

Joint Capital Resource Use Plan 2024/25

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| Region | South West |
| ICB/System | Somerset |
| Date Published | June 2024 |
| Version | 1 |

Introduction

The Somerset ICS provides healthcare to nearly 600,000 people. The provision of high-quality care in the most appropriate settings is a fundamental strategic aim for the system. This includes the provision of buildings, equipment, and digital technology to ensure this care can be delivered on an ongoing basis. The capital planning for 2024/25 has been undertaken alongside the development of an ICS Infrastructure Strategy. We have worked with partners across the ICS estates and digital groups, and continues the focus and established investment priorities. We have further developed our major investment plans, including the New Hospitals Programme and Electronic Health Records.

We continue to focus on developing infrastructure to support service demands and safety, these have included investment in the Acute hospitals sites in Taunton and Yeovil to support elective recovery, urgent care and the backlog maintenance programme.

Investment in community services continues, specifically in mental health services for both children and adults, focusing on community assets and the continued investment in in patient mental health facilities in Yeovil.

The plans for 2024/25 continue with the priorities of:

- Improvements to Musgrove Park Hospital – the completion of our Surgical Centre, and further work to transform the hospital as part of the national New Hospitals Programme.
- Investment in our digital infrastructure and Electronic Health Records.
- National programme of work in elective recovery
- Investment in Mental Health Services
- Supporting existing estates in backlog maintenance and equipment replacement
- Developing diagnostic services – specifically the community Diagnostic Services in Yeovil
- Community services including dental services
- Supporting capacity within our urgent care services

2024/25 CDEL Allocations and Sources of Funding

Capital Allocations are detailed in the table below:

| | CDEL | ICB | Somerset Foundation Trust | Total Full Year Plan |
|----------|---|-------|---------------------------|----------------------|
| | | £'000 | £'000 | £'000 |
| Provider | Operational Capital | | 30283 | 30283 |
| ICB | Operational Capital | 1007 | | 1007 |
| Provider | 24/25 Revenue Fair Shares Allocation Adjustment | | 6784 | 6784 |
| Provider | CDEL Additional Allocation | | 5000 | 5000 |
| ICB | CDEL Additional Allocation | 5000 | | 5000 |
| | | 6007 | 42067 | 48074 |

| | | | | |
|----------|--|------|-------|-------|
| Provider | Impact of IFRS 16 | | 14524 | 14524 |
| ICB | Impact of IFRS 16 | 0 | | 0 |
| Provider | STP Wave 3 | | 24631 | 24631 |
| Provider | NHP Programmes | | 2037 | 2037 |
| Provider | National Programmes (diagnostics, Front line digitisation, Mental Health, TIF) | | 7147 | 7147 |
| | Total System CDEL | 6007 | 90406 | 96413 |
| Provider | Other (technical accounting) | | 1917 | 1917 |
| Provider | Planned Overspend (within 5%) | | 1457 | 1457 |
| | Total Planned Spend | 6007 | 93780 | 99787 |

Capital Prioritisation and Planning

The capital investment plan for the year has been developed in response to the clinical strategy for the ICS and within available resources. As there is only one Foundation Trust in the ICB, with co-terminus geographical boundaries, this makes the prioritisation process relatively straightforward, with specific allocations made for continued investment in GP information technology and an allocation for Primary Care facilities. The remaining capital envelope is allocated to ongoing and agreed plans within Somerset NHS Foundation Trust.

The Foundation Trust component of the plan has been developed following proposed requests and discussion with operational and clinical managers and takes into consideration the capital funding constraints faced by the system. The plan also includes strategic investments that are funded from the Department of Health and Social Care.

The plan has been approved through the Trust Board. The table below identifies the key areas of programme expenditure.

| Areas of Capital Expenditure | £'000 |
|---|----------------------|
| Musgrove Park Hospital Surgical Centre | 24,631 |
| Yeovil District Hospital 5th Theatre and Modular Ward | 8,669 |
| New Hospital Programme Planning and Enabling | 2,037 |
| Mental Health and Community Schemes | 2,500 |
| Digital, IT & Electronic Health Record | 13,365 |
| Backlog Maintenance and equipment | 13,605 |
| Infrastructure Improvements | 4,273 |
| ICB Capital Schemes | 6,007 |
| Smaller Schemes | 3,392 |
| Bonus Capital Schemes | 6,784 |
| Leases renewals | 6,524 |
| Yeovil Diagnostic Centre | 8,000 |
| Total | <u>99,787</u> |

Overview of Ongoing Scheme Progression

The key funded investments that will progress this year are the Yeovil District Hospital elective recovery investment and the Surgical Centre on Musgrove Park Hospital Site. The YDH elective

recovery investment includes an additional theatre and modular ward. The Surgical Centre at MPH will include new theatres and critical care facilities. Work on both schemes is progressing after several years of planning and design work.

The New Hospital Programme scheme at Musgrove Park Hospital continues to be developed. This national programme should confirm the next stages of this scheme over the coming months. The early enabling works are scheduled to commence this year subject to national approvals.

The main locally funded investments include the completion of the Rowan ward project at Summerlands Hospital Yeovil, and the Yeovil Community Dental Centre. Construction of the Rowan ward project is well progressed and should complete later this year and enable the move of St Andrews ward for adult mental health inpatients over to the Summerlands site. The Yeovil Community Dental Centre will require local approvals, and works should commence in early Summer and be complete by the end of the financial year.

The Ambulatory Breast Care unit at Yeovil, largely financed by donated funds, will complete construction this financial year.

We are developing plans to further invest in our community mental health facilities.

The investment in GP IT services will continue as will the development of the Outline Business Case for a unified health record (EHR) in Somerset FT.

The Yeovil Diagnostic Centre is under construction, and due to complete in the autumn of 2024.

Risks and Contingencies

The key risks associated with the capital programme as follows:

- Delivery risk of the programme: there continues to be challenges in the UK construction market in respect to inflation and supply chain shortages. These may impact on the overall programme particularly in respect to larger investments.
- Clinical, regulatory and delivery risk associated with the physical estate, digital estate and associated equipment: The programme has been assessed based on current commitments and high-risk backlog and equipment replacement. There is however limited contingency and risk for any emergency items. Should a significant requirement arise in year this would require a reprioritisation or delay of existing schemes.
- Operational pressures: a number of programmes will require access to clinical areas to undertake essential maintenance and upgrades. Should the current high level of occupancy and clinical pressures continue this will impact on the ability to deliver the overall programme.
- Capacity pressures across multiple teams within the organisations that make up the ICB means that it is difficult to progress and complete major projects.

Business Cases in 2024/25

There remains the possibility that the Musgrove Park New Hospital Programme scheme will progress to the next stage of planning this coming year and that a Strategic Outline Case will be submitted to the ICB for approval and support.

The system is developing business cases to implement an electronic health record system across the integrated Foundation Trust.

Cross System and Collaborative Working

Somerset NHS Foundation Trust is the largest NHS partner in the ICB. It works with Somerset ICB to develop the system capital plan. The ICS Strategic Estates Group plays an important role in the co-ordination of the capital plan and future capital planning, involving partner representatives from across

the system. The relative simplicity of the system allows for an ongoing dialogue with partners, and the opportunity for all partner organisations to contribute.

Net Zero Carbon Strategy

Many of our facilities across our public estate in Somerset are old and inefficient. Our ICS Green Plan, and the organisational sustainability plans which feed into it, address Net Zero as a whole. A large part of this is making sure that our estate is as energy efficient, sustainably developed and environmentally friendly as possible. As we develop new buildings and renovate old ones, we will also be able to contribute to the Net Zero agenda more broadly by recognising the importance of an estate which promotes joined up and sustainable travel for patients. This emphasises the importance of working in partnership across our region to ensure our Estate Strategies are robust and enable system wide resilience.

We have set out nine core aims across the ICS to drive us to our net zero carbon target. Some of these relate directly to our estate, whereas others are more peripheral. The aims are aligned to the Estates Net Zero Carbon Delivery Plan and underpinned by the ICS Strategic Aims.

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|---|---|
| A green whole organisation approach | Raise the profile and understanding of sustainability within the trusts. |
| Net zero carbon buildings | Achieve net zero carbon for all energy use in buildings across our ICS estate |
| Reducing waste generated by our services | Reduce waste and implement the principles of the circular economy within the trusts and our supply chain. ICS Members will strive to achieve zero waste to landfill for non-clinical waste by 2030 |
| Reducing emissions from travel | Reduce our impact on local air quality through travel and transport. : The carbon emissions from ICS-controlled transport ¹⁸ will be net zero by 2040 with a minimum 80% reduction in carbon emissions by 2030 |
| Green anaesthesia and other medicine | Reduce CO2 emissions associated with anaesthetic gases, inhalers and other medicines. Tackling overprescribing as set out in the Somerset Medicines Green Carbon Footprint Strategy, by moving more towards social prescribing and nature-based interventions and activities. |
| Working with our supply chain | Work with our supply chain and Quality Improvement to reduce single use plastics and identify suitable items for re-use or re-manufacturing. |
| Sustainable catering and diets | Reduce overall food waste and ensure the provision of healthier, locally sourced, minimally processed foods and seasonal menus. |

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| Transformation to digital healthcare | Embed net zero principles across all clinical services especially through digital transformation. Review care pathways and opportunities to increase digitisation of services and minimise patient travel |
| Adaptation to the impacts of climate change | Mitigate the effects of climate change and severe weather conditions. All ICS members to have a climate change adaptation plan by 2024. |

System CDEL

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