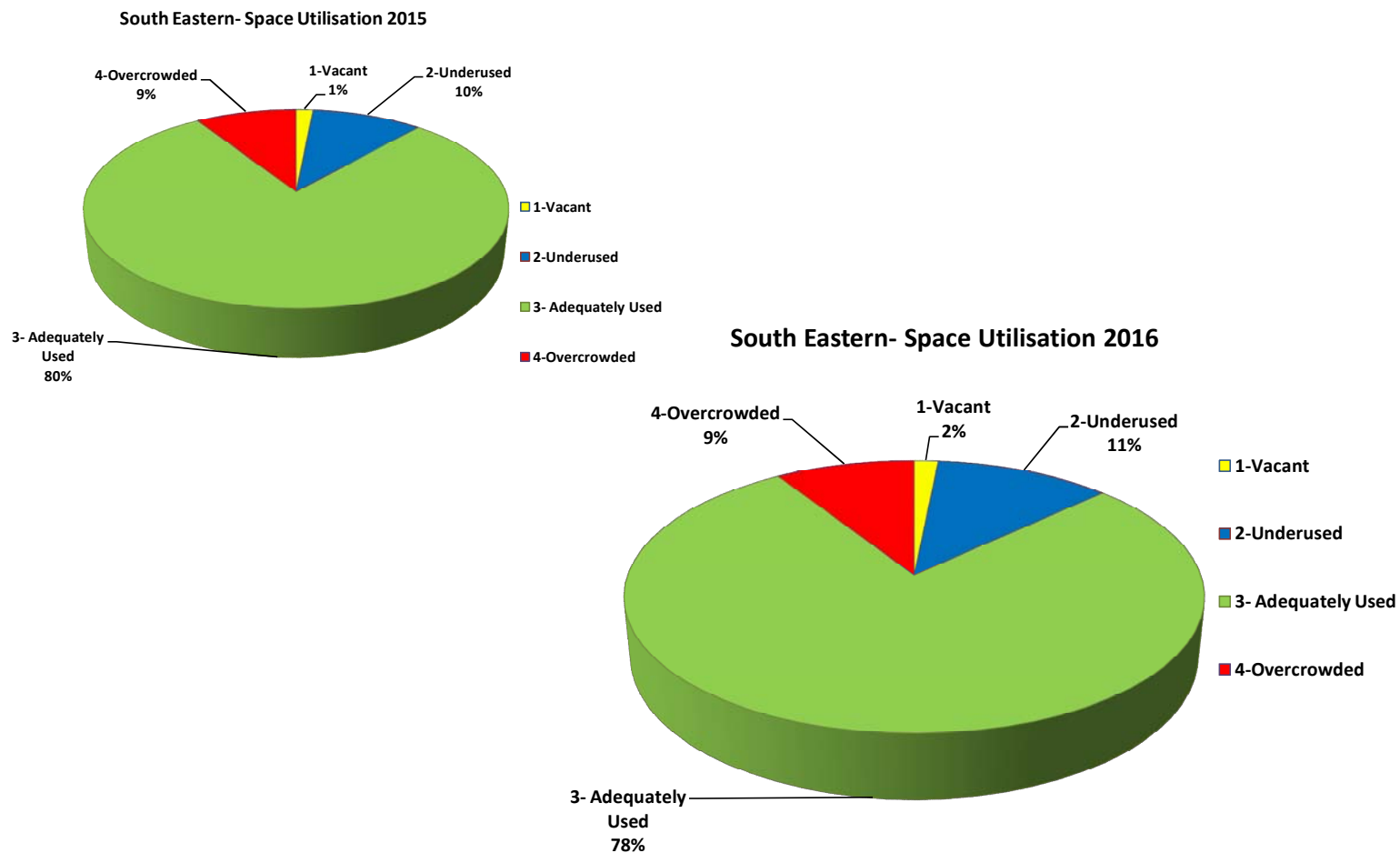
X-Appended to ‘C’ or ‘D’ to indicate that this department is impossible or impractical to improve.

Results from the June 2016 Estate Returns

Space Utilisation

- 6.77 Space Utilisation explores how well the property assets are being used.
- 6.78 The department requires all its ALBs to proactively dispose of vacant property assets for which there is no deliverable foreseeable need. All public bodies are required to manage their land and buildings efficiently and effectively and in doing so, demonstrate that property assets and associated costs provide value for money. Buildings which are either vacant or not fully utilised do not demonstrate value for money.
- 6.79 The SEHSCT has agreed reduction targets for vacant freehold estate of 1.0% and for underused estate of 1.4% in 2016/17. All agreed improvement targets are shown on page 53 and performance against these targets will be detailed in future SOTERs.
- 6.80 The Trust's return shows that:
- 78% of the estate is adequately used in terms of space utilisation.
11% of the estate is underused.
2% of the estate is vacant.
- 6.81 **Chart E: Space Utilisation comparison with previous report** is shown on page 93.

Chart E: South Eastern Trust **Space Utilisation** comparison with previous report 2015

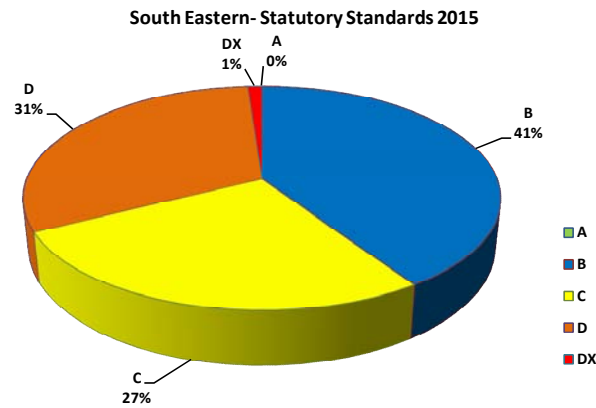


Results from the June 2016 Estate Returns

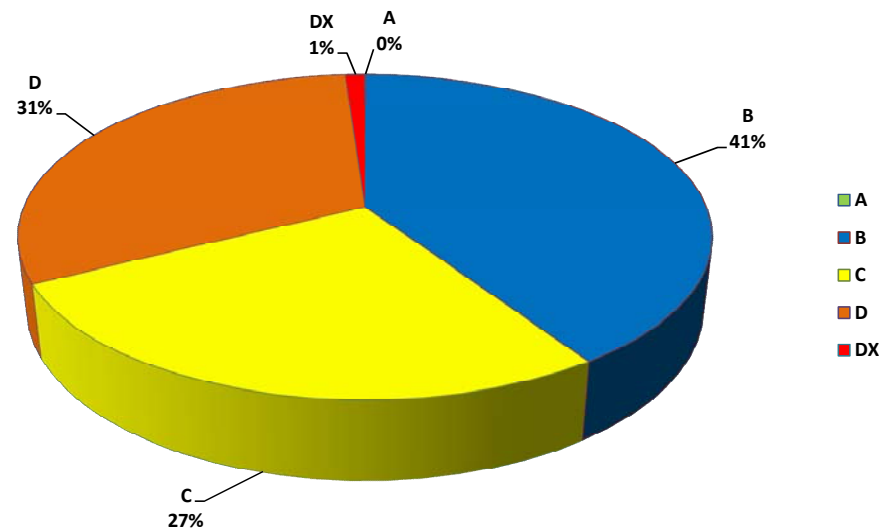
Statutory Standards

- 6.82 All healthcare buildings are subject to ongoing inspection and regulation by statutory authorities. New buildings must comply with Health and Safety Standards and Codes of Practice. However, health services can continue to be safely and satisfactorily delivered from existing buildings, which predate current standards, if all risks are identified and are proactively managed. HSC Trusts are required to proactively manage such risks to provide a safe environment for the delivery of services. Plans to improve compliance of such buildings, or move to more suitable premises, must always be a priority in the Estate Control Plan for the HSC estate.
- 6.83 The Trust's return shows that:
- 27% of the estate requires minor investment for upgrading for statutory standards, while 31% requires major expenditure.
- 1% of the estate is either impractical or too expensive to improve.
- 6.84 **Chart F: Statutory Standards comparison with previous report** is shown on page 95.

Chart F: South Eastern Trust **Statutory Standards** comparison with previous report 2015



South Eastern- Statutory Standards 2016



Statutory Standards Definition:

A-Conforms to statutory legislation and is a new building.
B-Conforms to statutory legislation.
C-Does not conform to statutory legislation but is capable of being upgraded to that level with minor expenditure.
D-Does not conform to statutory legislation but is capable of being upgraded to that level with major expenditure.
DX-Does not conform to statutory legislation and improvements are either impractical or too expensive to be tenable.

Results from the June 2016 Estate Returns

Southern HSC Trust (SHSCT) State of the Estate Report

- 6.85 This report is based on estate returns received from SHSCT in June 2016.
- 6.86 The information contained in this report, along with individual Estate Control Plans, should assist the SHSCT in prioritising investment decisions across all areas of estate management.

Description of the SHSCT estate

- 6.87 The SHSCT serves a population of approximately 360,000 and covers a land area of approximately 3200km².
- 6.88 The following key characteristics of the Trust's estate describe the property asset base:
- 223 blocks of freehold buildings;
 - approximate floor area of 262,858 m²;
 - 2 Acute Hospital facilities at the Craigavon and Daisy Hill;
 - 1 Local Hospital at South Tyrone Hospital;
 - 2 Non Acute Hospital sites at Armagh Community Hospital and Lurgan Hospital and some 91 Blocks of Community facilities;
 - 1 Other Major Healthcare facility at St. Luke's Hospital;
 - 42 leased properties (information from current AMP). CPD has confirmed that the Trust currently have up to **65%** of their lease information populated on the 3i system.
 - 17 Listed Historic buildings;
 - 1 "department owned" property – Warrenpoint Health Centre;
 - a land area of approximately 55 hectares (excluding Community Facilities).

6.89 In the Trust area there are six main Hospital sites:

- Craigavon Hospital;
- Daisy Hill Hospital;
- South Tyrone Hospital;
- St. Lukes Hospital;
- Lurgan Hospital;
- Armagh Community Hospital.

Estate Performance Report

6.90 The data used to produce this report is based on the June 2016 estate returns received from the Trust. SHSCT is required to validate the quality of their data before it is uploaded to the 3i system.

6.91 This report focuses on the current condition and performance of the SHSCT estate in 2016 and provides comparison with the 2015 data against the following categories:

- Overall Condition
- Physical Condition
- Functional Suitability
- Space Utilisation
- Statutory Standards

The Age Profile of the Trust estate is also included.

6.92 Comparative charts across the six Trusts and NIFRS for each category are shown in Section 4 of this report.

Age of the SHSCT estate

6.93 The Trust's return shows that:

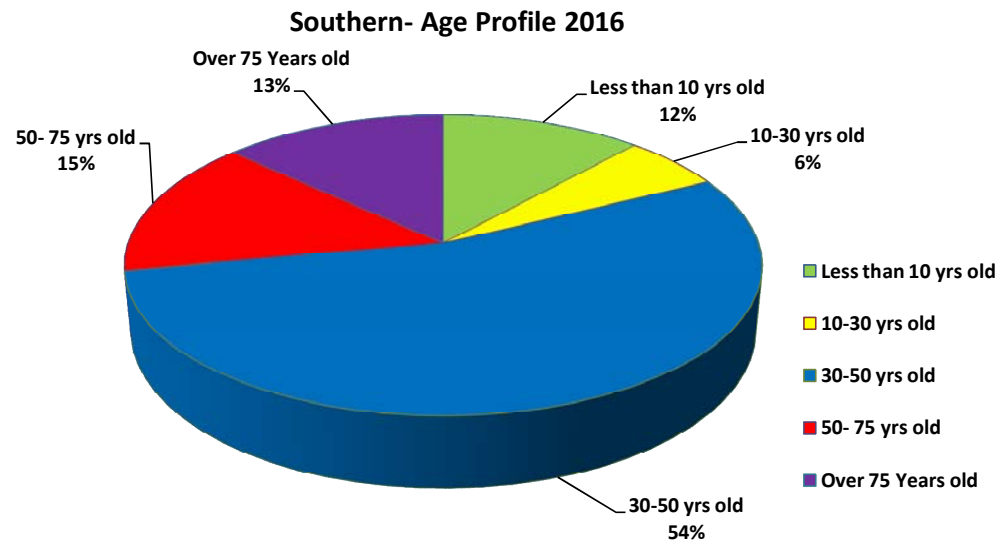
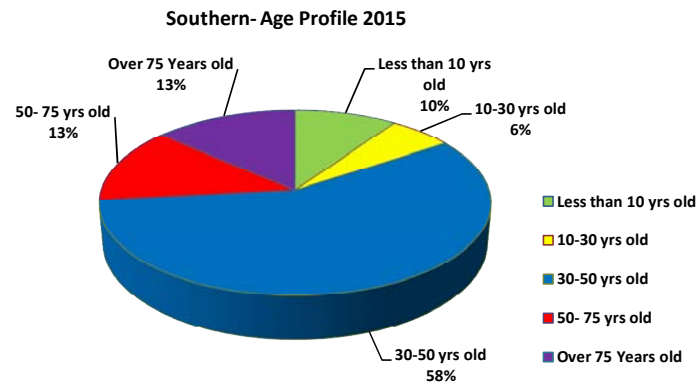
12% of the estate is less than 10 years old.

82% of the estate is over 30 years old.

13% of the estate is over 75 years old.

6.94 **Chart A: Age Profile comparison with previous report** is shown on page 99.

Chart A: Southern Trust **Age Profile** comparison with previous report 2015

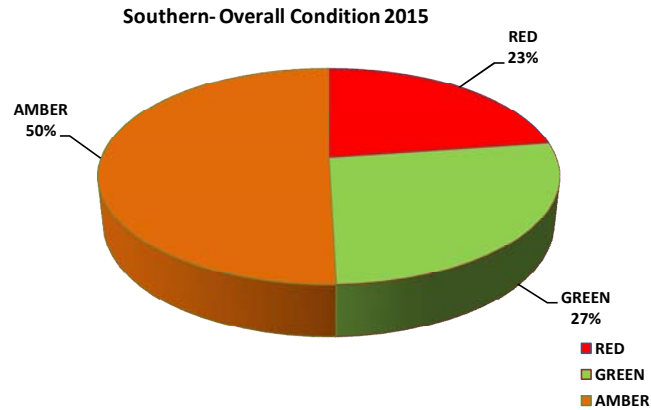


Results from the June 2016 Estate Returns

Overall Condition

- 6.95 This category describes the assessed condition of the SHSCT property assets using three colour categories to visually express the Overall Condition and to highlight the challenges faced by the Trust to improve estate performance.
- 6.96 The Trust's return shows that:
- 22% of the estate is in "Red" condition.
51% of the estate is in "Amber" condition.
27% of the estate is in "Green" condition.
- 6.97 **Chart B: Overall Condition comparison with previous report** is shown on page 101.

Chart B: Southern Trust **Overall Condition** comparison with previous report 2015



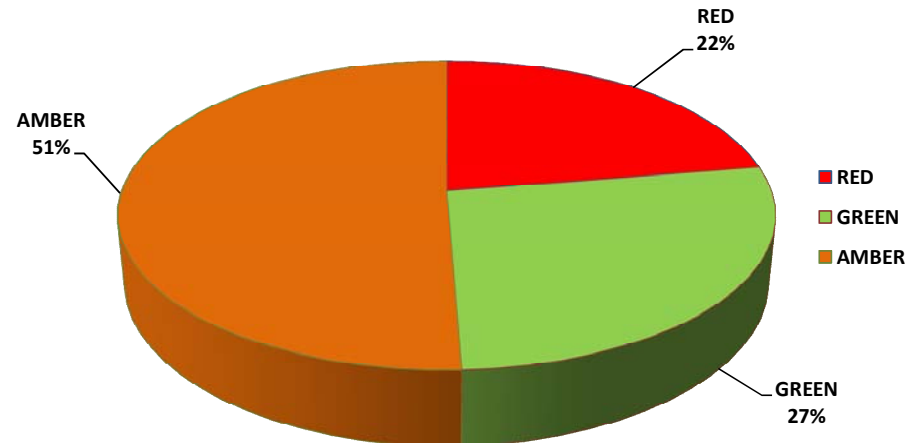
Overall Condition Definition;

Red-Will reflect a building that is, or is becoming largely untenable as a point for the delivery of an HSS service or contains serious inherent risks to life.

Amber-Will reflect a building that may have a significant remaining useful life, subject to appropriate management, but which will need major refurbishment/re-planning within 5-10 years.

Green-Will reflect new and relatively new buildings, the standards of which continue to be largely current, and which can be expected to deliver a service for the foreseeable future, subject to appropriate management.

Southern- Overall Condition 2016



Results from the June 2016 Estate Returns

Physical Condition

6.98 This category describes the physical condition of buildings within the SHSCT estate.

6.99 The Trust's return shows that:

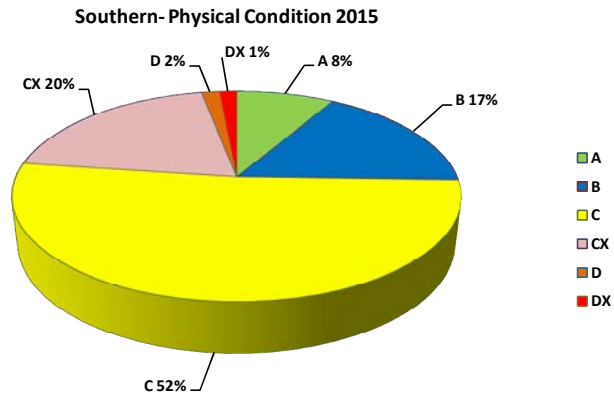
53% of the estate requires investment for physical condition.

20% of the estate needs replaced at an early date.

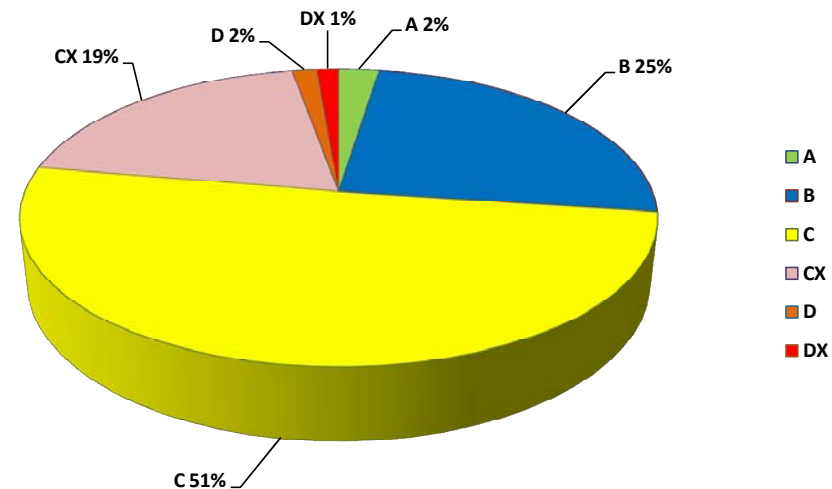
6.100 Within the SHSCT there are 17 Listed Historic buildings. These buildings present a challenge due to space standards and structure and can be unsuitable for the delivery of modern day healthcare. Disposal can be difficult and these buildings can be costly to retain. However the Trust has a responsibility to maintain these properties in line with Government policy contained in 'The Protocol for the Care of the Government Estate' issued by the Northern Ireland Environment Agency (NIEA).

6.101 **Chart C: Physical Condition comparison with previous report** is shown on page 103.

Chart C: Southern Trust **Physical Condition** comparison with previous report 2015



Southern- Physical Condition 2016



Physical Condition Definition:

A- As new and can be expected to perform adequately for its full normal life.

B-- Sound – some elements could be unacceptable.

C-- Operational, but the need for significant repairs has been identified – some elements could be in an unacceptable state.

D- Unacceptable.

X- Appended to 'C' or 'D' to indicate that it is impossible to improve without replacements.

Results from the June 2016 Estate Returns

Functional Suitability

6.102 This category demonstrates how effectively a building (or part of a building) supports the delivery of specific Trust services.

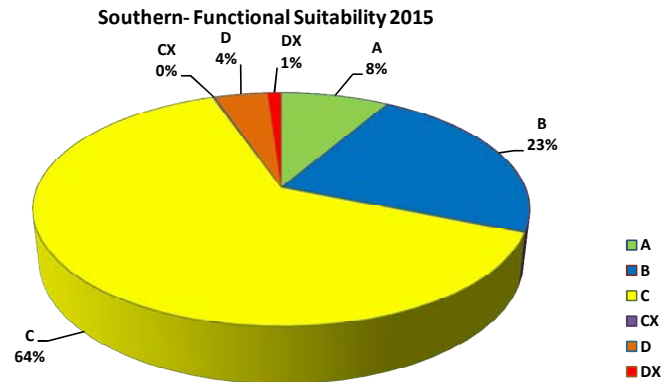
6.103 The Trust's return shows that:

63% of the estate requires minor investment for upgrading for functional suitability, while 4% requires major expenditure.

1% of the estate is either impractical or impossible to improve.

6.104 **Chart D: Functional Suitability comparison with previous report** is shown on page 105.

Chart D: Southern Trust **Functional Suitability** comparison with previous report 2015



Functional Suitability Definition:

A-Either in full compliance with or exceeds the appropriate nationally published guidance and has a “full life” expectation. No expenditure, except for routine maintenance, is required.

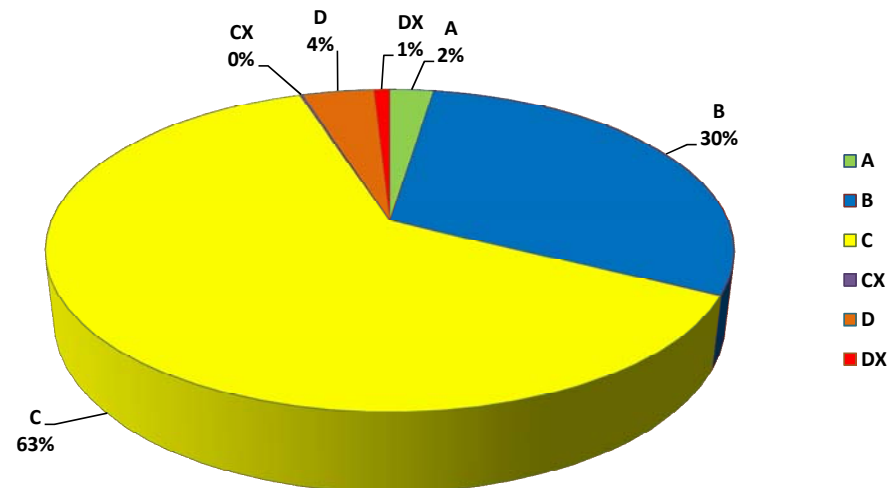
B-Reasonable and adequate even though it does not have a “full life” expectation or does not fully comply with national guidance. In most cases, this marking will be perfectly acceptable for the provision of health care. No capital expenditure would be required to improve the building. Repair and normal maintenance would be adequate to sustain at “B” rating.

C-Below ‘B’ standard and would require capital expenditure to upgrade to ‘B’.

D-Below ‘C’ standard and major capital expenditure required to achieve ‘B’.

X-Appended to ‘C’ or ‘D’ to indicate that this department is impossible or impractical to improve.

Southern- Functional Suitability 2016

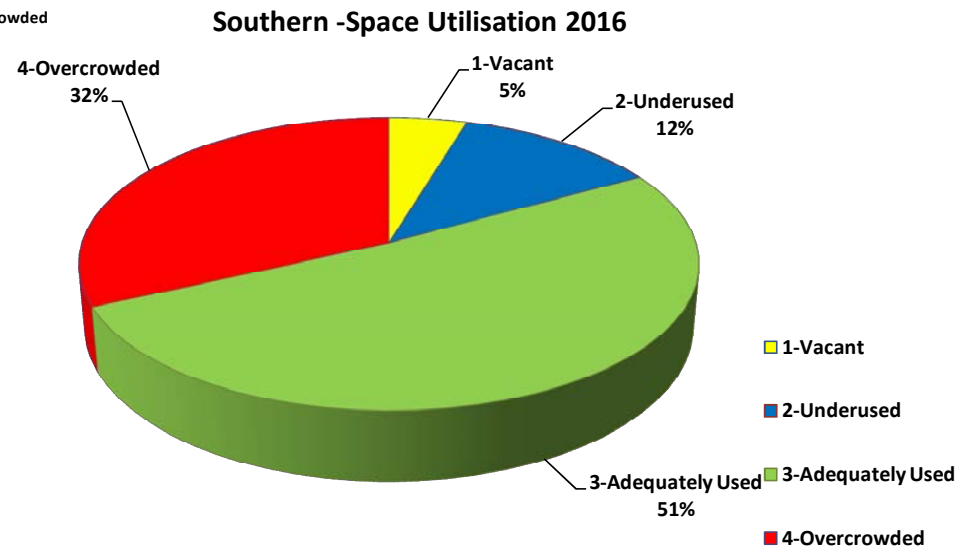
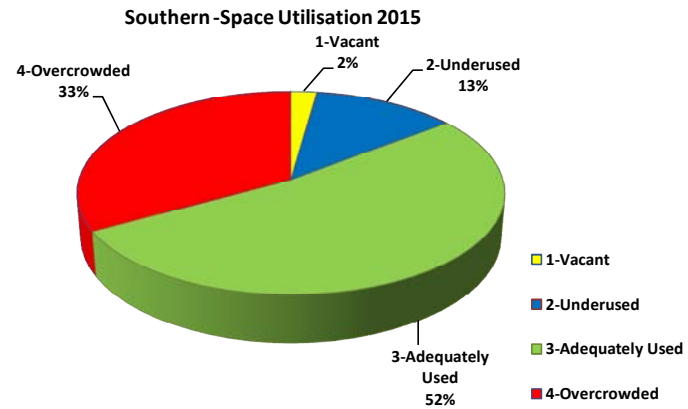


Results from the June 2016 Estate Returns

Space Utilisation

- 6.105 Space Utilisation explores how well the property assets are being used.
- 6.106 The department requires all its ALBs to proactively dispose of vacant property assets for which there is no deliverable foreseeable need. All public bodies are required to manage their land and buildings efficiently and effectively and in doing so, demonstrate that property assets and associated costs provide value for money. Buildings which are either vacant or not fully utilised do not demonstrate value for money.
- 6.107 The SHSCT has agreed reduction targets for vacant freehold estate of 14.7% and for underused estate of 8.0% for 2016/17. All agreed improvement targets are shown on page 53 and performance against these targets will be detailed in future SOTERs.
- 6.108 The Trust's return shows that:
- 51% of the estate is adequately used in terms of space utilisation and 32% is overcrowded.
- 12% of the estate is underused.
- 5% of the estate is vacant.
- 6.109 **Chart E: Space Utilisation comparison with previous** report is shown on page 107.

Chart E: Southern Trust **Space Utilisation** comparison with previous report 2015

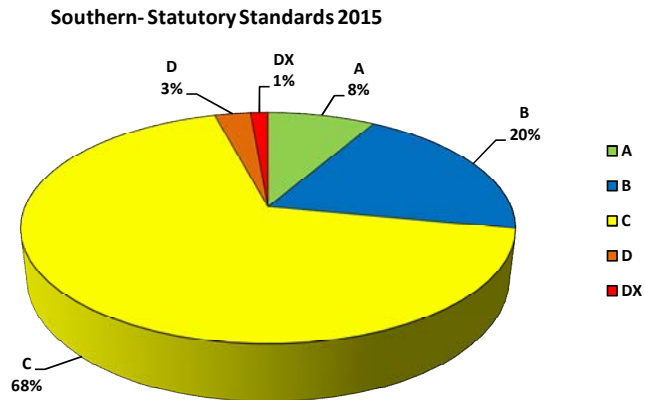


Results from the June 2016 Estate Returns

Statutory Standards

- 6.110 All healthcare buildings are subject to ongoing inspection and regulation by statutory authorities. New buildings must comply with Health and Safety Standards and Codes of Practice. However, health services can continue to be safely and satisfactorily delivered from existing buildings, which predate current standards, if all risks are identified and are proactively managed. HSC Trusts are required to proactively manage such risks to provide a safe environment for the delivery of services. Plans to improve compliance of such buildings, or move to more suitable premises, must always be a priority in the Estate Control Plans for the HSC estate.
- 6.111 The Trust's return shows that:
- 66% of the estate requires minor investment for upgrading for statutory standards, while 3% requires major expenditure.
- 1% of the estate is either impractical or too expensive to improve.
- 6.112 **Chart F: Statutory Standards comparison with previous report** is shown on page 109.

Chart F: Southern Trust **Statutory Standards** comparison with previous report 2015



Statutory Standards Definition:

A-Conforms to statutory legislation and is a new building.

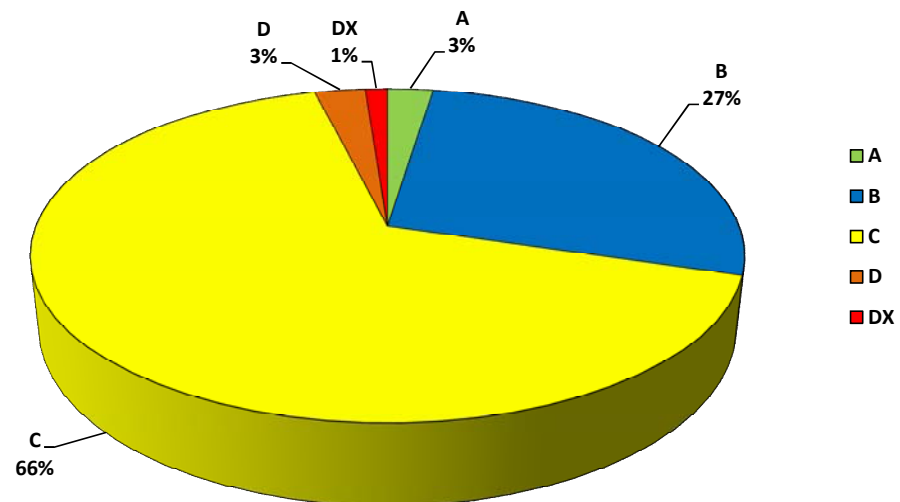
B-Conforms to statutory legislation.

C-Does not conform to statutory legislation but is capable of being upgraded to that level with minor expenditure.

D-Does not conform to statutory legislation but is capable of being upgraded to that level with major expenditure.

DX-Does not conform to statutory legislation and improvements are either impractical or too expensive to be tenable.

Southern- Statutory Standards 2016



Results from the June 2016 Estate Returns

Western HSC Trust (WHST) State of the Estate Report

6.113 This report is based on estate returns received from WHST in June 2016.

6.114 The information contained in this report, along with individual Estate Control Plans, should assist the WHST in prioritising investment decisions across all areas of estate management.

Description of the WHST estate

6.115 The WHST serves a population of approximately 299,431 and covers a land area of approximately 4842km².

6.116 The following key characteristics of the WHST estate describe the property asset base:

- 261 blocks of freehold buildings;
- approximate floor area of 331,131 m²;
- 2 Acute Hospital facilities at Altnagelvin Hospital and the South West Acute Hospital;
- 1 Enhanced Local Hospital at Tyrone County Hospital;
- 82 Blocks of Community facilities;
- 2 Other Major Healthcare facilities at Gransha and Tyrone and Fermanagh Hospitals;
- 49 leased properties (information from current AMP). CPD has confirmed that the Western Trust currently have up to **90%** of their lease information populated on the 3i system.
- 4 Listed Historic buildings;
- 8 “department owned” properties - including land and 9 buildings at Gransha Hospital, land at Drumcoo and Scroggy Road, Limavady;
- a land area of approximately 268 hectares (excluding Community Facilities).

6.117 In the Trust area there are five main Hospital sites:

- South West Acute Hospital;
- Altnagelvin Hospital;
- Gransha Hospital (which includes Waterside Hospital, Lakeview and Grangewood Hospitals);
- Tyrone and Fermanagh Hospital;
- Tyrone County Hospital.

Estate Performance Report

6.118 The data used to produce this report is based on the June 2016 estate returns received from the Trust. WHSCT is required to validate the quality of their data before it is uploaded to the 3i database.

6.119 This report focuses on the current condition and performance of the WHSCT estate in 2016 and provides comparison with 2015 data against the following categories:

- Overall Condition
- Physical Condition
- Functional Suitability
- Space Utilisation
- Statutory Standards

The Age Profile of the Trust estate is also included.

6.120 Comparative charts across the six Trusts and NIFRS for each category are shown in Section 4 of this report.

Age of the WHSCT estate

6.121 The Trust's return shows that:

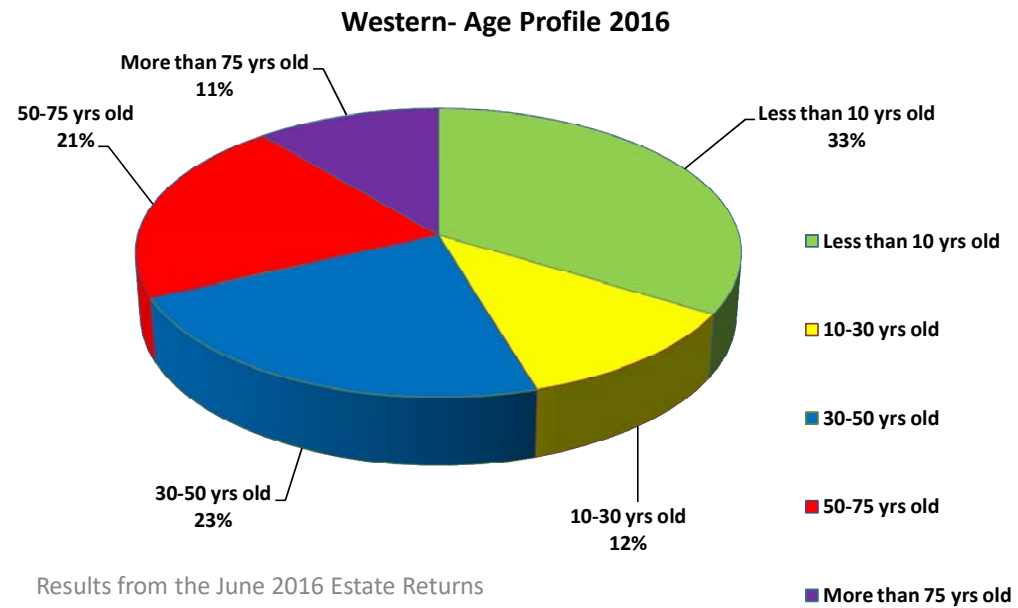
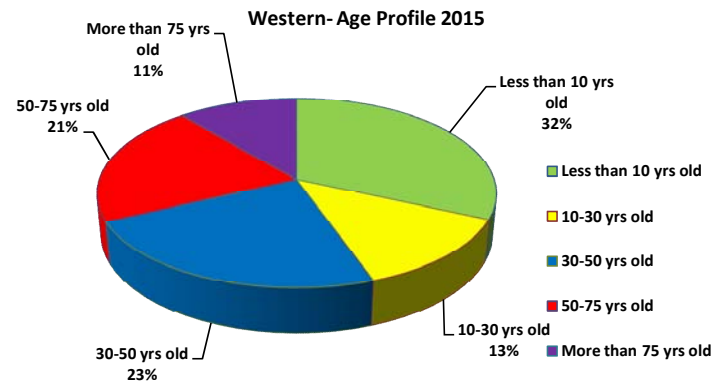
33% of the estate is less than 10 years old.

55% of the estate is over 30 years old.

11% of the estate is over 75 years old.

6.122 **Chart A: Age Profile comparison with previous report** is shown on page 113.

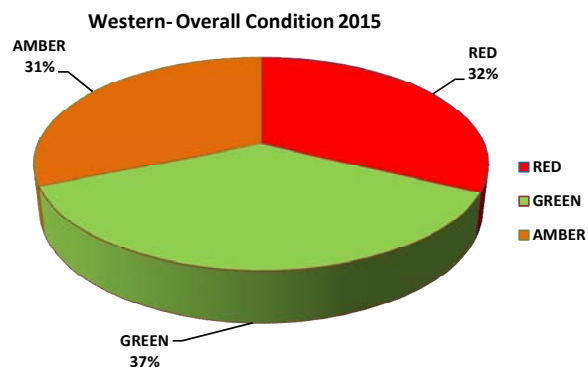
Chart A: Western Trust **Age Profile** comparison with previous report 2015



Overall Condition

- 6.123 This category describes the assessed condition of the WHSCT property assets using three colour categories to visually express the Overall Condition and to highlight the challenges faced by the Trust to improve estate performance.
- 6.124 The Trust's return shows that:
- 34% of the estate is in "Red" condition.
29% of the estate is in "Amber" condition.
37% of the estate is in "Green" condition.
- 6.125 **Chart B: Overall condition comparison with previous report** is shown on page 115.

Chart B: Western Trust **Overall Condition** comparison with previous report 2015



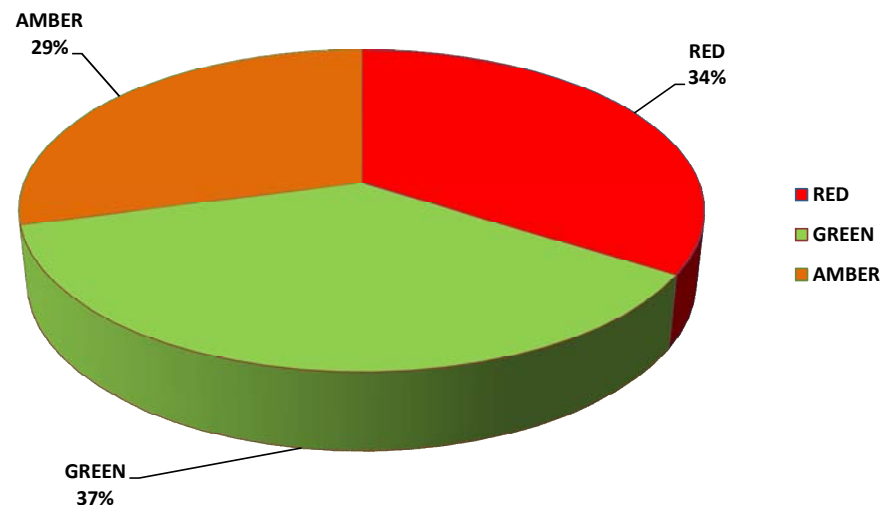
Overall Condition Definition;

Red-Will reflect a building that is, or is becoming largely untenable as a point for the delivery of an HSS service or contains serious inherent risks to life.

Amber-Will reflect a building that may have a significant remaining useful life, subject to appropriate management, but which will need major refurbishment/re-planning within 5-10 years.

Green-Will reflect new and relatively new buildings, the standards of which continue to be largely current, and which can be expected to deliver a service for the foreseeable future, subject to appropriate management.

Western- Overall Condition 2016



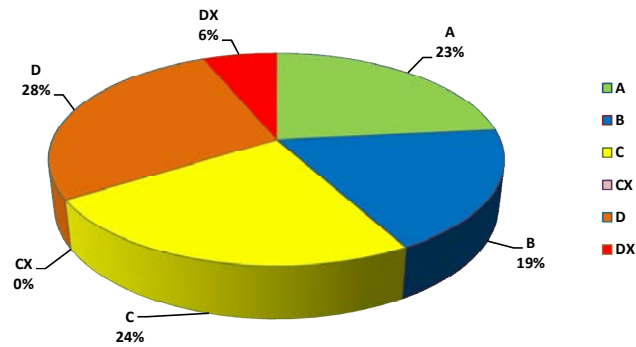
Results from the June 2016 Estate Returns

Physical Condition

- 6.126 This category describes the physical condition of buildings within the WHSCT estate.
- 6.127 The Trust's return shows that:
- 52% of the estate requires investment for physical condition
6% of the estate needs replaced at an early date.
- 6.128 Within the WHSCT there are 4 Listed Historic buildings. These buildings present a challenge due to space standards and structure and can be unsuitable for the delivery of modern day healthcare. Disposal can be difficult and these buildings can be costly to retain. However the Trust has a responsibility to maintain these properties in line with Government policy contained in 'The Protocol for the Care of the Government Estate' issued by the Northern Ireland Environment Agency (NIEA).
- 6.129 **Chart C: Physical Condition comparison with previous report** is shown on page 117.

Chart C: Western Trust **Physical Condition** comparison with previous report 2015

Western- Physical Condition 2015



Physical Condition Definition:

A- As new and can be expected to perform adequately for its full normal life.

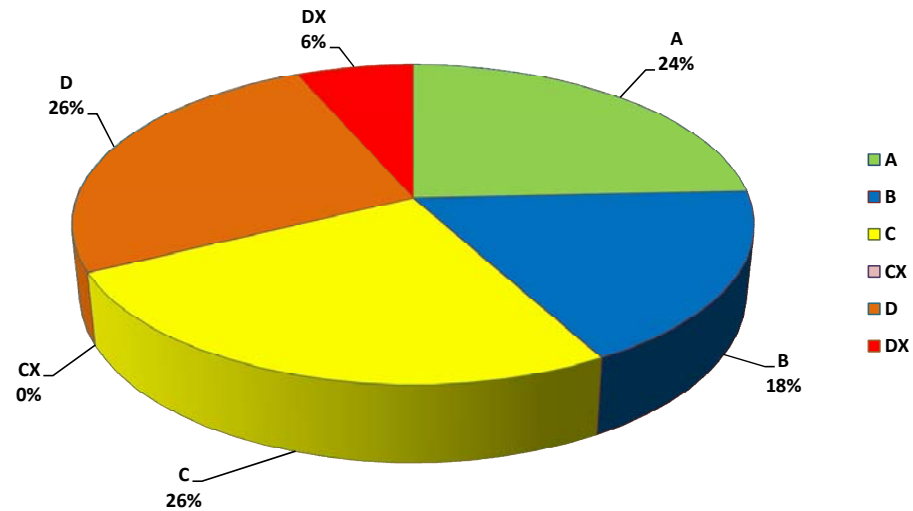
B-- Sound – some elements could be unacceptable.

C-- Operational, but the need for significant repairs has been identified – some elements could be in an unacceptable state.

D- Unacceptable.

X- Appended to 'C' or 'D' to indicate that it is impossible to improve without replacements.

Western- Physical Condition 2016



Results from the June 2016 Estate Returns

Functional Suitability

6.130 This category demonstrates how effectively a building (or part of a building) supports the delivery of specific Trust services.

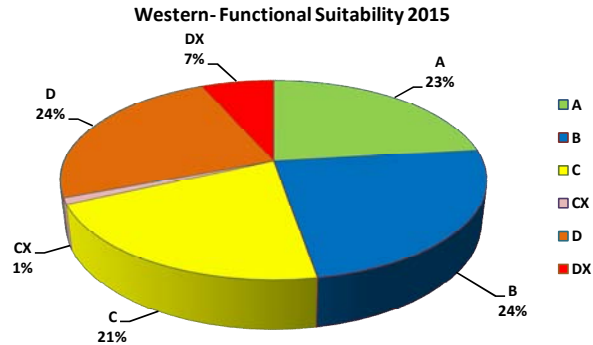
6.131 The Trust's return shows that:

22% of the estate requires minor investment for upgrading for functional suitability, while 24% requires major expenditure.

8% of the estate is either impractical or impossible to improve.

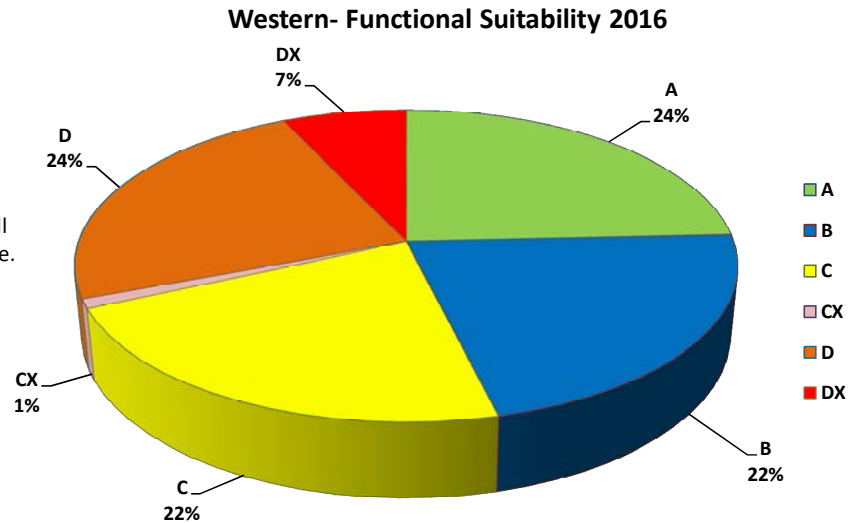
6.132 **Chart D: Functional Suitability comparison with previous report** is shown on page 119.

Chart D: Western Trust **Functional Suitability** comparison with previous report 2012/13



Functional Suitability Definition:

A-Either in full compliance with or exceeds the appropriate nationally published guidance and has a “full life” expectation. No expenditure, except for routine maintenance, is required.
B-Reasonable and adequate even though it does not have a “full life” expectation or does not fully comply with national guidance. In most cases, this marking will be perfectly acceptable for the provision of health care. No capital expenditure would be required to improve the building. Repair and normal maintenance would be adequate to sustain at “B” rating.
C-Below ‘B’ standard and would require capital expenditure to upgrade to ‘B’.
D-Below ‘C’ standard and major capital expenditure required to achieve ‘B’.
X-Appended to ‘C’ or ‘D’ to indicate that this department is impossible or impractical to improve.

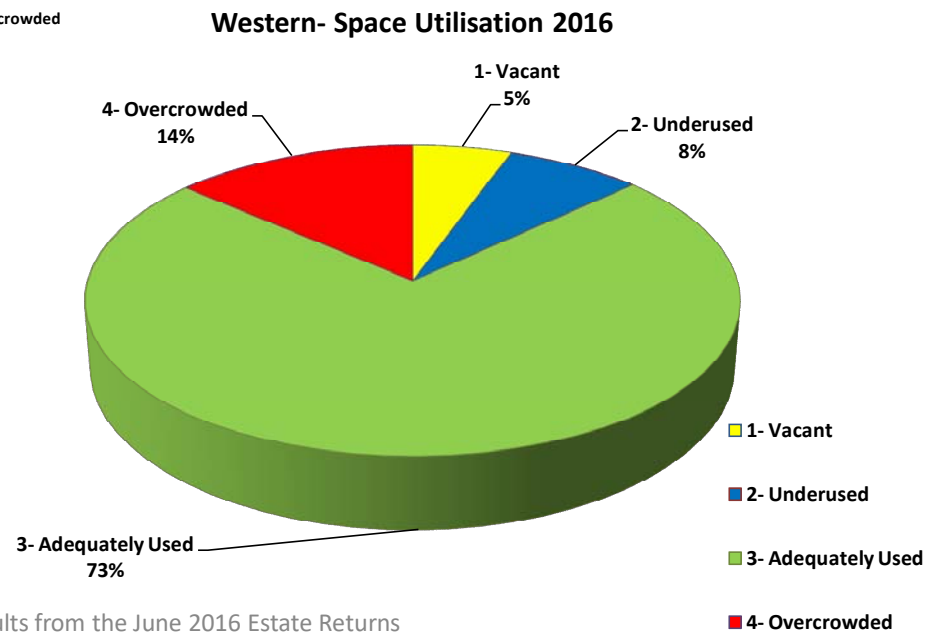
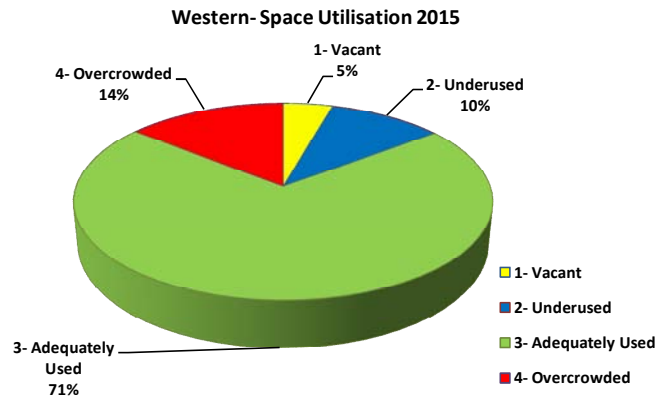


Results from the June 2016 Estate Returns

Space Utilisation

- 6.133 Space Utilisation explores how well the property assets are being used.
- 6.134 The department requires all its ALBs to proactively dispose of vacant property assets for which there is no deliverable foreseeable need. All public bodies are required to manage their land and buildings efficiently and effectively and in doing so, demonstrate that property assets and associated costs provide value for money. Buildings which are either vacant or not fully utilised do not demonstrate value for money.
- 6.135 The WHSCT has agreed a reduction target for vacant freehold estate of 4% in 2016/17. All agreed improvement targets are shown on page 53 and performance against these targets will be detailed in future SOTERs.
- 6.136 The Trust's return shows that:
- 73% of the estate is adequately used in terms of space utilisation and 14% is overcrowded.
- 8% of the estate is underused.
- 5% of the estate is vacant.
- 6.137 **Chart E: Space Utilisation comparison with previous** report is shown on page 121.

Chart E: Western Trust **Space Utilisation** comparison with previous report 2015

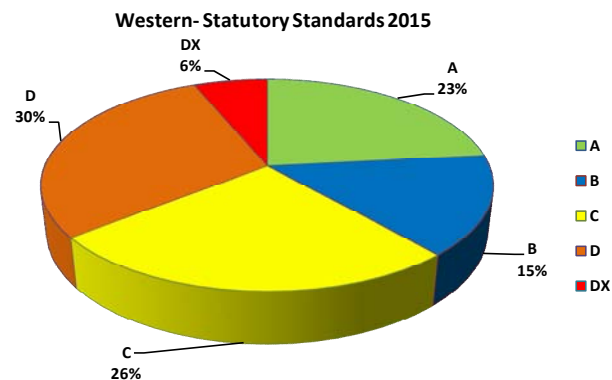


Results from the June 2016 Estate Returns

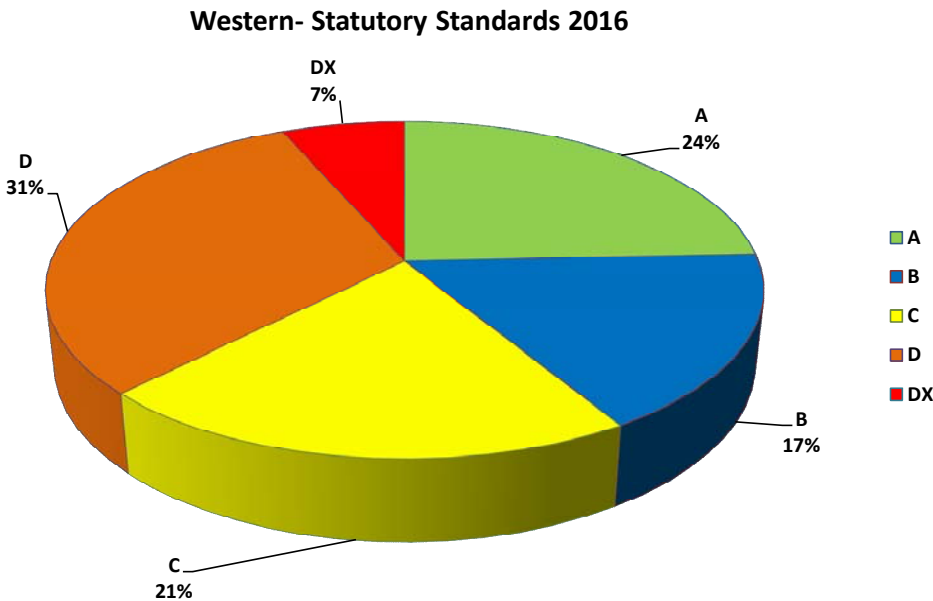
Statutory Standards

- 6.138 All healthcare buildings are subject to ongoing inspection and regulation by statutory authorities. New buildings must comply with Health and Safety Standards and Codes of Practice. However, health services can continue to be safely and satisfactorily delivered from existing buildings, which predate current standards, if all risks are identified and are proactively managed. HSC Trusts are required to proactively manage such risks to provide a safe environment for the delivery of services. Plans to improve compliance of such buildings, or move to more suitable premises, must always be a priority in the Estate Control Plans for the HSC estate.
- 6.139 The Trust's return shows that:
- 21% of the estate requires minor investment for upgrading for statutory standards, while 31% requires major expenditure.
- 7% of the estate is either impractical or too expensive to improve.
- 6.140 **Chart F: Statutory Standards comparison with previous report** is shown on page 123.

Chart F: Western Trust **Statutory Standards** comparison with previous report 2015



Statutory Standards Definition:
A-Conforms to statutory legislation and is a new building.
B-Conforms to statutory legislation.
C-Does not conform to statutory legislation but is capable of being upgraded to that level with minor expenditure.
D-Does not conform to statutory legislation but is capable of being upgraded to that level with major expenditure.
DX-Does not conform to statutory legislation and improvements are either impractical or too expensive to be tenable.



Results from the June 2016 Estate Returns

Northern Ireland Ambulance Service (NIAS) State of the Estate Report

- 6.141 This report is based on estate returns received from NIAS in June 2016.
- 6.142 The information contained in this report, along with individual Estate Control Plans, should assist the Trust in prioritising investment decisions across all areas of estate management.

Description of the NIAS estate

- 6.143 NIAS provides ambulance care, treatment and transportation services to the population of Northern Ireland and covers an area of approximately 5,455 square miles.
- 6.144 The following key characteristics of the NIAS estate describe the property asset base:
- 61 ambulance stations/deployment points;
 - 1 Headquarters and Regional Education & Training Centre;
 - 32 blocks of freehold buildings;
 - 2 Ambulance Control Centres (emergency and non emergency);
 - approximate floor area of 15,119 m²;
 - 49 leased properties (information from current AMP). CPD has confirmed that NIAS currently have up to **90%** of their lease information populated on the 3i system.

Estate Performance Report

- 6.145 The data used to produce this report is based on the June 2016 estate returns received from NIAS. NIAS is required to validate the quality of their data before it is uploaded to the 3i system.

6.146 This report focuses on the current condition and performance of the NIAS estate in 2016 and provides comparison with 2015 data against the following categories:

- Overall Condition
- Physical Condition
- Functional Suitability
- Space Utilisation
- Statutory Standards

The Age Profile of the Trust estate is also included.

6.147 Comparative charts across all the six Trusts and NIFRS for each category are shown in Section 4 of this report.

Age of the NIAS estate

6.148 The NIAS return shows that:

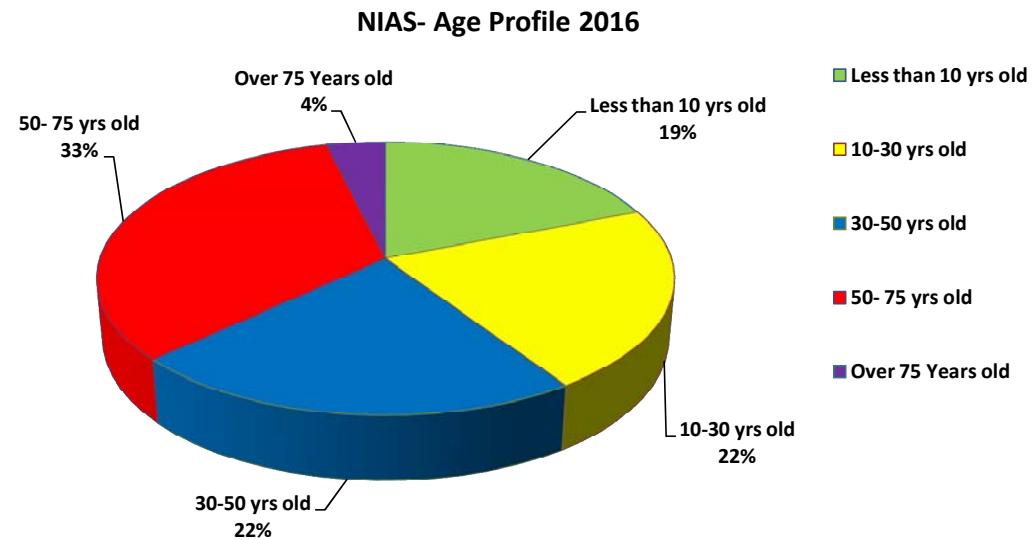
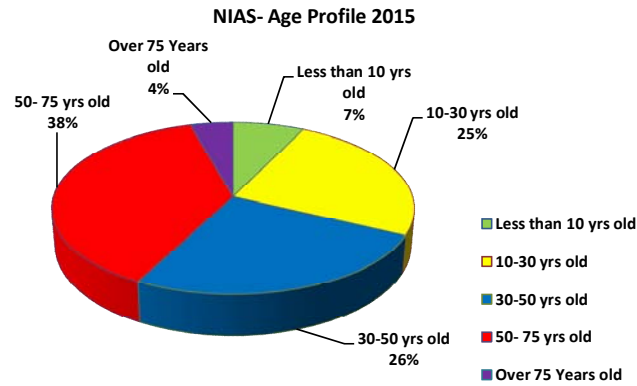
19% of the estate is less than 10 years old.

59% of the estate is over 30 years old.

4% of the estate is over 75 years old.

6.149 **Chart A: Age Profile comparison with previous report** is shown on page 126.

Chart A: NIAS Trust **Age Profile** comparison with previous report 2015

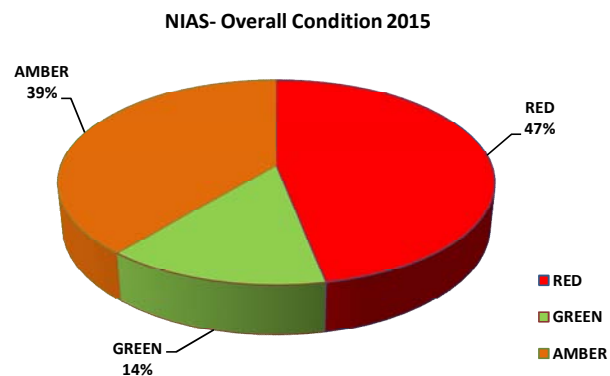


Results from the June 2016 Estate Returns

Overall Condition

- 6.150 This category describes the assessed condition of NIAS property assets using three colour categories to visually express the Overall Condition and to highlight the challenges faced by NIAS to improve estate performance.
- 6.151 The NIAS return shows that:
- 41% of the estate is in “Red” condition.
34% of the estate is in “Amber” condition.
25% of the estate is in “Green” condition.
- 6.152 **Chart B: Overall Condition comparison with previous** report is shown on page 128.

Chart B: NIAS Trust **Overall Condition** comparison with previous report 2015

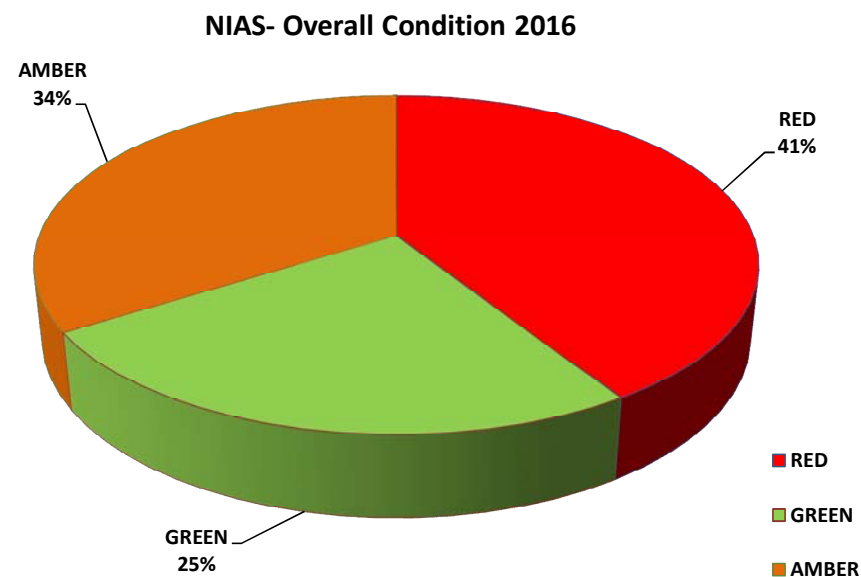


Overall Condition Definition;

Red-Will reflect a building that is, or is becoming largely untenable as a point for the delivery of an HSS service or contains serious inherent risks to life.

Amber-Will reflect a building that may have a significant remaining useful life, subject to appropriate management, but which will need major refurbishment/re-planning within 5-10 years.

Green-Will reflect new and relatively new buildings, the standards of which continue to be largely current, and which can be expected to deliver a service for the foreseeable future, subject to appropriate management.



Results from the June 2016 Estate Returns

Physical Condition

6.153 This category describes the physical condition of buildings within the NIAS estate.

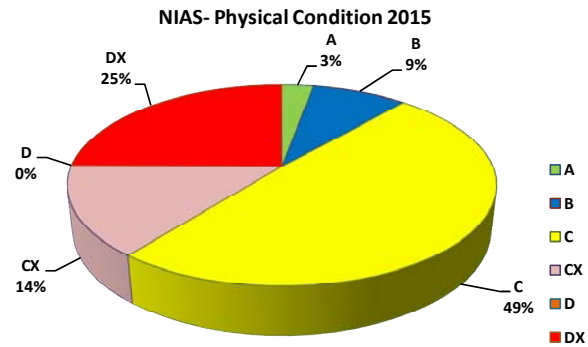
6.154 The NIAS return shows that:

43% of the estate requires investment for physical condition

35% of the estate needs replaced at an early date.

6.155 **Chart C: Physical Condition comparison with previous report** is shown on page 130.

Chart C: NIAS Trust **Physical Condition** comparison with previous report 2015



Physical Condition Definition:

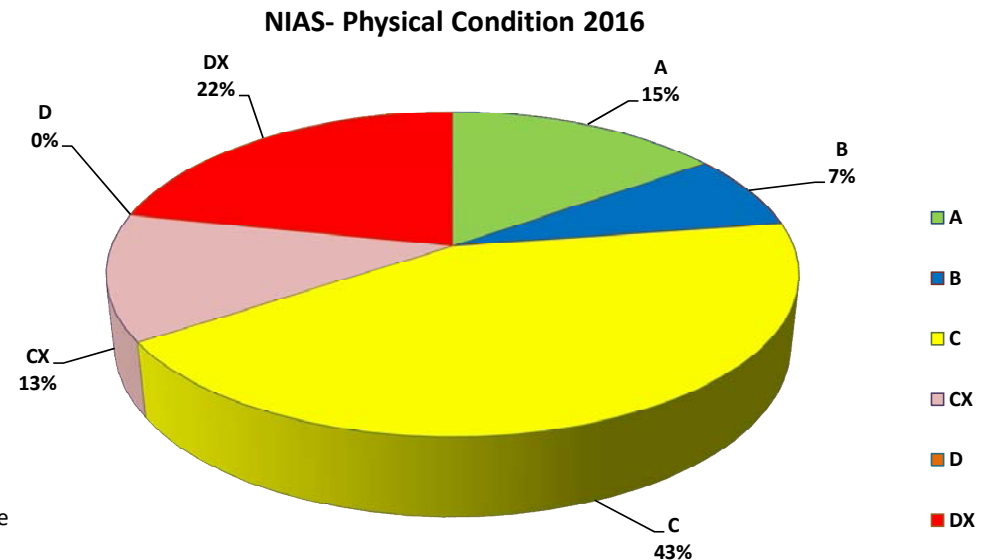
A- As new and can be expected to perform adequately for its full normal life.

B-- Sound – some elements could be unacceptable.

C-- Operational, but the need for significant repairs has been identified – some elements could be in an unacceptable state.

D- Unacceptable.

X- Appended to 'C' or 'D' to indicate that it is impossible to improve without replacements.



Results from the June 2016 Estate Returns

Functional Suitability

6.156 This category demonstrates how effectively a building (or part of a building) supports the delivery of specific Trust services.

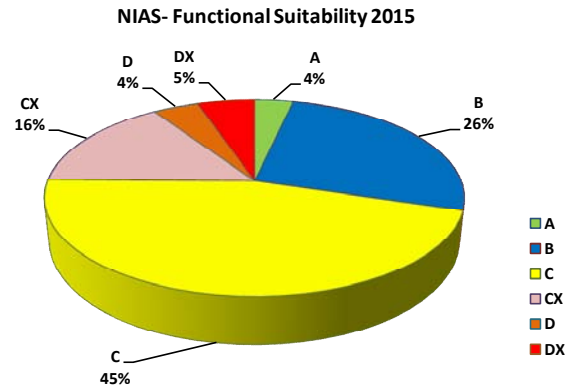
6.157 The NIAS return shows that:

40% of the estate requires minor investment for upgrading for functional suitability, while 4% requires major expenditure.

17% of the estate is either impractical or impossible to improve.

6.158 **Chart D: Functional Suitability comparison with previous report** is shown on page 132.

Chart D: NIAS Trust **Functional Suitability** comparison with previous report 2015



Functional Suitability Definition:

A-Either in full compliance with or exceeds the appropriate nationally published guidance and has a “full life” expectation. No expenditure, except for routine maintenance, is required.

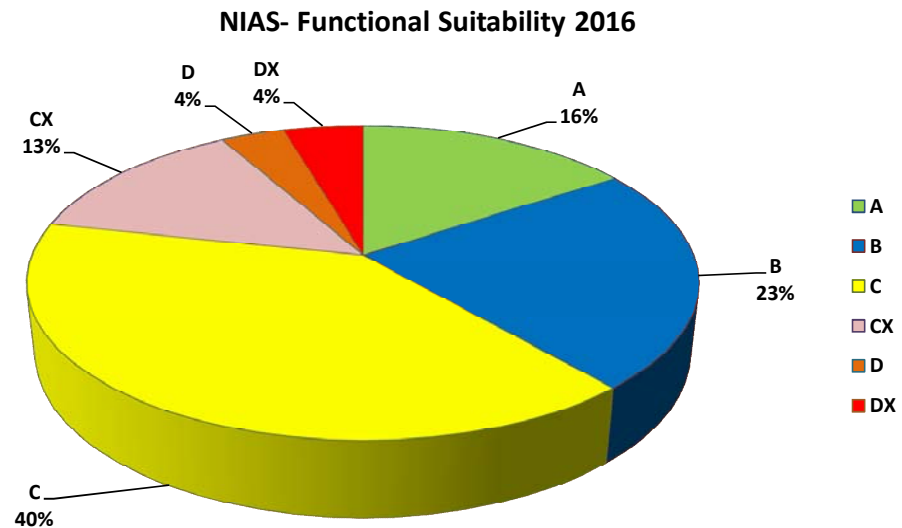
B-Reasonable and adequate even though it does not have a “full life” expectation or does not fully comply with national guidance. In most cases, this marking will be perfectly acceptable for the provision of health care. No capital expenditure would be required to improve the building. Repair and normal maintenance would be adequate to sustain at “B” rating.

C-Below ‘B’ standard and would require capital expenditure to upgrade to ‘B’.

D-Below ‘C’ standard and major capital expenditure required to achieve ‘B’.

X-Appended to ‘C’ or ‘D’ to indicate that this department is impossible or impractical to improve.

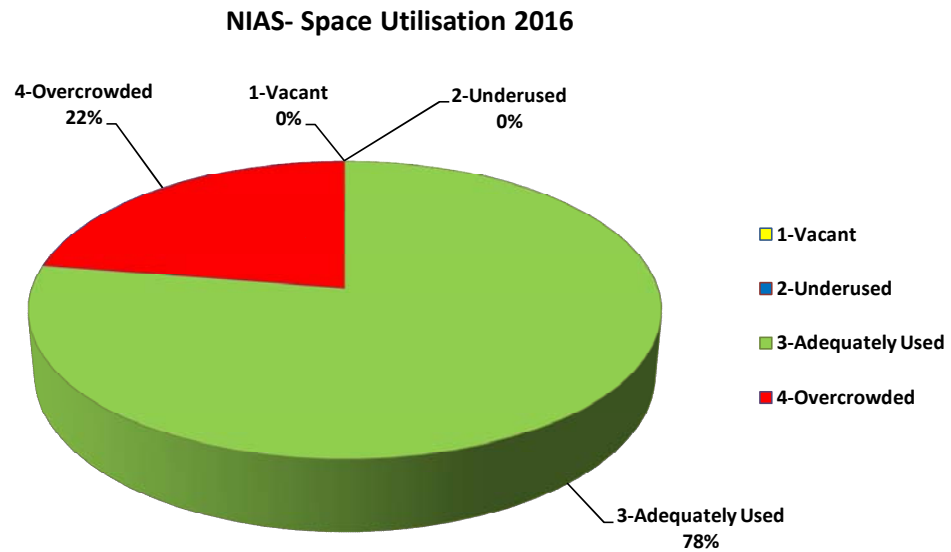
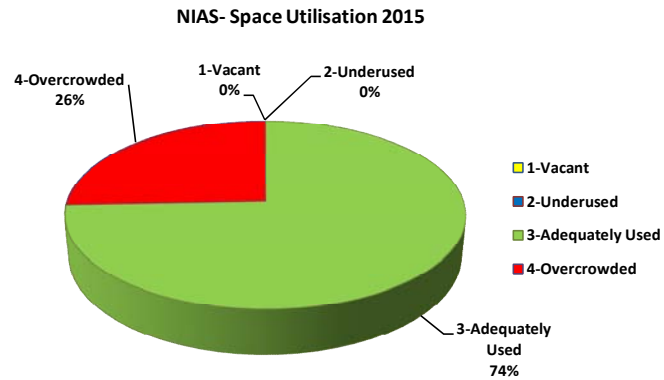
Results from the June 2016 Estate Returns



Space Utilisation

- 6.159 Space Utilisation explores how well the property assets are being used.
- 6.160 The department requires all its ALBs to proactively dispose of vacant property assets for which there is no deliverable foreseeable need. All public bodies are required to manage their land and buildings efficiently and effectively and in doing so, demonstrate that property assets and associated costs provide value for money. Buildings which are either vacant or not fully utilised do not demonstrate value for money.
- 6.161 The NIAS return shows that:
- 78% of the estate is adequately used in terms of space utilisation.
22% of the estate is overcrowded.
- 6.162 NIAS has no vacant or underused estate and therefore no targets have been set. However, the NIAS return shows that 22% of its estate is overcrowded which may pose a risk and this position should be appropriately managed by NIAS.
- 6.163 **Chart E: Space Utilisation comparison with previous report** is shown on page 134.

Chart E: NIAS **Space Utilisation** comparison with previous report 2015

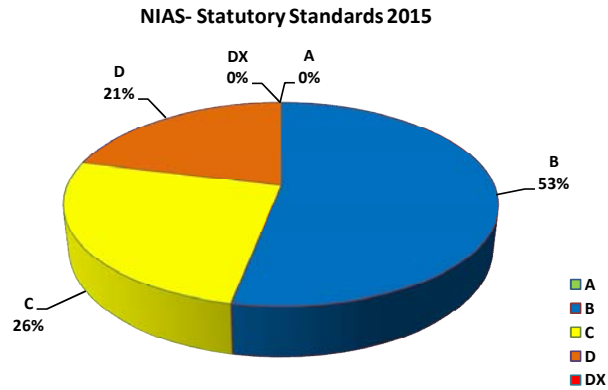


Results from the June 2016 Estate Returns

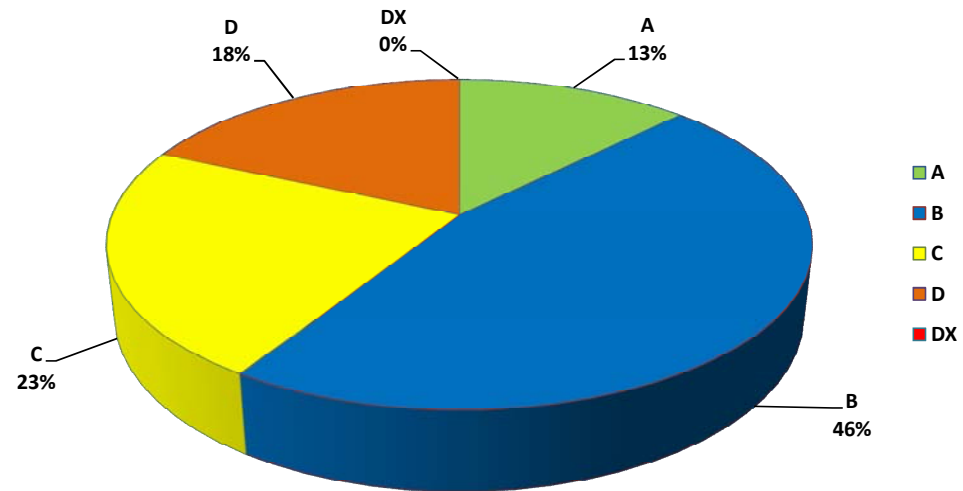
Statutory Standards

- 6.164 All healthcare buildings are subject to ongoing inspection and regulation by statutory authorities. New buildings must comply with Health and Safety Standards and Codes of Practice. However, health services can continue to be safely and satisfactorily delivered from existing buildings, which predate current standards, if all risks are identified and are proactively managed. HSC Trusts are required to proactively manage such risks to provide a safe environment for the delivery of services. Plans to improve compliance of such buildings, or move to more suitable premises, must always be a priority in the Estate Control Plans for the HSC estate.
- 6.165 The NIAS return shows that:
- 23% of the estate requires minor investment for upgrading for statutory standards, while 18% requires major expenditure.
- 6.166 **Chart F: Statutory Standards comparison with previous** report is shown on page 136.

Chart F: NIAS Trust **Statutory Standards** comparison with previous report 2015



NIAS- Statutory Standards 2016



Statutory Standards Definition:

A-Conforms to statutory legislation and is a new building.

B-Conforms to statutory legislation.

C-Does not conform to statutory legislation but is capable of being upgraded to that level with minor expenditure.

D-Does not conform to statutory legislation but is capable of being upgraded to that level with major expenditure.

DX-Does not conform to statutory legislation and improvements are either impractical or too expensive to be tenable.

Results from the June 2016 Estate Returns

Northern Ireland Fire and Rescue Service (NIFRS) State of the Estate Report

6.167 This report is based on estate returns received from NIFRS in June 2016.

6.168 The information contained in this report, along with individual Estate Control Plans, should assist ALBs in prioritisation investment decisions across all areas of estate management.

Description of the NIFRS estate

6.169 NIFRS serves the population of Northern Ireland covering a land area of approximately 5,455 square miles, providing a range of fire and rescue related services.

6.170 The following key characteristics of the NIFRS estate describe the property asset base:

- 68 Fire Stations;
- 1 Headquarters and Regional Control Centre building;
- 1 Fire and Rescue Training Centre;
- 73 blocks of freehold buildings;
- approximate floor area of 47,526 m²;
- 9 leased properties (information from current AMP). CPD has confirmed that NIFRS currently have up to **85%** of their lease information populated on the 3i system.

Estate Performance Report

6.171 The data used to produce this report is based on the June 2016 estate returns received from NIFRS. NIFRS is required to validate the quality of their data before it is uploaded to the 3i system.

6.172 This report focuses on the current condition and performance of the NIFRS estate and provides comparison with 2015 data against the following categories:

- Overall Condition
- Physical Condition
- Functional Suitability
- Space Utilisation
- Statutory Standards

The Age Profile of NIFRS estate is also included.

6.173 Comparative charts across the six HSC Trusts and NIFRS for each category are shown in Section 4 of this report.

Age of the NIFRS estate

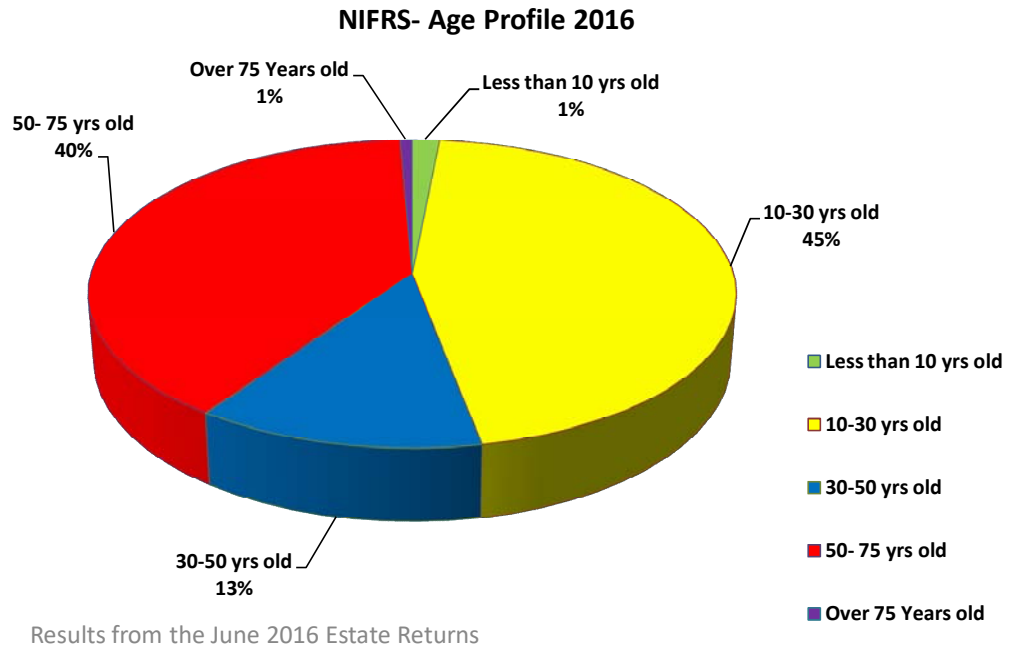
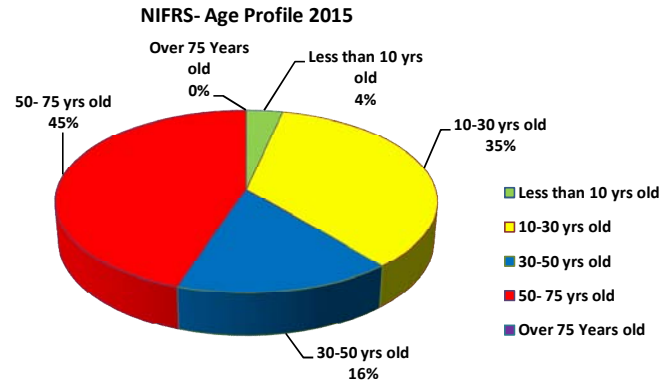
6.174 The NIFRS return shows that:

1% of the estate is less than 10 years old.

54% of the estate is over 30 years old.

6.175 **Chart A: Age Profile comparison with previous report** is shown on page 139.

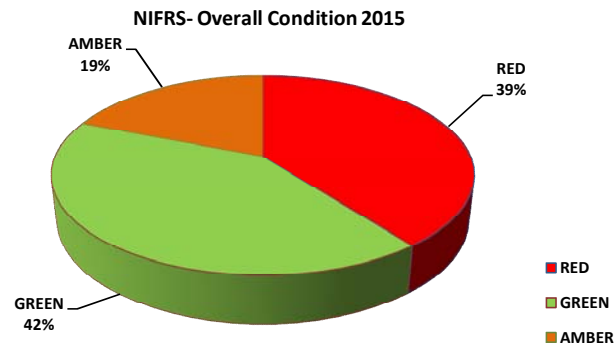
Chart A: NIFRS **Age Profile** comparison with previous report 2015



Overall Condition

- 6.176 This category describes the assessed condition of the NIFRS property assets using three colour categories to visually express the Overall Condition and to highlight the challenges faced by NIFRS to improve estate performance.
- 6.177 The NIFRS return shows that:
- 27% of the estate is in “Red” condition.
 - 21% of the estate is in “Amber” condition.
 - 52% of the estate is in “Green” condition.
- 6.178 **Chart B: Overall Condition comparison with previous** report is shown on page 141.

Chart B: NIFRS **Overall Condition** comparison with previous report 2015

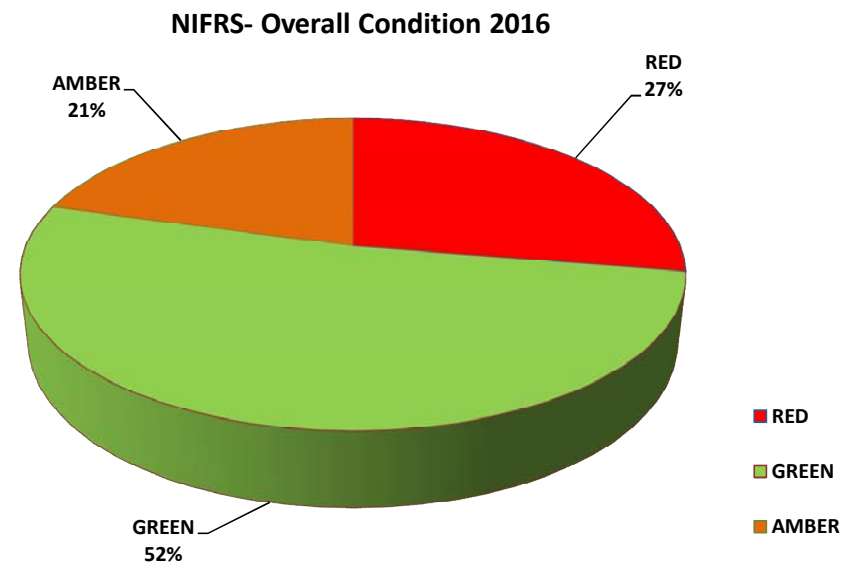


Overall Condition Definition;

Red-Will reflect a building that is, or is becoming largely untenable as a point for the delivery of an HSS service or contains serious inherent risks to life.

Amber-Will reflect a building that may have a significant remaining useful life, subject to appropriate management, but which will need major refurbishment/re-planning within 5-10 years.

Green-Will reflect new and relatively new buildings, the standards of which continue to be largely current, and which can be expected to deliver a service for the foreseeable future, subject to appropriate management.



Results from the June 2016 Estate Returns

Physical Condition

6.179 This category describes the physical condition of buildings within the NIFRS estate.

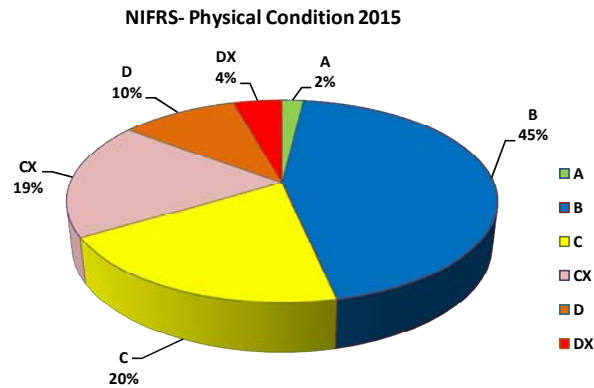
6.180 The NIFRS return shows that:

29% of the estate requires investment for physical condition

19% of the estate needs replaced at an early date.

6.181 **Chart C: Physical Condition comparison with previous report** is shown on page 143.

Chart C: NIFRS **Physical Condition** comparison with previous report 2015



Physical Condition Definition:

A- As new and can be expected to perform adequately for its full normal life.

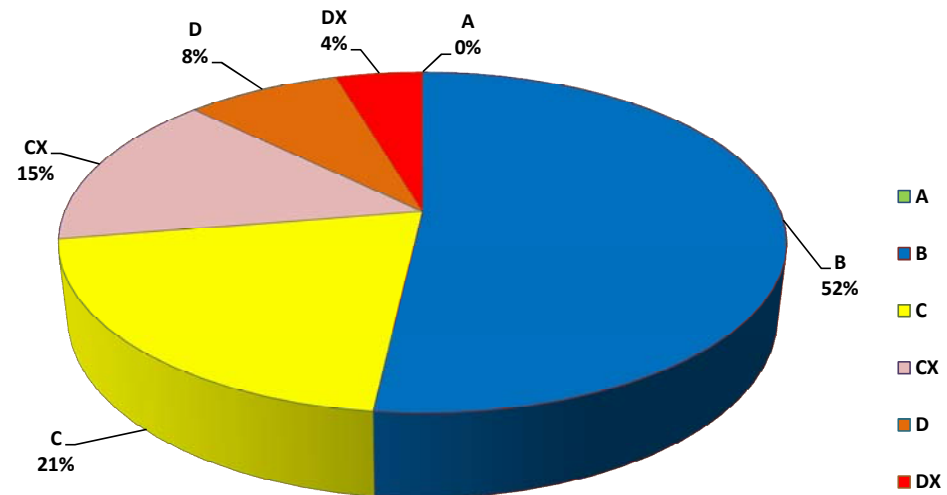
B-- Sound – some elements could be unacceptable.

C-- Operational, but the need for significant repairs has been identified – some elements could be in an unacceptable state.

D- Unacceptable.

X- Appended to 'C' or 'D' to indicate that it is impossible to improve without replacements.

NIFRS- Physical Condition 2016



Results from the June 2016 Estate Returns

Functional Suitability

6.182 This category demonstrates how effectively a building (or part of a building) supports the delivery of specific ALB services.

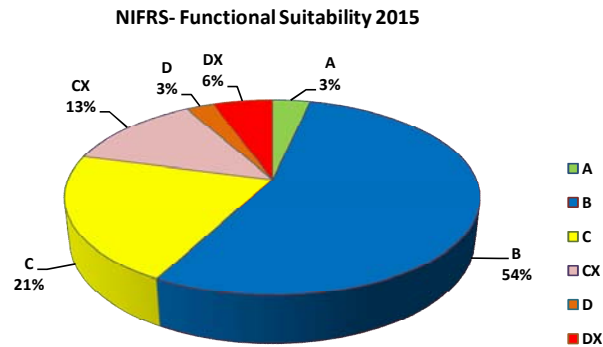
6.183 The NIFRS return shows that:

18% of the estate requires minor investment for upgrading for functional suitability, while 2 % requires major expenditure.

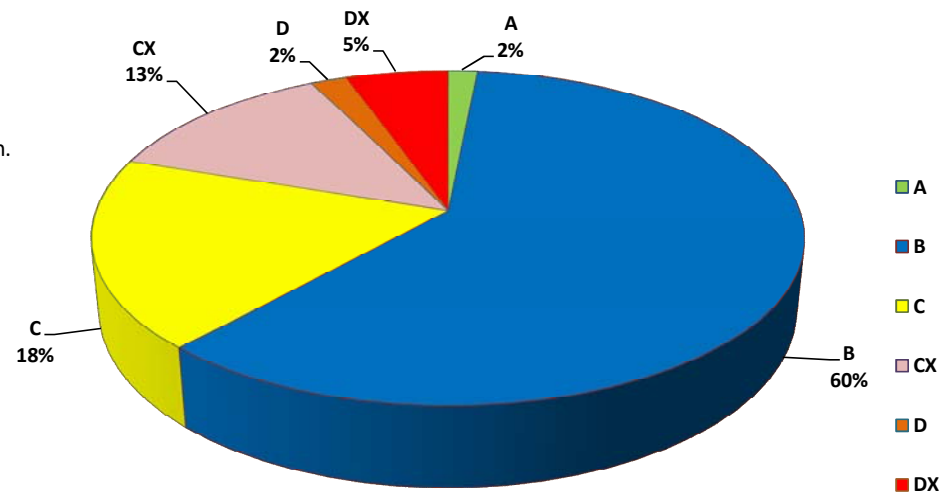
18% of the estate is either impractical or impossible to improve.

6.184 **Chart D: Functional Suitability comparison with previous report** is shown on page 145.

Chart D: NIFRS **Functional Suitability** comparison with previous report 2015



NIFRS- Functional Suitability 2016



Functional Suitability Definition:

A-Either in full compliance with or exceeds the appropriate nationally published guidance and has a “full life” expectation. No expenditure, except for routine maintenance, is required.

B-Reasonable and adequate even though it does not have a “full life” expectation or does not fully comply with national guidance. In most cases, this marking will be perfectly acceptable for the provision of health care. No capital expenditure would be required to improve the building. Repair and normal maintenance would be adequate to sustain at “B” rating.

C-Below ‘B’ standard and would require capital expenditure to upgrade to ‘B’.

D-Below ‘C’ standard and major capital expenditure required to achieve ‘B’.

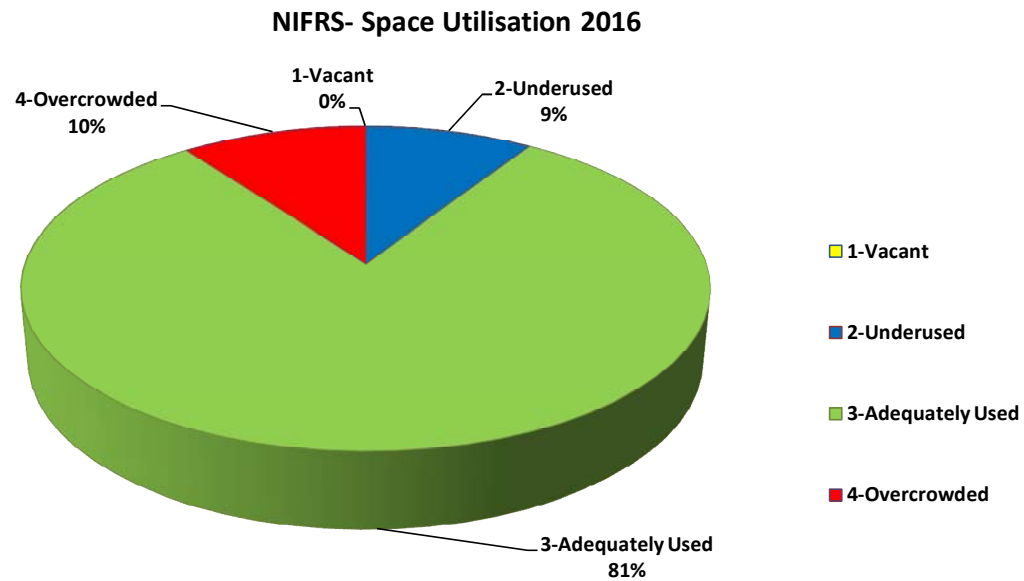
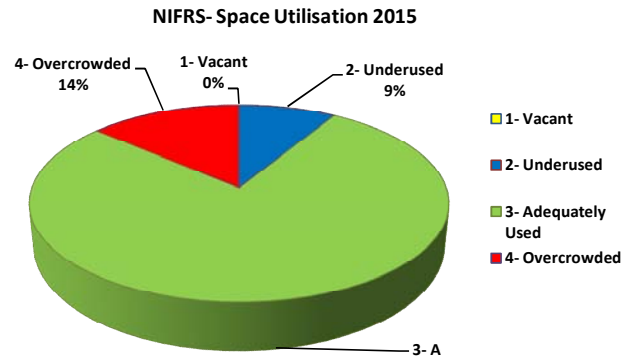
X-Appended to ‘C’ or ‘D’ to indicate that this department is impossible or impractical to improve.

Results from the June 2016 Estate Returns

Space Utilisation

- 6.185 Space Utilisation explores how well the property assets are being used.
- 6.186 The department requires all its ALBs to proactively dispose of vacant property assets for which there is no deliverable foreseeable need. All public bodies are required to manage their land and buildings efficiently and effectively and in doing so, demonstrate that property assets and associated costs provide value for money. Buildings which are either vacant or not fully utilised do not demonstrate value for money.
- 6.187 NIFRS has agreed a reduction target for its underused freehold estate of 45% in 2016/17. All agreed improvement targets are shown on page 53 and performance against these targets will be detailed in future SOTERs.
- 6.188 The NIFRS return shows that:
- 81% of the estate is adequately used in terms of space utilisation.
10% of the estate is overcrowded while 9% is underused.
- 6.189 **Chart E: Space Utilisation comparison with previous report** is shown on page 147.

Chart E: NIFRS **Space Utilisation** comparison with previous report 2015

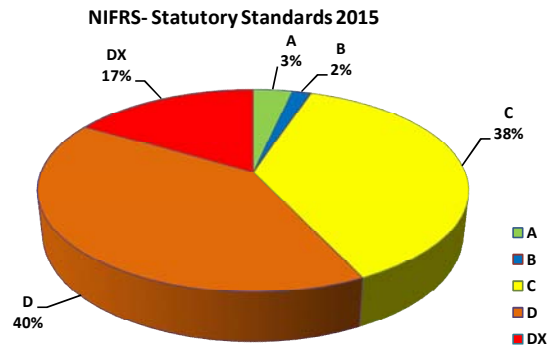


Results from the June 2016 Estate Returns

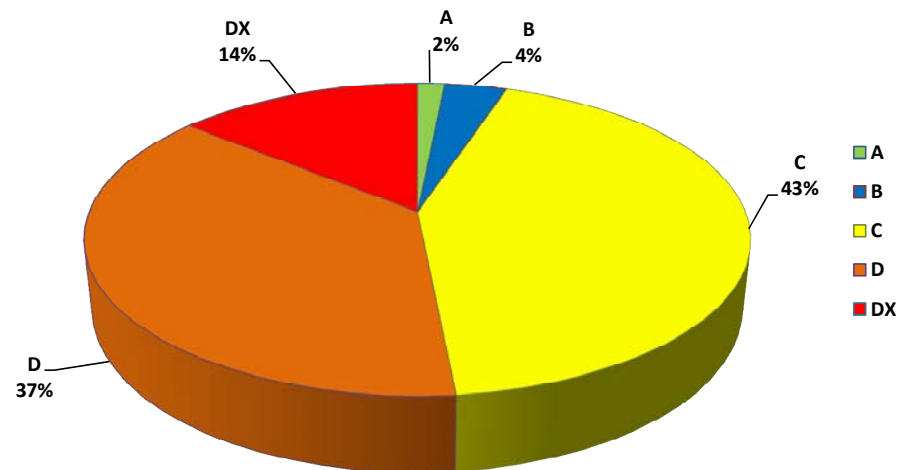
Statutory Standards

- 6.190 All buildings in the estate are subject to ongoing inspection and regulation by statutory authorities. New buildings must comply with Health and Safety Standards and Codes of Practice. However services can continue to be safely and satisfactorily delivered from existing buildings, which predate current standards, if all risks are identified and are proactively managed. ALBs are required to proactively manage such risks to provide a safe environment for the delivery of services. Plans to improve compliance of such buildings, or move to more suitable premises, must always be a priority in the Estate Control Plans for the estate.
- 6.191 The NIFRS return shows that:
- 43% of the estate requires minor investment for upgrading for statutory standards, while 37% requires major expenditure.
- 14% of the estate is either impractical or too expensive to improve.
- 6.192 **Chart F: Statutory Standards comparison with previous report** is shown on page 149.

Chart F: NIFRS **Statutory Standards** comparison with previous report 2015



NIFRS- Statutory Standards 2016



Statutory Standards Definition:

A-Conforms to statutory legislation and is a new building.

B-Conforms to statutory legislation.

C-Does not conform to statutory legislation but is capable of being upgraded to that level with minor expenditure.

D-Does not conform to statutory legislation but is capable of being upgraded to that level with major expenditure.

DX-Does not conform to statutory legislation and improvements are either impractical or too expensive to be tenable.

Results from the June 2016 Estate Returns

7.0 LIST OF DoH ARMS LENGTH BODIES (ALBs)

- Belfast Health and Social Care Trust (BHSCT)
- Northern Health and Social Care Trust (NHSCT)
- South Eastern Health and Social Care Trust (SEHSCT)
- Southern Health and Social Care Trust (SHSCT)
- Western Health and Social Care Trust (WHSCT)
- NI Ambulance Health and Social Care Trust (NIAS)
- Health and Social Care Board (HSCB)
- Public Health Agency (PHA)
- Patient and Client Council (PCC)
- Business Services Organisation (BSO)
- Regulation and Quality Improvement Authority (RQIA)
- NI Blood Transfusion Service Agency (NIBTS)
- NI Fire and Rescue Service (NIFRS)
- NI Guardian Ad Litem Agency (NIGALA)
- NI Medical and Dental Training Agency (NIMDTA)
- NI practice& Education Council for Nursing and Midwifery (NIPEC)
- NI Social Care Council (NISCC)

8.0 Acknowledgements

- Belfast HSC Trust
- Northern HSC Trust
- South Eastern HSC Trust
- Southern HSC Trust
- Western HSC Trust
- Northern Ireland Ambulance Service
- Northern Ireland Fire and Rescue Service