

Method Statement
General Services

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Objectives

Project Co shall provide an overarching Facilities Management Service that ensures the high quality, integrated and seamless delivery of the following Services:

- Estates Services
- Grounds and Gardens Maintenance
- Utilities
- Ward Housekeeping
- Helpdesk
- Pest Control
- Waste Management
- Car Parking
- Catering
- Domestic
- Reception
- Portering
- Linen
- Security
- Switchboard

The General Services provision shall incorporate the agreement and implementation of Project Co policies, procedures and specific protocols to assure the Board that mechanisms are in place to facilitate the transparency of Project Co's management of the Service and shall recognise the Board's requirement as laid out in the General Services Specification and listed hereunder.

- Leadership including:
 - Management;
 - Continuous Improvement;
 - Performance Monitoring, and
 - Monthly Reporting.
- Staff & Development including:
 - Recruitment;
 - Training and Induction, and
 - Human Resources issues.
- Policy & Strategy including
 - Statutory obligations and Law;
 - Integration with Board Policies and Operation;
 - Health & Safety;

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- Quality Assurance;
- Environmental Management, and
- Contingency Planning.

- Partnerships & Resources including:
 - Liaison;
 - Board Representative;
 - Equipment, and
 - Approved List of Service Providers.

It is agreed between the Parties that the Method Statements shall not apply during the Transition Periods.

2 Management Supervision and Organisation Structure

Key operational interfaces will take place on a number of levels across Project Co's services:

- The operational Staff working within a specified service will interface on a daily basis with the Board's staff and, where appropriate within an agreed framework and protocol between Project Co and the Board, will take direction from service users.
- Project Co's Managers and Team Leaders will work with the appropriate departmental staff within the Board and liaise on a regular basis with the nominated Board Representative as part of the departmental management process.
- Formal interface will take place between Project Co's Management Team and the Board's nominated representatives. These formal meetings will discuss and review key operational issues that affect specific departments within the Board as well as whole hospital issues.
- The Contract Liaison Committee shall meet formally as defined in the Project Agreement clause 12. (See figure A below)

To enable Project Co to deliver an integrated and seamless services, a Facilities Management Board (FM Board), will be operated as part of Project Co. This FM Board, chaired by Project Co's Contract Director, will include representation from the Board, Project Co and other service providers as required.

The Main Project Partners

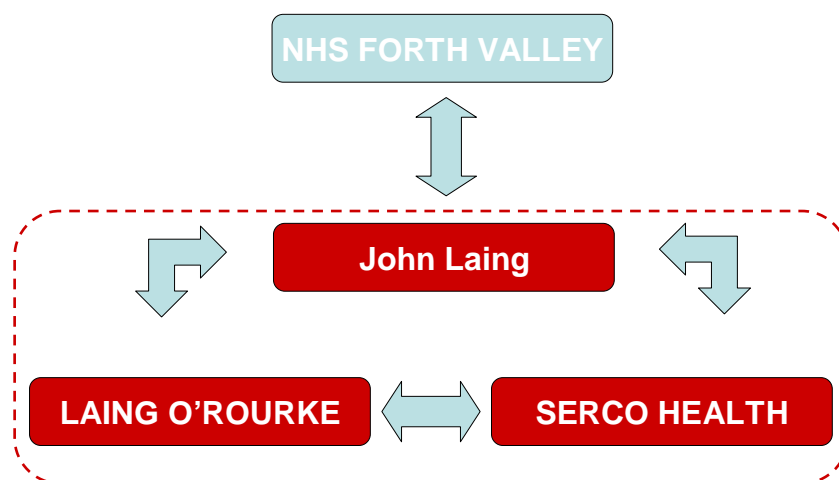


Figure A: Contract Liaison Committee

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The FM Board will comprise of the following members from Project Co:

- Site/Contract Directors of the representative organisations;
- Key operational management; and
- Quality/Risk Managers.

The role of the FM Board will be to review the delivery of services to the Board to provide an integrated approach to provision of the Services. This will be attained through the establishment, delivery, management and monitoring of objectives across the provider organisations.

The FM Board will provide the forum to:

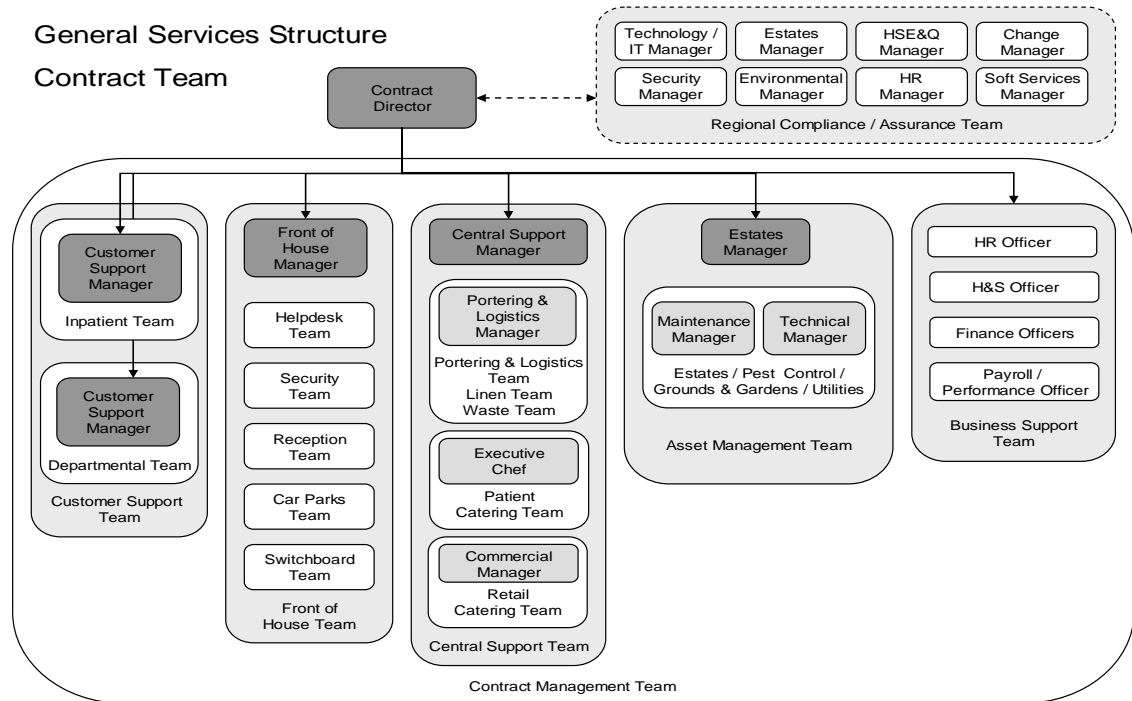
- Communicate and co-ordinate individual service initiatives and developments to enhance the service delivered and where required agree any project variations required to meet the changing needs of the Board
- Agree the structure and content of the formal monthly reports, including both internal and external report
- Review overall service performance and approve the release of monthly monitoring reports
- Monitor individual and global service performance to identify areas and deadlines for action/resolution
- Co-ordinate responses to the Board/consortium initiatives
- Anticipate and respond to future Board requirements and service trends and generate solutions
- Utilise the experience and knowledge of service providers to provide support and generation of innovation across all services
- Ensure a consistent and approach to risk management issues and systems
- Operate within a consistent model for the management of human resources
- Undertake Quarterly strategic reviews in addition to monthly monitoring
- Review and report on hazards and potential hazards and agree action plans
- Address operational issues

Service Managers as indicated in the Organisation Chart below will support the Contract Director in achieving the General Service Objectives. This support will be enhanced by the Regional Compliance/ Assurance Team as required by the Contract Director.

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Project Co's Structure for General Services is shown below:

Figure B.



*The Estates Manager shall be site based but with wider off-site responsibilities.

3 Work Schedules and Procedures

3.1 Leadership

3.1.1 Management

- GP01a Project Co shall prior to Service Commencement notify the Board in writing of their management structure, responsibilities and lines of communication in respect of the “Services”. During the Operational Term Project Co shall report any changes to the Board Representative. These changes shall be in accordance with 27.3 of the Project Agreement.
- GP01b Four months prior to the Operational Term, Project Co shall nominate the three Project Co Representatives that form the Liaison Committee in accordance with Clause 12.
Project Co shall jointly agree with the Board a procedure to ensure the regular monthly liaison between Project Co's management team and the Board Representative occur.
Project Co shall propose a schedule of monthly meetings for agreement by the Board. The purpose of these meetings shall be as described in Clause 12 of the Project Agreement and Project Co will provide all necessary reports and information to the Board Representative on the provision of the “Services”. This information shall be provided to the Board by Project Co as a series of exception reporting and management information reports within 5 working days of the meeting.
- GP01c Project Co shall introduce systems and controls to safeguard the property, cash and commodities for all “Services” and ensure appropriate records are kept and are available for inspection at Project Co’s expense. Project Co shall ensure that the systems and controls are functional. These systems and controls shall be monitored and maintained in accordance with Project Co’s Business Integrity Plan.
- GP01d Project Co shall develop a monthly liaison procedure between the Service Providers, Project Co and nominated Board management representatives. Project Co shall provide management reports relating to the delivery of the Services and shall make these available to the Board within 5 working days of the anniversary of each contract month. Following the issue of this report Project Co shall meet with the Board on a monthly basis and as required to discuss Project Co’s performance and issues pertaining to the Services.
Project Co’s Contract Director shall provide the Board’s representative with a copy of the liaison procedure and reporting mechanism at least one month prior to service commencement and these shall be updated regularly and at least annually
- GP01e Project Co shall produce a schedule detailing any changes to the “Services” or the Method Statement. Project Co shall outline the likely impact of those changes, the financial implications of the changes, the impact of the timing of such changes or the Board’s ability to carry out its

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functions and any other matter which the Board may require according to the agreed variation procedure, as set out in accordance with 27.3 of the Project Agreement. Prior to implementation Project Co shall have received written consent from the Board Representative. These changes will be reviewed at the monthly meeting.

GP01f Project Co shall provide information to the Board Representative for contribution to the Board's internal and external public relations.

GP01g Project Co have in place a process to manage hazards. This process will be incorporated within the Quality System. Project Co shall notify the Board Representative, of the details of the hazard, the likely impact resulting from the hazard and the suggested actions to mitigate the hazards as part of a formalised reporting process.

Project Co shall also establish a system for the receipt from the Board Representative of all hazard warnings and safety action bulletin notices published by the NHS. Project Co shall disseminate the Safety Action Notices and Hazard Warnings to the appropriate Board Employees, Service Providers and Staff. The notification shall be made to Board staff by the use of electronic email which shall be used as the method of demonstrating that the notification was sent. This system shall be managed by the Contract Director.

Project Co shall ensure that appropriate action is taken under the scope of the "Services" and recorded centrally at Project Co's expense

In respect of disposal of waste generated through the Service provision this obligation extends beyond the boundaries of the Site to the point of disposal/recycling/treatment. This shall include where appropriate the notification to other parties of their obligation(s) as determined within the Project Agreement and is detailed within the Waste Method Statement.

3.1.2

Continuous Improvement

GP02 Project Co will be committed to continuous improvement and will in conjunction with the Board agree annual performance ranges for the Key Performance Indicators. The Contract Director will coordinate this with involvement from the Service Managers on site.

Continuous improvement will be achieved by a combination of factors, some of which may provide step changes in performance that are immediately evident, whilst others will be a more evolutionary process that will need to be measured over a longer period of time. Factors that will affect performance will include:

- Technological advances;
- New equipment;
- Changes in our methods of working;
- Changes in the Board's methods of working;
- Consumer expectation;

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- Legislation and guidance; and
- NHS initiatives.

Site managers will monitor service achievement against key performance indicators on a monthly basis.

Project Co's Helpdesk will be central to ensuring continuous improvement. It will provide the data against which Project Co can measure trends in our performance and the factors that affect it. The Contract Director and senior management team in conjunction with the operational teams will review performance and implement action plans to ensure Project Co achieve their improvement targets.

This process will continue throughout the life of the contract. Project Co will measure the existing services and calibrate these against the performance parameters and KPI's within the Service Specific Specifications

- GP03a Project Co shall implement a reporting procedure on a quarterly basis showing the scores achieved.
- GP03b Where the performance is found to fall within the Red Range Project Co shall identify remedial actions and timescales and submit this to the Board for discussion. Project Co shall organise and attend a meeting with the Board Representative within two working weeks.
At the end of the meeting Project Co shall produce an Action Plan as agreed with the Board Representative. This action plan will be issued within 5 working days of the meeting.
- GP04 Project Co's Contract Director shall ensure that each Service Manager implements and monitors any Action Plans relevant to their service as agreed with the Board Representative in accordance with the agreed timescales and timetable.
- Progress regarding the action plan will be discussed at the next monthly meeting.

3.1.3

Performance Monitoring

- GP05 Four months prior to Operational Term Project Co shall supply the Board with the Performance Monitoring Programme in the agreed format
- Within the programme, Project Co will agree with the Board Representative how each Performance Parameter will be measured in accordance with the Board's Service Level Specifications, how the information is to be gathered including sample sizes and methods and how often it will be reported.
- GP05b The performance parameters outlined in the Board's Service Specific Specifications will form the basis of a structured management information

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system. Performance monitoring will be a continuous process and will be undertaken in order to report against the Performance Parameters and KPI's stated in the Service Specific Specifications.

Prior to Service Commencement Project Co will draft a detailed performance monitoring programme to be agreed with the Board. Within the programme Project Co will agree what is to be measured, how the information is to be gathered and how often.

The programme will include, but not be limited to, the following types of Project Co monitoring methods:

- Helpdesk data
- Internal audits
- Surveys
- External reviews
- Benchmarking
- Operational data

Based on the regular reports, Project Co will generate and implement action plans, strategy reviews, and introduce any necessary change to methodologies.

The Helpdesk will be the focal point of data collection that will be used to determine the performance measurement results and the format of the agreed regular management reports. The reports will be used to identify current performance and performance trends.

The performance monitoring programme will be reviewed and updated at least annually.

3.1.4

GP06

Monthly Reporting

Project Co shall supply the Performance Monitoring report to the Board in the agreed format and quality within 5 Business Days after each Contract Month end.

The Performance Monitoring Report shall contain the information in respect of the Contract Month just ended as outlined in the General Services Specification GP06.

The performance monitoring programme will use the payment mechanism as the basis of its reporting and will be consistent across all functional parts for each Service. The report will identify Performance and Unavailability failures and will subsequently be used to develop an action plan to remedy identified failures.

The Performance Report will be developed on a Service by Service basis and will include, but not be limited to, the following:

- the monitoring carried out as well as a summary of the findings;
- a summary of all incidents reported to the Helpdesk;

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- Service Response Time/Rectification Times and those achieved for all incidents;
- a summary of all Performance Failures and Unavailability Events;
- the Functional Parts affected;
- the duration of any Performance Failure/Unavailability Events not rectified on time;
- the relevant volume related data (e.g. energy consumed, catering/linen units provided etc);
- the deductions to be made;
- any volume related adjustments to be made to the Service Payment; and
- the number of Service Failure Points (SFP's) to be awarded
- summary of all Service Requests and Events reported to the Helpdesk during the Contract Month including allotted target Service Response Time/Rectification Times where applicable and those achieved;
- total number of helpdesk calls received per Contract Month;
- number of helpdesk calls answered;
- number of helpdesk calls outside of 15 seconds;
- Functional Area, Functional Unit and or Service in which each Event has occurred or Service Request posted
- all maintenance (planned and reactive) undertaken in that month;
- details of training of personnel, changes of personnel,
- testing (statutory, PAT, insurance company, legionella, pressure systems, security systems, telephone systems and fire hydrants)
- a schedule of all items replaced through lifecycle during that month.

An indicative Performance Monitoring Report is attached at appendix A and will be the starting point for agreeing the format and content of the Monthly Performance Report with the Board.

3.2 Staff and Development

GP07 Not Used.

3.2.1 Recruitment

GP08 The Project Co shall comply with all Board Recruitment & Selection Policies and ensure that all Staff complete a pre-employment health screening check and obtain satisfactory clearance from a recognised Occupational Health adviser prior to commencing employment.

GP09 The Project Co will ensure that all Staff employed in roles specified complete a Disclosure Scotland declaration, details of these Staff will be issued to the Board Representative in a format that is acceptable to the Board that does not unduly restrict the Project Co's ability to engage staff to meet its obligations under GP07 or contravene Data Protection legislation. Project Co will issue this to the Board Representative prior to the Staff commencing work.

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3.2.2

Training and Induction

GP10a / b

Project Co's Service Managers will ensure that individual training records are maintained on Project Co training database for each member of Staff and Board Employee trained by Project Co.

GP11

All Project Co Staff will receive an agreed induction programme and shall cover those elements listed in Appendix A of the General Services Specification as a minimum. New Staff will not be allowed to commence work without first having been trained in Health and Safety and site specific/job specific requirements. A record of Staff attendance and comprehension of the training received shall be recorded on the Project Co Training database. The comprehensive induction programme covering as a minimum that specified in Appendix A of this General Service Specification will be compulsory within the first four weeks of employment. Auditing by Project Co Health and Safety representatives shall check compliance at departmental level.

Project Co will make available material and/or resource to the Board to allow them to complete items of their induction programme that are specific to the Project Co's responsibilities.

GP12

All new recruits will complete a comprehensive induction training programme within the first four weeks of employment. Staff will not be allowed to undertake their duties until they have completed minimum aspects of the induction programme such as Health and Safety and site specific/job specific training. The induction programme will, as a minimum, cover the issues shown in Appendix A of the General Services Service Level Specification. The list shown in Appendix A will be modified in agreement with the Board as appropriate to the staff role.

Any refresher training on the use of plant and equipment deemed to be necessary for Project Co Employees will be delivered as required.

Project Co will provide support to the Board in carrying out refresher training where deemed necessary by Project Co

GP13

Project Co will keep its Staff fully informed at all times via their line manager to allow them to undertake their duties with specific emphasis on Health and safety

Subject to reasonable notice, Project Co will release its Staff to attend statutory Board training and will backfill at its own expense to ensure that the training does not compromise service delivery. Proactive spot safety checks shall be carried out by management supervisors and staff representatives at regular intervals to ensure adherence to workplace risk assessments and safe systems of work.

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GP14 The training requirements for each member of Staff shall be formally reviewed by their line manager, either annually or when a change of duties requires new skills. The requirements of new Staff shall be reviewed on appointment by the appropriate Manager/Team Leader and all Staff shall be inducted appropriately.

When a training need is identified the relevant manager, where possible, incorporates the requirements in his training plan or records of nominations for future courses. The line manager will organise the provision of training in accordance with this plan. Training consists of both on the job training and formal, internal and external training courses.

Project Co will through the appraisal process introduce a training programme that reflects the training needs of both existing and any new Staff. This training will be operated via a programme of continuous professional development through toolbox talks, training events, information sheets and on the job training.

Each member of Staff will be provided with a training plan developed under the Knowledge and Skills framework (KSF). This will vary in scope and complexity but will be appropriate to the needs of the individual. This will be updated annually following an appraisal with the employee's line manager.

GP15 The Project Co will ensure that all Staff are offered immunisation in accordance with the Board's Occupational Health Policy and the nature of their duties.

Project Co will assume that at the time of transfer all existing staff that are to be transferred have documented that they have been offered or are up to date with their immunisation status.

3.2.3

Human Resource Issues

GP16a All Staff will, prior to the commencement of their duties, be issued with appropriate uniforms, work wear and personal protective equipment in accordance with the Board's uniform policy. All Staff will wear identification badges, the design to be agreed with the Board to reflect the single Board identity and the Patient Plus concept. They will be advised of the need for professional image and manner at all times in the discharge of their duties.

GP16b The Project co will adhere to Board Policies, including the Infection Control Policy and will accordingly follow the appropriate reporting procedures, as detailed by the Board's Infection Control for Staff suffering illness that may compromise the health or safety of Project Co Staff, Board Employees, patients or visitors. Project Co will also comply with Board Policy and notification procedures for any Staff recently returned from overseas travel in countries which the Occupational Health Department deem to be of high risk, or who may be suffering from a

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notifyable disease.

- GP16c Project Co will undertake annual staff satisfaction surveys in accordance with the Board's Service Level Specification we will seek to achieve a staff satisfaction survey in excess of 90%. The surveys will be undertaken annually and will be reported to the Board as part the Performance Monitoring Report for the relevant month.
- GP17 The Project Co will have in place a policy for the management of sickness absence to maintain levels comparable to national standards. A programme of workshops will be held to update line managers' awareness of sickness and absence controls. Project Co will monitor turnover and sickness absence and operate exit interviews and return to work interviews to ascertain reason for turnover and absence levels, identifying and rectifying potential threats to staffing levels in order to maintain service standards. The information gathered will be shared with the Board on request.

3.3 Policy and Strategy

3.3.1

Service Requirements

3.3.2 General

GP18 Project Co's Contract Director will be responsible for ensuring that Project Co complies with Good Industry Practice and NHS Requirements including legislation and regulations throughout the life of the contract as detailed in the General Services Specification. Project Co will operate a self-monitoring system for each service supported by data input from the Board. The system will be continuously reviewed and refined to incorporate changes in:

- Procedures;
- Guidelines;
- Codes of Practice; and
- Legislation

Project Co and the Board will work in partnership to identify and react to changes in legislation, procedures, guidelines or codes of practice relating specifically to healthcare and ensuring that joint policies are aligned and developed together.

Legal compliance will be verified during an annual audit which will be completed to monitor all assurance systems, business processes health and safety, environmental, quality, finance and human resources. Project Co will report on compliance with legal and contractual requirements to the Board.

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**3.3.3
Operation**

Integration with Board Policies and

GP19a

Project Co's Regional Compliance/Assurance Team shall be responsible for providing electronically the on-site contract teams with information, guidance and tools to comply with legislation, including health and safety regulations.

This responsibility extends to providing information on forth-coming changes in legislation and how these should be dealt with and incorporated. Changes to statute and prescribed standards will be communicated through the Contract Director, Health and Safety officer or representative from the management team.

The communication will be provided formally, in an agreed format, and will contain an impact assessment prepared and submitted to the Board Representative.

Compliance will be verified during the Audits contained in the Business Integrity Plan.

GP19b

Method Statements and supporting procedures, etc. will be kept up to date by the appropriate managers, for example:

- Central Support Services – Central Support Manager
- Customer Support Services – Customer support Manager
- Front of House Services – Front of house Manager
- Asset Management Services – Asset Manager
- General Services – Contract Director

Verification and compliance will be ensured by the Audits contained in Project Co's Business Integrity Plan. In addition, sample Audits may be used if required, these will be conducted by the Board Representative. At this point Method Statements and any procedure manuals will be checked to verify that they are complete, up to date and available.

GP20

Prior to the introduction of any changes to working practices or variation to existing practices, Project Co shall receive approval from the Board's Representative.

The Service Level Specifications contained in the Project Agreement will be the initial reference point, changes to the Project Agreement including working practices will be initiated from a number of sources including a Project Co request, A Board request and formal changes as a result of changes in legislation or the introduction of new legislation. In addition, changes may be requested as a result of actions arising from the continuous development programme. In all instances changes will be agreed with the Board Representative prior to implementation.

GP21

Project Co will, prior to service commencement, agree the timing of services with the Board's Representative through the introduction of service level agreements that will provide each user with a clear document detailing all services appropriate to their area. The agreements will cover:

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- Resources allocated;
- Response times;
- Timings;
- Area service requirements.

These local service level agreements will be produced within a framework agreed with the Board Representative, and shall be finalised prior to service commencement. The service level agreements shall be reviewed on a regular basis or at least once annually and discussed with the Board Representative prior to any changes being introduced into the local SLA.

3.3.4

Health and Safety

GP22a & d

Project Co will administer its health and safety obligations through the Assurance / Compliance Team which will support the on site operational team. A key role within the Assurance/Compliance Team is a NEBOSH HSEQ Manager (qualified to NEBOSH Diploma level) who will have responsibility for ensuring all health and safety matters are adhered to and communicated throughout the organisation.

The HSEQ Manager will ensure that there is a comprehensive and up to date Health and Safety Manual and that the manual is available and used by all Staff as appropriate.

GP22b

The Contract Director, supported by the HSEQ Manager, will be responsible for ensuring that the Board Incident Record System (IR1) is implemented in line with Board policy. Copies Incident Report Forms, including IR1 forms and RIDDOR forms etc, will forwarded to the appropriate persons including the Project Co HSEQ Manager and Contract Director to ensure that appropriate corrective action is carried out and reported to the Board in line with the required policy and timescales. Details of the corrective action will be detailed in an action plan. The action plan will contain all relevant agreed information and will be agreed with the Board Representative.

Copies of supporting information will be made available to the Board Representative, as necessary within an agreed timescale, to satisfy periodic sample audits.

The Contract Director and the management team will be responsible for ensuring, through regular monitoring, that reporting procedures for accidents and/or breaches of statutory health and safety obligations are available, known and understood by all Staff and adhered to. This will be achieved through comprehensive training. Initial training will be provided upon induction when new starts commence their employment. Additional training will also be delivered in line with the annual Training Plan.

Any H&S breaches will be reported to the Board Representative.

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Training completion will be verified through Audits, in line with the Audits outlined in the Business Integrity Plan and annual audits as necessary.

GP22c Where applicable Project Co will work with the Board in reviewing and developing its policies, or to develop joint policies and procedures where appropriate.

Where joint policies are appropriate, these will cover all staff issues and will assist in achieving a unified employment environment. Project Co will integrate and reflect the Board's policies within its policies, most of which will be project specific covering areas such as:

- Health and Safety;
- Quality Assurance;
- Environmental management;
- Contingency planning.

Policies and procedures will be embedded within operational procedures for each service area and the in the Quality Assurance Manual.

All policies and procedures will be subject to audit as part of the Business Integrity Plan.

GP22e Each service Manager will be responsible for ensuring that Staff are provided with suitable, appropriate and British Standard or EU equivalent compliant personal protective equipment (PPE) and clothing appropriate the needs of their role.

The PPE for each role/task is identified in advance when creating the risk assessments. Verification of compliance with the PPE requirements and demonstration of provision to Staff will be achieved through the regular audits included in the Business Integrity Plan. Spot checks will also be carried out by the Contract Director and the HSEQ Manger to ensure that Staff are using the PPE supplied.

GP22f The Health and Safety Officer will be responsible for ensuring, through regular audits, that well-stocked first aid facilities are provided for and the name of the on duty First Aider is clearly identified. Stock will be maintained by First Aiders by logging first aid supplies used and by regular stock checks. First Aiders will submit first aid box supply requests whenever they find that supplies have fallen below the minimum holding requirements.

GP22g The Health and Safety Officer or appropriate Manager, for example the Executive Chef, will maintain and keep up to date electronic site specific health and safety records and documentation and make these available for inspection by the Board Representative, the Project Co HSEQ Manager or external assessors on request. Information which will be maintained will include information such as: risk assessments in respect of all of the services; other assessment information such as COSHH

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assessment; and Method Statements etc.

Where necessary the information will be made available for periodic audit by the Board Representative.

3.4 Quality Assurance

3.4.1

Quality Assurance

GP23

Project Co shall implement and achieve accreditation to ISO 9001:2000 Quality Management System for the Project, for the aspects of the Services within 18 months of final phase patient service commencement.

Project Co shall maintain a Quality Management System in accordance with ISO 9001:2000.

Project Co's procedure requires that each site has a robust internal and external audit/inspection schedule as indicated in Part 14 Section 3 (Services Quality Plan) which is agreed and implemented to determine the level of compliance with the relevant performance indicators, health and safety legislation and with the Company's management systems. As and where necessary corrective action will be recommended to rectify non-conformances.

The Contract Director will be supported by the HSEQ Manager in achieving a site specific accreditation to the international standard.

In line with the requirements of the standard, the Quality Management System shall be designed to requirements of the services specific specifications and performance measurement system. As such, the system will ensure that the appropriate records are completed and maintained for audit purposes by Project co, the Board and external assessors.

Project Co will allow the Board access to records at all times and a provide liaison as necessary. In addition, Project co will provide the Board with such information as it may require in order to fulfill its obligations to compile NHS Controls Assurance Returns.

Above all the Quality Management System will ensure that management, supervisors and Staff are trained to achieve the level of understanding of the required quality system appropriate to their role. The information gathered will be used to provides an insight into the quality of the performance being delivered and will allow the Contract Director and the management team to make informed decisions on how services can be continuously improved. Improvement shall be tabled and discussed with the Board Representative prior to implementation.

3.4.2

Environmental Management

GP24/25

Project Co shall implement and achieve accreditation to ISO 14001 Environmental Management System for the Project, for the aspects of

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the Services within 18 months of final phase patient service commencement.

Project Co shall implement and maintain an Environmental Management System accredited to ISO 14001 in accordance with Part 14 Section 3 (Services Quality Plan). A copy of the certification will be available on Project Co's CAFM system "Public" folders.

The Contract Director supported by the Regional Compliance/ Assurance Team will provide the Environmental Policy and procedures to enable this and will also monitor their application through the conduct of internal audits and facilitation of external audits. The Contract Director will assume overall responsibility for the management of the environment across the contract, assisted by qualified and competent support from within the company.

The Health and Safety Environmental and Quality Manager in collaboration with the Environmental Manager shall carry out annual audits of the facility operations and activities to identify and reduce any impact on the environment, minimise the use of energy and other resources and reflect the principles of sustainable development in all our activities. The Environmental Manager will promote the formation of a Joint Utility Working Group comprising Estates Service Managers and Senior Facilities Managers from the Board.

The Environmental Manager shall provide the interface with the Board in the assessment, reporting and review of energy use of the facilities. The Contract Director will be responsible ensure that Project Co's policies and guiding principles on environmental issues are embedded within the business through the management systems and awareness of Staff.

It is incumbent on the Contract Director to ensure that the activities of Project Co are aligned with its Environmental Policy. Project Co shall therefore provide Environmental Awareness training to all of its employees in effort to identify and mitigate any environmental impact as a result of Project Co's activities, use of resources, utilities and selection of materials. Employees will be encouraged to highlight any issues as they become apparent.

Project Co shall work in partnership with the Board to ensure that any adverse impact the facility activities have on the environment are reduced or, where reasonably practicable, eliminated.

Project Co shall review the services from external sources, such as subcontractors; have a sound understanding of environmental issues. Products and materials will be purchased from sustainable sources if available, with an emphasis on using recycled materials whenever possible. Subcontractors and Suppliers shall be subject to vetting prior to inclusion on Project Co's Approved List.

An initial Environmental risk assessment process will be completed by the team culminating in the development of a prioritised action plan and appropriate communication to the relevant Staff. Ongoing risk reviews and

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regular monitoring of work practices will also take place to ensure that control measures remain effective and initiatives to improve environmental performance are identified.

The Health and Safety, Environment and Quality Manager (HSEQ) shall ensure that Emergency procedures are clearly defined, established and regularly practised wherever there is a high risk of causing significant environmental impact. All serious incidents will be reported, recorded and thoroughly investigated. To ensure compliance with policy and procedures the HSEQ shall also carry out annual environmental inspections and monitoring and will provide a report for the consumption and review by Project Co and the Board.

Lessons learned as a result of investigations into incidents will be disseminated following these audits within the contract and this action, along with the sharing of 'best practice'.

Wherever possible and practicable Project Co will adopt the use of the following:

- production processes and technologies which utilise resources more efficiently use less energy (gas, oil, electricity) or water or which generate less waste or pollution
- The maximum use of resources from sustainable sources
- The minimum use of materials and products from non-renewable sources
- The use of recycled and environmentally friendly materials and products
- The use of recycling programmes to minimise the amount of waste generated
- The use of non-chemical materials for maintenance of soft landscape areas
- Exclude the use of pesticides.

Project Co will review the service delivery on an annual basis to consider alternative ways of working that may positively contribute to sustainable development of the environment. Consideration will be given to:

- Returning used resources
- Recycling used resources
- Re-engineering/Rethinking the way that we do business
- Reusing resources wherever possible
- Redesigning processes/equipment
- Reducing energy and resource use.

The Environmental Manager shall using data from the BMS system and Estates records, monitor and report on all utility usage to Project Co and to the Board on a frequency and format to be agreed.

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3.4.3

Contingency Planning

GP26

Project Co shall develop, maintain and update each Contract Year Service specific contingency plans and in addition:

- a fire and evacuation action plan for Project Co areas;
- service specific risk assessment; and
- Utility and other Estates system emergency plans.

The plans will be developed by Project Co's Contract Director and Service Managers. Plans will be developed in conjunction with parties outlined in the General Services Specification.

Project Co shall work with the Board to ensure that the contingency plans are incorporated into the Board's Major Emergency Procedures and Major Infrastructure Response Plan.

Examples of our proposed contingency plans are covered in Section 5 of this Method Statement and in individual Service Method Statements.

Project Co will cooperate with the Board in the development of incident plans and for the release of Staff for training and practise of incident planning.

The Assurance / Compliance Team will support the Contract Director and the contract team to ensure integrity of the Services will cover all aspects of health, safety, environmental and quality issues. This information shall be included in the ISO 9001 and ISO 14001 accreditations which will be obtained for the contract. For the systems, appropriate training will be provided and undertaken within an agreed timescale. In addition Investors In People will be implemented within 24 month of final phase patient service commencement and maintained.

Internal and external reviews will be carried out as required and within timescales to be agreed with the Board's Representative to validate plans and ensure continuous improvement.

3.5 Partnerships and Resources

3.5.1

Liaison

GP27

Project Co's Contract Director and the management team will liaise with the appropriate Board personnel on a daily, weekly and monthly basis. The liaison will take place on formal and informal basis as agreed prior to service commencement.

The Customer Support Managers will liaise with all wards and departments in undertaking or preparing to undertake action in respect of works which may impact upon the delivery of the clinical services or upon the comfort and/or well being Key Customers. The Customer Support Managers will also be responsible for reviewing the service

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level agreements as necessary during the life of the service.

The appropriate Project Co Representatives shall be responsible for liaising with Board Representatives, such as fire officers, health and safety advisors, control of infection officers, pharmacists, crime prevention officers, and external advisors and statutory bodies in respect of the Services provided. Representatives shall be agreed and tabled in respect of scheduled and planned meetings. In the case of unplanned or ad hoc meetings the Contract Director will nominate the most appropriate Project Co Representative to attend

Where appropriate and to ensure that we provide an integrated approach with the Board, Project Co will introduce a number of structured liaison groups covering strategic, operational and specialist areas to ensure that corporate and local issues are addressed. Project Co will interact with the Board on strategic and asset issues whilst the proposed liaison groups will meet at regular intervals – the frequency of these meetings will be determined according to the role the group is undertaking.

Meetings and liaison shall be documented where appropriate.

The Contract Director will meet with the Board Representative on a Monthly basis. The agenda for this meeting shall be tabled in advance to allow both parties to prepare the relevant information from agreed actions. Verification of the meetings and agreed actions shall be the Meeting Minutes. The meeting minutes shall be issued in a timely manner by Project Co after the meeting. Where appropriate, the Contract Director and the Board Representative will meet more frequently as mutually agreed.

3.5.2

Board Representative

GP28

From time to time Project Co shall expect to receive, from the Board, a written list of all persons (each "a Board Representative") employed by the Board to whom the Board has delegated certain responsibilities and obligations of the Board under the Service Specific Specifications and who are authorised by the Board to act upon their behalf in connection with such functions.

Project Co shall liaise at all times with staff designated as Board Representatives where works may impact on clinical operations.

3.5.3

Equipment

GP29

Project Co will provide, maintain and replace as necessary all equipment and consumables required for the delivery of the Services.

For the avoidance of doubt the following equipment and consumables, but not limited to, are excluded from Project Co's provision and shall be

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General Services

provided by the Board:

- hand soaps, toilet rolls, hand towels, disposable paper for clinical purposes, locker bags and kitchen rolls;
- crockery and cutlery, employee meals, hospitality services and vending to the Forth Valley Community;
- Board Contractor clinical waste bins and sharps bins;

All equipment used in the delivery of the Services will be in good working order, carry the correct validation certificate/license and will be used by a trained operative (where applicable). Equipment lists, certification/licenses and maintenance records will be held on site. Procedures for checking, the use and defect reports will be completed. Training shall be given and Staff monitored by Service Managers for correct use of equipment.

Project Co shall ensure sufficient stocks of materials and consumables necessary to provide Project Co Services are available and stored in areas as agreed with the Board Representative.

Project Co shall clean and disinfect where appropriate Project Co equipment used for the Services in accordance with the programme agreed with the Board.

Project Co shall provide PDA/Equivalent capable of transferring both voice and data across the wireless network. This device shall be referred to within the Method Statements as 'PDA or equivalent' Each handheld device shall be fitted with an RF Tag to enable Staff location tracking.

Project Co shall ensure that the PDA will communicate with the Helpdesk to provide the following information as a minimum:

- Work task number
- Response classification
- Callers name
- Callers phone number
- Date task received
- Date to perform
- Fault location
- Fault category
- Work description

For the avoidance of doubt, Project Co will procure where possible all equipment, materials and consumable goods from NHS approved suppliers. Specialist suppliers such as catering foods suppliers will be fully vetted and audited in line with the contract specific ISO 9001:2000 Quality Management System to ensure they comply with all necessary

Method Statement

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legislative and best practice requirements. In the event that suppliers are not on the NHS approved supplier list, Project Co will ensure that they are part of the Project Co Approved Supplier list.

For the avoidance of doubt, where Project Co are reliant on the Board for the provision and maintenance of equipment and systems, the Board will procure and maintain such items in order to enable Project Co to undertake tasks in accordance with the Service Level Specifications.

Project Co shall provide such equipment and consumables as are necessary for the provisions of the Service Specific Specifications at Project Co's cost and shall ensure that such equipment is maintained in such a manner and replaced from time to time, so as to ensure that the health and or safety of all Key Customers is at all times safeguarded. For the avoidance of doubt, the provision of equipment and consumables shall specifically exclude clinically related equipment such as wheel chairs and patient movement equipment.

Project Co shall work with the Board ensure that sufficient stocks of materials and consumables are maintained for the provision of the Services and that such materials shall be stored in a clean and tidy manner in areas to be agreed with the Board. The Board will advise Project Co of any anticipated shortages from the National Distribution Centre in advance where possible. In this instance Project Co will operate to the agreed contingency procedures.

Project Co shall have equipment disinfected in accordance with the programme agreed with the Board Representative prior to service commencement. The programme will fully comply with the requirements of the Board's Infection Control Policy.

3.5.4

Approved List of Service Providers

GP30

Project Co shall ensure, through monitoring, that an Approved List of Contractors is implemented and maintained by all Service Managers and all listed providers undergo regular vetting.

The Approved List will include only contractors who have satisfied the requirements of Project Co's Sub-contractor and/ or Supplier Evaluation Process. The process shall consider all aspects of the applicants performance including but not limited to health and safety system and performance, quality systems accreditation (if applicable), personnel resources and competency, financial stability, management and operational experience and environmental credentials.

3.6 Work Schedules

Prior to service commencement Project Co shall meet with the Board Representatives to agree the scheduling of services. This information shall be consolidated and issued. The frequency and timings of all scheduling shall be based around the parameters set out in Part 14, the Service Level Specifications.

Method Statement
General Services

4 Quality Standards

Project Co shall ensure that the delivery of the General Services shall meet the requirements of the Service Specific Specification and associated documents. The delivery shall be monitored and recorded in accordance with the Performance Parameters and any deviation from the required standard of service shall be rectified as soon as it becomes apparent.

These will be backed up by Project Co's Quality Systems.

5 Contingency Plans

Our contingency arrangements will include access to:

- supply difficulties;
- Fuel crisis;
- Equipment breakdown;
- IT failure;
- Loss of utilities, including total power failure;
- Staff shortages;
- Major incident plans;
- Catastrophe planning; and
- Escalation.

Project Co's Contract Director and the Service Specific Managers will prepare procedures and contingency plans for all operations. Where necessary, these procedures and plans will be prepared in co-operation with the Board Representative referring to the Service Level Specific Specifications.

The outcomes identified in Project Co's risk assessment, agreed with the Board, will inform the contingency plans. All outcomes will be rated for severity and likelihood. Project Co will then prepare plans that will allow the departmental managers to manage the incidence and the outcomes.

Project Co's contingency plans will be put in place to cover three main categories which affect our service delivery:

- People;
- Equipment; and
- Supplies.

In the event that Project Co need to invoke contingency arrangements, the following areas will be prioritised:

- Communication with the Board, not limited to those within the output specifications, but including associated disciplines such as Fire Officers and Health & Safety Advisors;
- Communication to the Board, staff and customers as they are usually more sympathetic if required changes are known about;
- The consideration of employees;

Method Statement

General Services

- Review of work practices, as hire equipment is often not capable of coping with the numbers or involves extra transport requirements;
- Long-term use of contingency style arrangement could lead to higher staff turnover;
- Understanding that all jobs will take longer;
- What additional equipment they might need; and
- The cost implications including loss of sales, liabilities of contractors, etc.

Project Co's Contingency plans will feed into the Board's Major Incidence Procedure and Major Infrastructure Failure Response Plan.

Project Co's contingency arrangements will include access to:

- Alternative communications systems;
- Alternative transport arrangements for Project Co Staff; and
- The implementation of Service Specific Contingencies as detailed in the individual Method Statements.

5.1 Staff shortages

Project Co's strategy for managing any threats to manpower through illness, resignation and industrial action will be key to ensuring continuity of service.

Project Co's approach will be to cover difficulties in the following escalating manner:

- A multi-skilling approach for Staff so that they are flexible enough to be able to perform a range of duties during service disruption;
- The use of allied appropriately trained Staff within the teams i.e. porters, security and Receipt & Distribution Staff to act as temporary Staff;
- Use of overtime to those Staff available;
- The use of a team of appropriately trained, retained or bank staff;
- The use of nominated labour agency staff. Due to their unfamiliarity with the site they would normally work alongside site Staff. Agency staff, as part of their employers' nomination, will be CRB cleared.
- The bringing to site of Project Co personnel from other operational sites, such as Wishaw.

In the event of national industrial action, Project Co will initiate a detailed and comprehensive planning process covering all areas potentially affected. This process would involve full risk analysis, client consultation and emergency plans.

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5.2 Equipment breakdown

Any instances of equipment failure are immediately logged with the Helpdesk. The Estates Services will then provide a 'first line' review and complete a repair where possible.

In the event that a timely repair is not possible, a call will be logged with the appropriate manufacturer. The Estates Services Department will act as the point of contact.

Whilst all equipment is important, priority will be given to specific areas that are customer facing or which affect clinical delivery. In these cases, suppliers will provide an emergency call-out maintenance service.

In the event of a piece of equipment being inoperable and another suitable piece of equipment not being available on site, then the required access will be made to our equipment hire suppliers for an alternative.

5.3 Supply difficulties

Project Co will ensure that all stock levels are managed to ensure continuity of service should manufacturer levels diminish. Should such a circumstance arise that required immediate action then we will use the buying power of Project Co's Strategic Sourcing to deliver all appropriate materials to the hospital.

Project Co recognise that the Board has its own preferred supply route and will develop with the Board full and extensive knowledge of its preferred suppliers and with work with the Board to ensure supply relationships are maintained with all such parties.

5.4 Major Incident Procedure

This section covers Project Co's involvement in the Board's Major Incident Procedure in relation to external incidents that may impact on the hospital.

Project Co development and response to Major Emergency Response alert will include:

- Consult with the Board regarding liaison with departments in such planning.
- Ensure that appropriate communication plans are made in relation to the Hospital Information and Co-ordination Centre.
- Review existing local FM plans, and develop new ones as appropriate.
- Update escalation procedures with the appropriate management information
- Response to calls to the Front of House Manager, Security and Car Parking Team Leader and off duty Security and Car Parking Officers.
- Ensuring free access to A&E, including detailing of Porters (x 3) with radios as specified.
- Additional staff brought to site, particularly in services key to the incident and its duration.

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- Opening and unlocking of access doors as specified.
- Set up the meeting room adjacent to the Security Control Room as Co-ordination centre.
- Control of all security operations, appropriate liaison and communication with Hospital Information/Co-ordination Centre and with Police.

5.5 Major Infrastructure Failure planning

In the event of a Major Infrastructure Failure on site, Project Co will have operatives specifically trained to respond to the on-site emergency. Specific Contingency Plans will be also be held in certain departments, for example Estates to deal with specific internal incidents (i.e. loss of water, electricity, etc.).

The Helpdesk Operatives will be issued with comprehensive escalation procedures that deal with any relevant kind of emergency. These procedures will provide a robust link to the service team leaders and managers 24 hours per day, via an on-call arrangement that ensures appropriate support to all the FM services.

Board duty personnel will be familiarised with the Project Co escalation policy and procedures to ensure that they have an appropriate degree of confidence in our ability to respond in all circumstances

Appendix A - Indicative FM Report

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Indicative FM Report

**INDICATIVE
MONTHLY FM REPORT**

DECEMBER 2006



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1 Catering Services

1.1 Details of Self Monitoring of the Output specifications

1.2 Results of staff & Restaurant satisfaction surveys

Awaiting on

1.3 Results of 'S Catering Hygiene Audits

Audit ~

1.4 Summary of compliments/issues in relation to service provision:-

581712 :- Domestic member of staff complained that there was nut covered shortcake for sale which was displayed in the same tray as chocolate covered shortcake, domestic was allergic to nuts & was concerned that this practice as she has already brought this to the attention of the Catering Staff.

1.5 Details of Catering Services failures and actions taken to address these failures

Catering Service Score – 99.69%

The following element scores fell below 95%

Ad-hoc requirements delivery time 87.50 %

Contributing Factors

High demand during peak times

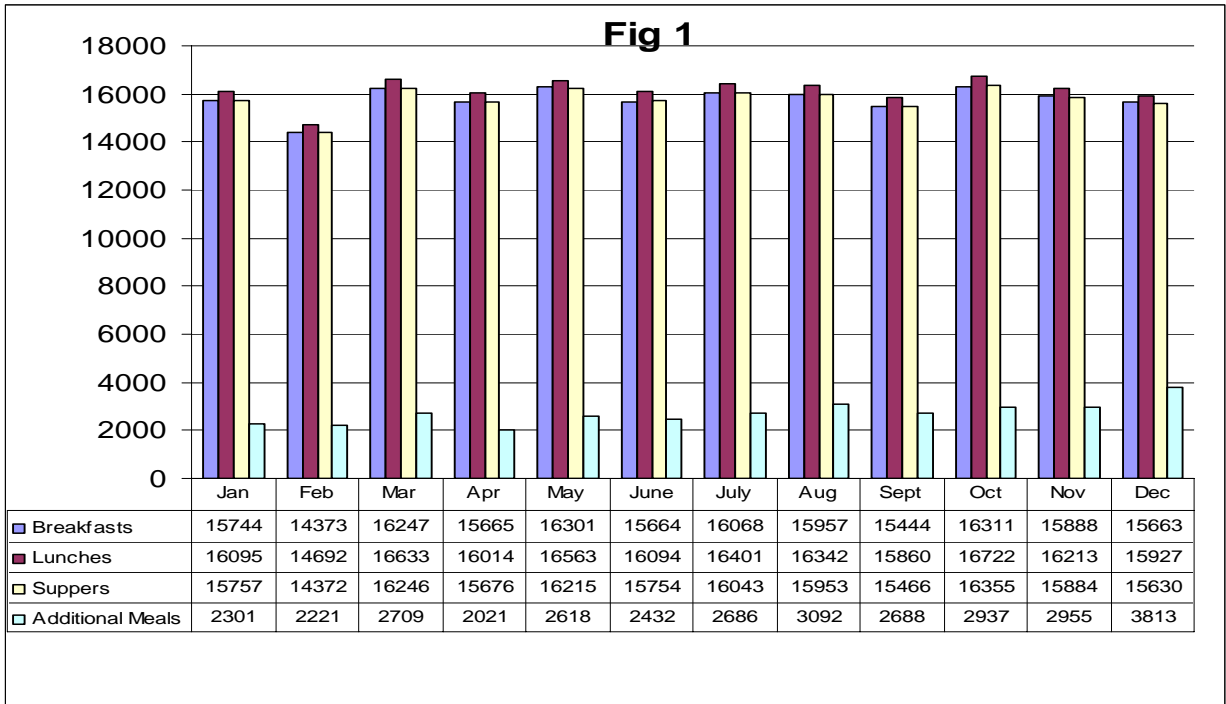
Actions Taken

Catering Dept send a detailed copy of failures to the Board Representative on a monthly basis.

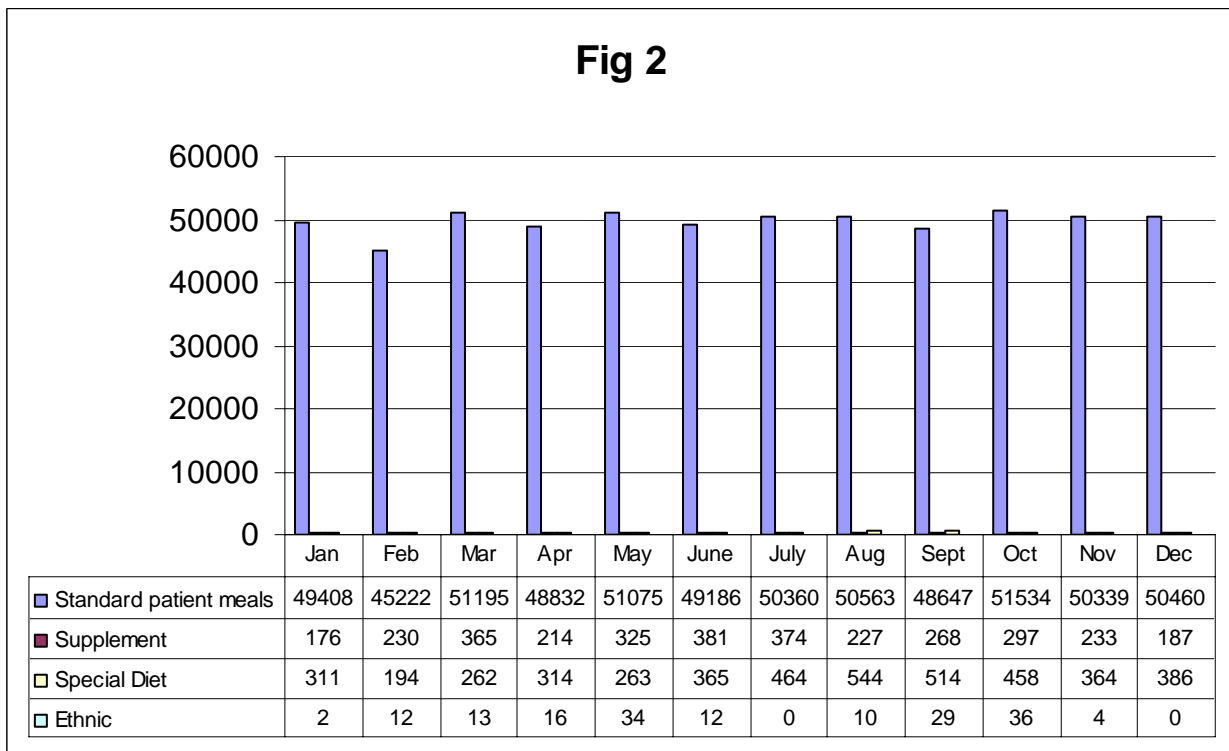
1.6 Patient meal details

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Numbers and types of meals served.
Types of Meals Served

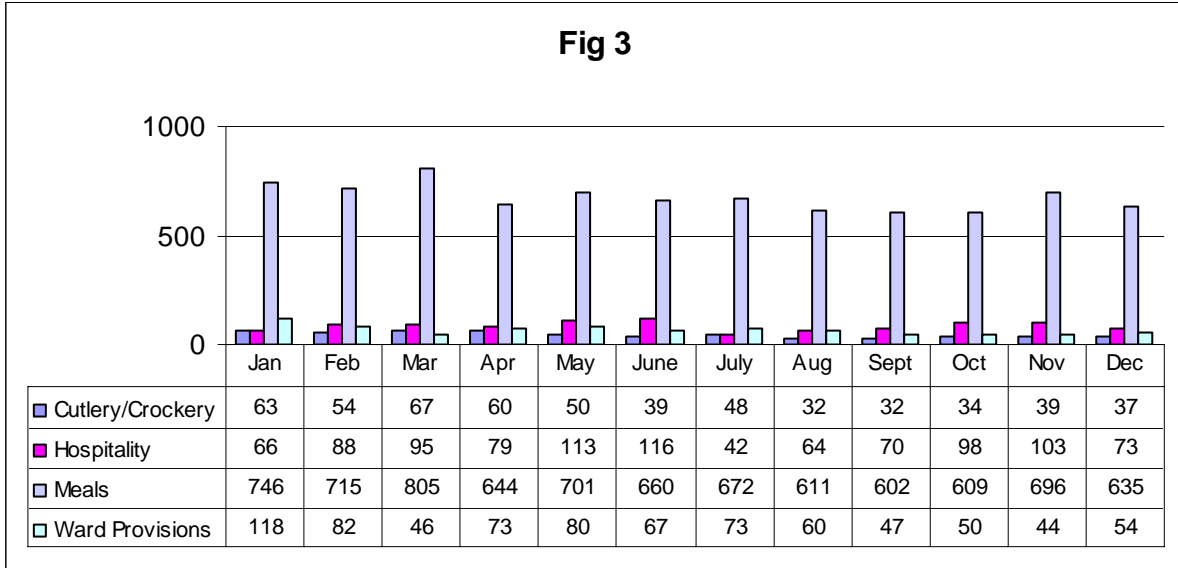


No of Meals Served



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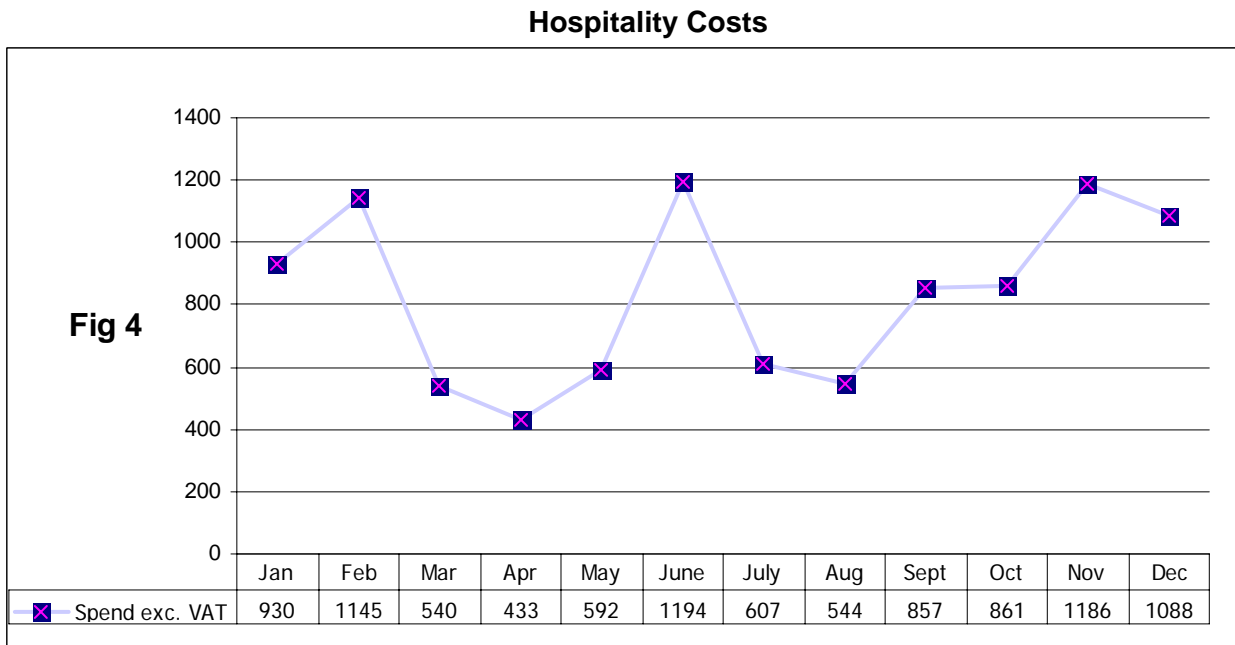
Catering Reactive Tasks



1.7 Results of patient's staff surveys

1.3 Details of Hospitality

1.3.1 Details of hospitality per department & costs – also see appendix 1



1.8 HR. Issues

1.8.1 Details of staff training

None

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1.8.2 Departmental Issues/News

- Cutlery not being returned to Catering Dept – discussions ongoing with
- Ad-hoc meal requests very high – discussions to be held with

1.9 Added Value

- Coffee Machine being supplied to Endoscopy Dept Day Surgery
-

2 Domestic and Residential Services

2.1 Details of self-monitoring of the output specifications

2.1.1 Results of customer satisfaction surveys

Awaiting information from on joint approach.

2.1.2 Summary of compliments/issues in relation to service provision

None

2.1.3 Results of 'S Domestic Audits - All findings actioned within priority response times.

2.1.4 Details of Domestic penalty failures and action plan to remedy any service failures.

Domestic Service Consolidated score –97.31%

Area scores details are: - Area 1 – 97.31%
 Area 2 – 97.87%
 Area 3 – 97.76%

Details of Element scores, which fell below 95 %

Area 1

Clinical Floor Maintenance - 94.50%

11 fails out of 60 planned tasks

Clinical Sanitary Ware - 94.17%

10 fails out of 60 planned tasks

Clinical Furniture, Fixing's Fittings – 94.53%

1 Emptying Waste fail out of 60 planned tasks

15 Horizontal fails out of 93 planned tasks

6 Vertical fails out of 68 planned tasks

Area 3

Clinical Floor Maintenance – 94.50%

11 fails out of 60 planned tasks

Clinical Furniture, Fixings, & Fittings – 91.63%

8 Emptying of Waste Disposables fails out of 69 planned tasks

13 Horizontal fails out of 75 planned tasks

3 Vertical Surfaces out of 63 planned tasks

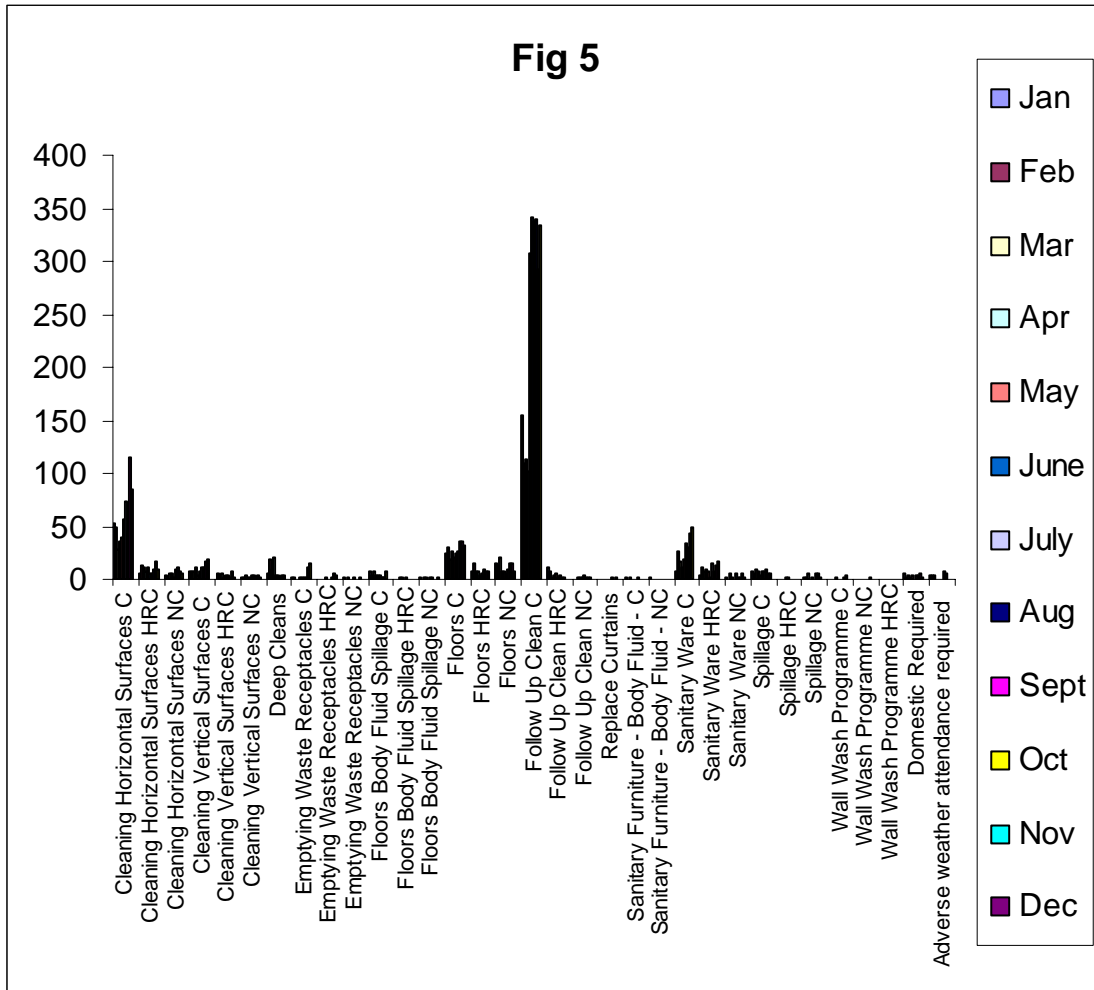
ALL FAILURES WERE ADDRESSED IMMEDIATELY AT TIME OF AUDITS. REACTIVE JOBS WERE RAISED AND COMPLETED WITHIN PRIORITY TIMESCALES

2.2 Summary of service provision

2.2.1 Summary of Domestic reactive cleaning requests by type

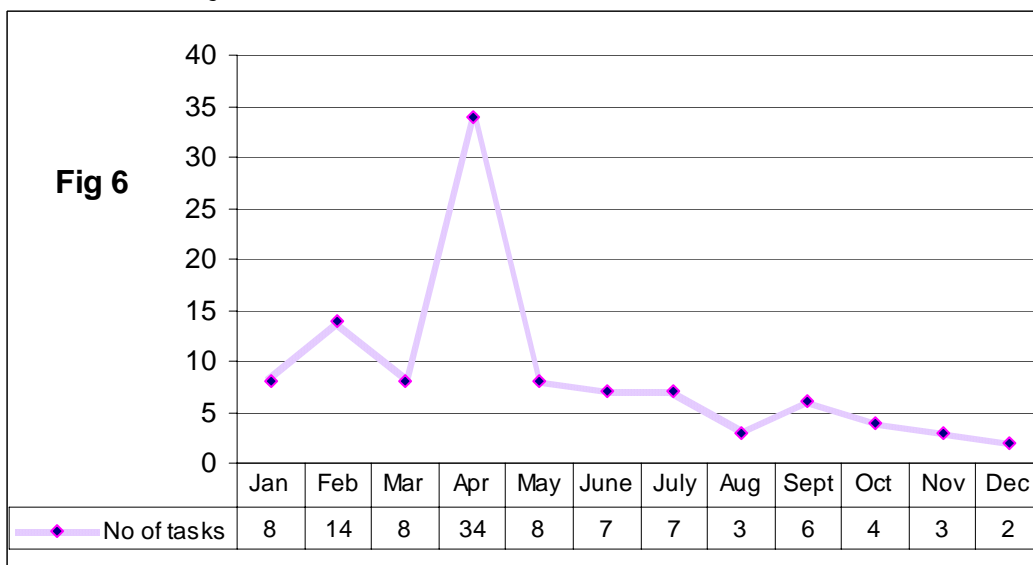
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Reactive Tasks by Type



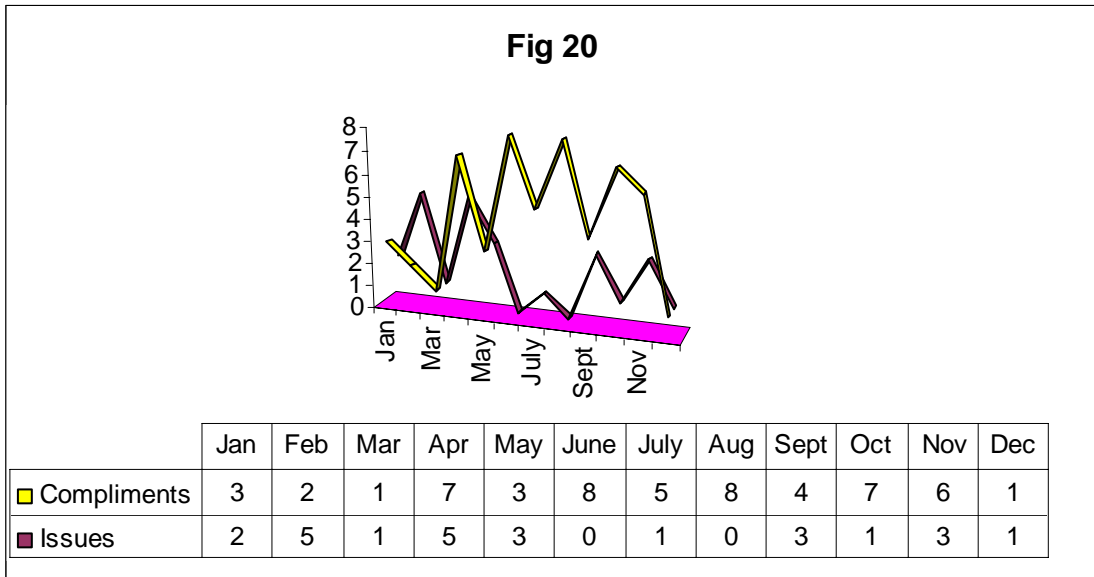
2.3

Summary of Additional Domestic cleans undertaken



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Number of Additional Domestic Cleans Undertaken



2.4 HR. Issues - None

2.3.1 Details of Domestic staff training:

No training carried out in December

2.4 Departmental Issues/News

- Approximately 300 Maternity follow up cleans per month not being put through archibus by staff

2.5 Added Value

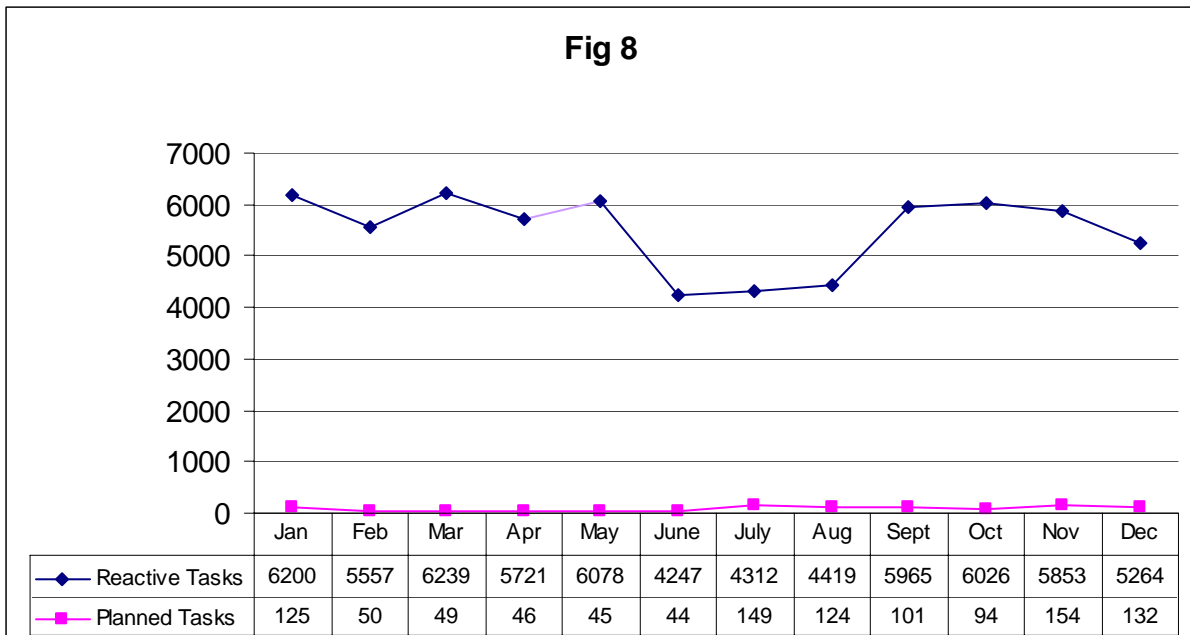
On average Serco are requested to clean & defrost Ward based fridges/freezers on a monthly basis.

Out of hours Curtain Hanging is being carried out on a regular basis

H.A.I 2006 Serco are working in partnership with to provide data to enable to complete H.A.I database on a monthly basis.

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3.2.2 Patient Movement



3.3 HR. Issues

3.3.1 Details of staff training for Central Support

- Fire awareness training. Manual handling training

3.3.2 Departmental Issues/News

3.3.3 Added Value

A designated porter has been assigned to Accident & Emergency Department and Theatre

4 Switchboard Services

4.1 Details of self-monitoring of the output specifications

4.1.1 Results of staff satisfaction surveys

Awaiting information from on joint approach.

4.1.2 Details of penalty failures and action plan to remedy any service failures.

Service score ~ 99.23%

Element scores that fell below 95%

Call Handling ~ 93.88%

Issues

10 Issues for Nov 06 (to be discussed at Operational Review Group Meeting)

Ongoing ~extremely poor response to Emergency Team call out at 11:00 each day - staff require to be reminded to respond

Ongoing ~staff not using Internal Directory

Ongoing ~wards constantly contacting switchboard requesting internal extension numbers, duty doctor and page number

4.1.3 Solution- Action Plan

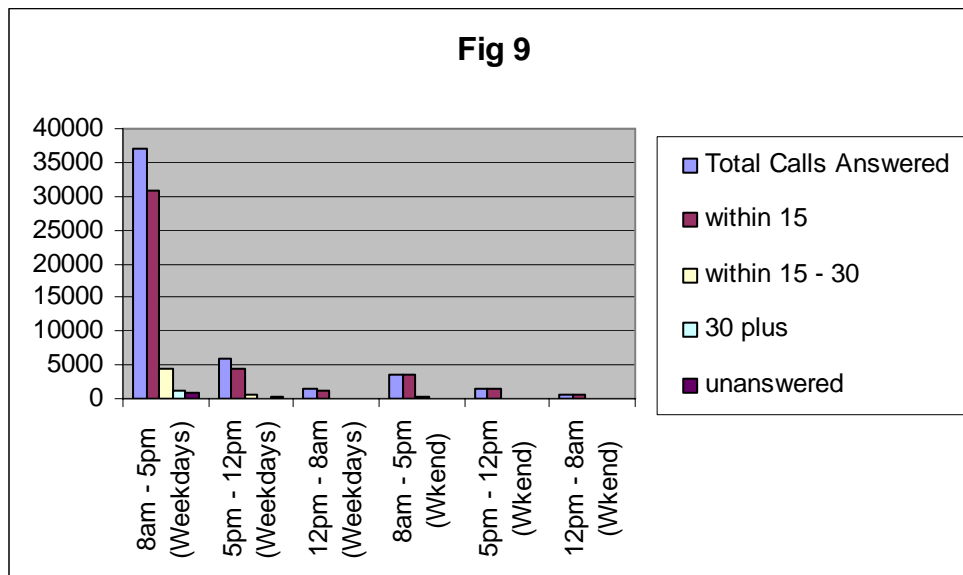
Issues to be discussed at the Soft FM

4.1.4 Summary of Compliments/Complaints in relation to service provision

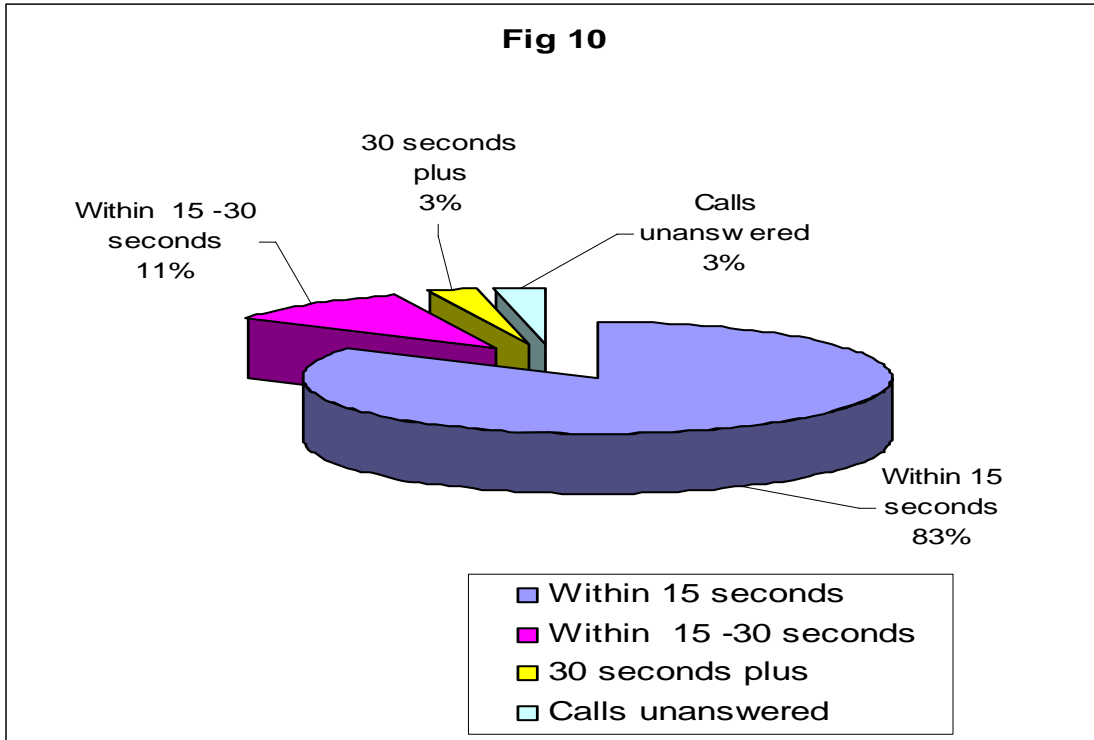
None

4.1.5 Operator & system performance report via call logger

Operator Responses

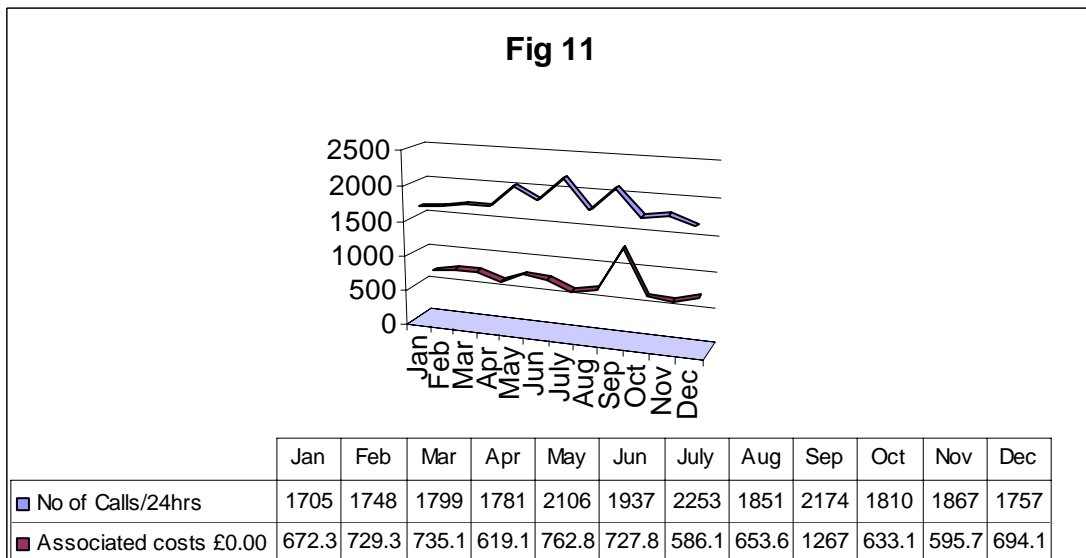


4.1.6 Switchboard calls responded to in December



4.1.7 Summary of all calls (24hrs) made from the Residences

Calls made from Residences



4.1.8 Report on monthly paging system testing – see appendix 3

4.1.9 Summary of staff pagers – See appendix 4

4.1.10 Summary of telephone directory amendments –

23 Amendments

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4.2 HR Issues

4.2.1 Details of staff training

None

4.2.2 Departmental Issues/News

Emergency call out test – page holders do not call helpdesk to confirm they have received the page.

4.2.3 Added Value

Connecting callers who telephone switchboard instead of using internal directory.

5 Security Services

5.1 Details of self-monitoring of the output specifications

5.1.1 Results of client satisfaction surveys

Awaiting information from on joint approach.

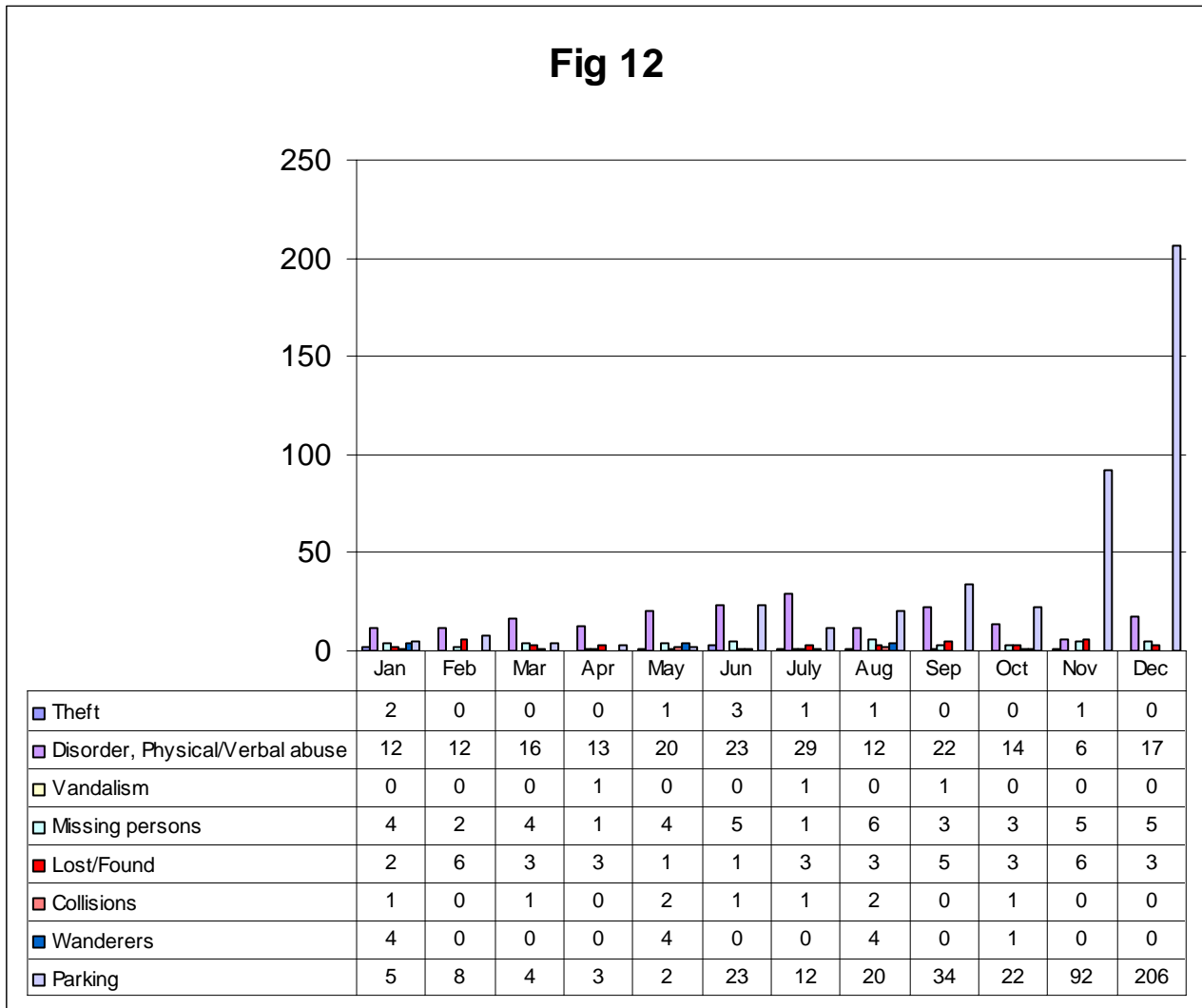
5.1.2 Details of penalty failures and action plan to remedy any service Failures.

Service Score 99.68%

5.1.3 Summary of compliments/issues in relation to service provision –

576057: - Sister Scoular complimented security officer George McCaskey on way he dealt with unruly female who was refusing to leave the department.

Incident responses



5.1.4 Incidents of note

Swipe Access at The Education Suite External door has been out of service since 19th December 2006, PMS Fails have been recorded in December's PMS Report.

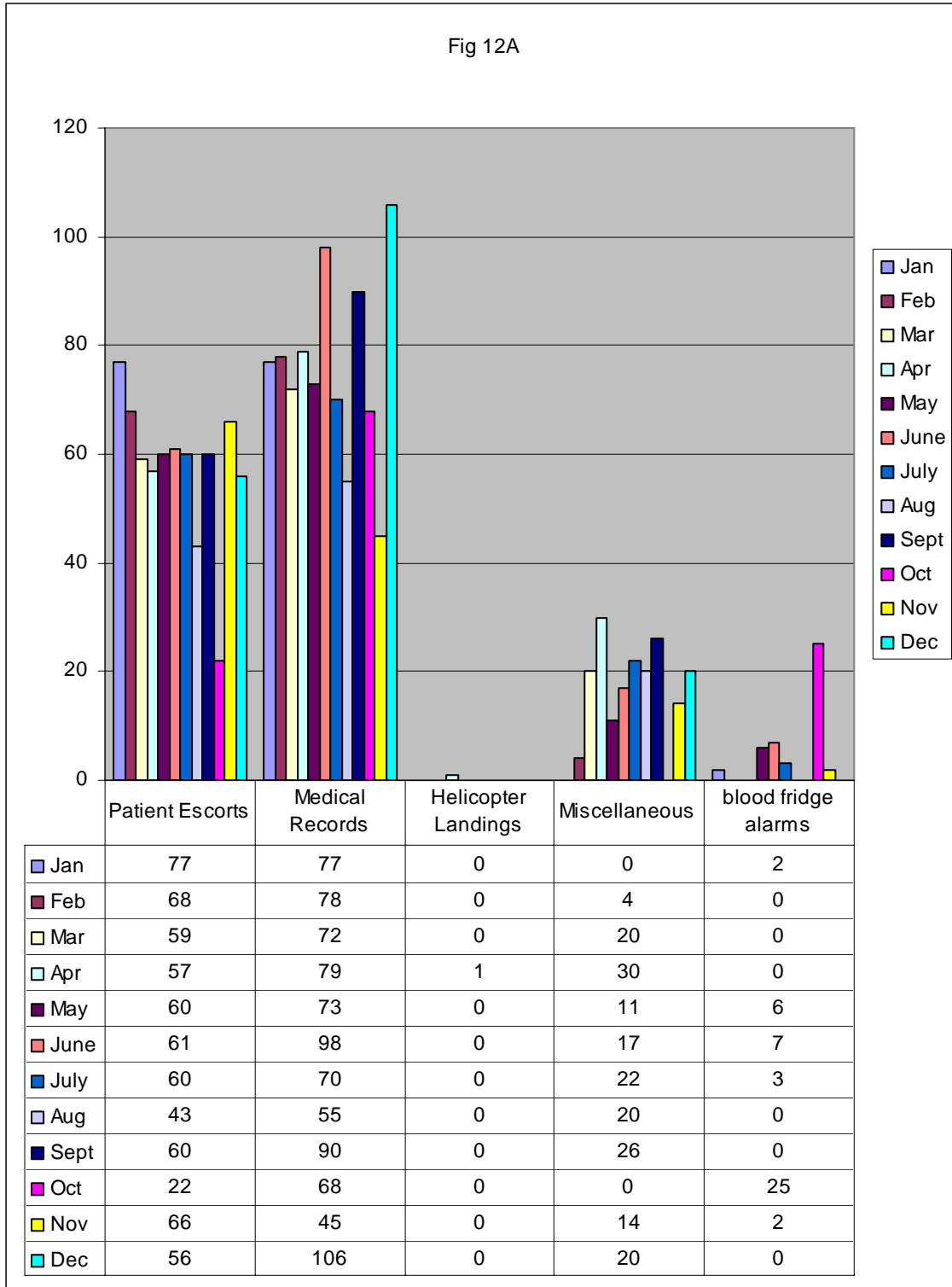
5.2 HR. Issues – None

5.3 Details of staff training for Security

Security staff receiving Fire training

5.4 Departmental Issues - None

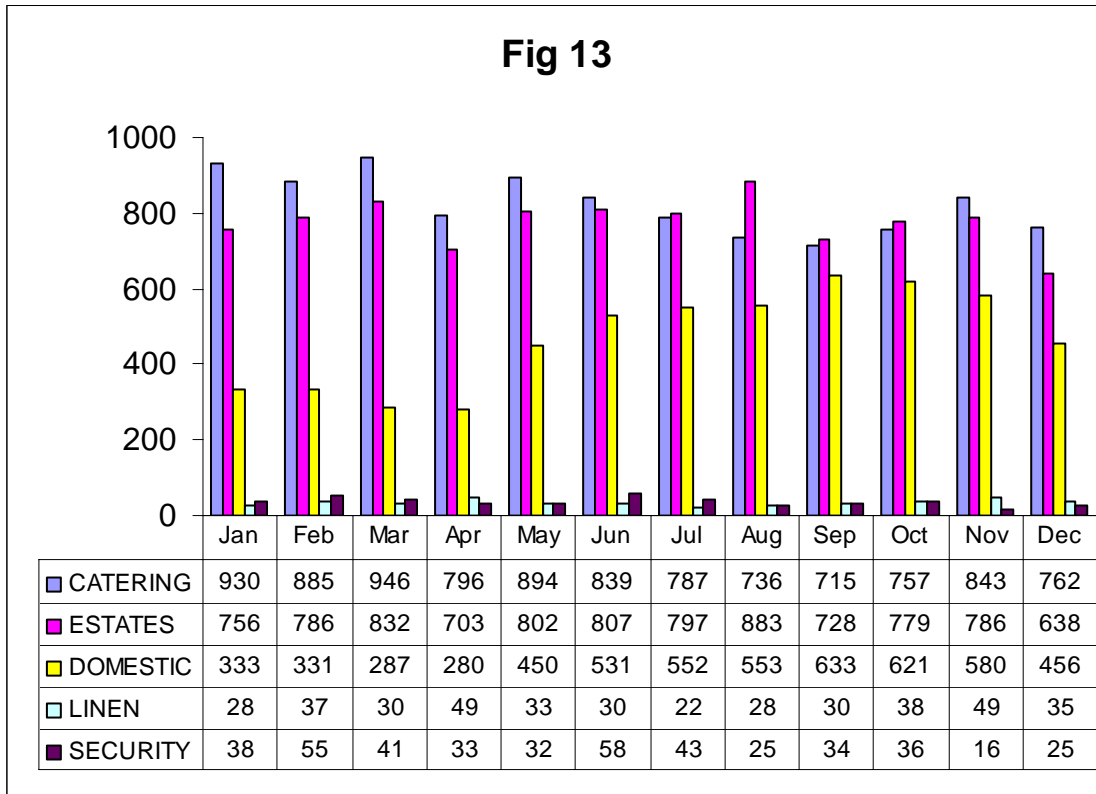
5.5 Added Value



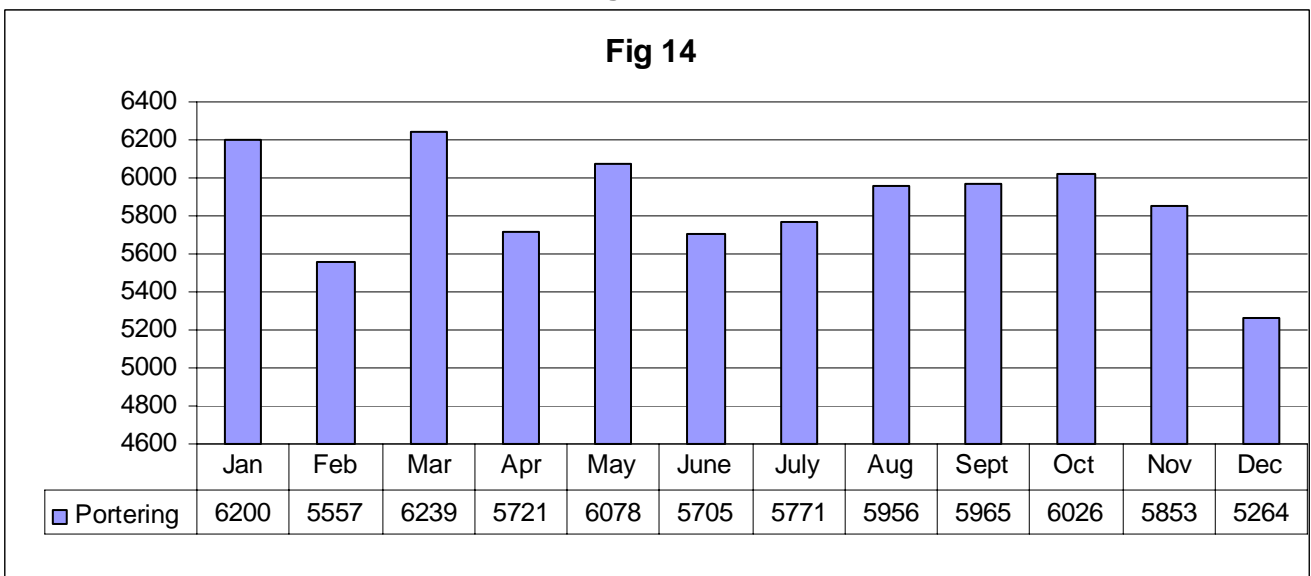
6 Helpdesk Services

6.1 Summary report, which details the breakdown of calls by category.

Helpdesk calls split by service



Portering reactive tasks



6.2 Results of Client Satisfaction Survey

Awaiting information from on joint approach.

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6.3 Summary of compliments/issues in relation to service provision

No compliments/complaints received

6.4 Department Issues /News

- None
-

7 Linen Services

7.1 Details of self-monitoring of the output specifications

7.1.1 Client satisfaction surveys

Awaiting information from on joint approach.

7.1.2 Details of penalty failures and action plan to remedy any service failures.

- Service Score 100%.

7.1.2 Summary of compliments/issues in relation to service provision.

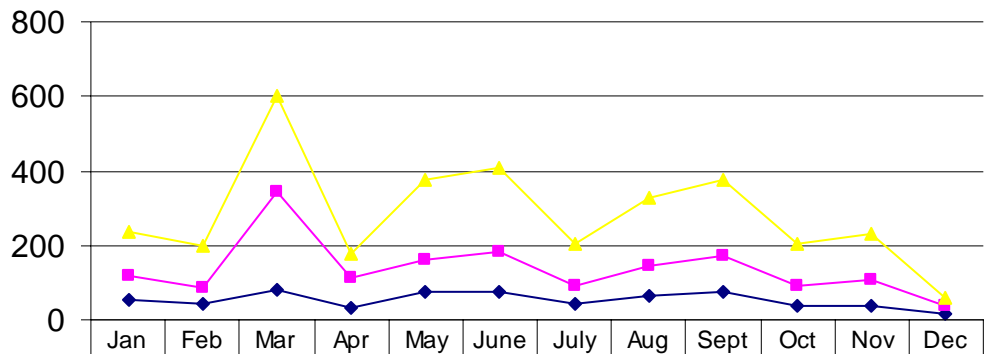
None reported.

7.2 Summary of service provision

7.2.1 Summary of staff uniform issue.

Total number of fittings/alterations/items ordered

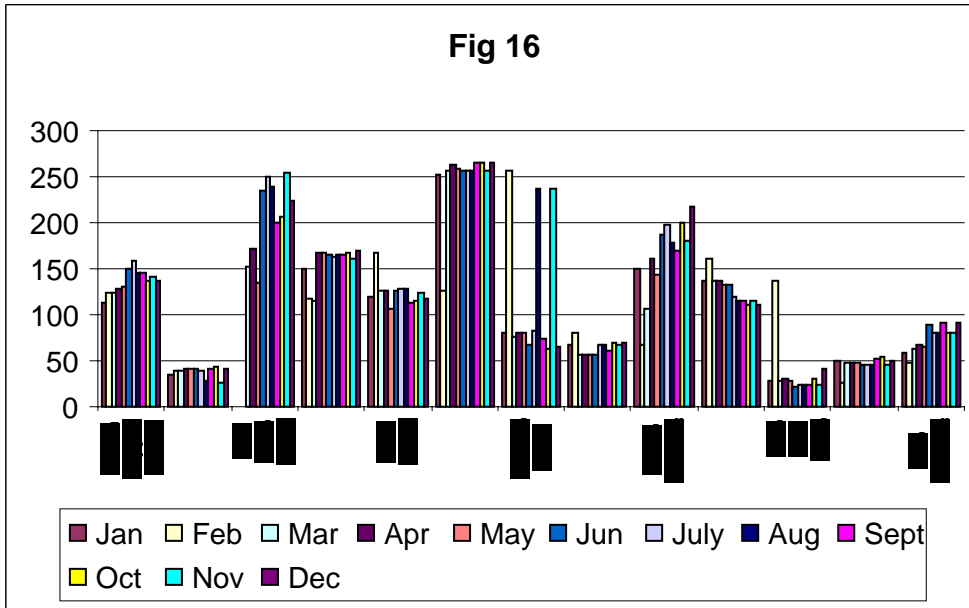
Fig 15



—▲— No. of Items ordered in month	120	112	259	64	215	227	112	185	204	113	124	20
—■— No. of items altered	62	44	259	84	89	103	52	83	98	53	67	20
—◆— No. of fittings	54	41	83	30	74	77	41	62	73	39	38	18

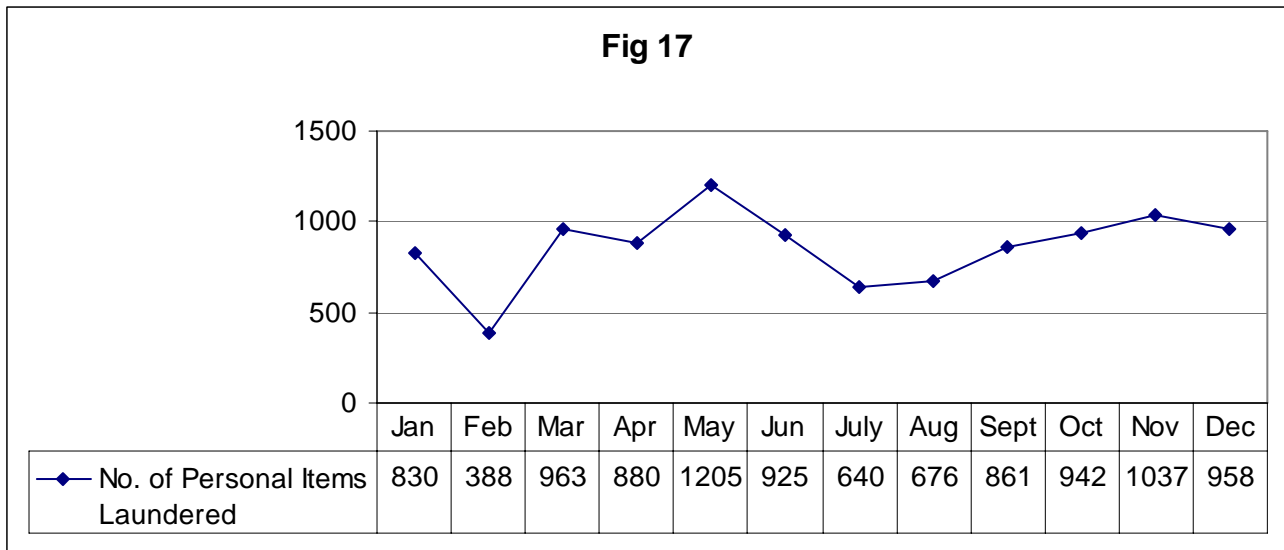
7.2.2 Results of stock counts

Uniforms – stock count totals



7.2.3 Summary of personal items laundered per month.

Number of personal items laundered



7.3 HR.Issues

7.3.1 Details of staff training for Linen

None

7.4 Department Issues/News

Dept still experiencing shortage of curtains/screens have been informed.

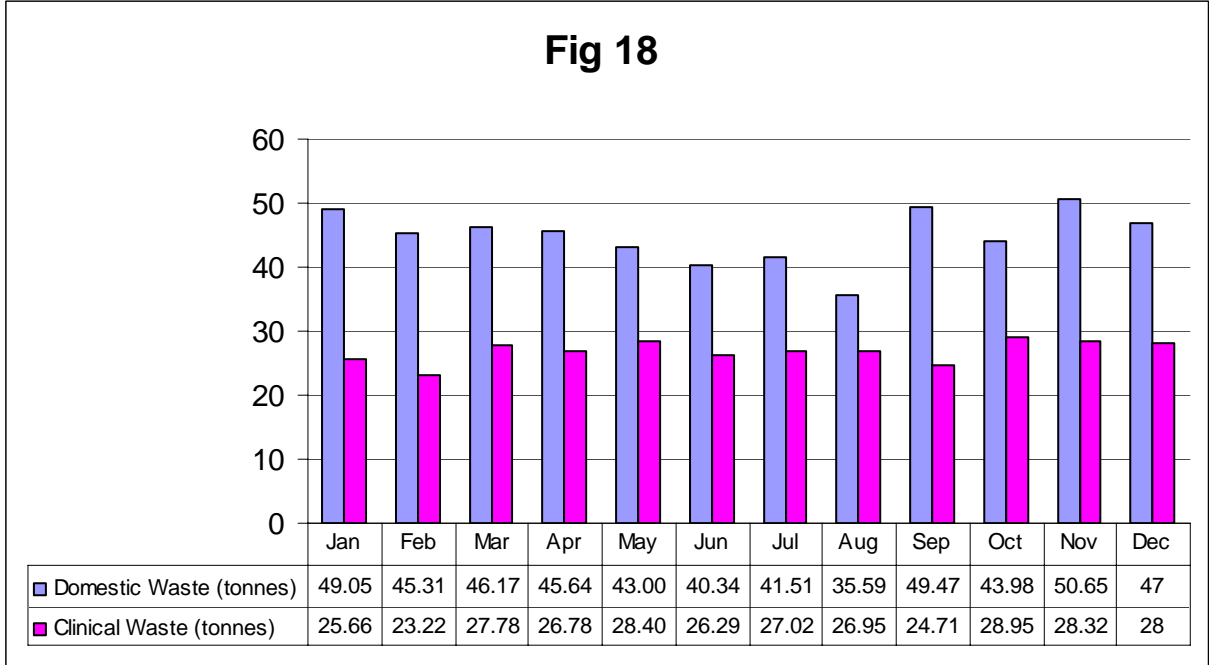
7.5 Added Value

None

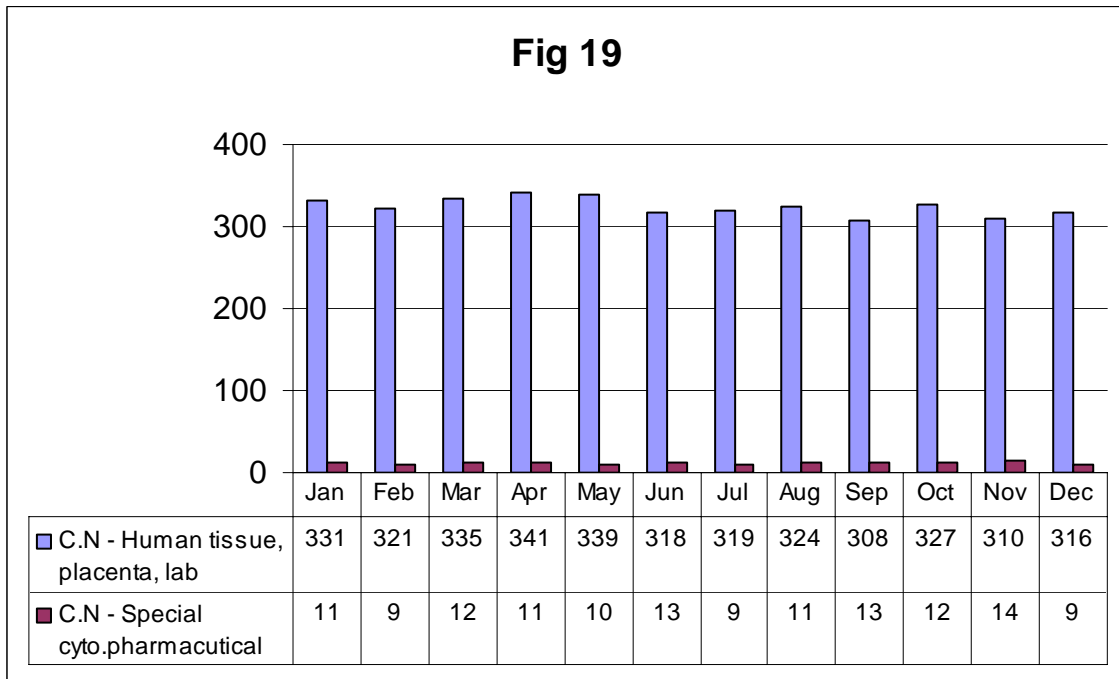
8 Waste Management

8.1 Details of Domestic and Clinical Waste and no. of consignment notes

Domestic and Clinical Waste



Number of consignment notes

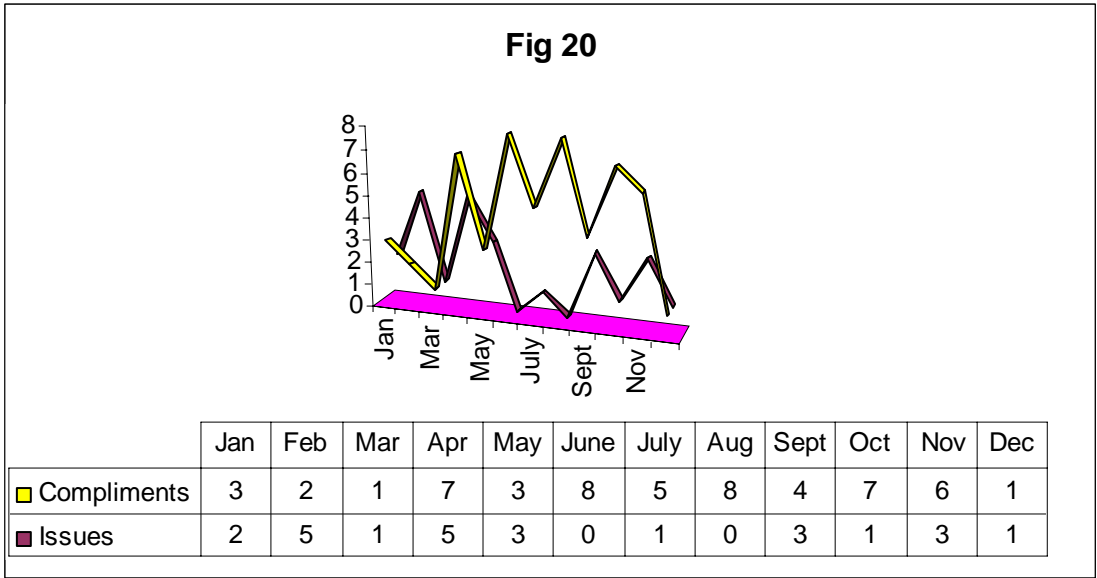


8.2 Compliments/Issues summary

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8.3 A summary of compliments/issues made across all services.

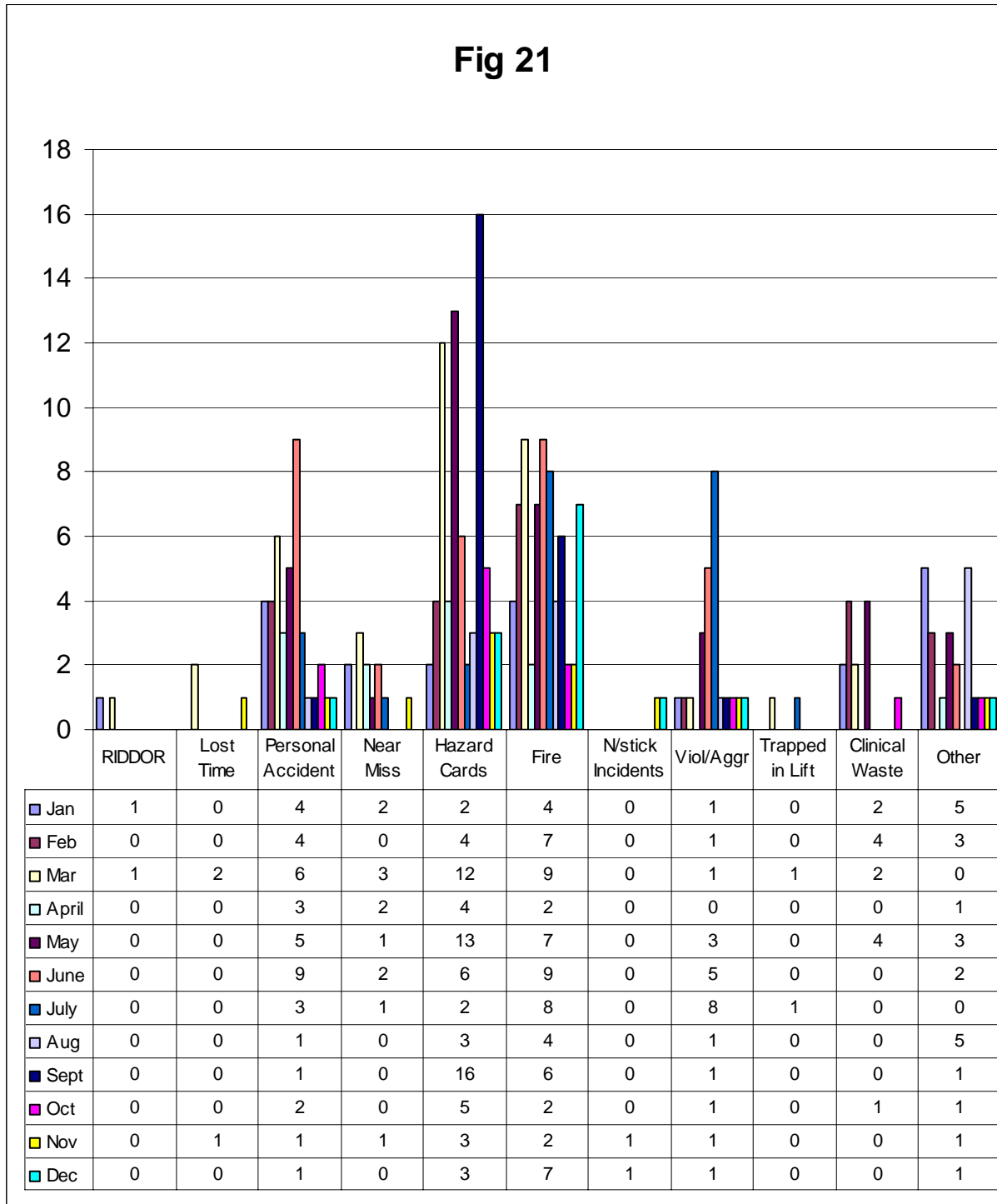
Compliments and Issues across all services



N.B. Details of above are provided in each service.

9 Incident Reporting

9.1 Details of all incidents to the public & FM service provider employees & sub contractors (making use of IR1 form)



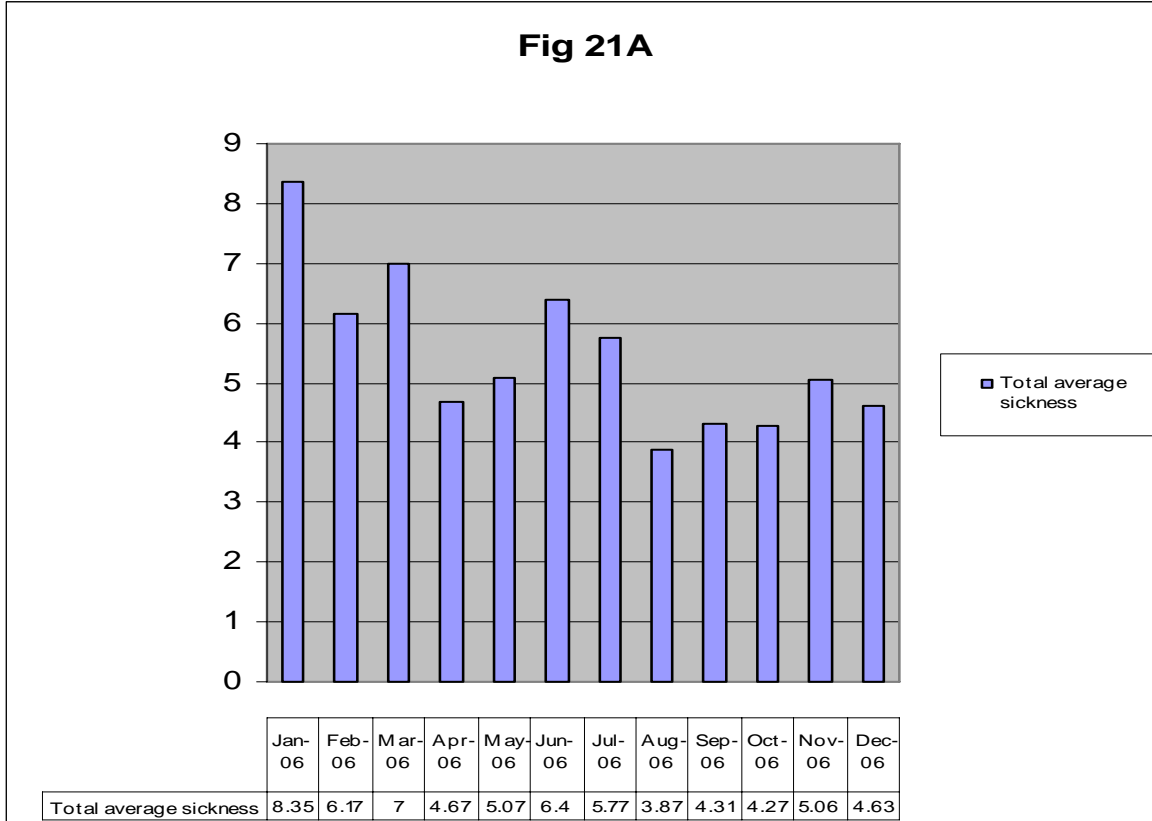
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IR1 Incidents

1Riddor	Nil
2Lost Time	Nil
3Personal Accident	Domestic Assistant, Ward 2 grazed shoulder on shelf when straightening up after cleaning skirting board
4Hazard Card	Tear in carpet
5Hazard Card	Metal edging off stair tread
6Hazard Card	Nut shortcake on sale on same tray as normal shortcake (nut allergy hazard)
7Fire	Fire Alarm Activated: Ward 23 Pantry fumes burnt toast
8Fire	Fire Alarm Activated: Central Level 0 Lift 7
9Fire	Fire Alarm Activated: north Block Level 2 Sector 1, Parent Toilet - steam from shower
10Fire	Fire Alarm Activated: South Block Level 2 Sector 4 Day Surgery staff sitting room fumes from burnt toast
11Fire	Fire Alarm Activated: West Block Level 1 Sector 1 Ward 5 BGU broken by patient
12Fire	Fire Alarm Activated: West Block Level 1 Sector 2 Ward 6 toilet fumes from area freshener
13Fire	Fire Alarm Activated: Ward 23 Pantry fumes burnt toast Domestic Assistant: Ward 16 - moving tube lying on table had diabetic needle attached resulting prick to thumb
14Needlestick	
15Violence & Aggression	Serco Employee: verbal abuse restaurant (under investigation)
16Trapped in lift	Nil
17Clinical Waste	Nil
18Others	ACCU: Nurse slipped on wet floor (no injury sustained) incident under investigation

10 HR Issues – Summary

10.1 Staff Sickness contract wide



11 Estates Services

11.1 Details of self monitoring of the output specifications

11.1.1 Results of client satisfaction surveys

Awaiting information from on joint approach.

PMS Service Score 99.42%

11.1.2 Details of penalty failures and action plan to remedy any service failures.

No Element scores fell below 95%

Summary of Failures

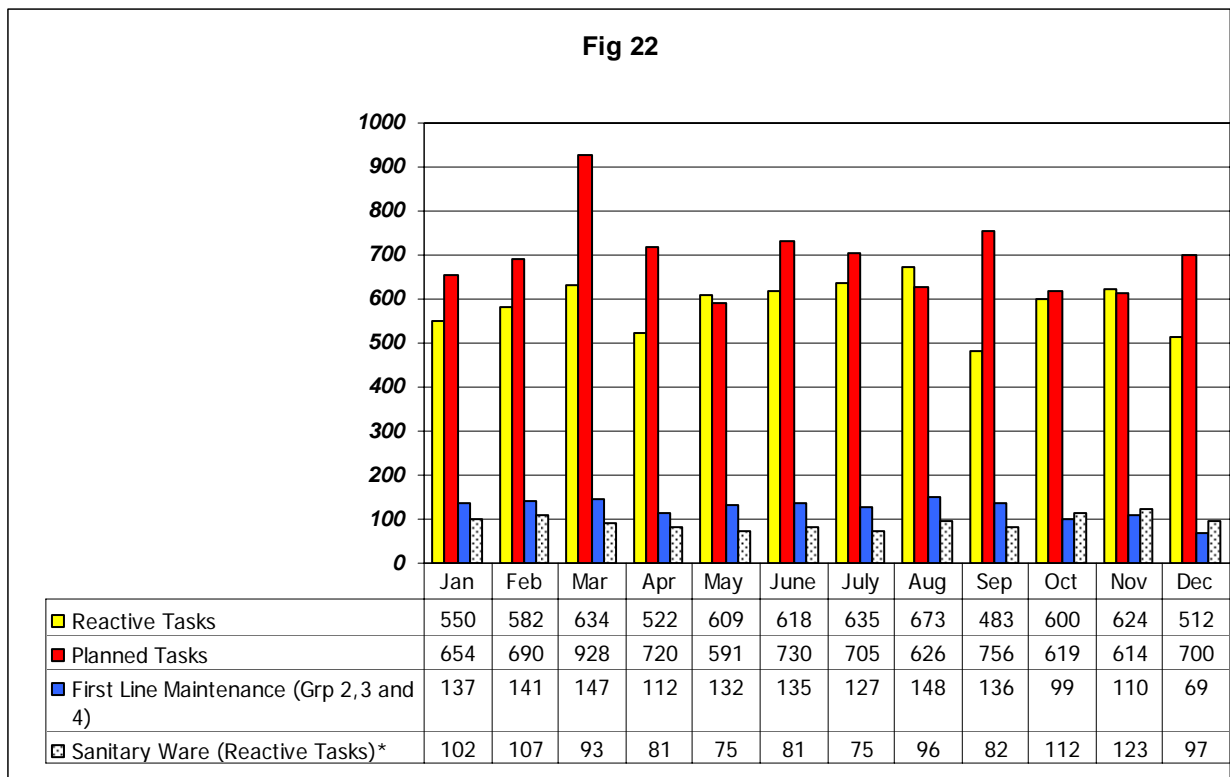
- 0 Reactive Task Failures
- 4 PPM Task Failures

External doors at Ronald Miller Suite are unable to be secured due to faulty release mechanism. Awaiting delivery of replacement unit.

11.1.3 Summary of compliments/issues in relation to service provision

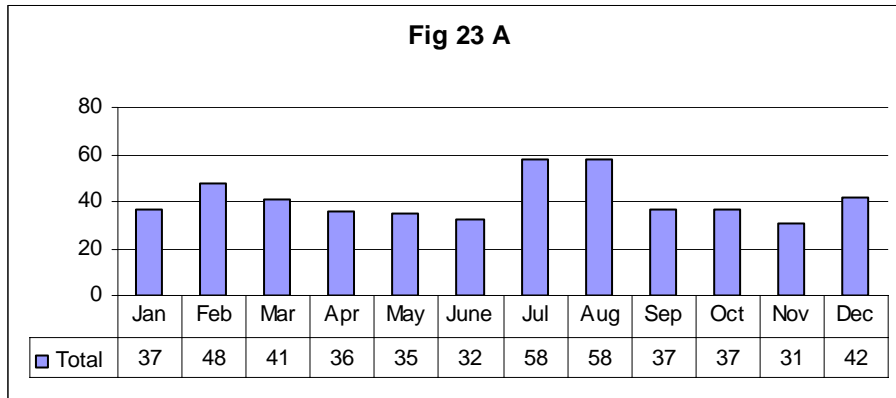
11.2 Summary of service provision

11.2.1 Summary of Estates Planned & Reactive Tasks



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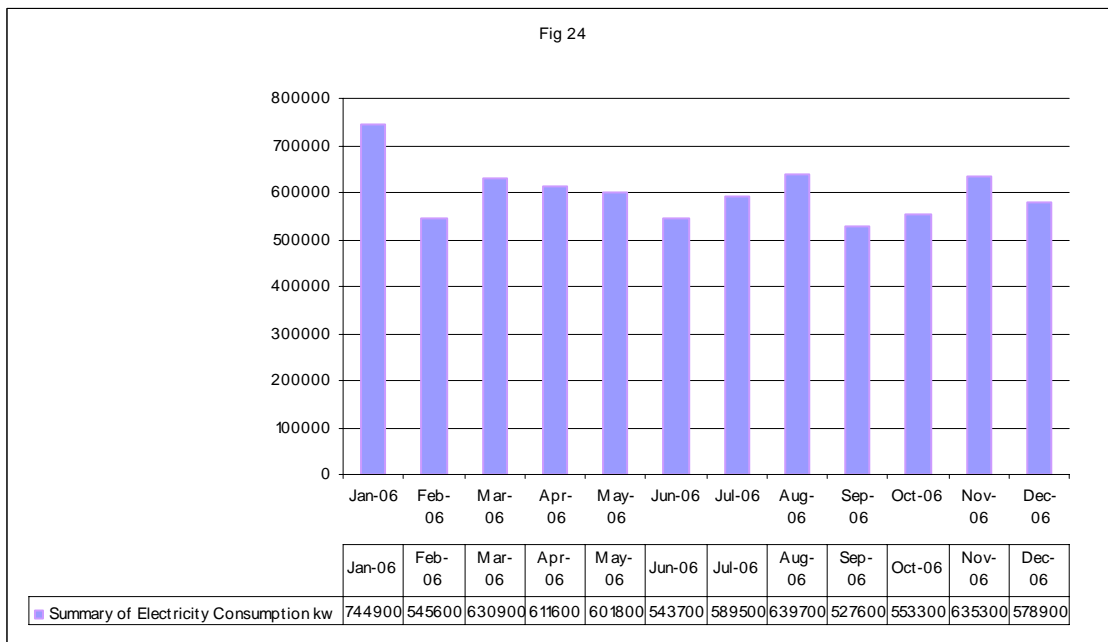
11.2.2 Total number of callouts per month



11.2.3
5

Breakdown of call outs per department - See Appendix

11.2.4 Progress report on energy consumption



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Fig 25

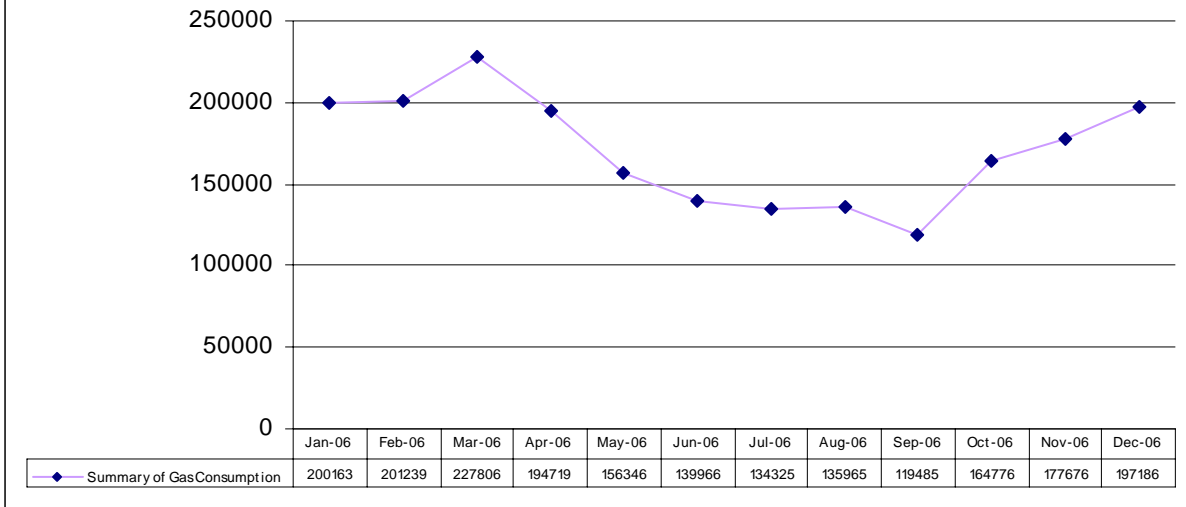
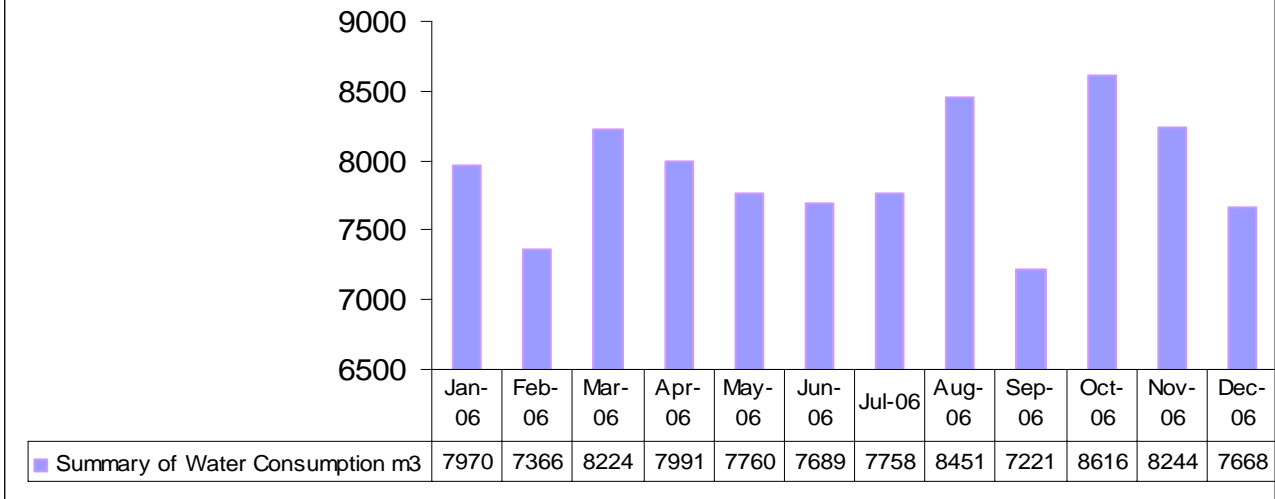
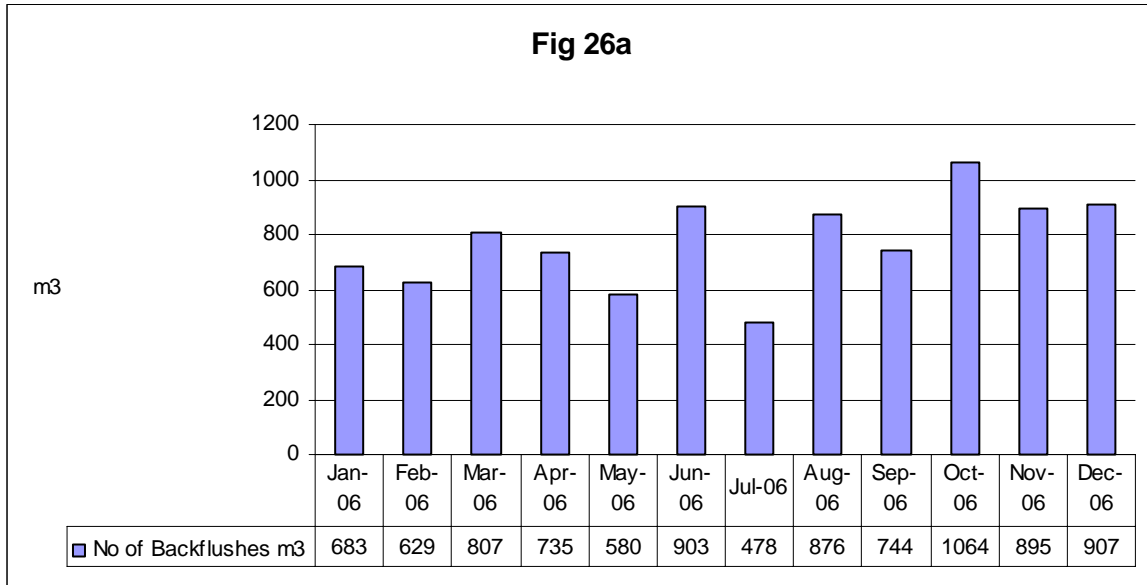


Fig 26



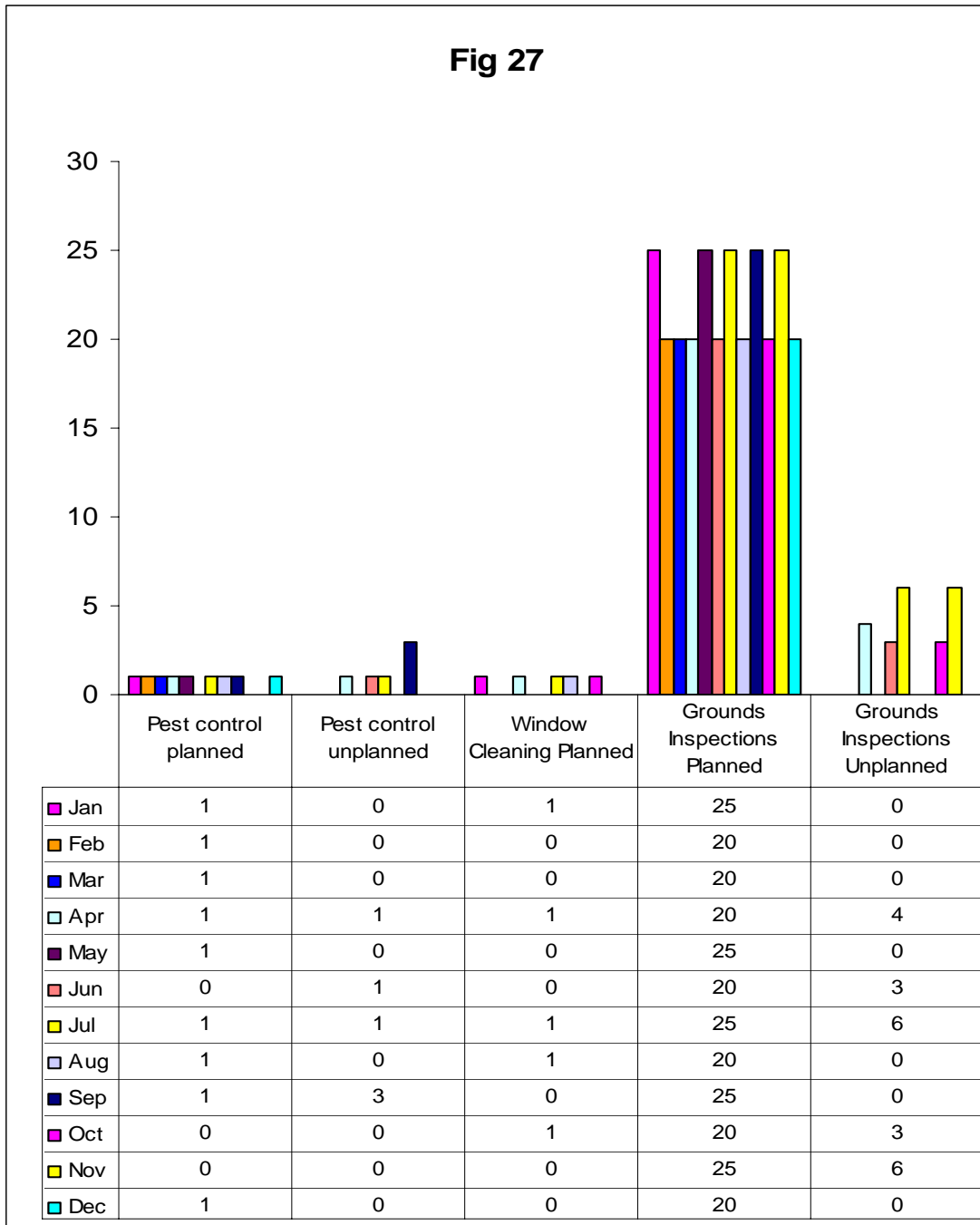
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Details of Back Flush Discharge



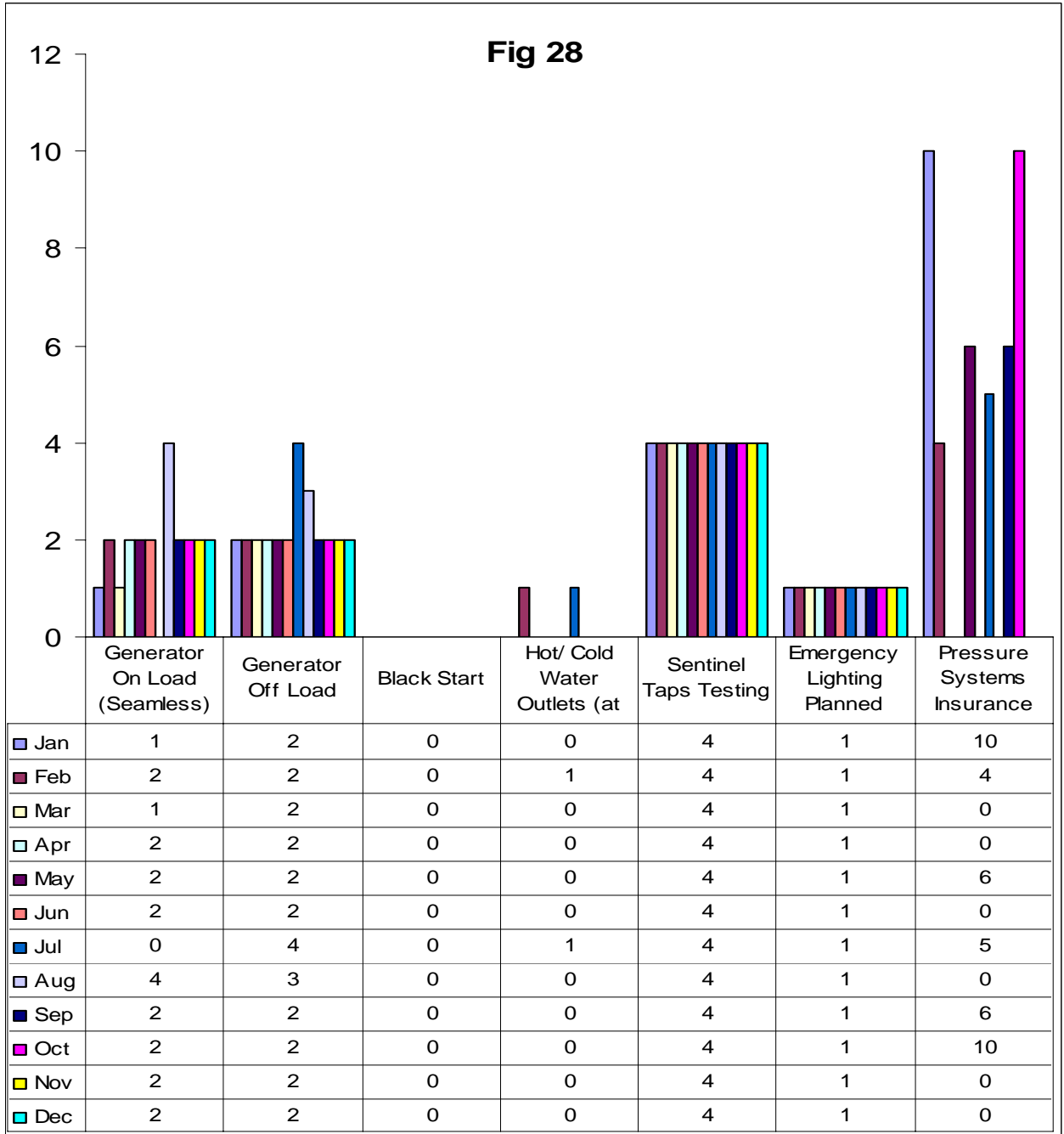
11.3 Summary of pest control/window cleaning/ grounds

11.3.1 Inspections



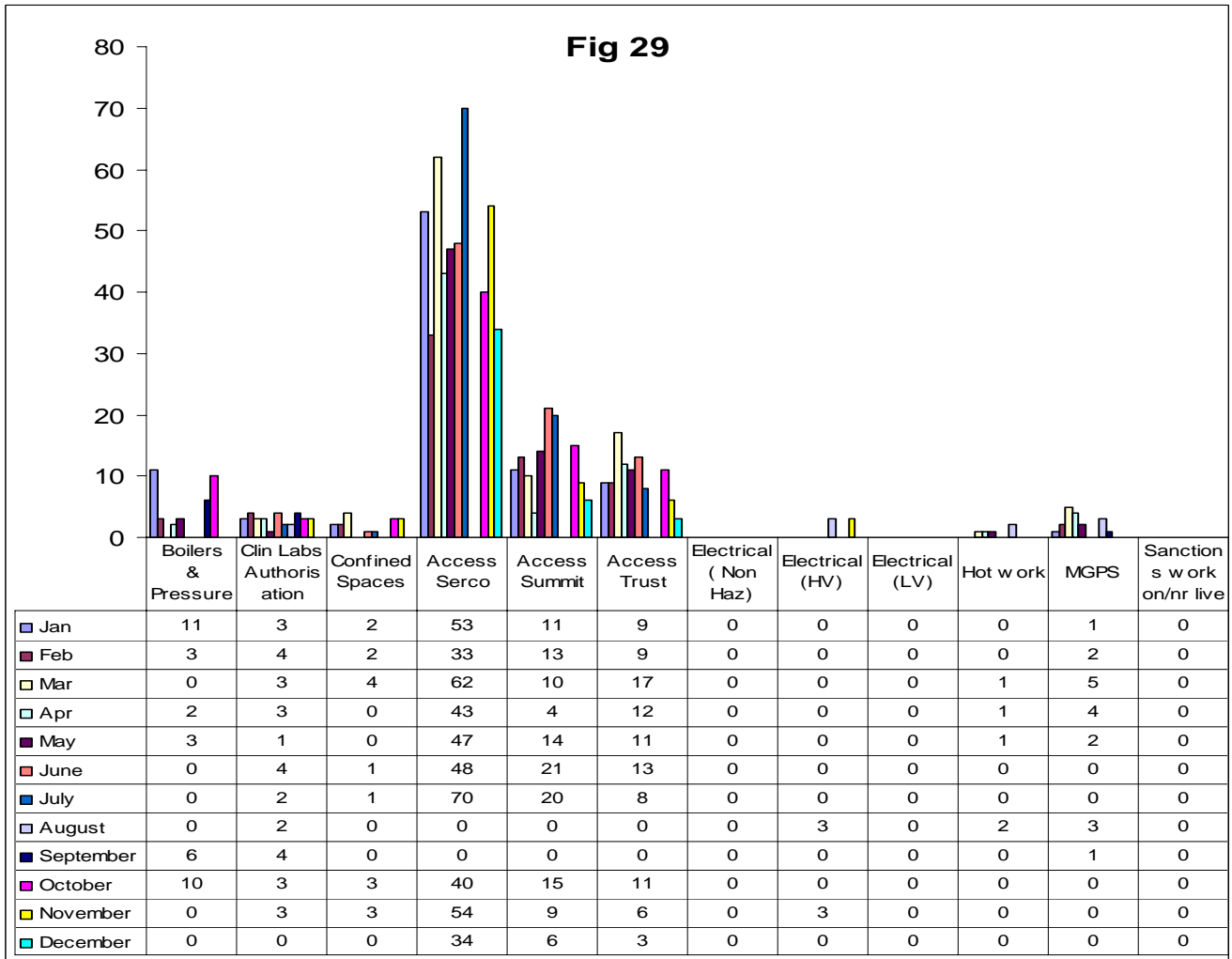
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11.3.2 Summary of Contingency testing

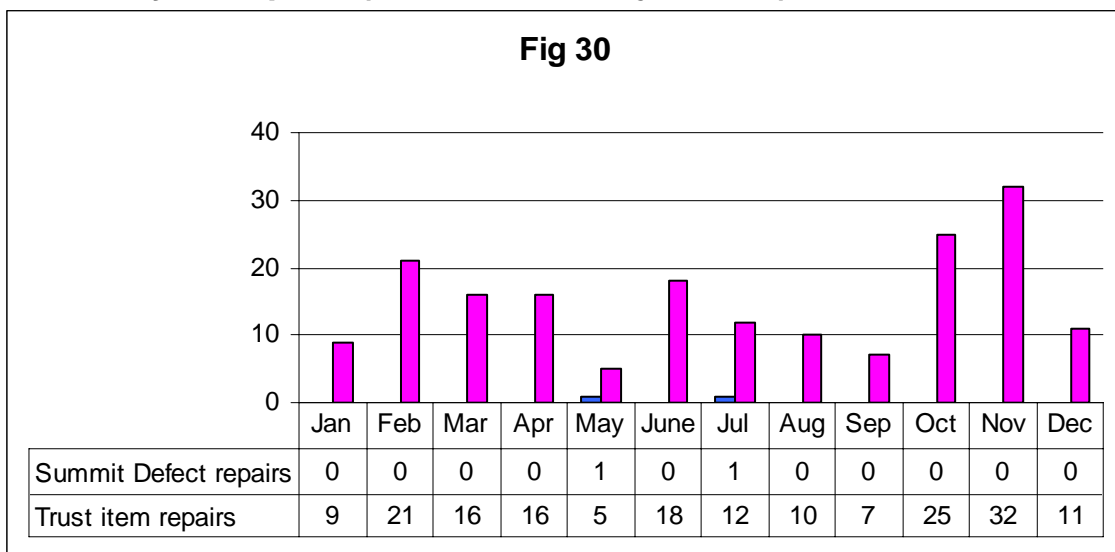


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11.3.3 Summary of permits to work issued

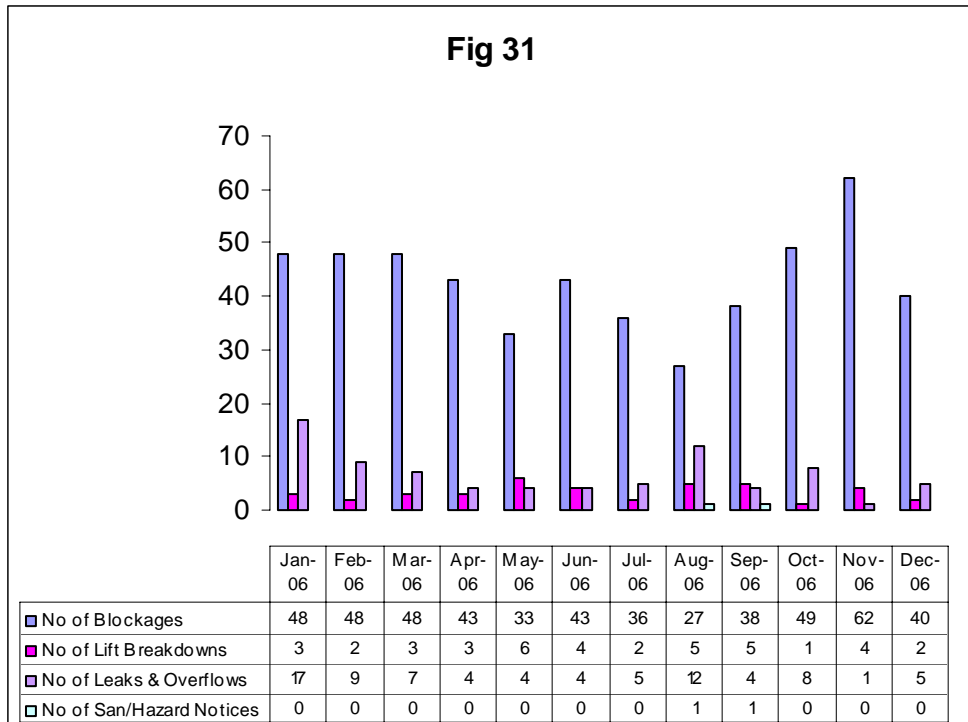


11.3.4 Summary of Repairs (based on no. of job lines)



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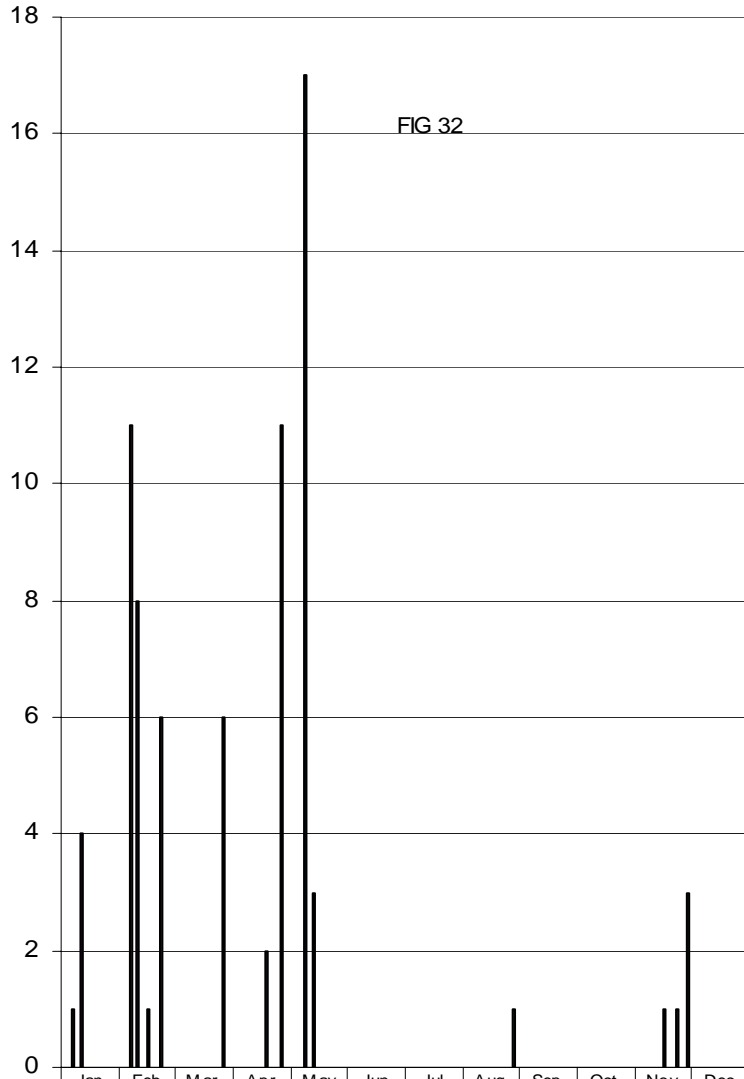
11.3.5 Summary of Blockages, Leaks & Overflows, Lift Breakdowns And SAN/Hazard Notice



11.4HR Issue

11.4.1 Details of staff training

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	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
▣ Abrasive Wheel Training	0	0	0	0	0	0	0	0	0	0	0	0
▣ Access Ladder training	0	0	0	0	0	0	0	0	0	0	0	0
▣ Appraisal Training	0	0	0	0	0	0	0	0	0	0	0	0
▣ Blood and body Fluid Spillage	0	0	0	0	0	0	0	0	0	0	0	0
▣ Boilers & Pressure Systems	0	0	0	0	0	0	0	0	0	0	0	0
▣ Confined Spaces	1	11	0	0	0	0	0	0	0	0	0	0
▣ Control of Infection	0	0	0	0	17	0	0	0	0	0	0	0
▣ Electrical Periodic Testing	0	0	0	0	0	0	0	0	0	0	0	0
▣ Enterprise Training	0	0	0	0	0	0	0	0	0	0	0	0
▣ Fire Awareness Training	4	8	0	0	0	0	0	0	0	0	0	0
▣ Gas Awareness Training	0	0	0	0	0	0	0	0	0	0	0	0
▣ Gerberit Training	0	0	0	0	3	0	0	0	0	0	0	0
▣ Great Plains/Finance/E proc	0	0	0	0	0	0	0	0	0	0	0	0
▣ Hoist Training	0	0	0	0	0	0	0	0	0	0	0	0
▣ HV Refresh	0	1	0	0	0	0	0	0	0	0	1	0
▣ Infection control	0	0	0	0	0	0	0	0	0	0	0	0
▣ IOSH	0	0	0	2	0	0	0	0	0	0	0	0
▣ Legion	0	0	0	0	0	0	0	0	0	0	0	0
▣ Management Training	0	0	0	0	0	0	0	0	0	0	0	0
▣ Management Water Systems	0	0	0	0	0	0	0	0	0	0	0	0
▣ M GPS	0	0	0	0	0	0	0	0	0	0	1	0
▣ Scaffold Training	0	6	0	0	0	0	0	0	0	0	0	0
▣ Select Training	0	0	0	0	0	0	0	0	0	0	0	0
▣ Toolbox Training	0	0	6	11	0	0	0	0	0	0	0	0
▣ WTI Training	0	0	0	0	0	0	0	0	0	0	0	0
▣ Technician Training	0	0	0	0	0	0	0	1	0	0	0	0

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11.5 Departmental Issues/news

None

11.6 Added Value

No
