



Doncaster and Bassetlaw
Teaching Hospitals
NHS Foundation Trust

Estates and Facilities Operational Management Policy

This procedural document supersedes: CORP/FAC 15 v.1 – Estates and Facilities Operational Management Policy



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Amendment Form

Please record brief details of the changes made alongside the next version number. If the procedural document has been reviewed **without change**, this information will still need to be recorded although the version number will remain the same.

Version	Date Issued	Brief Summary of Changes	Author
Version 2	June 2026	<ul style="list-style-type: none"> • Change of Executive Sponsor. • Updated section 4.2 - Customer Services Helpdesk telephone contact number. • Renamed Capital Services to Capital Infrastructure. • Updated Appendix 1 – Estates & Facilities Management Structure. • Added a separate E&F Capital Infrastructure structure (Appendix 2). • Amended 4.4 - Facilities Services section. • Amended 4.7 - Medical Technical Services (MTS) section. • Amended 4.8 - Estates Reactive Maintenance section. • Amended 4.9 - Planned Preventative Maintenance (PPM). 	Sean Tyler
Version 1	12 July 2022	This is a new procedural document, please read in full.	Sean Tyler

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1 INTRODUCTION

Doncaster & Bassetlaw Teaching Hospitals NHS Foundation Trust (Referred to as 'The Trust') is required to clearly define policies and procedures for their premises under its control. Through this Estates and Facilities Operational Management Policy, Estates and Facilities contribute to providing a safe, high quality Healthcare environment for the Trust's patients, staff and visitors.

This policy is intended to represent a clear undertaking by the Estates, Facilities and the Medical Technical Services (MTS) for the Estates and Facilities Directorate to carry out a range of specified services to the standard and level detailed in this document.

This policy has been designed to reflect the working relationship that exists between the Estates and Facilities Directorate and its end users and stakeholders. It is anticipated that this document will supplement the Estates and Facilities activity and services to the Trust and act as assurance on the matters in which end users and stakeholders receive the activities and services.

This policy provides guidelines to cover: -

- A clearly defined Estates and Facilities Operational Management Policy (this Policy)
- Qualitative statements about the services to be provided.
- Programmes for continuing improvement in delivering those services.
- The framework, constraints and boundaries within which those services are delivered.
- The organisation, roles and responsibilities of Estates and Facilities directorate staff and resources to provide those services.
- The means of measuring and monitoring the efficacy and efficiency of the Estates and Facilities Department; and to assure value for money, to regularly review the scope and definition of provided Estates and Facilities Directorate services within a healthcare environment.

It also serves as a Policy detailing the Trusts requirements of those contracting companies employed under Service or Maintenance contracts. This document shall be issued to all contracting companies as a part of their approval process and available by request from the Trust in electronic format.

Contracting companies are expected to ensure that all personnel under their employ who are to be engaged on Trust maintenance work are trained on the requirements of this policy. Non-compliance with Statutory Regulations or with Trust policies by a contracting company or any of its employees shall lead to the suspension of operations at no cost to the Trust.

Nothing within this Policy and Procedure is to be construed as relieving a Contractor of any of his Statutory obligations under the Health and Safety at Work Act 1974, the Management of Health and Safety at Work Regulations 1999, or any other current and relevant Legislation, Regulations or Approved Codes of Practice.

2 PURPOSE

This Policy will provide the Trust with clear statement of intent by the Estates and Facilities Directorate.

- Treat all end users and stakeholders (patients, visitors, staff and contractors) equally and with respect and courtesy.
- Inform end users and stakeholders promptly where service requirements or deadlines will not be met and the remedial action which will be taken.
- Employ or source sufficient staff to ensure that the services are always provided. Estates, Facilities and MTS regularly reviewed, and those sufficient resources are available to meet the service requirements.
- Employ such persons as are competent, skilled and capable of the duties required of them and must ensure that every such person is properly and sufficiently trained and instructed to carry out the services to be performed. Inform end users and stakeholders when work is to be carried out and provide a programme of works where applicable.
- Provide to the end users and stakeholders timely, accurate and up to date advice and information as and when required on all matters covered by this policy.
- Ensure that all staff are aware of and trained/instructed on all relevant rules,
- Policies, procedures, and standards of Doncaster & Bassetlaw Teaching Hospitals NHS Foundation Trust.
- Provide each member of Estates, Facilities and MTS staff with a form of identification, which staff shall always display on their clothing when they are at work.
- Ensure that its staff do not disclose to any person (other than a person authorised by the Trust) any personal information acquired by them in connection with the service.
- Protect personal data in accordance with the provisions and principles of Data Protection and the Caldicott Report and ensure compliance with the Trust's
- information security arrangements. It must also ensure the reliability of its staff who have access to any personal data held by the Trust. In addition, if Estates, Facilities and MTS are required to process personal data held by the Trust, all such personal data will be always kept secure.
- Ensure that Estates, Facilities and MTS staff do not disclose to any person any commercial in confidence information acquired by them in connection with the service.
- Ensure that Estates, Facilities and MTS staff are utilising personal protective equipment where appropriate.

Estates, Facilities and MTS is provided to deliver.

- The service is delivered using a mix of in-house skills, subcontract and specialist subcontract resource.
- Service support includes Helpdesk using bespoke Facilities Management Software (Planet FM) and a Computer Aided Facilities Management (CAFM) system.

- The service is provided from 0800hrs – 1600hrs Monday to Friday excluding bank holidays with 24-hour call-out facility for emergencies at all other times.
- Technical expertise is available from qualified professional staff from a range of construction, building, Technical and engineering backgrounds.
- The Estates, Facilities and MTS will manage all contractors on the trusts sites through policies and procedures, to enable good control and audit of contractors.
- Method statements and risk assessments will be in place when required and the contractor will be managed by an appropriate Estates Directorate Officer or Manager.

This policy outlines the guidelines, regulations, and duty of care for all Contractors undertaking service work on Trust property.

Nothing in these guidelines absolves Contractors or their respective Sub-Contractors, their employees and the self-employed from their duty to comply with all relevant Health and Safety legislation.

3 DUTIES AND RESPONSIBILITIES

A management structure with defined roles and responsibilities is in place. Single points of contact will be maintained for directors and premises managers. Regular on-going performance monitoring will be undertaken, designed to identify improvements to facilitate the service. The Management structure is provided in [Appendix 1](#).

3.1 Trust Board

The Trust Board has a generic responsibility for all aspects of Health & Safety. Contractors working on Trust property pose a significant risk and the Trust Board, therefore, has a responsibility to ensure that there is an approved Policy for the Operational Management and is available to minimise that risk.

3.2 Chief Executive

The Chief Executive is responsible for ensuring that there is a suitable management structure in place to manage the Estates & Facilities Operational Management Policy and its associated procedures. Responsibility for this is delegated to the Operational Director of Estates and Facilities.

3.3 Director of Infrastructure

The Director of Infrastructure is accountable to the Chief Executive and Trust Board for ensuring that all who undertake work in connection with the maintenance of Trust's assets do so in accordance with the requirements set out within this policy. They are also responsible for ensuring services provided by external providers are appropriate, effective, efficient, safe and compliant with current statutory Legislation, Regulations and NHS Good Practice Guidance including Health and Safety and +Infection

Prevention and Control and that the risks are identified and managed as part of the Trust Governance Framework.

3.4 Operational Director of Estates and Facilities

The Operational Director of Estates and Facilities is accountable to the Director of Infrastructure for ensuring that this policy and appropriate procedures and systems are in place to ensure that all staff and contractors' activities are conducted safely and in compliance with current legislation, regulations and good practice.

The Operational Director shall ensure the Director of Infrastructure is kept informed at reasonable time intervals as to the effectiveness of the arrangements for the Management of Operational Services and shall report any serious deviations to and when they arise. The Operational Director of Estates and Facilities shall ensure that regular audits are undertaken regarding the Estates and Facilities Operational Management Policy, including regular checks on adherence to the Trust Policies and Procedures.

The Operational Director shall ensure an approved Contractors list is maintained, which will define all specific Contractors who provide services and maintain trust assets.

3.5 Heads of Estates / Facilities / Capital Infrastructure / Compliance / MTS

The Heads of Estates/ Facilities/ Capital Infrastructure / Compliance/ MTS are responsible to the Operational Director of Estates and Facilities for ensuring that this policy and appropriate procedures and

systems are in place to ensure that all staff and contractor's activities are conducted safely and in compliance with current legislation, regulations and good practice.

3.6 Managers or Leads of Estates / Facilities / Capital Infrastructure / Compliance / MTS

The Estates / Facilities / Capital Infrastructure / Compliance/ MTS Managers and Leads are responsible to the Heads of Estates / Facilities / Capital Infrastructure / Compliance/ MTS for ensuring that this policy and appropriate procedures and systems are in place to ensure that all staff and contractors' activities are conducted safely and in compliance with current legislation, regulations and good practice.

Estates / Facilities / Capital Infrastructure / Compliance/ MTS Managers and Leads hold the day-to-day management responsibility for ensuring that all staff and contractors carry out their duties in the Trusts Service's and Maintenance activities and, as such, carry a responsibility to be aware of, and

familiar with the Estates and Facilities Operational Management Policy. They should make every endeavour to ensure that they, and staff under their control, comply with the relevant documentation.

They all hold a responsibility to ensure that specific work undertaken by their Staff and Contractors under their control is undertaken safely and in accordance with applicable legislation regulations and good practice and will: -

- Plan, organise, lead, monitor and control all activities undertaken by directly employed staff and service contractors.
- Ensure that suitable and sufficient communication occurs between the Directorate's Operational function and service recipients and other key stakeholders, such as the Infection Prevention and Control Team (IPCT).

It is the responsibility of the person commissioning or managing the contractors to ensure that meetings are held prior to the start of any work. During the meeting the contractor must provide details of how they intend to carry out any work and the risks associated with that work, to ascertain whether any precautions need to be taken before or during the work. Permit to work systems may be required for some types of work, these methods of work must be agreed and documented prior to commencement of the work.

Each manager in areas where contractors are working must be made aware of any hazards and risks presented by the work and relevant safety measures, as well as ensuring contractors are made aware of risks that may be present in the area they are working.

Where there is the potential for the work to impact on the delivery of patient care or where the work takes place in the proximity of a clinical area, advice must be sought from the Trust Infection Control Team. Any deviations from planned work programmes or delays in reactive work, other than those of a minor nature, will be reported to the Operational Director of Estates and Facilities and the Head of Capital Infrastructure and, if appropriate, directly to the relevant specialist team (Fire Officer, IPCT etc.). The Estates and Facilities Managers will review the program of work annually.

3.7 Estates Officers and Facilities Supervisors

Estates Officers and Facilities Supervisors hold the day-to-day responsibility for ensuring that all relevant Services and Maintenance is planned and satisfactorily completed, either by their direct staff team or by contractors under their control, in a timely manner. They will arrange all necessary actions to remedy any faults or deficiencies found during these activities. Where appropriate, the Estates and Facilities Managers will be notified and informed of any remedial action taken.

3.8 Sustainability and Energy Management

Sustainability and Energy Management is responsibility of the Operational Director of Estates and Facilities and Head of Estates. They are responsible for monitoring and reporting of energy and utilities

consumption, expenditure and for improving the operating efficiency of the estate in matters of site infrastructure, building fabric, and mechanical and electrical systems.

The Head of Estates has direct overall responsibility and accountability for the Building Management Systems and any systems controls affecting the energy or utility consumption of a building facility.

Accountable to the Director of Infrastructure, the Operational Director of Estates and Facilities is responsible for producing the Green Plan which includes the Energy and Carbon Management Strategy and forms part of Sustainable and Site Development Management Plans.

The Green plan can be viewed on the trust intranet or in the d:/

The Sustainability and Energy Management will provide all necessary data for any NHS returns such as Estates Returns Information Collection (ERIC).

The Operational Director of Estates and Facilities and Head of Estates review all design and proposed changes to site infrastructure that affects Energy and Utility consumption, including insulation, heating and cooling systems linking directly to the correct operation of the BMS and Energy controls and equipment.

3.9 Estates Authorised/ Competent Persons

Where a Trust employee is deemed to be undertaking 'Authorised Person' or 'Competent Person' duties under the definition of either legal or Health Technical Memorandum (HTM) procedures, the individual will be suitably trained, qualified, experienced, knowledgeable and can demonstrate specific skills in the service being provided.

The Authorised Person will be required to be assessed – or deemed to be competent by the Authorising Engineer. An Authorised or Competent Person could be an appointment made to a contractor or contractor organisation. An Authorised or Competent Person is not simply deemed to be Authorised or Competent by virtue of being employed by an approved contractor organisation.

3.10 Authorising Engineers

Authorising Engineers (AEs) are independent of the Trust and are appointed by the Chief Executive. The AE will independently audit the effective implementation of the safe systems of work against identified within guidance Health Technical Memorandums (HTM) Suite of documentation and provide an annual audit report to Operational Director of Estates & Facilities.

Included in the audit the AE will assess the suitable and sufficient adequacy of: -

- Staff competencies and training AP's and CP's.
- Appropriate maintenance schedules and records (including drawings).
- Review the electronic operation and maintenance manuals.
- Current Risk assessments and action plans.
- Program of Improvement works.

- Trust Safety procedures.
- Permits to Work and Method Statements Suitability and state/condition of plant and equipment.
- Reporting procedures and safety alerts actions and records.
- Assessing and recommending appointments of APs.
- Other fire Safety issues that are deemed relevant by the AE.

A list of AEs (where appropriate) against relevant disciplines can be obtained from the Head of Estates or Head of Compliance.

3.11 Transport and Car Parking Contract Manager

The Transport and Car Parking Contract Manager is responsible to the Head of Compliance and Manages the Fleet and Logistics services on be-half of the Trust. The Transport Manager and Car Parking Contract will ensure that all drivers and logistics staff activities are conducted safely and in compliance with current transport legislation, regulations, and good practice and that this Policy and appropriate procedures and systems are in place.

The Transport and Car Parking Contract Manager is responsible for overseeing the car parking contract with external company Saba to ensure smooth running of the service, ensuring compliance with contract KPI's through monthly contract meetings.

3.12 Estates and Facilities Service Contract Managers

The service contracts Managers are responsible to the service Leads to monitor the performance of the contracts and contractors and report any deviations from the contract specification either Financial or Performance terms.

These contracts include the following services: -

- Catering Service Contract.
- Laundry Services Contract.
- Decontamination Services Contract.
- Security & Car Parking and Smoking Enforcement Services Contract.
- Waste Management Contract.
- Pest Control Contract.

3.13 Other Staff

All employees who may be required to organise, work alongside, or assist contractors have a responsibility to co-operate with their line manager in using the Trust's Estates and Facilities Operational Policy and to participate, where required in any relevant training.

All staff have a duty to look after their own safety and that of others affected by their acts or omissions and therefore must co-operate with management in following agreed procedures when contractors are undertaking work on behalf of the Trust.

3.14 Health and Safety Advisor

The Health and Safety Advisor will work closely with those responsible for the Estates and Facilities Operational Management Policy in the provision of advice and practical assistance in all matters for health and safety.

3.15 Fire Safety Advisor

The Fire Safety Advisor will work closely with those responsible for the Estates and Facilities Operational Management Policy in the provision of advice and practical assistance in all matters relating to Fire safety.

3.16 Local Security Management Specialist

The Local Security Management Specialist (LSMS) will work closely with those responsible for the Estates and Facilities Operational Management Policy in the provision of advice and practical assistance in all matters relating to Security and Violence, Prevention and Reduction Management.

3.17 Infection, Prevention and Control Team

The Infection, Prevention and Control Team is responsible for providing advice on matters relating to infection, prevention and control and the risks which could arise as a result of construction work in clinical areas. The Infection, Prevention and Control Team will be responsible for performing audits in clinical areas during the construction/alteration work to ensure that the highest standards of infection, prevention and control are maintained throughout the work.

3.18 Contractors

Contractors are responsible for ensuring compliance with all Health and Safety procedures and legislative requirements. Contractors working on premises leased to another Trust must, in addition to the procedures set out in this policy, also follow any relevant Health and Safety Management policies of the occupying Trust. Non-compliance with any of these policies may result in termination of the contract. Contractors must also ensure that they do not interfere with the day-to-day operation of the departments or site.

All contractors, whether visiting or working on any of the Trust's properties, must ensure their employees register through the SkyVisitor system and be issued with the appropriate contractor pass or Permit to Commence Work.

Additional permits exist for different types of work activities on specialist or hazardous equipment or systems. The Trust Representative responsible for a given project/work will, under normal

circumstances, be the first point of contact for any necessary permits and for any issues associated with the work.

Risk Assessments, Method Statements, and Safe Systems of Work are the responsibility of the contractor and must be uploaded to the SkyVisitor portal, unless the work is being carried out jointly with Trust personnel. In such cases, the safe system of work must first be approved by the Trust's representatives.

If the main contractor intends to use subcontractors or self-employed individuals to provide services to the Trust, these must also be registered via SkyVisitor, follow all instructions required by the Trust, and be approved by the Trust, unless this is part of a capital works and the main contractor is responsible for the works.

The contractor must also ensure that their activities do not endanger members of the public or Trust employees working in the location of the works and must report all accidents or incidents to the relevant member of the Estates and Facilities Compliance Team.

4 PROCEDURE

4.1 Service Delivery

Within the Trust the Key areas to ensure the delivery of high-quality services which are as follows: -

- Customer Services Helpdesk (see section 4.2 below).
- Service Contracts.
- Additional / Minor Works
- Delivery of monthly, quarterly and annual performance monitoring.
- Assist in the management of electronic filing of all estates technical service reports for all critical and key building services.
- Estates and Facilities Information, Labour and asset Management System (Planet FM)
- Reactive Maintenance, this element is a repair service actioned normally by Estates and Facilities Management staff or user departments and comprises of Emergency repairs (Priority 1), Urgent repairs (Priority 2) and Routine repairs (Priority 3)
- Planned Preventative Maintenance (PPM), this element avoids breakdown of crucial plant and equipment, maintains safety standards and statutory compliance and enables activities to be planned, thus keeping disruption to services to a minimum.

4.2 Customer Services Helpdesk

The Estates and Facilities infrastructure shall provide an effective, flexible and efficient Helpdesk Service which forms part of Customer Services through normal working hours. Monday to Friday 08:00 – 16:00hrs excluding Bank holidays. The helpdesk can be contacted by phone on 01302 644111 to log

emergency and urgent job, giving details of exact location (which can be found on the door sticker) and giving as much information as possible.

The department has a 24/7 on-line helpdesk service for Non-Urgent Calls which can be accessed via the Hive intranet site by selecting 'Log an Estates Job'.

Helpdesk can also be contacted via e-mail for Non-Urgent jobs to be logged or for general enquires at dbth.estateshelpdesk@nhs.net.

All Jobs logged on the Trust CAFM system 'Planet FM' will generate an e-mail to the caller confirming the call and again when the call has been closed. There is a link on this e-mail for callers to leave feedback regarding the service Estates & Facilities have provided.

The Trust operates an emergency 'on call' system for out-of-hours emergencies that is accessed via the switchboard. Switchboard will pass the call on to an Estates and Facilities on-call Manager for action.

4.3 Estates and Facilities Compliance Team

The Estates and Facilities Compliance Management team provide detail of the Performance and information for all sections within the Estates and Facilities function.

The Directorate has the responsibility to provide Health & Safety, Fire Safety and Security Management advice to the other Divisions and Directorates.

Transport Fleet and Logistics Management and Car Parking contract are also managed under the Compliance Management Team.

The Compliance Management team are responsible for ensuring suitable systems and processes are in place to provide assurance to Trust Board of Directors of compliance with all Statutory, Regulatory and NHS requirements where appropriate.

The Compliance Management team is responsible for the completion of the Premises Assurance model (PAM) with co-operation and information provided from all functions within the Estates and Facilities Directorate and identified stakeholders.

The Compliance Management team is responsible for gathering and collating Estates and Facilities Estates Returns Information Collection (ERIC) Returns and submission to NHS England (NHSE).

The Compliance Management team is responsible for the development of specialised policies and procedures for all compliance services for the Estates and Facilities Directorate following the Trust approved format, ensuring policy and procedure implementation following Trust policy approval.

4.4 Facilities Services

The Facilities Management Team is responsible for managing the various facilities services across the Trust. These services are delivered through a combination of in-house teams and external contractors. Performance across all service areas is monitored and reported quarterly via the Estates and Facilities Performance Report and monthly at Performance Review Meetings (PRM's).

- **Catering Services**

Catering is delivered via an agreed contract by Sodexo. The service is contractually monitored and overseen by the Facilities Lead based at Bassetlaw Hospital.

- **Cleaning and Deep Cleaning**

Cleaning services are provided in-house managed by the Facilities Lead via the Facilities Manager and Facilities Coordinators. Performance is monitored through regular cleanliness audits at each site and reported quarterly.

- **Portering Services**

Portering is provided in-house and managed by the Facilities Lead via the Facilities Manager and Facilities Coordinators. The service is supported by the TeleTracking automated system, which allows stakeholders to log movement requests and provides performance data on patient and item transport tasks.

- **Laundry and Linen Services**

This service is outsourced to an external contractor and managed by the Facilities Manager. DRI - Clean linen is delivered in bulk and distributed internally by the Facilities Team. Soiled linen is collected and transferred to a central location for collection and reprocessing. A dedicated Laundry Supervisor ensures service users have a point of contact and access to emergency supplies when needed.

BH & MH - Clean linen is delivered as a pack to ward service. Linen supplies and distribution is managed by Facilities colleagues, supported by a supervisor based at DRI.

- **Post Room Services**

Managed in-house by the Facilities Management Team under the direction of the Facilities Lead.

- **General Administration**

Estates and Facilities administrative functions are overseen by the Facilities Leads and Managers.

- **Waste Management**

Waste disposal—including confidential, clinical, domestic, sharps, and cytotoxic waste—is managed under contract arrangements with Sharpsmart, Veolia and Shred It. The contractors provide all associated equipment and collection services for their respective waste streams. A

dedicated Waste and Sustainability Manager within the Facilities Team oversees contract performance.

- **Accommodation Services**

The Trust's accommodation booking service is managed by the Facilities Team through a designated Accommodation Officer. Occupancy data is reported quarterly to the Trust Board via the Estates and Facilities Performance Report and monthly PRM meetings.

- **Premises Assurance Model (PAM)**

The Facilities Services Team input relevant data into the Premises Assurance Model (PAM).

4.5 Estates Operational Services

The Estates Operational Services is provided in the following framework: -

- The service is delivered using a mix of in-house skills, subcontract, and specialist subcontract resource.
- Service support includes Helpdesk using bespoke Facilities Management Software (Planet FM).
- The service is provided from 08:00 to 16:00 hours Monday to Friday excluding bank holidays with 24-hour call-out facility for emergencies at all other times.
- Technical expertise is available from qualified professional staff from a range of construction, building, engineering and service backgrounds.
- The Estates Department will seek to manage all contractors on the trusts sites through policies and procedures, to enable good control and audit of contractors. Method statements and risk assessments will be in place when required and the contractor will be managed by an appropriate Estates Manager or Officer.
- Ensure systems and assets are maintained, meeting legislative requirements and in accordance with all HTM's HBN'S and any other relevant guidance issued by Department of Health.
- Estates Operational Services input data into the Premises Assurance Model (PAM).

4.6 Capital Infrastructure

The Capital Infrastructure Team is a project management function with no internal design capability. The team is therefore made up of project management personnel and other external advisor's dependent upon the stage of each project. The delivery of the service is provided through the following framework: -

- The Head of Capital Infrastructure will author and implement the process and determine appropriate resourcing in order that the requirements of the process can be achieved within the overall mission statement and goals of the team and the wider Estates and Facilities function. To carry out a periodic review of the process in order to update in connection with changes in delivery or any other financial or quality related issues.
- The Head of Capital Infrastructure will appropriate the requisite staffing in order to deliver the schemes to include the appropriate design delivery teams, which will be chargeable to each

project, including architect, mechanical and electrical design, quantity surveyors, structural engineers, principal designers and clerk of works etc.

- Funding will be set aside annually to assist in the delivery of feasibilities in connection with approved Capital Infrastructure Initiation Documents (CPIDs) including architectural support and cost advice (QS) for budgetary purposes.
- Further QS support will also be required to assist with monthly cash flow and potentially accruals depending upon the volume of work at the time.
- Ensure systems are designed, constructed, commissioned and handover, meeting the most recent legislative requirements and in accordance with all HTM's HBN'S and any other relevant guidance issued by Department of Health.
- Capital Infrastructure Team will deliver capital schemes and carry out other support works, to deliver feasibility and cost advice to our Trust's Divisions and Departments.
- Capital Infrastructure input data into the Premises Assurance Model (PAM).

4.7 Medical Technical Services (MTS)

Medical Technical Services manage the medical devices for the Trust. The MTS service is provided by an in-house team of Medical Engineers/ Technicians and external contactors for specialised medical equipment. Contracts are managed in conjunction with the procurement department with the exception of medical devices Imaging and Cardio-Respiratory departments, the service provided is as follows: -

- Medical devices maintenance contracts via the Procurement department.
- Medical Equipment Library (MEL).
- Medical Equipment Planned Preventative Maintenance (PPM).
- Medical Equipment Inspection Preventative Maintenance (IPM).
- Medical equipment Reactive Maintenance.
- Procure/management of medical gases contracts.
- Procure/management contract for AE (D) services.
- Manage the Trusts Medical Devices Safety Office and the flow of MHRA alerts and manufacturers Field Safety Action Notices throughout the Trust.
- De-contamination Services (Steris).

The Management of all medical device contracts are monitored via an Excel spreadsheet; this is managed on a continual basis by the departments Administrative Lead in close co-operation with Procurement.

All work that a contractor undertakes is recorded on Helpdesk using bespoke Facilities Management Software Planet Enterprise asset management system database and reported Quarterly in the Estates and Facilities Performance report.

Quarterly/annual review meetings are carried out with contractors where the contract is of a large value.

The MTS Chair and Co-chair a number of Management Groups within the Trust as follows: -

- Chair the Medical Devices Management Group (MDMG) that oversees the management/governance of medical devices and manage the standardisation of medical devices.
- Co-Chair the Medical Equipment Group (MEG) that oversees the capital spend on medical devices throughout the year.
- Co-Chair the Trusts Medical Devices Decontamination Group (MDDG) that oversees cleaning/decontamination of medical devices and provide the Trusts Approved Person (Decontamination) (AP(D)).

The MTS Management is the author of the Trust's Medical Devices Management Policy and the Medical Gas Pipeline Policy.

MTS input data into the Premises Assurance Model (PAM) for medical devices and decontamination.

4.8 Estates Reactive Maintenance

The Trust's Reactive Maintenance is recorded and managed through the Helpdesk using bespoke Facilities Management Software (Planet FM) and a Computer Aided Facilities Management (CAFM) system. All reactive tasks are categorised on a priority basis as follows:

- **Priority 1: Urgent – Patient Areas**
For emergency jobs in patient care areas. Examples include total loss of electricity, flooding, fire alarm failure, or any breakdown/occurrence that makes it impossible to safely treat or look after a patient. These are high-risk health and safety issues where delay could cause serious harm or endanger security.
- **Priority 2: Urgent – Non-Patient Areas**
For urgent jobs outside of patient areas. Examples include health and safety issues, disruption to operational activity, minor electrical failures, heating or hot water system breakdowns, minor floods, roof leaks, or security risks such as vandalism or break-ins.
- **Priority 4: Non-Urgent – Patient Areas**
For non-urgent jobs in patient areas. Examples include repairs or minor works which, while not immediately critical, could affect patient comfort or the delivery of services if left unresolved.
- **Priority 5: Non-Urgent – Non-Patient Areas**
For non-urgent jobs in non-patient areas. Examples include repairs of a more superficial nature, low-risk issues, or minor new works.
- **Priority 6: Minor Works**

For small, low-complexity jobs that are non-urgent in nature and do not impact immediate service delivery but are still necessary for site upkeep.

4.9 Planned Preventative Maintenance (PPM)

Planned Preventative Maintenance is managed via the Helpdesk using bespoke Facilities Management Software (Planet FM) and a Computer Aided Facilities Management (CAFM) system. All PPM activities are assessed on a risk basis.

The PPM system ensures statutory and mandatory obligations are met and is designed to provide the most cost-effective method of maintaining buildings, plant, services, and equipment to maximise their economic life. PPM is undertaken in line with Health Technical Memorandums (HTMs) and customer requirements.

PPM priorities are categorised as follows:

- **Priority 3: Statutory/Mandatory PPM**
PPM tasks required to meet statutory or mandatory regulations (e.g. legal, health and safety, MHRA, HTM requirements).
- **Priority 7: Non-Statutory PPM**
PPM tasks that are not statutory or mandatory but are required to support service delivery or customer requirements.

The PPM programme will be reviewed annually by the Estates, Facilities, and Medical Technical Managers to ensure all statutory, mandatory, and customer requirements are covered. Any gaps in the PPM programme will be identified and recorded on the Departmental or Divisional Risk Register. Where risks are significant, they will also be escalated to the appropriate governance committee.

All Estates, Facilities, and MTS staff and/or contractors undertaking PPM or reactive work must follow safe systems of work at all times. This includes compliance with infection prevention and control policies and procedures. Staff will receive regular infection prevention and control training and be fully trained in safe working practices within clinical environments. Records of training will be maintained on personal files and on the Estates and Facilities Personnel Risk Register.

4.10 Performance Monitoring

Performance monitoring within Estates and Facilities (E&F) is undertaken using a range of quantitative and qualitative sources. The primary source is weekly performance data drawn from the Computer Aided Facilities Management (CAFM) systems used across E&F, including Planet MRI, Teletracking, BackTraq and Micad. This data is routinely reviewed to assess service delivery, compliance, responsiveness and overall performance.

Performance is also monitored through regular engagement and communication, including scheduled liaison meetings, departmental meetings, day-to-day operational contact with service users, and

formal service-contractor performance meetings held on a monthly, quarterly and bi-annual basis. These forums provide additional assurance, enable issues to be identified at an early stage and support continuous service improvement.

In addition, E&F produces internal monthly performance reports which are reviewed as part of the E&F Performance Review Meetings. Bi-annual performance reports are also submitted to the Finance and Performance Committee (F&P). These reports are based on the key performance indicators identified in Appendix 3. A consolidated quarterly Estates and Facilities Performance Review Meeting (PRM) report is produced using this data and is presented to the Trust Executive Team at the quarterly Executive PRM meetings.

4.11 Financial Management

Estates and Facilities staff operate under the Trusts Standing orders CORP/FIN 1(A) and the Trust's Standing Financial Instructions CORP/FIN 1(B).

Authority and delegations

Capital Investment	Building work, equipment, software etc.
Up to £100k Executive Director or Divisional Director must be approved by Capital Control Group or Medical Equipment Group	Equipment Group and be in accordance with the Capital Projects Framework

Tendering Process		
Organising tender	Head of Procurement, Operational Director of Estates and Facilities, Head of Capital Infrastructure.	
Receiving tenders	Chief Finance Officer	
Opening and recording tenders	Executive Director designated by the Chief Executive. All tenders to be sent and received via the e-tendering platform 'Atamis'.	
Adjudication decision	Head of Procurement, Operational Director of Estates and Facilities, Head of Capital Infrastructure.	The award should be based on Price and Quality of the compliant tender. The Amount (£) Delegated to Capital Project Manager. Adjudicating managers shall define decision criteria with approval from Head of Capital Infrastructure and/or Head of Estates and document in tenders and Tender reviews.

Written quotations	
£5k to £50K	3 written quotations

Formal Tender process

£50k – OJEU threshold	3 Formal Tenders via the e-portal 'Atamis'
Above OJEU threshold	OJEU Tender – Legal requirements to publish in EU official journal – advice from the Head of Procurement

Single Tenders (Waiver)		
Single Tender/Quotation	£5k to OJEU	Operational Director Estates & Facilities to approve Waiver Form (provided by Supplies) - for Building Works, Maintenance, Fixtures and Fittings.
In all cases a Waiver Form with a Supplies generated unique Waiver Reference code/number is to be completed and signed.		

Measured Term Contracts (MTC) Framework	
MTC Lite	£0 - £49,999
NOECPC	£50,000 +

5 LEARNING/SUPPORT

Learning requirements for colleagues will be determined by their role and the competencies required to work safely and effectively. These requirements include national, local and role-specific mandatory learning and are set in line with Trust and professional standards.

Role-specific learning will be defined by the relevant subject matter expert or topic lead and coordinated through the Trust's agreed governance arrangements.

All mandatory and role-specific learning requirements, completion status and competency records will be held in the colleague's personal Electronic Staff Record (ESR).

For further guidance, please see: **CORP/EMP 66 – Mandatory Learning Policy and DBTH Mandatory Learning Framework**

5.1 Trust Mandatory Training

Staff are required to undergo mandatory Trust induction and refresher training. These training records are held centrally by the Electronic Staff Records (ESR) administered by the Training & Education Department.

All staff are subject to thorough a training program, including the following which is not exhaustive: - Health & Safety, Fire Safety, Conflict resolution, Moving and Handling, SET Awareness, Fraud Awareness, Equality Diversity and Human rights, Infection Prevention and Control, Information

Governance and Data Security, Safeguarding Adults, Safeguarding Children, Role Specific Training (ReST) training.

5.2 Specialised Training

In addition to general trade and professional qualifications, specific staff are required to have initial and refresher training appropriate to the systems or disciplines. This includes training on preparation and approval of risk assessments; method statements and permits to work.

Under Health & Safety the training can include for example lone working, working at heights, confined spaces, asbestos awareness, risk and COSHH assessments, manual handling, slips, trips and falls, Personal Protective Equipment, use of work equipment, noise and vibration, permits to work, hot work, confined space etc. The staff who require this specific training are identified and training is provided.

Estates and Facilities operate a Safe Systems of Work under the Health Technical Memorandums (HTM's) - Policies and principles of healthcare engineering, - that replicates the responsible/delegated person tasks and duties within Estates and Facilities as a named point of contact and lead for a particular discipline. This appointment also has an independent auditor/advisor (AE); and identifies Authorised and Competent Persons.

Specialised training is given to those who carry out duties where appointment of Authorised Persons (AP's) and Competent persons (CP's) in accordance with HTM guidance for Electrical systems, Medical Gas, Fire Safety, Heating and Ventilation, Passenger Lifts, Water Hygiene and Decontamination.

The training requirements of staff will be identified through a Learning Needs Analysis. Monitoring and planning of specific individuals training and skills development is discussed and agreed using the Trust's Appraisal Specific educational needs will be determined by the Heads of Service.

Each Department within the Estates and Facilities has a training Matrix which can be obtained from the Head of each Service.

6 MONITORING COMPLIANCE WITH THE PROCEDURAL DOCUMENT

What is being Monitored	Who will carry out the Monitoring	How often	How Reviewed/ Where reported to
Review of Policy	Operational Director of Estates & Facilities/Head of Compliance	3 Yearly or when significant change to process	Approval from Trust Health & Safety Committee
Monitor Approved Contractors/Sky visitor.	Head of Estates/ Head of E&F Compliance	Monthly Biannual	To the Operational Director of Estates & Facilities/E&F Governance Group
Monitoring of	Head of Facilities	Monthly	Monthly Performance

Facilities Service Contracts: - Catering, Waste, and Laundry/Linen		Biannual	reviews with contractors, Biannual KPI reports to the Finance and Performance Committee/PRM meetings
Monitoring of Facilities Service Contracts: - Security and Parking,	Head of Compliance/LSMS/Transport and Car parking Contract Manager	Monthly	Quarterly Performance reviews with contractors, Biannual KPI reports to the Finance and Performance Committee/PRM meetings
Monitoring of Maintenance Service Contracts	Head of Estates	Monthly Quarterly Biannual	Quarterly Performance reviews with contractors, Biannual KPI reports to Finance and Performance Committee/PRM meetings
Monitoring of MTS Contracts: - Medical Devices	Head of MTS	Monthly Biannual	Biannual KPI reports to the Finance and Performance Committee/PRM meetings
Monitoring of MTS. MHRA Alerts FSNA's	Head of MTS	Monthly Biannual	Monthly reports to the Operational Director of Estates & Facilities, Biannual KPI reports to the Finance and Performance Committee
Monitoring of MTS Contracts: - De- contamination (Steris)	Head of MTS	Monthly Biannual	Monthly Reports to the Head of MTS, Biannual KPI reports to the Finance and Performance Committee
Monitor Competent Persons Register	Head of Estates/ Head of Compliance	Annually	Premises Assurance Model/ Operational Director of Estates & Facilities
Review of Planned Preventative Maintenance (PPM) Schedules	Head of Estates.	Weekly Monthly Biannual	Monthly Reports to the Operational Director of Estates & Facilities/ PRM meetings
Audit of Labour Management System	Head of Estates/ Estates Managers/Head of Compliance	Annually	To the Operational Director of Estates & Facilities. E&F Governance Meeting.
ERIC Returns	Head of Compliance	Annually	Annual Submission to NHSE/DoH. Chief Finance Officer, Director of Infrastructure, Operational Director of Estates &

			Facilities, Trust Board
Premises Assurance Model (PAM)	Head of Estates Head of Facilities Compliance	Annually	(PAM) Submission to the DoH. Action plan with timeline. Chief Finance Officer, Director of Infrastructure, Operational Director of Estates & Facilities, Trust Board

Design Consultants - Architects, Building Surveyors, Engineers, QS's and other consultants, should be registered with an appropriate Professional Institutions (RIBA, ICE, IMechE, RICS etc) and have appropriate quality assurance (e.g. ISO 9000).

Contractors – membership of a recognised trade body (ECA / NICEIC, Building & Engineering Services Association (formerly HVCA), Institute of Plumbing, FMB etc) and have membership of a trade safety organisation (e.g. CHAS). Contractors must be CIS registered.

Expenditure vs. Budgets are monitored monthly and discussed at the monthly Finance meetings with the Directorate Finance Business Partner.

The Matrix for the Key Performance Indicators (KPI's) for Estates and Facilities can be seen in [Appendix 3](#).

7 DEFINITIONS

ERIC- Estates Returns Information Collection.

HTM – Health Technical Memorandum.

IG – Information Governance.

IPCT – Infection Prevention and Control Team.

MTS – Medical Technical Services.

PAM – Premises Assurance Model

PDA – Personal Development Appraisal.

SET – Statutory and Essential Training

8 EQUALITY IMPACT ASSESSMENT

The Trust aims to design and implement services, policies and measures that meet the diverse needs of our service, population and workforce, ensuring that none are disadvantaged over others. Our objectives and responsibilities relating to equality and diversity are outlined within our equality schemes. When considering the needs and assessing the impact of a procedural document any discriminatory factors must be identified.

An Equality Impact Assessment (EIA) has been conducted on this procedural document in line with the principles of the Equality Analysis Policy (CORP/EMP 27), the Equality Diversity and Inclusion Policy (CORP/EMP 59) and the Civility, Respect and Resolution Policy (CORP/EMP 58).

The purpose of the EIA is to minimise and if possible, remove any disproportionate impact on employees on the grounds of race, sex, disability, age, sexual orientation or religious belief. No detriment was identified. ([See Appendix 4](#))

9 ASSOCIATED TRUST PROCEDURAL DOCUMENTS

CORP/FAC 02 – Non-Emergency Trust Funded Transport (Internal Transportation)
 CORP/FAC 03 – Medical Gas Systems Policy
 CORP/FAC 07 – Hospital Catering Policy – Provision of Food to Patients, Staff and Visitors
 CORP/FAC 11 – Use and Care of Trust Vehicles
 CORP/FAC 13 – Capital Process, Procedure & Quality Policy (Estates & Facilities)
 CORP/FAC 14 – Trust Accommodation Policy
 CORP/FIN 01 (B) - Standing Financial Instructions
 CORP/FIN 01(A) – Finance Standing Orders
 CORP/HSFS 01 – Health and Safety Policy
 CORP/HSFS 03 – Lone Workers Policy
 CORP/HSFS 04 – Manual Handling Policy
 CORP/HSFS 07 – Control of Substances Hazardous to Health (COSHH) Guidance
 CORP/HSFS 10 A/B – Asbestos Policy/ Asbestos Management Plan
 CORP/HSFS 14 – Fire Safety Policy
 CORP/HSFS 15 – Security Policy – incorporating Bomb Threat/Suspect Packages
 CORP/HSFS 15- Security Policy
 CORP/HSFS 17 A – Waste Management Policy
 CORP/HSFS 21 – Ionising and Non-Ionising Radiations Safety Policy
 CORP/HSFS 22 – Electronic Door Access Control and System Policy
 CORP/HSFS 27 – Electrical Safety Policy
 CORP/HSFS 28 – Window Management Policy
 CORP/HSFS 30 – Management of Contractors Policy and Procedures
 CORP/HSFS 31 – Permit to Work Policy and Procedures
 CORP/HSFS 32 – Work at Height Policy
 CORP/HSFS 33 – First Aid at Work Policy
 CORP/HSFS 36A – Water Safety Plan: Governance Policy
 CORP/HSFS 36B – DBTH Water Safety Plan Operations and Procedures Manual (WSP/Tech)
 PAT/IC 21 – Laundry Policy

10 DATA PROTECTION

Any personal data processing associated with this policy will be carried out under ‘Current data protection legislation’ as in the Data Protection Act 2018 and the UK General Data Protection Regulation (GDPR) 2021.

For further information on data processing carried out by the trust, please refer to our Privacy Notices and other information which you can find on the trust website: <https://www.dbth.nhs.uk/about-us/our-publications/information-governance/>

11 REFERENCES

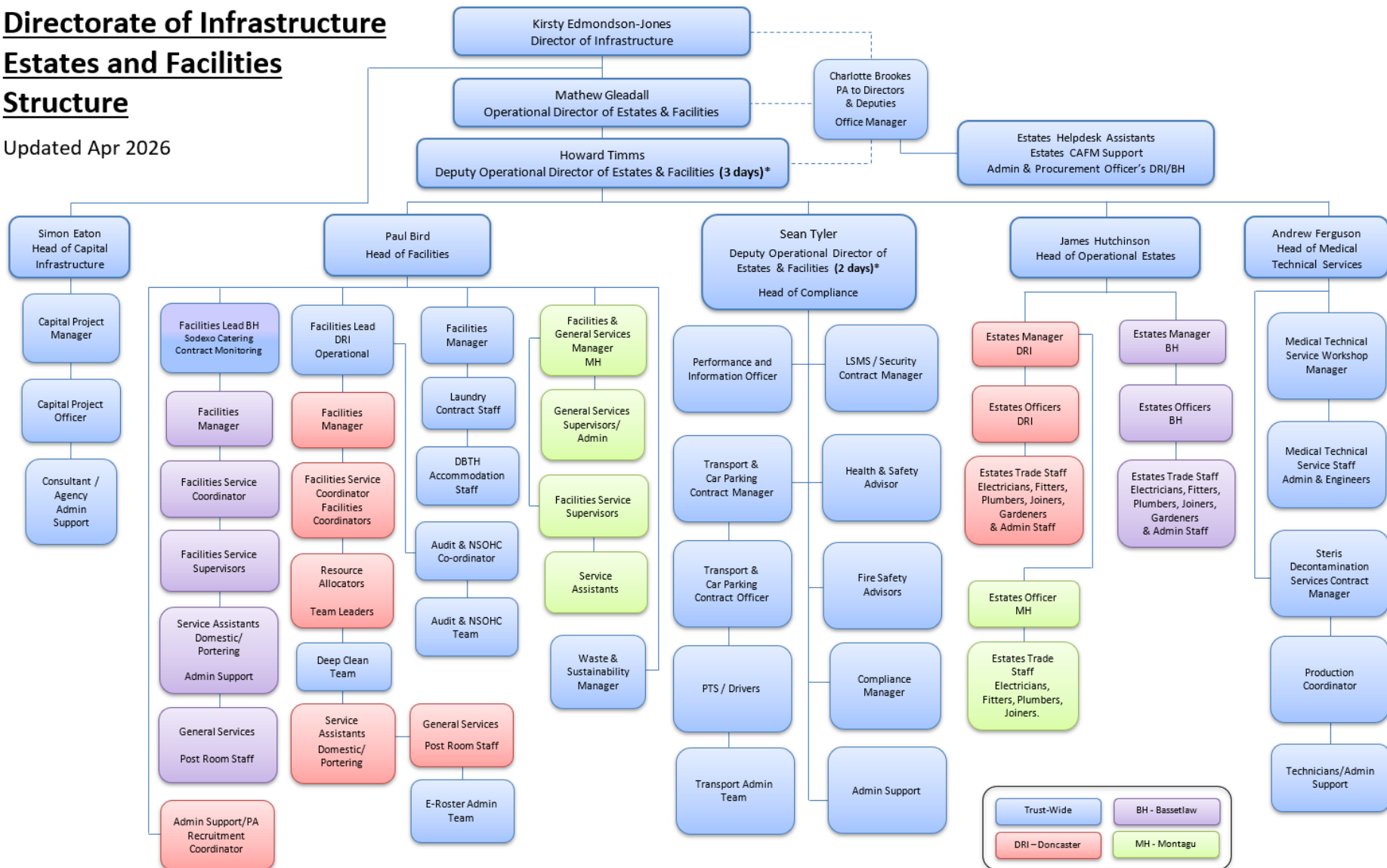
Confined Space Regulations 1997
Confined Spaces Regulations 1997
Construction (Health, Safety & Welfare) Regulations 1996
Control of Asbestos at Work Regulations 2012
Electrical Safety, Quality and Continuity Regulations 2002
Electromagnetic Compatibility Regulations 1992
Health and Safety (first aid) Regulations 1981
Health and Safety (First Aid) Regulations 1981
Health and Safety at Work act 1974
Lifting Operations & Lifting Equipment Regulations (LOLER) 1998
Manual Handling Operations Regulations 1999
Mental Capacity Act (2005): Code of Practice, 2007 www.dca.gov.uk
Personal Protective Equipment at Work Regulations 1992
Personal Protective Equipment Regulations 2002
Pressure Systems Safety Regulations 2000
Provision & Use of Work Equipment Regulations 1998
Provision and Use of Work/Equipment Regulations 1992
Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995
Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) 2013
The Construction (Design and Management) Regulations 2015
The Electricity at Work Regulations 1989
The Management of Health and Safety at Work Regulations 1999
The Noise at Work Regulations 1989
The Working at Height Regulations 2005

This list is not exhaustive and is the responsibility of Staff and Contractor to ensure that they are conversant with all relevant legislation.

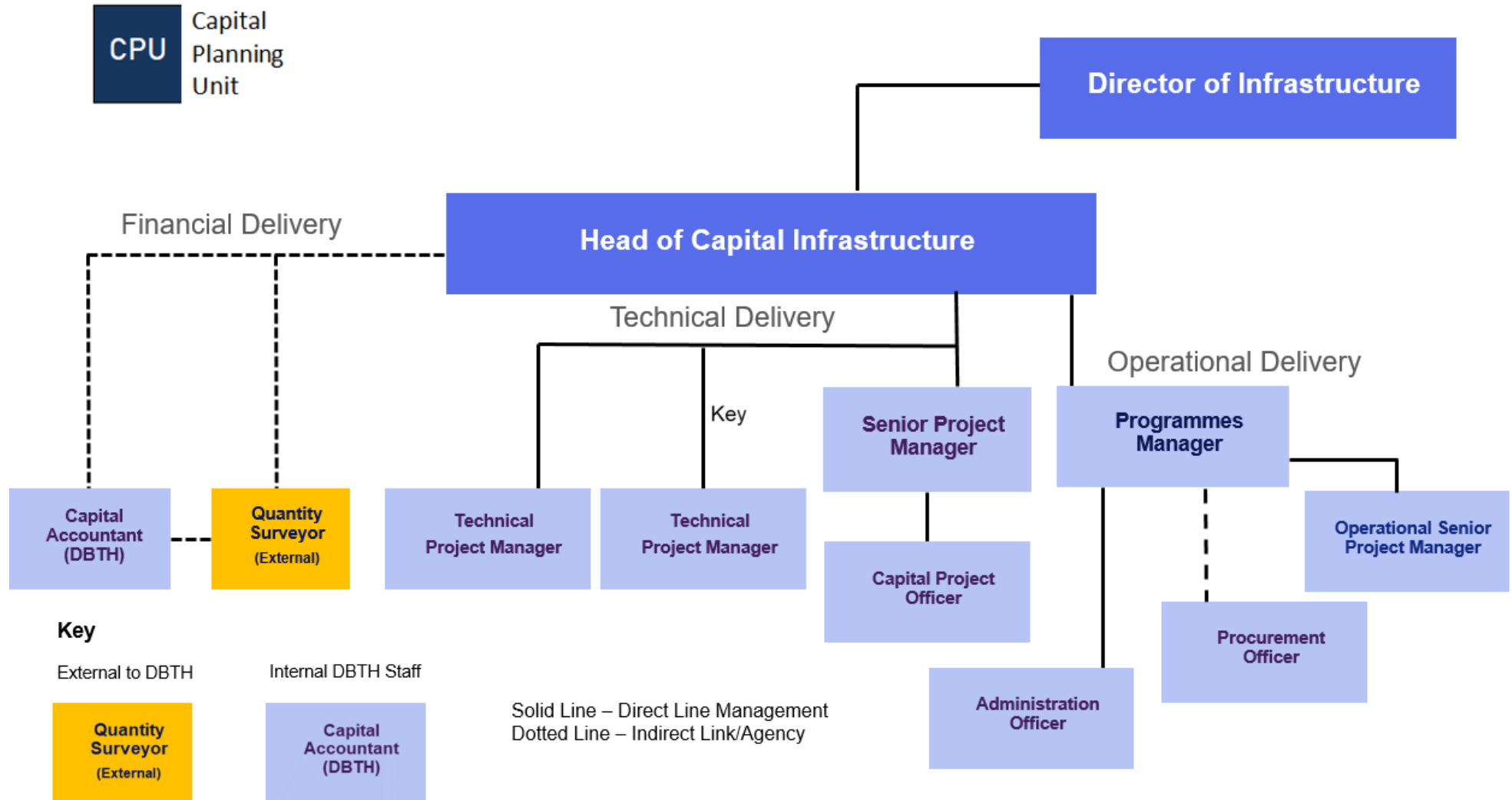
APPENDIX 1 – ESTATES & FACILITIES MANAGEMENT STRUCTURE

Directorate of Infrastructure
Estates and Facilities
Structure

Updated Apr 2026



APPENDIX 2 – ESTATES & FACILITIES CAPITAL INFRASTRUCTURE



APPENDIX 3 - KEY PERFORMANCE INDICATORS (KPI'S)

Key Performance Indicators (KPI's)

Performance Measure	KPI Target
Staff Appraisals	90%
Statutory and Essential Training (SET)	90%
Sickness Absence	3.5%
Catering Satisfaction	95%
Cleanliness Audits DRI/BH/MH	FR1 98% / FR2 95%*
Portering Response DRI/BH/MH	Complete under 30 mins
Estates PPM DRI/BH/MH	None
Estates Reactive DRI/BH/MH	90% Cat 1
MTS DRI/BH/MH	100%
Security Contract	KPI's met to contract
Sterile Services Contract	KPI's met to contract
Waste Contract	KPI's met to contract
Accommodation Occupancy	80%

* Functional Risk (FR)

APPENDIX 4 - EQUALITY IMPACT ASSESSMENT PART 1 INITIAL SCREENING

Service/Function/Policy/Project/Strategy	Division	Assessor (s)	New or Existing Service or Policy?	Date of Assessment
Estates and Facilities Operational Management	Estates and Facilities	Sean Tyler	Existing	5 May 2026
1) Who is responsible for this policy? Name of Division/Directorate: Estates and Facilities				
2) Describe the purpose of the service / function / policy / project / strategy? Who is it intended to benefit? What are the intended outcomes? This policy is intended to represent a clear undertaking by the Estates, Facilities and the Medical Technical Services (MTS) for the Estates and Facilities Directorate to carry out a range of specified services to the standard and level detailed in this document.				
3) Are there any associated objectives? Legislation, targets national expectation, standards: H&S at Work Act 1974, all associated Legislation, ACOPS, Health Technical Memorandum (HTM's) and Health Building Notes (HBN's)				
4) What factors contribute or detract from achieving intended outcomes? – Provision of suitable and sufficient financial resource to achieve intended outcomes				
5) Does the policy have an impact in terms of age, race, disability, gender, gender reassignment, sexual orientation, marriage/civil partnership, maternity/pregnancy and religion/belief? Details: [see Equality Impact Assessment Guidance] - No				
<ul style="list-style-type: none"> • If yes, please describe current or planned activities to address the impact [e.g. Monitoring, consultation] – N/A 				
6) Is there any scope for new measures which would promote equality? [any actions to be taken] – N/A				
7) Are any of the following groups adversely affected by the policy?				
Protected Characteristics	Affected?	Impact		
a) Age	No	N/A		
b) Disability	No	N/A		
c) Gender	No	N/A		
d) Gender Reassignment	No	N/A		
e) Marriage/Civil Partnership	No	N/A		
f) Maternity/Pregnancy	No	N/A		
g) Race	No	N/A		
h) Religion/Belief	No	N/A		
i) Sexual Orientation	No	N/A		
8) Provide the Equality Rating of the service / function / policy / project / strategy – tick (✓) outcome box				
Outcome 1 ✓	Outcome 2	Outcome 3	Outcome 4	
*If you have rated the policy as having an outcome of 2, 3 or 4, it is necessary to carry out a detailed assessment and complete a Detailed Equality Analysis form – see CORP/EMP 27 .				
Date for next review: December 2028 (Policy valid until May 2029)				
Checked by: Howard Timms			Date: May 26	