

Ref: FOI/GS/ID 5629

Please reply to:
FOI Administrator
Trust Management
Maidstone Hospital
Hermitage Lane
Maidstone
Kent
ME16 9QQ
Email: mtw-tr.foiadmin@nhs.net

13 August 2019

Freedom of Information Act 2000

I am writing in response to your request for information made under the Freedom of Information Act 2000 in relation to Facilities Management Services.

You asked:

- 1. Who is responsible for the provision and management of estates for the trust?*
- 2. What current model of facilities management delivery does the trust use?*
 - a. Outsourcing of single services (maintenance, cleaning, security and associated services)*
 - b. Total Facilities Management model*
 - c. Self-delivery with contractor support*
 - d. Maintained as part of a PFI.*
- 3. What are your future plans for outsourcing of the Facilities Management services?*
- 4. What is the current facilities management budget for 2018/2019?*
- 5. Would the trust provide their current estates strategy?*
- 6. Please supply the companies and current lengths of your existing supplier contracts for maintenance, cleaning, security and associated services.*
- 7. Has the trust entered into an Energy Performance Contract?*

Trust response:

1. In house Estates Team, under the Director of Estates.
2.
 - a. Self delivery with some outsourced services. E.g. Security, Car Parking Management.
Estates Maintenance C) at Maidstone Hospital and D) at Tunbridge Wells Hospital
3. No further outsourcing planned
4. £16m
5. Please see the following document.

Maidstone & Tunbridge Wells NHS Trust



Estate Strategy 2013 to 2023

Contents

Executive Summary	4
- Current Position	4
- Future Requirements	5
Introduction	7
The Trusts Existing Estate	9
- Estate Condition	9
-- Physical Condition – Maidstone Hospital Site	9
--- Backlog Costs	10
--- Risk Adjusted Backlog	11
-- Physical Condition – TWH	11
--- Backlog Costs & Risk Adjusted Backlog	11
Review of Clinical Strategy & Current Service	12
- Building on Previous Strategy of Establishing Centres of Excellence	12
- Cancer Centre for Kent/Medway/Hastings & Rother	13
- Provide Integrated Care where Appropriate including Developing Specialist Community Services	13
- Private Healthcare seen as a Key Business for the Trust	14
- Clinical Services Defined by Measures of Efficiency & Viability	14
- Collaboration with Clinical Commissioning Groups (CCGs)	15
- Site Development Plan	15
Operational Performance Indicators	18
- Radar Charts	18
- Environmental Management	21
-- Energy, Emissions and Utilities 2011/12 Compared to Previous Year	21
- Trust High Level Key Performance Indicators	22
The Trusts Strategic Direction	25
- The Trusts Annual Report 2011-12	25
- Impact on the Future Need for the Estate	28
- Target for Change	28
Developing Options for the Future	29
- Strategic Options for Developing and Investing in the Estate	29
- Option Appraisal	30
- Estate Condition at Maidstone Hospital	30
- Estate Condition at TWH	32

The Next 10 Years	34
- Estate Changes at Maidstone Hospital	34
-- Original Hospital Build – Core Blocks	34
-- Oncology Department	35
-- Staff Accommodation	35
-- Car Parking	37
-- PET/CT Scanner	38
-- Hospital Main Entrance	38
-- Private Patients Unit/Oncology	38
-- Discharge Lounge	38
-- Admissions Lounge	39
-- Endoscopy & Urology Investigation Unit	39
-- Service Centre	39
-- Catering Department/Restaurant	40
-- Boilers & Boiler House	41
-- Laundry	41
-- Support Services	41
- Estate Changes at TWH	42
-- Chapel	42
-- Staff Accommodation	43
-- Car Parking	44
-- Oncology Service Provision of a Linac at Pembury	45
-- Provision of Intermediate Discharge Lounge Areas	45
Affordability	46

Annex A – Capital Programme and Capital Cash Management Plans 2012/13 to 2021/22

Executive Summary

This document describes the Estate Strategy for Maidstone and Tunbridge Wells NHS Trust for the period from 2013 to 2023.

The aim of the strategy is to ensure that the Trust provides safe, secure, high-quality healthcare buildings capable of supporting current and future service needs.

The process adopted for developing the Estate Strategy has been in accordance with the guidance and processes described in the Department of Healths document 'Developing an Estate Strategy'.

Current Position

The Trusts existing estate comprising of Maidstone Hospital and Tunbridge Wells Hospital at Pembury has a total asset value of £363 million. The Estates & Facilities related costs of owning and occupying this estate (maintenance, energy, cleaning, capital charges, etc) is £30 million per annum.

Developing this Estate Strategy included a comprehensive appraisal of the condition and performance of the estate at Maidstone covering:

- Physical condition
- Compliance with Fire, Health & Safety & other statutory standards
- Environmental Management
- Functional suitability
- Space utilisation
- Adaptability

The results from this appraisal are summarised as follows:

- Over 50% of the existing estate is in poor physical condition and/or performing below an acceptable standard. These core 8 blocks of the Maidstone site were assessed as Estatecode Condition D; which means that they are "operationally unsound and in imminent danger of breakdown." There are also aspects of the estate which do not meet current fire and statutory standards.
- The expenditure needed to bring the estate up to an acceptable condition and performance and to ensure compliance with fire and statutory standards

(backlog cost) is estimated to be £18.357 million. However, the definition of backlog costs excludes fees, VAT, builder's preliminaries, and optimism bias contingencies. Therefore, the actual investment/project cost of undertaking this backlog work is estimated to be £30.656 million as at 31 April 2013.

- A risk assessment of the elements of the building and engineering services on which expenditure is required, identified that the majority of this expenditure (77%) as "High" and "Significant" risk items (items having a relatively high probability of failure with considerable impact on the Trusts ability to deliver services).
- In addition to the poor physical condition and performance of the estate, the appraisal also identified that there is poor asset utilisation.
- Significant areas of Maidstone Hospital were assessed as being "Unsatisfactory" in terms of functional suitability i.e. space, layout, amenities and facilities that do not adequately support the delivery of modern healthcare services.

Future Requirements

The Trust needs to address the current poor condition and performance of the estate and move towards the provision of safe, secure, high-quality healthcare buildings appropriate for the delivery of modern healthcare services. However, the Estate Strategy and any proposed investment in the estate must be "service led" with the patient at the centre of any proposed changes.

It is a crucial time for healthcare in Kent. Significant changes are taking place both within the health economy and across the country to make sure that the NHS is in the best possible shape to meet future health needs and improve people's well-being.

A number of key documents set out the future strategic direction and vision for the Trust, and have been influential in shaping this Estate Strategy:

- The Trusts Annual Report 2011-12
- The Trusts Draft Integrated Business Plan 2013-2017 (4th Draft)
- Trusts Clinical Strategy

- Directorate 5-Year Business Plans 2013/14

- Oncology
- Trauma & Orthopaedics
- Emergency
- Womens & Sexual Health
- Surgery
- Diagnostics, Pharmacy and Therapies
- Medicine
- Theatres
- Paediatrics

The changes to local healthcare services described in the documents listed are part of a wider programme of change across the country driven by:

- Changes in peoples health needs.
- Increasing public expectation in terms of access to a comprehensive range of high quality, efficient and effective healthcare services and choice on how they use services.
- Advances in medical and nursing practice that enables patients to be treated in new and different ways.
- Developments in medical, communications and information technology that make care closer to home a plausible reality.
- National initiatives aimed at making the NHS more effective and efficient; particularly, the changing emphasis to providing care closer to home in non-acute cheaper community based settings of care and with increased use of ambulatory care pathways.

Inevitably, these changes lead to some uncertainty around the future models of service delivery that the Estate Strategy and any investment in the estate must underpin. However, this is the reality of the situation in which the estate must be managed and cannot be used as justification for “doing nothing”. The estate cannot be managed effectively to support changing service delivery models unless a strategic plan for changing and investing in the estate is developed.

The affordability of all the required works on the estate to bring it up to the required standard should be a main concern for the Trust. Years of continuing neglect and lack of spend on the core estate have left the buildings at Maidstone in a very poor condition and requiring significant capital investment. However, the lack of foresight and investment has meant that there are now a large number of competing bids for the available capital. Unfortunately, at this time there are insufficient Capital funds

allocated to effectively deal with the backlog problems within a reasonable timeframe.

Introduction

This document describes the Estate Strategy for Maidstone and Tunbridge Wells NHS Trust for the period from 2013 to 2023.

An Estate Strategy is defined as:

“A long-term plan for developing and managing the estate in an optimum way in relation to the Trusts service and business needs.”

The Estate Strategy is an integral part of service planning and identifies service-led changes to the estate over a 10-year period. The strategy describes the following:

- The Trusts existing estate, and an analysis of its existing condition and performance as an asset
- The proposed changes to the estate over the next decade
- A comprehensive estate investment programme (including all capital expenditure proposals where required) for:
 - New buildings
 - Upgrading and refurbishment of existing buildings
 - Backlog maintenance
- Estate rationalisation plans
- Proposed acquisitions and disposals of land and buildings
- Site development control plans
- Plans for improvement in key estate performance indicators
- Estate utilised by the Trust but which is not owned by the Trust

Decisions on investment in the estate are some of the most important made within the NHS. The estate has huge potential to play a major role in facilitating change &

improvement in service delivery and modernising the NHS. This Estate Strategy is the Trusts vision for realising that potential.

The Estate Strategy described in this document has been developed in accordance with the guidance and processes described in the Department of Healths document "Developing an Estate Strategy."

Maidstone and Tunbridge Wells NHS Trust is a large acute hospitals trust providing a full range of high quality general hospital services to a population of 500,000 people living in the south of West Kent and parts of East Sussex.

Many of the people we serve live in the Maidstone, Tonbridge and Tunbridge Wells areas and are treated at Maidstone Hospital or Tunbridge Wells Hospital at Pembury (TWH). Maidstone Hospital is a fully Trust owned asset which is in need of considerable work to bring it up to standard and to reasonably reflect the state of the art facilities at the TWH site. TWH is a new hospital, completed in 2011, which has been provided under a Private Finance Initiative (PFI) programme; and provides an excellent single-bedded room ward environment. However, as with any PFI hospital their cost is expensive and there are significant constraints on the use of, or changes to, the accommodation. The Trust also provides specialist cancer services, through its cancer centre at Maidstone and cancer unit at Kent & Canterbury Hospital, for the whole of Kent, Hastings and Rother, a population of some 1.8 million people.

The Trust provides services predominantly from its two main acute sites, increasingly services are provided beyond these hospitals in a variety of additional care settings as the Trust develops to become an integrated provider of healthcare. Such services range from community midwifery, outpatient diabetes in a town centre location and specialist rehabilitation in a community hospital setting.

The Trust is also at the forefront of developments in minimally invasive laparoscopic surgery in the NHS and is increasing the range of other highly specialised services available locally to patients, including centres of expertise in trauma (emergency surgery and orthopaedics), maternity, paediatrics (children's inpatient care) planned orthopaedics and planned complex surgery.

The Trusts income for 2012-13 was £365 million.

The Trusts Existing Estate

The Trusts services are provided at two sites:

- Maidstone Hospital which has up to 423 beds and occupies a site of 16.6 hectares. A further 1.69 hectares provides space for staff accommodation.
- TWH which has 513 beds and occupies a site of 14.1 hectares. This hospital was provided under a PFI initiative.

The key statistics that describe the existing estate are summarised in the table below.

	Area (sq m)	Asset Value (£M)		
		Land	Buildings	Total
Maidstone Hospital	63,350	18.3	103.3	126.1
TWH	63,341	14.1	221.1	236.8
Total	126,691	32.4	324.4	362.9

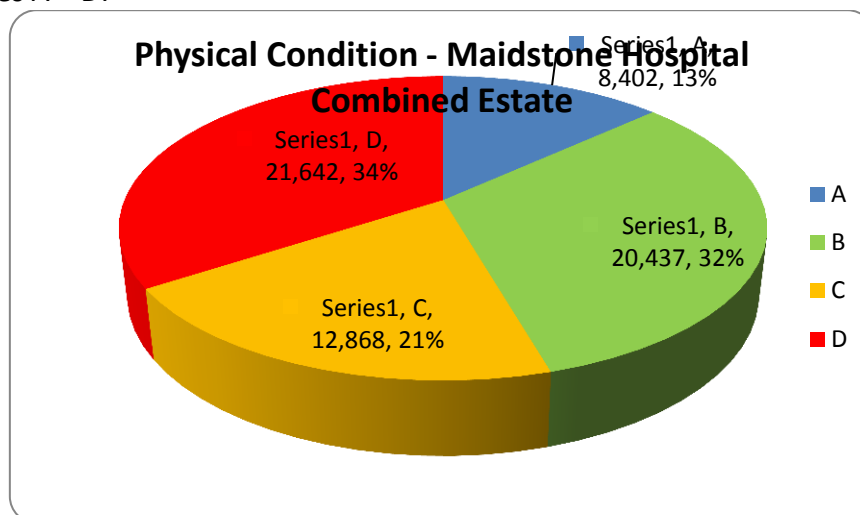
Estate Condition

Physical Condition – Maidstone Hospital Site

The physical condition appraisal of Maidstone Hospital site identified that the site has a mix of accommodation ranging from those which are in very good condition to those in very poor condition. The engineering infrastructure of the original hospital buildings (Phase 1 and 1A completed in 1983 and 1986 respectively) on the Maidstone Hospital site is generally approaching the end of its economic and operational life and, therefore, will have increasing high probabilities of failure unless investment is made in replacing/upgrading the services in the near future. These 8 blocks are considered the core of the original hospital and the majority of the areas within these blocks are currently assessed for condition as Estatecode D – “operationally unsound and in imminent danger of breakdown.” Additionally, the staff residential accommodation is in particularly poor condition. It should be noted

that plans are being developed for the replacement of the staff accommodation at Maidstone and this is currently scheduled for FY2015/16.

The following pie chart represents the percentage (by floor area) of Maidstone Hospital estate which is considered to be within each of the defined categories of physical condition in accordance with the Department of Health Estate code categories A – D:



Those areas of the estate ranked in Condition D (34% and shaded red in the chart) and Condition C (21%) are most likely to need immediate attention in order to support the delivery of healthcare services in a modern, safe and effective environment.

Backlog Costs

The cost of bringing building services and engineering systems up to an acceptable condition (Backlog Cost) is estimated to be £18.357 million for the Maidstone site. Given the scale of the work required it is important to identify the real Investment/Project Costs which include fees, VAT, builder's preliminaries, and optimism bias contingencies. Both the Backlog Costs and the Investment/Project costs are shown in the table that follows:

Area	Floor Area sq.m	Backlog Costs £ Millions	Investment/Project Costs £ Millions
Maidstone Hospital Site	48,529	16.035	26.779
Other Off-site Properties	4,109	599	1.001
Residences	7,106	1.722	2.876

		18.357	30.656
--	--	---------------	---------------

The total expenditure of £30.656 million, as at 1 April 2013, is based on the current buildings and their usage; this expenditure would have little effect on improving the functionality or modernising the hospitals for future use. The scale of work required will need to allow for decanting space/facilities which will disrupt the operation of the hospitals. The practical approach to undertaking this work would be to combine it with refurbishing and upgrading departments to bring them up to modern standards. Without such refurbishment, the quality of the environment for patients, visitors and staff is likely to deteriorate.

Risk Adjusted Backlog

The risk based expenditure profile is shown in the following table and shows that the majority of the backlog expenditure is assessed as being “High” and “Significant” in terms of risk:

	Total Expenditure £M	Risk Profiled Expenditure Requirement £M			
		High	Significant	Moderate	Low
		26%	36%	12%	27%
Maidstone Hospital Site	26.779	11.013	9.762	3.192	2.812
Other Off-site Properties	1.001	0.025	0.043	0.170	0.763
Residences	2.876	0.396	2.480	0	0
Total	30.656	11.434	12.285	3.362	3.575

Note: The residences are currently planned for disposal at the end of FY2015/16.

The consequences of failing to address the poor condition of the estate are clear:

- Increased risk to patients, visitors and staff
- Increasing risk of building/engineering systems failure
- Potential for legal enforcement notices
- Significant disruption to clinical activity
- Accelerated deterioration

Physical Condition – TWH

The TWH was finally completed and handed over to the Trust in May 2011 and the external works to the site were completed in February 2012. The physical condition of the TWH estate is Condition A as defined in accordance with the Department of Health Estatecode categories A – D. The only exception to this is the Chapel building which is Condition C; this building is over 100 years old and is also Grade II listed.

Backlog Costs & Risk Adjusted Backlog

The Backlog Costs for the TWH are calculated as £12k which exclusively relates to the works required on the Chapel to bring it up to Condition B. The Risk Adjusted Backlog Costs for the TWH site is £20k and relates only to the Chapel works.

Review of Clinical Strategy & Current Service

The Trusts Clinical Strategy has identified potential changes within operational areas, and this has been used to develop this Estates Strategy document.

Building on Previous Strategy of Establishing Centres of Excellence

With the full opening of the TWH the Trust has successfully implemented major strategic service changes. The first phase of the clinical strategy has been delivered to ensure the future sustainability and quality of core acute services:

- Trauma and orthopaedics
- Emergency Surgery
- Inpatient, complex and cancer surgery
- Inpatient paediatrics
- Obstetrics

The service reconfigurations have consolidated our clinical expertise, improved out of hours service provision, and have improved patient outcomes.

The clinical service disposition for the Trust now includes off-site services such as diabetes and inpatient stroke rehabilitation as initial steps to provide care outside of acute hospital settings and to integrate with community services.

Of significant note is the TWH state of the art ward facilities which increases its suitability for satisfying a wider range of higher margin and innovative service offerings /configurations.

Maidstone Hospital currently has a service disposition reflective of the service reconfigurations and benefits from the end of the independent sector treatment centre contract that precluded the Trust from offering day surgery and some other services from site. The hospital also provides centres of expertise for cancer and complex planned surgery. This is further enhanced with the provision of emergency medicine, day surgery including general surgery, orthopaedics and gynaecology; endoscopy, rheumatology and all chemotherapy. The hospital also provides the location for service 'hubs' for the Trust in chronic pain and sexual health services.

The resultant centres of expertise within the Trust, together with established Board agreed 'fixed points' that include the Kent Oncology Centre, emergency services and medical admissions at both hospitals, form the platform for the new phase clinical strategy. The clinical strategy is to continue to build and maintain centres of expertise which acknowledges the balance necessary between local access and create resilience to sustain clinical skills, knowledge and experience within the challenging economic climate facing the Trust.

Cancer Centre for Kent/Medway/Hastings & Rother

The Cancer service already meets our two overarching aims, there is clear evidence that the service is of high quality and is efficient. Building upon the principle that cancer care should be provided by centres of excellence, the clinical strategy seeks to maintain the Trusts position as the Cancer Centre for Kent and Medway, Hastings and Rother.

The Trust will enhance this position through the development of satellite radiotherapy provision at TWH and elsewhere in Kent & Medway. The Trust will also develop mobile oncology services to reach patients across the county bringing care closer to home for acutely unwell patients. These developments will increase the Trusts catchment and offer choice to both NHS and private patients.

Evidence suggests cancer is an illness of middle to old age (*89% of all cancers are diagnosed in the aged 50+ population*). The aging demographic profile of the population that we serve indicates demand will rise for cancer care and the clinical strategy identifies cancer care as one of our 5 key tenets and therefore ensures the Trust is positioned to meet this increasing demand.

Provide Integrated Care When Appropriate Including Developing Specialist Community Services

The Trust already provides a range of services in community settings. The Trusts clinical strategy seeks a significant increase in the volume and span of this work which the Trust believes achieves two of our overall aims of patient safety & experience, and providing maximum efficiency.

The clinical strategy is to deliver more effective management of integrated care pathways - across the health economy, including primary, community, secondary and tertiary services ensuring care is delivered in the appropriate setting.

There are approximately 20 community services that have been identified where there is a strong service improvement based case for integration with MTW acute services, mainly related to the emergency medical care pathways and paediatric services.

Private Healthcare Seen as a Key Business for the Trust

Estimates indicate that South East England's private medical insurance penetration is 18.5% of the total population. This is significantly higher than the UK average of 12% and indeed is the highest level of penetration in the UK.

The value of the local market for private surgical care is estimated at £25m - £30m of hospital revenues which are generated by the Spire Healthcare and Nuffield Health Hospitals in Tunbridge Wells in the west and the BMI Hospital in Maidstone in the east mainly through the practices of consultants employed by the Trust. The private oncology market is largely split between the Trust and Nuffield Health in the west and the BMI Somerfield in the west. The Kent Oncology Centre currently generates some £3m of revenues and has capacity to grow its market particularly if it improves its revenue capture and its marketing. The Trust already generates circa £6m of annualised revenues from private patients of which some £3m is derived from oncology - principally radiotherapy. Maidstone Hospital's proximity to the M20 opens up its potential market to North Kent and Medway as well as to Ashford to the south. Whilst BMI Healthcare dominates the competitor hospitals within Maidstone and to the North at Fawkham Manor there are no competitor facilities to the south until the Benenden Hospital. New emerging entrants to the market place in the next 1-2 years raise the importance of the Trust making clear and decisive steps to position itself in this market to secure potential for growth and to protect existing market share in key services such as chemotherapy.

The further development of private healthcare within the Trust features as a core principle of our clinical strategy for the following reasons:

- Providing additional choice to patients – both local and Kent-wide – through increased private patient capacity
- Secure additional income streams to support the Trusts core NHS mission; with every pound earned reinvested into NHS patient care
- Offering additional elective capacity, which complements existing and planned future provision in the NHS
- More efficient use of consultant time and less time spent off site. There is a benefit to consultants wishing to undertake private work through provision of a convenient location; less travelling time; and safer environment
- Positions the Trust to respond to changes in NHS commissioning intentions
- Enables the Trust to take opportunities to provide services that are not part of the clinical service offer

Clinical Services Defined by Measures of Efficiency & Viability

Radiology and pathology are two high profile examples where a significant number of episodes take place where concentration is felt to provide the optimum service to patients. With a lesser number of episodes, the co-location of inpatient haematology care for example needs to be of a magnitude that serves a population greater than that of West Kent. The Trust will pursue all opportunities to deliver centralised or specialised services of this type to include inpatient haematology for Kent & Medway, and through collaborative arrangements for radiology and pathology.

Multiple national reviews and multiple medical Royal Colleges have identified the benefits to patients of concentrating precious and, on occasion expensive, medical resource in centres of excellence. The Trust clinical strategy will actively seek opportunities to concentrate clinical services with a critical mass that delivers patient safety and experience at maximum efficiency.

Collaboration with Clinical Commissioning Groups (CCGs)

The Trust welcomes the creation of both West Kent; and High Weald, Lewes and Havens CCGs; which mirror the catchment area served by the Trust. Our clinical strategy is predicated upon hospital admission as a last resort rather than the norm.

Contents Page

The delivery of such a strategy requires incentivisation in the system to avoid and minimise hospital attendance through improved stratification of high risk groups, better risk sharing with payments based upon outcome not attendance, and closer clinical collaboration between primary and secondary care.

Critical objectives of this element of the clinical strategy are:

- to reduce emergency in-patients
- to repatriate care locally
- to secure efficiencies in provision of care
- to ensure seamless quality of care and best possible patient experience through whole pathway commissioning and integration of service provision (community services)

Site Development Plan

As previously stated, the service disposition is not planned to change greatly but inpatient bed capacity will change significantly. We will see shifts in:

- the 'weighted distribution' of services between our two sites as services move to more hub and spoke models of working for some services
- a shift from unplanned inpatient to unplanned ambulatory care
- a swing from emergency to more planned care
- increasing 'out of hospital' or satellite provision of others.

The Trust capacity currently includes 827 beds:

	Category	Beds
Maidstone	Medical acute inpatients	186
	Surgical acute inpatients	56
	Other acute inpatients	31
	Acute Day case	58
	Regular attendees	9

	Maternity	4
TWH	Medical acute inpatients	156
	Surgical acute inpatients	120
	PP	16
	Other acute inpatients	71
	Acute Day case	60
	Maternity	48
Tonbridge Cottage Hospital	Medical acute inpatients	12
Grand Total		827

In addition the Trusts clinical infrastructure includes 19 operating theatres (10 at TWH and 9 at Maidstone) and 9 Linear Accelerators (6 at Maidstone and 3 at Kent & Canterbury Hospital).

The total number of beds and the allocation of beds will change in accordance with the implementation of the Clinical Strategy 'Phase II'. A reduction in emergency admissions and an increasing use of ambulatory care pathways will see medical acute bed numbers reduce at both hospitals. An increase in NHS planned activity and private patient activity will see rises in bed numbers accordingly.

Overall, bed numbers will reduce with the reduction being seen at Maidstone Hospital where the reduction affords the Trust the ability to reconfigure wards to deliver a much needed step change to improve the patient environment. The wards will progressively be redeveloped to offer more single rooms and 4-bed bay configurations; replacing the current 6-bed bay wards with their washing and toilet facilities, and privacy and dignity, currently limited by design.

This is an integral part of improving the quality of the patient experience at Maidstone Hospital and is being overseen by the Maidstone Hospital Programme Board. The programme will deliver a modernised estate, a refreshed clinical model of care in core services at Maidstone Hospital and a plan to fully maximise the utilisation of the estate. Other specific projects within this programme include:

- Development of an accredited centralised endoscopy unit at Maidstone
- Reviewing the Kent Oncology Centre to enhance or otherwise improve the environment and all associated services offers
- Outpatients areas
- Staff residential accommodation
- Private patient facilities
- Reviewing and consolidating office accommodation
- Car parks

Where estate may be surplus to Trust requirements, MTW will work with partners to put that estate/capacity to effective use in the interests of the Local Health Economy through forming a 'Health Campus' on the Maidstone Hospital site. This may enable greater financial benefits elsewhere in the health system.

Operational Performance Indicators

This section contains information on various Operational Performance Indicators utilised by the Department of Health (DoH). Apart from the section on Environmental Management the Trusts results are based on data submitted to the DoH by the Trust in the Estates Return Information Collection (ERIC) returns.

Note:

Whilst the figures utilised within the Trusts ERIC returns are accurate, the overall results do not provide a clear indication of the Trusts current position. The closure and demolition of the old Pembury Hospital; opening of TWH; and the disposal of the Kent & Sussex Hospital and the Nurses Home/Oakapple staff accommodation site have, and will continue to have, a significant impact on our position. A true indication of our position will only become available once the ERIC returns are based on a 'steady state' estate infrastructure; and it is not anticipated that this will occur until after our FY2013/14 submission, the results of which will not be available until October 2015. As a consequence, the Operational Performance Indicators are considered of little use at this time, but are included in order to provide guidance on information that should be presented in the Estate Strategy document.

Radar Charts

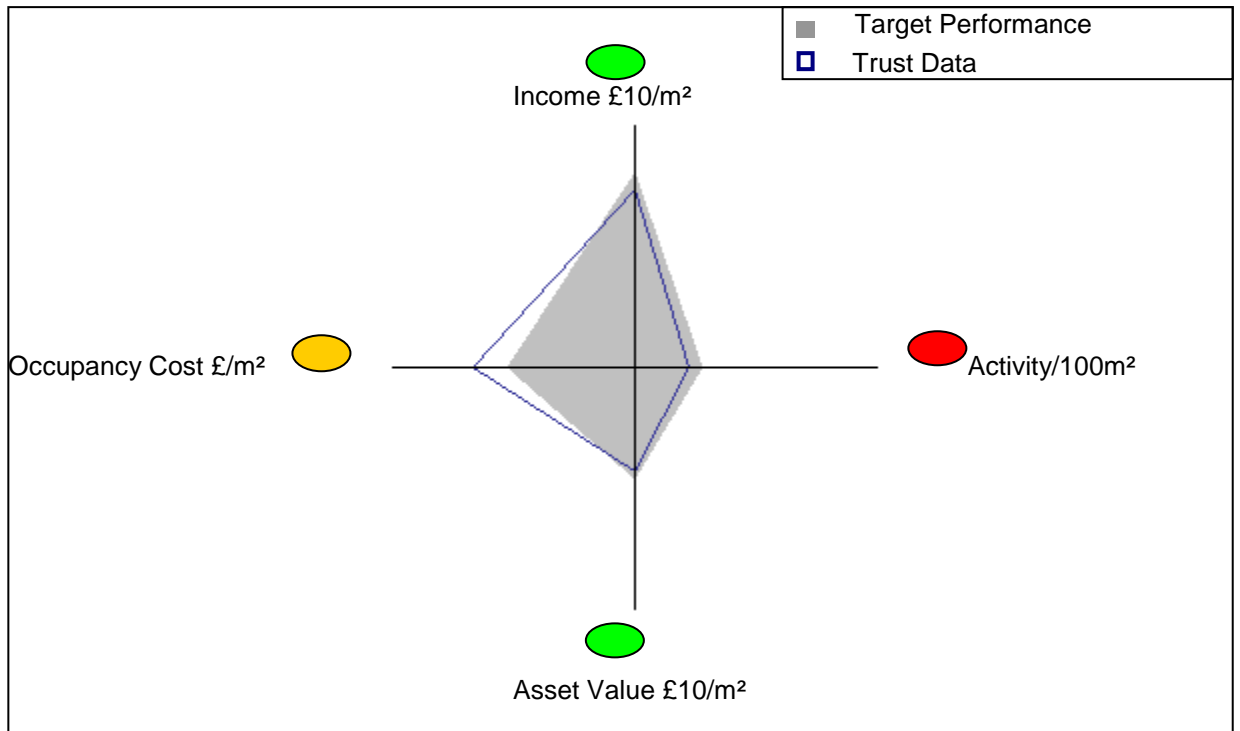
Radar capacity charts, using performance indicators, demonstrate where the Trust is currently positioned when compared with similar organisations and the national average for the cluster.

Maidstone and Tunbridge Wells NHS Trust has been grouped with others using the DoHs basic level clustering 'large acute Trusts outside London', so that comparisons are of like organisations.

The comparisons below show:

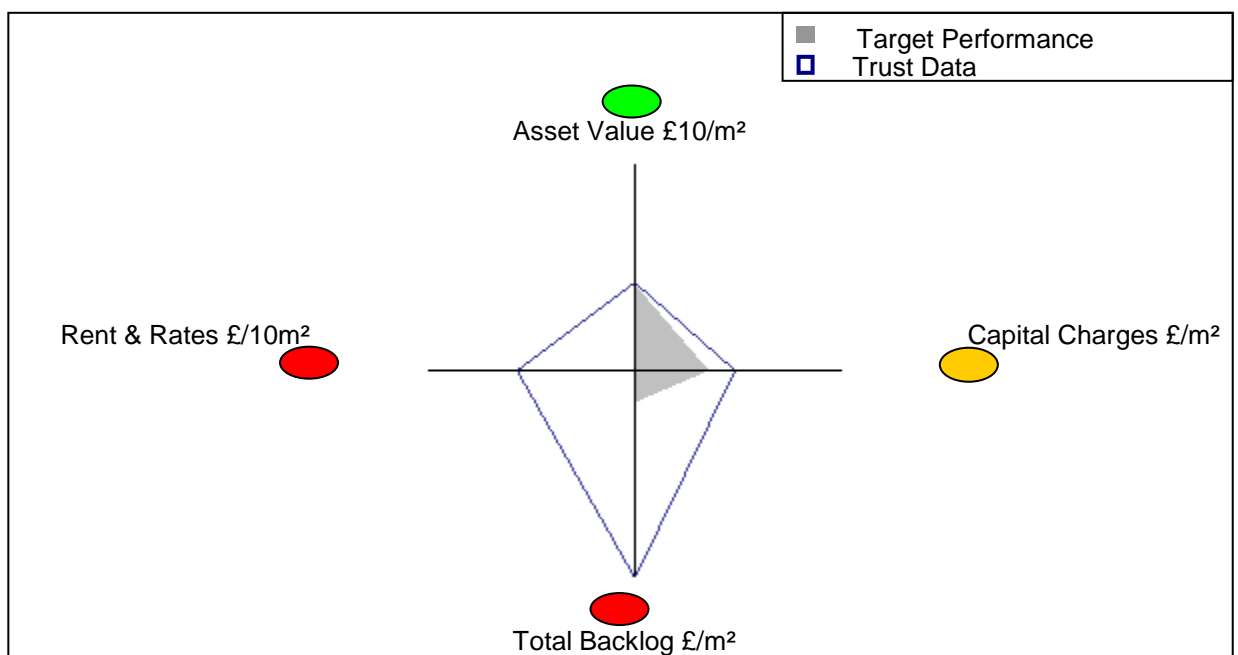
- Space Efficiency
- Asset Productivity
- Asset Deployment
- Estates Quality
- Cost of Occupancy

Space Efficiency



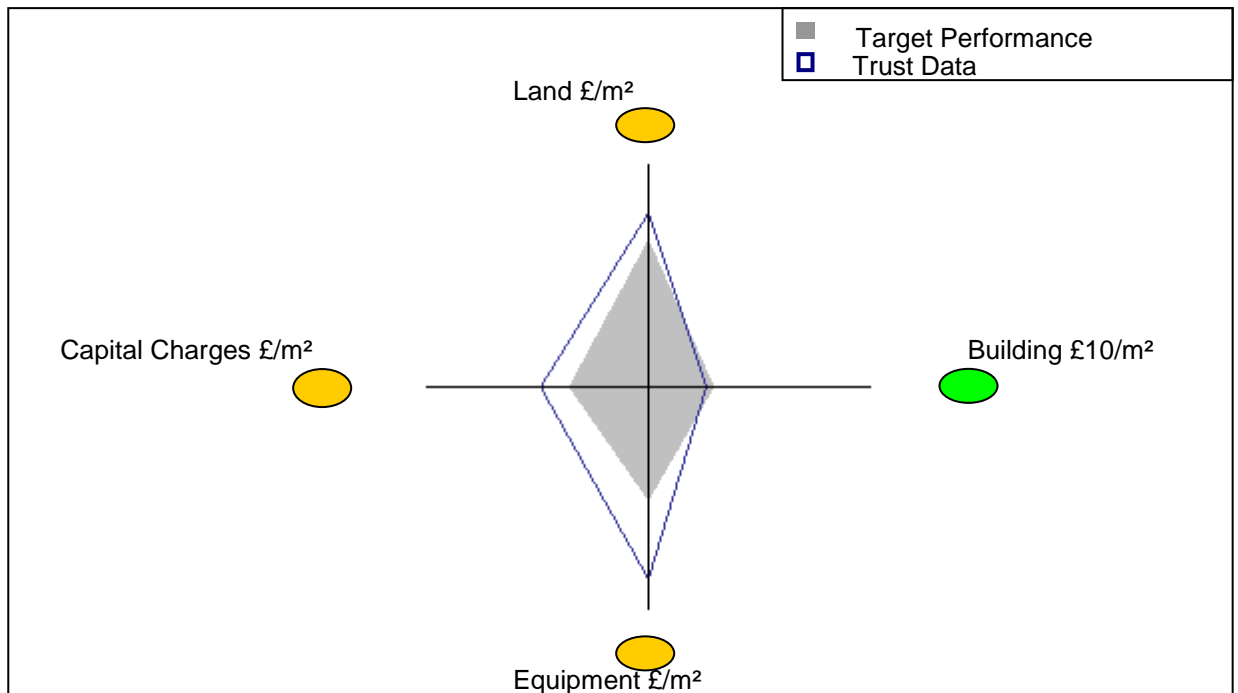
Aim of Indicator: To relate the estate and its annual occupancy cost to the output of the Trust

Asset Productivity



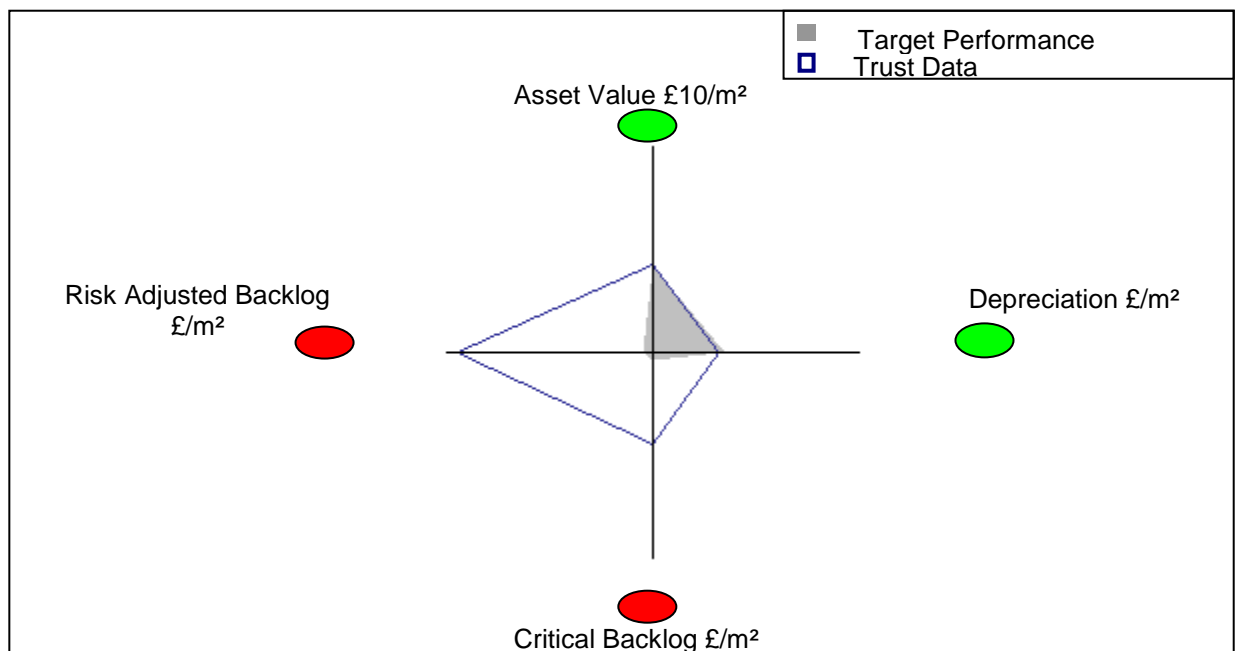
Aim of Indicator: To demonstrate the actual cost of owning renting assets

Asset Deployment



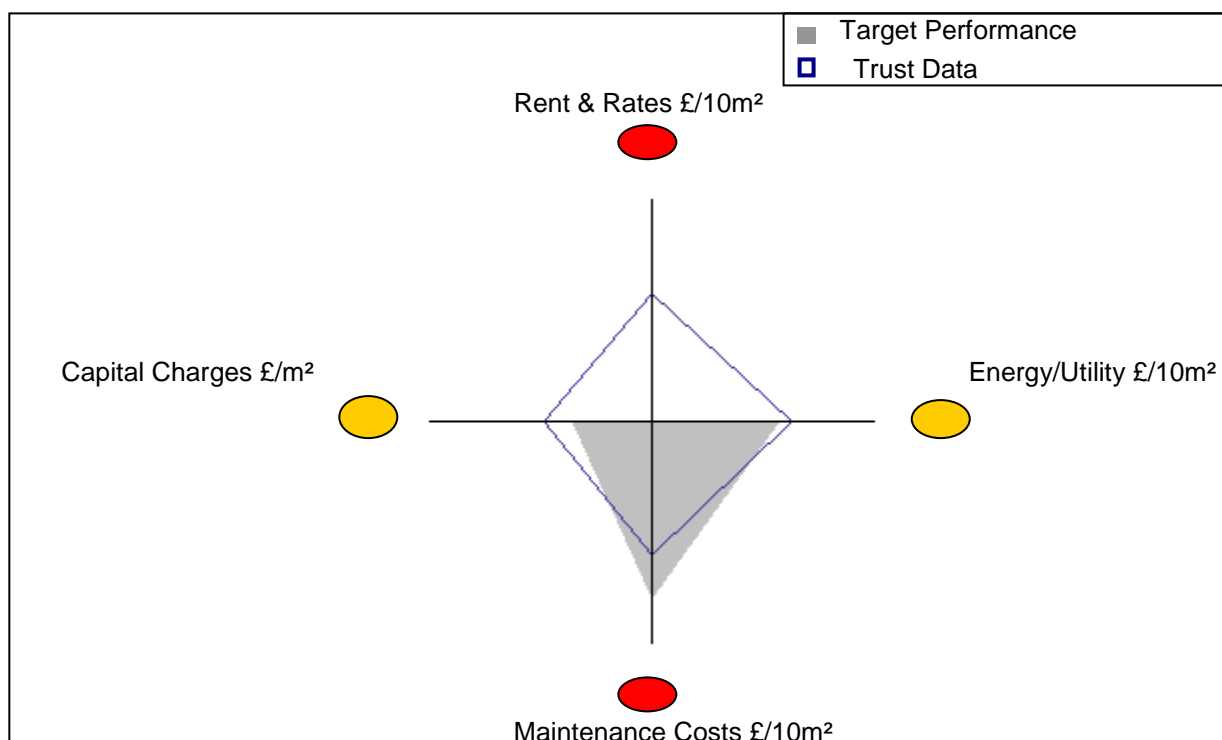
Aim of Indicator: To identify the current allocation of financial resources

Estate Quality



Aim of Indicator: To give a balanced view of the overall condition of the estate relative to value and age

Cost of Occupancy



Aim of Indicator: To identify the profile of occupancy costs (revenue)

Environmental Management

Energy, Emissions and Utilities 2011/12 Compared to Previous Year

Total energy used by the Trust is 25% less than the previous year due to the closure of the old Kent & Sussex and Pembury hospitals. Additionally, in the previous financial year these old hospitals had been run in parallel with TWH.

This year is the first phase of the Carbon Reduction Commitment – Energy Efficiency Scheme (CRC EES) and carbon allowances costing £228,000 have had to be purchased to cover the Trust's energy based carbon emissions.

Maidstone Hospital

Energy use has increased over the past year by 4.34% due to the addition and commissioning of two new buildings – a new build extension providing a Cellular Pathology Unit and a new modular build Birth Centre. Water consumption has also increase by 7.69% over the same period due to the new buildings.

Contents Page

TWH

TWH opened fully in September 2011 and the base-line energy target is contractually not implemented until 2013/14, however, consumption is currently as predicted.

The biomass boiler has now been in use for over a year and it is a requirement that 10% of energy is from a sustainable source and in principle this requirement has been met. The design estimated total annual energy requirement is 30,000,000 kW and this is realistic.

Using biomass reduced our carbon emissions by 312 tonnes of CO₂ and this saved £3744; this being the monetary value of the carbon allowances that would have had to otherwise be purchased. Biomass is also cheaper than natural gas and an additional £17,750 has been saved. However, natural gas has recently dropped in price and the cost of natural gas and biomass are converging.

Laundry

The Trust Laundry energy consumption fell in the last year by 42.66% due to the installation of new steam trapping systems and optimising plant; and this compliments the earlier installation of heat recovery plant.

These new systems and plant are also a major contribution to a 49.73% reduction in water consumption. The cash value of these savings was £53,000 in energy and water, £3,573 in carbon allowances, and £3,544 in sewage costs (which are based on water consumption). Carbon emissions were reduced by 297 tonnes of CO₂.

Carbon Emissions

The significant savings in energy highlighted previously have had a significant effect and resulted in reduction in our carbon emissions of 6% at the Maidstone site, a reduction of 238 tonnes of carbon; and a 12% reduction at the Laundry, a reduction of 30 tonnes.

Trust High Level Key Performance Indicators

The DoH provides the high level key Performance Indicators (PI) shown in the following table from data submitted by the Trust.

These PIs allow informed judgement on the efficiency and condition of the estate. All are based on indicators that are expressed as ratios of a Trusts building and land areas. A simple traffic light system classifies performance management information into three categories:

- Green – no or very limited problems
- Amber – some problems
- Red – serious problems

The table compares the Trusts performance with 118 other large acute Trusts of a similar size in England.

Notes:

1. The table shows the Trusts high level PIs and the national average for its cluster. It should be noted that the backlog figures used in the PIs were those available prior to results of the completed condition survey which have significantly increased the backlog costs.
2. As previously mentioned, as our ERIC return does not provide viable information currently the Operational PIs are not considered accurate but are included in order to provide guidance only on information that should be presented in the Estate Strategy document.

MAIDSTONE AND TUNBRIDGE WELLS NHS TRUST - 2009/2010

		Grouping PI (Percentile Bands)		
PI SUMMARY	Trust PI	33%	34%	33%
Space Efficiency				
Income £10/m ²	291	190	191 and 257	258
Activity/100m ²	90	6	7 and 88	89
Asset Value £10/m ²	169	125	126 and 166	167
Occupancy Cost £/m ²	265	165	166 and 212	213
Asset Productivity				
Asset Value £10/m ²	169	125	126 and 166	167
Capital Charges £/m ²	193	85	86 and 123	124
Total Backlog £/m ²	400	44	45 and 120	121
Rent & Rates £/10m ²	227	86	87 and 464	465
Asset Deployment				
Land £/m ²	309	203	204 and 366	367
Building £10/m ²	104	86	87 and 113	114
Equipment £/m ²	342	108	109 and 182	183
Capital Charges £/m ²	193	85	86 and 123	124
Estate Quality				
Asset Value £10/m ²	169	125	126 and 166	167
Depreciation £/m ²	127	64	65 and 91	92
Critical Backlog £/m ²	176	7	8 and 32	33
Risk Adjusted Backlog £/m ²	378	9	10 and 41	42
Cost of Occupancy				
Rent & Rates £/10m ²	227	86	87 and 464	465
Energy/Utility £/10m ²	249	197	198 and 241	242
Maintenance Costs £/10m ²	238	224	225 and 307	308
Capital Charges £/m ²	193	85	86 and 123	124

The Trusts Strategic Direction

A number of key documents set out the future strategic direction of the Trust and affect the Estate Strategy:

- The Trusts Annual Report 2011-12
- The Trusts Draft Integrated Business Plan 2013-2017 (4th Draft)
- Trust Draft Clinical Strategy
- Directorate 5-Year Business Plans 2013/14
 - Oncology
 - Trauma & Orthopaedics
 - Emergency
 - Womens & Sexual Health
 - Surgery
 - Diagnostics, Pharmacy and Therapies
 - Medicine
 - Theatres
 - Paediatrics

The Trusts Annual Report 2011-12

The Trusts Annual Report 2011-12 defines the Trusts strategic direction, vision and aims for the next 3 years; including the achievement of Foundation Trust (FT). The report sets out the rationale and framework that will shape the Trusts detailed plans for FY2012/13. The report includes an overview of the Trust, the services it provided, financial position, performance ratings and the challenges it faces.

The Annual Report contains a detailed review of the factors that comprise and influence the demand for acute healthcare and of the Trusts position to meet that demand. The Trust maintains that its market strengths are its reputation for clinical excellence and innovation, and its accessibility to its local population.

Maidstone and Tunbridge Wells NHS Trust (MTW) is a large acute hospital Trust in the South East of England. The Trust provides a full range of general hospital services and some areas of specialist complex care to around 500,000 people living in the South of West Kent and the North of East Sussex. The Trusts core catchment

areas are Maidstone and Tunbridge Wells and their surrounding boroughs. In addition, the Trust provides specialist cancer services to 1.8 million people, from its flagship cancer centre at Maidstone, for the whole of Kent, Hastings and Rother.

MTW services are available to any patient from outside of these areas through Patient Choice.

In September 2011 the Trust fully opened the first NHS hospital in the country to provide all inpatients with single rooms and en-suite facilities. It also created centres of expertise in its hospitals for planned and emergency surgery and women and childrens care as part of its clinical strategy to further improve patient care. The Trust also continues to be at the forefront of developments in minimal invasive laparoscopic surgery in the NHS.

The Trust employs a team of 5,645 full and part-time staff, equating to a whole time equivalent of 4,878 people.

The Trusts vision is to provide excellent health services delivered by high performing staff, to exemplary standards, providing care, comfort and dignity within a safe and efficient environment.

The Trusts Clinical Strategy sets out MTWs long-term strategic aims for the development of health services in Maidstone, Tunbridge Wells and the surrounding areas. As part of this strategy, in 2011-12 the Trust created centres of expertise for planned and emergency surgery and women and childrens care in Maidstone and Tunbridge Wells. The centres focus on different areas of care, with specialist dedicated teams of doctors, nurses and other staff providing better outcomes for patients. MTW now has:

- A dedicated centre for planned complex surgery at Maidstone Hospital. Maidstone Hospital is already recognised as a leader in laparoscopic surgery and training, and in specialist cancer care
- A dedicated centre for trauma surgery and orthopaedic surgery at TWH
- A dedicated centre of womens and childrens care at TWH, with a new purpose built midwifery-led birthing centre at Maidstone
- Day surgery and '23-hour' surgery continuing at both hospitals

The Trust is reviewing its vision and strategic aims in 2012-13 as part of the development of a new 5-year clinical strategy within a context of major reforms and financial challenges to the whole NHS. The Trust strategy incorporates the progression to become a FT. Underpinning this are four key themes:

- Our focus is our patients, we will deliver services which improve the quality of the lives of our patients
- We will become an integrated care organisation, managing the care pathway both in and out of hospital
- We will be a leader in the development of healthcare for the communities which we serve
- We will both collaborate and compete, dependent upon the clinical service which needs to be provided.

MTW completed its largest ever programme of planned developments and clinical changes in 2011-12. The Trust opened TWH and created three new hubs of clinical expertise during September 2011. It also continued to keep its public promise to develop services at Maidstone Hospital and provide patients in West Kent with two hospitals of equal regard. These major changes were among some of the most complex operational challenges faced by any NHS Trust, and were successfully carried out with minimal disruption for our patients thanks to our highly skilled teams of staff. One of the early clinical benefits the Trust has now seen, as a result of these changes, is a sustained reduction in weekend mortality rates at its hospitals.

The Trust also continued to meet the commitments it has to its patients and staff in other important and measurable ways. Over the past year we have:

- Maintained a high level of care for our patients, with statistically low mortality rates and real-time feedback from thousands of our patients showing a good overall experience
- Made further inroads into reducing cases of avoidable infections, most notably around MRSA
- Spent our finite resources wisely on patient care and at the same time delivered efficiency savings of £16 million
- Further enhanced our staff experience with noticeable improvements in their working lives compared with other NHS employers
- Moved the Trust forward on its journey to achieve FT status in 2013
- Continued to work closely with our stakeholders generally and specifically with our local Primary Care Trusts and GP clusters as the transition towards more locally accountable and clinically led health services continues.

A significant proportion of the Trusts focus during the latter half of the year has centred on embedding our new centres of expertise. We continue to explore the opportunities these create to enhance patient care both with our staff and professional organisations.

The Trust faces significant challenges and opportunities, as do all other NHS care providers this year. The Trust has identified efficiency savings of £24 million during 2012-13 to help reduce costs and contribute towards the NHS savings plan nationally. Our savings plan will continue to target initiatives that do not impact on patient care, and contribute, wherever possible, to care improvements. This will need to be achieved at the same time as more hospital-based care moves into the community and greater levels of NHS resources shift towards the prevention of illness. To stay financially healthy, and responsive to the needs of our patients, our hospitals will need to become ever more flexible by diversifying, providing more integrated care and creating opportunities for collaboration.

Impact on the future need for the estate

Notwithstanding the uncertainty around the future, there is a clear need to ensure that the Estate Strategy will lead to:

- Property that supports service delivery/capacity requirements
- Safe, secure and appropriate buildings
- High-quality healthcare environments, which aid staff retention/morale and patient outcomes/satisfaction levels
- A means of targeting investments to minimise the risks associated with the built environment
- An opportunity to optimise occupancy costs
- An opportunity to dispose of surplus and/or poorly-used assets and reinvest released resources
- A clear commitment to complying with sustainable development and environmental requirements/initiatives
- A plan for change that enables progress towards goals to be measured

Targets for change

The Estate Strategy will target improvement in the estate as follows:

- Improvements in the quality of the operational estate over time (which can be measured through reductions in backlog maintenance costs/risks and using annual patient perception surveys)
- Improvements in statutory compliance and reduction in risk (which can be measured through reductions in non-compliance with statutory legislation and incident rates)
- Improvements in energy performance (in line with mandatory targets for NHS organisations in England); water consumption; waste; and transport management
- Reductions in the revenue cost of the operational estate over time (which can be measured by mapping trends in overall maintenance costs, utilities costs and the Trusts income-to-asset value ratio)
- Improvements in the use of the estate over time by eliminating under-used and surplus assets (which can be measured by comparing building floor area with total site area and by income-to-asset value ratio)

Developing Options for the Future

Developing estate options for the future has involved operational, financial and business staff from across the Trust. This approach has helped to generate a broader understanding of the importance of the estate in strategic service planning for the Trust.

The options for the future are greatly affected by the physical condition appraisal of Maidstone Hospital that identified that the site has a mix of very good to very poor condition buildings. The engineering infrastructure of the original hospital buildings at Maidstone is generally approaching the end of its economic and operational life and will have increasing high probabilities of failure unless investment is made in replacing and/or upgrading the services. These 8 blocks are considered the core of the original hospital and the majority of the areas within these blocks are currently assessed for condition as Estatecode D - operationally unsound and in imminent danger of breakdown. Future options are also affected by TWH although these relate to clinical operational options; as the maintenance and support of the building infrastructure is covered for the next 29 years under the terms of the PFI agreement. Consequently, the real estate options for the immediate future revolve around investment in the Maidstone Hospital site, and how these will be developed to assist in delivering the Clinical Strategy.

Strategic Options for Developing and Investing in the Estate

The strategic options for the Maidstone site are summarised as follows:

- **Do Nothing** – included as a baseline against which other options could be compared. Given the scale of backlog costs identified on the Maidstone Hospital site and the fact that much of this cost relates to “High” and “Significant” risk elements then the Trust cannot take this option.
- **Do Minimum** – continue to operate and invest in bringing the buildings at Maidstone up to an acceptable condition. The poor condition and performance of much of the estate will mean that “do minimum” will have a detrimental long-term effect with an ever increasing “price tag” associated with it; again the Trust cannot continue to utilise this option due to the increasing associated risks.
- **New Build** - inevitably in an exercise that involves developing an Estate Strategy, particularly where significant expenditure is required on the

existing estate, the option of providing new hospital accommodation emerges as a strategic option. However, this was considered but rejected on the grounds of affordability.

- **Modernisation of Maidstone site** – operate from our two sites but with rationalisation of services and facilities across both sites; aimed at addressing the current condition and performance of the Maidstone Hospital estate and “future proofing” it against expected changes in activity and models of service delivery. In order for the Trust to fully meet its commitments and achieve its strategic direction, vision and aims, then modernisation of the Maidstone Hospital estate is the only viable option.

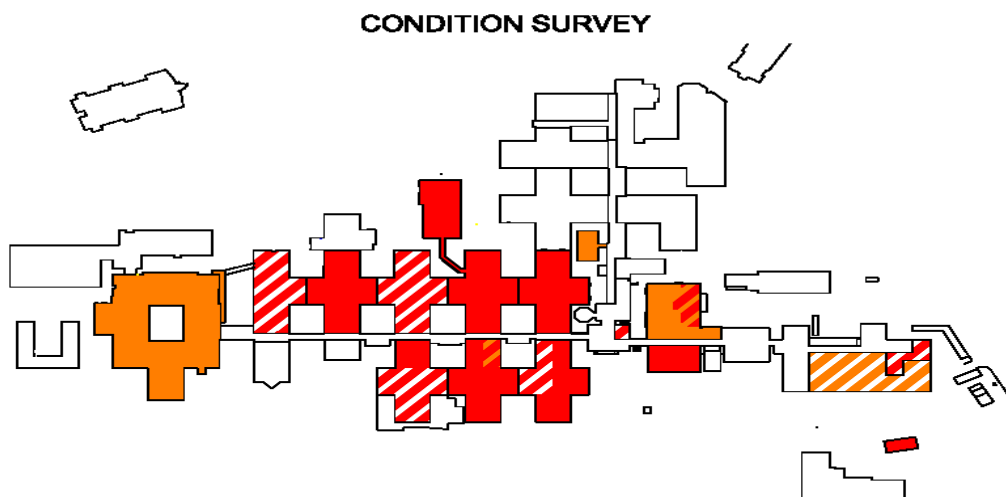
Option Appraisal

The Government, through the Treasury, provides guidance to public sector bodies on how options should be appraised before significant funds are committed. The option appraisal on strategic estate options for the Trust follows this guidance and involves:

- An appraisal of the non-financial benefits of the options
- A risk assessment of the options
- An appraisal of the capital, revenue and lifecycle costs of the options

Estate Condition at Maidstone Hospital

Following the recent Condition Survey carried out on the Maidstone Hospital site which highlighted a backlog maintenance figure of over £30m, a comprehensive review of the estate has been carried out. This review established that, apart from the off-site properties and residential accommodation, the majority of the backlog maintenance was due to the condition of the central area of Maidstone Hospital site.



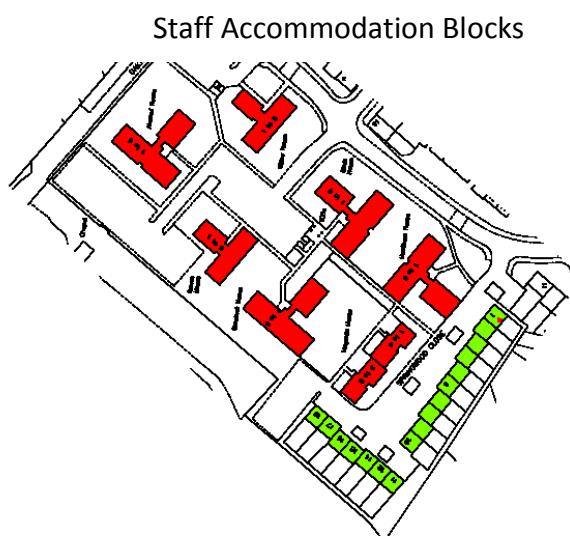
The previous diagram shows the outcome of the Condition Survey and illustrates the areas of the hospital that are categorised as Estatecode Condition C in amber, or Condition D in red. Areas shown by the 'hatched' lines indicate where only one of the floors of the block is affected. The 8 core blocks shown as Condition D relate to the original hospital buildings where construction was completed in 1983 or 1986.

These 8 core blocks identified provide accommodation for:

- A significant proportion of the main ward areas
- A & E
- Main Theatres
- X-ray
- ICU/HDU
- Chronic Pain
- GUM Clinic
- Out Patient Department
- Stroke Unit
- Oncology

The list above provides guidance on the main departments within the 8 blocks but is not a comprehensive list of all the users; however, it does highlight the importance of these blocks.

As previously stated the Risk Adjusted Backlog figures for the Maidstone site is over £30m, of this just under £3m relates to backlog maintenance of the Staff Residences. The following diagram shows our staff residential blocks in Springwood Road shown in red; and the adjacent 3-bedroom houses shown in green that belong to Kent & Medway Partnership Trust. The staff residential blocks were built in two phases, the first phase being completed during 1975 and the second phase completed during 1982/3. No significant refurbishment or upgrade has been carried out on these buildings since their completion, they provide very poor sub-standard accommodation units for staff, and are currently Estatecode Condition D.



Estate Condition at TWH

The TWH was only completed and fully opened during 2011 and is currently assessed as Estatecode Condition A. Whilst the main hospital is in an excellent condition there are a number of estate issues at the Pembury site that will be addressed in this Estate Strategy:

- Old Chapel Building. The old Chapel on the hospital site at Pembury is a listed building and is currently assessed as Estatecode Condition B. The Chapel is not used as a place of worship and various uses are being considered. However, the pews and organ within the Chapel also form part of the listing and the Trust is in discussion with the local council planning and conservation officers concerning their listing. If the pews and organ are not

'de-listed' it will be very difficult for the Trust to find a feasible use for the building.

- **Staff Accommodation.** The Trust has no staff accommodation on, or near, the hospital site at Pembury; staff are using the Burslem House accommodation of the old Kent & Sussex Hospital site in Tunbridge Wells. However, this accommodation is only available for use by the Trust until 31 March 2014 when the building is planned to be handed over to the site purchaser; failure to achieve this date will result in significant financial penalties for the Trust. Plans for providing staff accommodation at the Pembury site have been approved by the Executive Team and Trust Board, but are ultimately dependent on obtaining planning permission on a site near the hospital – this will be discussed in detail later in this document.
- **Car Parking.** Due to the unexpected levels of patients and visitors attending the site there is a problem with the limited number of car parking spaces available. A solution has been adopted that utilises some of the staff car parking area in the multi-storey car park which, unfortunately, means that there are now insufficient spaces for staff. The long-term solution of providing additional car parking by using a 'deck' system is currently being reviewed – this will be discussed later in the document.
- **Sewage Pumping Station.** The sewage pumping station at TWH is maintained by the Trust and does not form part of the PFI contract. A design flaw has been discovered in the handling of sewage pumped from the site in that failure to efficiently 'trap' large items could result in all the pumps becoming blocked. This has been raised as a Major Risk for the Trust in that this could result in the hospital being closed whilst the pumps would need to be cleared. We are currently working on a proposal to resolve this issue by re-designing the installation and the provision of an additional trap.

The Next 10 Years

As detailed earlier in the document, the Estate Strategy is an integral part of service planning and should identify service-led changes to the estate over the next decade.

The main changes to the estate over the next decade will be at the Maidstone site where significant improvements and refurbishments are required. Whilst there are some estates changes required at the TWH site these do not affect the new hospital buildings.

Estate Changes at Maidstone Hospital

Original Hospital Build – Core Blocks

As has been previously mentioned, the original build of the hospital completed construction in 1983 with 6 blocks forming the main ward and clinical areas; these blocks were designated as Blocks A, B, C, D, E and F. A further 2 blocks to a similar design were later added and completed in 1986; these blocks were designated as Blocks P and R. These 8 blocks are considered the core of the original hospital and the majority of the areas within these blocks are currently assessed for condition as Estatecode D – “operationally unsound and in imminent danger of breakdown.” Refurbishment work on these 8 blocks has been limited since their construction, and all the main electrical and mechanical services are now in need of refurbishment/upgrading. Whilst some of the areas within the 8 blocks visually appear to be in good repair the supporting infrastructure requires refurbishment.

All the blocks provide ground and first floor accommodation, thus effectively providing 16 individual areas. In addition to ward based areas the 16 areas provide accommodation for the Out Patient Department, Accident & Emergency, Theatres, Radiology, Intensive Care Unit, High Dependency Unit, Childrens Unit, Chronic Pain Department, Stroke Unit and Oncology areas.

Work has recently been completed on the ground floor area of Block A which has seen a previous ward converted into an Urgent Medical & Ambulatory Unit (UMAU). This work consisted of a full strip out of the existing infrastructure and a total refurbishment of the area at a cost of just over £2.5m. The UMAU, ground floor area of Block A, is now at Estatecode condition A.

Following on from the recent work on the UMAU plans are currently being developed for the refurbishment of 5 of the ward areas over the next 5 years. However, plans need to be considered for the refurbishment of the remaining 10 floor areas, but this will be dependent of the availability of the Capital funding.

Contents Page

Whilst availability of Capital funding for any estate works is limited the Trust must make some commitment to the refurbishment of the remaining 10 floor areas. At the current rate of refurbishment some of these areas, which includes many 'critical' clinical areas, may be over 40-years old prior to any refurbishment. With the current Estatecode D assessment which was completed in 2010 – “operationally unsound and in imminent danger of breakdown” – patient safety will be compromised.

As will be discussed later, there are a number of other major areas within the hospital which will soon need to be considered for upgrading and refurbishment, these will also impact on the Capital Programme; and will certainly need to be considered prior to the end of the 'Core Block' programme.

Oncology Department

The original Oncology Department was completed in 1992 and the Estate Strategy must deal with the issue of refurbishment of its support services, some of which only have an expected 25-year life. Some of the buildings within the department were assessed as Estatecode C during 2010, and some of these areas should be considered for upgrading/replacement from 2017 onwards, hence the inclusion in this 10-year Estate Strategy document. With such a large expansive structure any refurbishment should be carefully planned for over a period of time, possibly 2 to 4 years. Consequently, the costs of the refurbishment of the Oncology area needs to be taken into account for the 10-year Capital programme. However, with the ever increasing timeframe of the 'core block' programme this will be another major conflict in the Capital programme allocation for the Trust to resolve.

Staff Accommodation

The Trust currently provides single staff accommodation units at the Maidstone site for up to 167 members of staff. A decision was made by the Trust towards the end of 2011 to halt the provision of married accommodation for staff and this resulted in the disposal of some married accommodation. Additionally, a decision has been taken to dispose of the Nurses Home site, comprising of the old Nurses Home building together with a married accommodation block (Oakapple House) and the adjacent land. The remaining staff accommodation units comprise of the following 7 blocks:

Almond House
Willow House
Rowan House

Birch House
Chestnut House
Hawthorn House
Magnolia House (consists of 4 x 2-bedroom & 4 x single-bedroom units)

There is a major backlog maintenance issue with the accommodation blocks; together with a further issue related to the disposal of the Nurses Home and Oakapple House site:

1. Backlog. Two of the blocks, Willow and Rowan Houses, were built and completed in 1975; a further four blocks, Almond, Birch, Chestnut and Hawthorn Houses, were completed in 1982; with Magnolia House being completed in 1983. Since their original build very little work has been carried out on the blocks apart from occasional redecoration and work to meet some of the compliance requirements. Following the full condition survey of the Maidstone site during 2010 all the blocks were classified as Estatecode D – “operationally unsound and in imminent danger of breakdown.” Consequently, considerable work is required on all the 7 blocks to bring them up to an acceptable standard, Estatecode B, and the current backlog figure for this work is £3.2m.
2. Disposal of Nurses Home & Oakapple Site. As a consequence of the disposal of the Nurses Home and Oakapple site it has been established that, if we retain the 7 staff accommodation blocks on the Oakapple Lane site, substantial works will have to be carried out to connect the blocks to the main service utilities. These works include the re-routing/reconnection of all the utilities and the cost of this work has been estimated to be in the order of £0.5m.

Whilst other options are under consideration, plans need to be made and Capital funding needs to be allocated in order to carry out some of the works indicated above. The imminent sale of the Nurses Home/Oakapple House site necessitates the utilities work, and plans should be made for the refurbishment of one of the accommodation blocks.

Possible New Staff Accommodation

From the above it is clear that if the Trust retain the 7 staff accommodation blocks then an investment of well in excess of £3.7m is required to bring the units up to an acceptable standard and cover the cost of re-routing the utility supplies.

As an alternative to carrying out the works identified above, there is an option for considering the disposal of the properties and land associated with the 7 blocks off Springwood Road, and the re-provision of accommodation on the Maidstone main hospital site adjacent to The Academic Centre.

Some initial work has been carried out on the above proposal and it has been established that the Springwood Road site (buildings and land) has a potential value in excess of £7m. Additionally, early indications are that a 100-bedded unit could be constructed on the site next to The Academic Centre for just over £5m. Work is also progressing to look at incorporating a 100-bedded unit with retail outlets below – costs not yet available; but this option could possibly generate considerable income for the Trust.

From all the figures discussed above there is the possibility our old staff accommodation units could be replaced with modern units on the hospital site at a cost of just over £5m. The old site could then be disposed of at an estimated income of over £7m. Additionally, there would be a further saving to the Trust of approximately £3.7m due to backlog and re-routing of utility services.

The proposed disposal of the Springwood Road site could be tied into the disposal of the Nurses Home and Oakapple House site, with the Springwood Road site not being available to the purchaser until the new accommodation on the Maidstone hospital site is completed. This thus provides, what has been seen by some potential purchasers, as an excellent development site offering good phasing and potentially an extended timeframe of work.

A decision on the way forward with the above proposals has yet to be made by the Trust. However, if the decision is delayed then consideration must be given to starting a full upgrade programme for the accommodation blocks.

Car Parking

There are a number of issues concerning car parking on the Maidstone site, some of which relate to how the car parking areas are managed. The two areas that relate to the Estate Strategy are as follows:

1. Infrastructure Equipment. All the current infrastructure equipment relating to car parking access control, barriers, issue of tickets and payment facilities at the Maidstone site are very old and require updating/replacement. Additionally, the Trust does not have full access control of all the available parking areas on the site which has lead to abuse of the available parking by

some of our stakeholders. From our experience on the TWH site, where we have full control of all the parking areas, we have seen a considerable increase in the amount of income from car parking. Plans are progressing for the upgrade of all the equipment.

2. Additional Car Parking. It has become clear that there is insufficient car parking on the Maidstone site and plans have been drawn up for an extension to one of the staff car parking areas which will provide an additional 120 parking bays when completed. By changing the allocation of bays at the rear of the site it is planned to increase both staff and patient/visitor parking by approximately 60 bays each. The Trust has been trying to obtain planning permission for this extension for just over 2 years now, however, following some further dialogue with the council the planning application will now need to be re-submitted again during the next financial year. It is hoped that work will be able to start on the car park extension during late summer 2013.

PET/CT Scanner

Plans are progressing for the installation of a new PET/CT scanner at the Maidstone site, whilst this is still in its very early stages some work has been completed on installation detail and possible location.

Hospital Main Entrance

Work has recently started on looking at the options concerning Maidstone Hospital main entrance. A number of possibilities have been reviewed including new entrance location options and refurbishment/alterations to the existing entrance area. Following the initial review it has been decided to proceed with options relating to changes to the existing front entrance. Schemes are currently being reviewed and it is hoped that decision on the way ahead should be taken in the early 2013. Finally, as part of the work on the front entrance area consideration is also being given to reviewing the location of some of the car parking areas; there is a possibility that in future all staff car parking area could be at the rear of the site, with the front areas being specifically for patients and visitors only.

Private Patients Unit/Oncology

Work has recently been completed on reviewing possible locations on the Maidstone site for the development of a Private Patients Unit (PPU), together with changes to

the location of some of our Oncology services. Whilst these plans are still in their very early stages a number of options have been reviewed, mainly involving one of our Core Blocks, Block R, which houses our Charles Dickens and Lord North wards. Any development utilising this building would lead to an improvement in our Estatecode and Backlog Maintenance figures for this building. Finally, it is worth noting that the Trust is also considering the option of working with an external agency in the development of the PPU at Maidstone which may greatly assist in the funding of the development works.

Discharge Lounge

Following the recent opening of the Urgent Medical and Ambulatory Unit the Trust has reviewed how we can process our patients more efficiently through our Admissions and Discharge facilities. Our initial priority has been to look at our Discharge Lounge area which is considered to be in the wrong location and too small to handle the number of patients transiting through the facility.

Following a number of reviews and meetings a proposal for the positioning of the Discharge Lounge towards the front of the hospital, close to the old helicopter landing pad site, is being pursued. This facility is still being designed but should provide accommodation for up to 3 trolley patients, in addition to seating for others patients. Completion of this facility is not expected until mid-2013 and timeframe will be dependent on the Trust obtaining planning permission for the new building.

Admissions Lounge

The Trusts current Admissions Lounge is situated on the first floor of Block V, the block being referred to as the Travers Centre. The lounge shares the first floor accommodation with the Doctors Mess and the on-call accommodation. The present accommodation is considered to small to meet the current requirements and needs expanding. Following a review of the required number of on-call rooms there is now the opportunity to re-model the first floor accommodation to provide increased capacity for the Admissions Lounge, increased space allocated for the Doctors Mess, and a reduction in the number of on-call rooms. These proposals are still in their early stages but it is proposed that this work may be completed in the next financial year.

Endoscopy & Urology Investigation Unit

Plans are now well advanced for work to start converting the ground floor area of the old Independent Sector Treatment Centre (ISTC), which was utilised by CareUK, into an Endoscopy and Urology Investigation Unit (UIU). The ISTC building is owned by West Kent PCT and the building is currently leased to the Trust. Funding for the

Contents Page

proposed alterations to the building is being supplied by West Kent PCT. Work on site is about to start and we have an estimated completion date of the end of May 2013. Design work is progressing well and in accordance with the Joint Advisory Group (JAG) advice the unit will meet the JAG accreditation requirements.

Service Centre

The service centre is located in Block U on the Maidstone site and houses a number of users split over the ground and first floor areas. Ground floor users include the Estates Works area, Electrical Medical Equipment, Medical Records, Hospital Radio, Patient Care Office, and Goods Inwards; whilst first floor users include the Executive Team, Finance, Estates & Facilities Office, and Human Resources. Two options are currently under review for the Service Centre:

1. Ground Floor. With all the changes that have occurred in the Trusts organisation over the past few years the space now in the ground floor area of the Service Centre is poorly organised and utilised, and significant work is required to rationalise the area. Additionally, there are a large number of new potential users for space within the ground floor area, together with other pressures that need to be resolved within the Trust; including provision of staff changing and shower facilities, bed & mattress storage areas, bed wash down area, etc. Whilst space available within the ground floor would not be able to meet all the requirements, significant improvements are possible.
2. First Floor. The first floor area of the Service Centre consists of offices, meeting rooms, toilets, beverage and computer hub accommodation. Options are being considered for this first floor area to be converted into full open plan accommodation with associated meeting and breakout rooms, toilet and beverage facilities, and a computer hub room. These plans are still at a very early stage and more work is required before any real recommendation can be made on preferred layouts.

Catering Department/Restaurant

The building infrastructure of the Catering Department and Restaurant area at Maidstone was assessed as Estatecode C in 2010, since which time only limited funds have been spent to maintain the area. Additionally, the kitchen equipment is very old, needs constant attention to maintain, and should be upgraded/replaced as soon

as possible. However, other decisions are also required which could affect the type of equipment required and, therefore, significantly affect the works required.

The current food service provision at Maidstone for patients is fresh food, cooked on site in the kitchen, meals are then plated individually prior to delivery via trolleys to each area where the meals are then distributed to patients. It should be noted that the trolleys in use are also very old and in need of replacement. Food is also prepared in the kitchen for sale in the Restaurant, and to support some other areas where SLAs are in place; these generate additional income for the Trust.

The service at Maidstone differs to that at TWH where patient food is regenerated from frozen utilising regeneration trolleys at ward level. It was always the Trust intention to provide the same service at Maidstone, however, this has been delayed. Additionally, fresh food is produced from the TWH kitchen to support the café/restaurant.

A decision on the type of service to be provided at Maidstone needs to be made urgently in order that planning can start to provide the selected meal services at Maidstone. The type of service, and how this is delivered, will have a significant impact on the kitchen/restaurant department area together with a possible major impact on future ward layouts. Finally, the decision will determine the type of replacement meals trolleys that are acquired; and these need urgent replacement action.

Boilers & Boiler House

The 3 boilers at Maidstone that provide all the hot water and heating are due to be replaced within 5-years. These are major items of plant and are also expensive. There are a significant number of options open to the Trust about what they replace the existing boilers with; this could be a straight like-for-like replacement, the use of Combined Heat Power and boilers; or a combination of various available 'green' energy devices. There are also a considerable number of options over how this work should be carried out and funded, and this exercise is currently underway within the Estates & Facilities department. However, whatever the outcome of the current work there will be a requirement for some significant amount of investment from the Capital budget. Finally, it should be noted that additional works will be required on the boiler house to accommodate any replacement plant.

Laundry

It has always been the Trusts ambition to expand the use of the Laundry by taking on additional work and we have had some success in meeting this requirement. However, whilst we currently launder approximately 6m items per annum it is hoped to double this throughput; something that can be achieved fairly easily by increasing the number of hours worked daily and by installing a second tunnel washer. We are also actively involved in bidding for addition work, as well as considering options to work with other local NHS Trusts. Any major success from this work will necessitate a very fast requirement for the installation of the additional tunnel washer.

The layout of the laundry has been designed to allow for this second washer, but we do need to plan for its purchase and installation. The cost of the washer and installation are expected to be in the order of £0.6m. Additionally, it should be noted that the existing tunnel washer is also due for replacement within the next 10 years.

Support Services

Over the past few years a number of options have been looked at concerning the future development of the Maidstone site and these have raised a number of potential problems that may affect the site over the forthcoming years:

1. Medical Gases. We have recently carried out work converting the ground floor area of Block A into an Urgent Medical & Ambulatory Unit. This work required that full bed head gases be available for every proposed bed and trolley location. This work has seen a significant increase in the number of outlet points being available within this area. This increased requirement will continue with the ongoing future development of the ward and other clinical areas, and it is imperative that we have the correct provision of the medical gas services infrastructure to meet all future requirements. A survey/study has been carried out that identified areas where improvements need to be made and plans for the medical gas services infrastructure are being formulated.
2. Electrical Power Supplies. There are two concerns at present with our external electrical power supplies:
 - a. The Trust is approaching the maximum power consumption available to the main hospital site through the present supply service infrastructure. With the development of new clinical equipment and procedures the future power consumption figures

for the Maidstone site are difficult to predict, however, it is quite clear from historical data that consumption is expected to continue to increase.

- b. The rear of the Maidstone site provides the majority of opportunities for expansion of any clinical and/or associated areas. A recent proposal identified that there is very limited electrical power supply capacity to the rear of the site and that any future development may require the provision of another electrical sub-station.

As a consequence of the above, it is proposed that a full review of our current electrical power provision be carried out early in the next financial year to ensure that we have the required infrastructure to meet all our future needs. If another electrical sub-station was required to be installed, indications are that this would cost in the order of £1.0m.

Estate Changes at TWH

Chapel

The old Chapel building on the TWH site is a Grade II listed building. The building is part of the old Union Workhouse site and is the only remaining building. In addition to the Chapel building being Grade II listed, the pews and organ also form part of the listing.

The Trust has an outstanding planning condition related to the Chapel from the original planning application for the new acute hospital:

“Within 6 months of the occupation of the new acute hospital hereby approved, a Listed Building Management Plan for the Listed Chapel shall be submitted to and approved in writing by the Local Planning Authority. The Management Plan shall be generally in accordance with the Heritage Impact Assessment dated 26 July 2007 and received on 30 July 2007. The development shall be carried out in accordance with the approved details, unless otherwise agreed in writing by the Local Planning Authority.”

A number of studies have been carried out and options looked at for uses for the Chapel in the future, however, to date no plans have been finalised. An application was made to the Planning Office to have the pews and organ de-listed in order that

some of the possible uses under consideration would be viable. However, following discussions with the council planning officer and conservation officer, and on advice from our external consultants, we have withdrawn this application. The council are now expecting us to re-visit all possible uses for the Chapel, including its use as a church. We continue to work with our consultants to develop possible uses and address the outstanding planning condition.

Whilst the Chapel has been considered for use as office accommodation, a crèche, staff gymnasium, clinical physiotherapy department, etc, all these uses will require some form of extension to provide toilet and beverage type of facilities – this would obviously be dependent on planning permission. Current uses under consideration are for meeting rooms, hospital radio or a Doctors Mess – again toilet and beverage facilities will be required. One of the main issues affecting the use of the Chapel building is its proximity to car parking facilities for the main users; and whilst it has direct access for public parking, there is no staff parking currently within the vicinity.

Staff Accommodation

There are a number of issues concerning the provision of staff accommodation at the TWH site. Staff accommodation is being provided by utilising the Burslem House staff accommodation on the old Kent & Sussex Hospital site in the centre Tunbridge Wells. This is very sub-standard accommodation but, as part of the disposal of the Kent & Sussex site, will only be available to the Trust until the end of March 2013. The accommodation and remaining site are due to be handed over to the purchaser, Berkeley Homes, and significant financial penalties would be encountered by the Trust if this timeframe is not met.

As a possible solution to providing accommodation for staff at TWH the Trust is in the process of acquiring the property known as The Springs from Kent & Medway Partnership Trust (KMPT). This property used to form part of the Trusts estate prior to it being transferred to KMPT about 10 years ago. Plans for the provision of new accommodation on The Springs site have shown that it would be possible to provide approximately 60 single bedded en-suite facilities on the site. However, recent work has shown that there is a requirement for around 100 units of single bedded en-suite accommodation. In order to be able to provide this accommodation the Trust has decided to purchase the adjacent property to The Springs which was recently put on the open market by the owner – this property is known as Hillcroft. Hillcroft consists of a fully modernised house and extensive gardens. It is the Trusts intention to utilise the extensive grounds of Hillcroft to extend The Springs site in order to provide sufficient space to allow the provision of buildings to provide 100 single

bedded en-suite units. The fence line between the sites will be moved to accommodate this and then Hillcroft will be marketed and sold.

Plans are currently being drawn up for discussion with the local planning office, ahead of the submission of a planning application, to provide the required accommodation.

Car Parking

Since the opening of the new hospital at Pembury we have seen a significant increase in the number of patients and visitors attending the site. These additional numbers have meant that our initial plan for utilising part of the multi-storey car park for patient and visitor parking to cover the requirements during the original build phase of the project has had to be extended; originally the multi-storey car park was for staff use only. Additionally, the Trust are utilising some additional car parking space for staff at the nearby Notcutts garden centre, however, this arrangement is due to end on the 31 March 2013. At the end of March 2013 the staff parking on the Notcutts site are expected to move to the main hospital site. The current provision and layout on site of the car parks and access to the hospital will not provide sufficient car parking, in terms of spaces for staff and patients/visitors in the right locations, to meet the forecast requirements. From work that has been carried out on available parking spaces throughout the working week, at peak times we could be short of up to 75 patient/visitor spaces. This extra requirement will necessitate the continued use of one of the areas within the multi-storey car park for patients and visitors. Consequently, there is now a requirement to provide additional car parking on-site for a similar number of additional staff, which will also cover the transfer of staff from Notcutts at the end of March 2013.

To meet the requirement for additional staff car parking the Trust are planning additional car parking on the North Car Park site by providing an additional deck to this area. This deck would provide an additional net 150 spaces, which will meet all our predicted current requirements and provide for some expansion in the number of staff on site, in the future. However, this additional deck will require full planning permission and an application has recently been made to the local authority.

In order to allow for possible delays in obtaining planning permission the Trust have negotiated with the Mercure Hotel for the use of 50 car parking spaces on their site; these are available from 1 April 2013. No extension was available for the continued use of Notcutts as they are proceeding with the redevelopment of their site. Additionally, it has been proposed that the Upper Level of Level -1 be used for staff

car parking, with the Lower Level of Level -1 continuing to be allocated for patient/visitor parking.

Oncology Service – Provision of a Linac at Pembury

The Trust is looking at the possible provision of a Linac Unit for the TWH site at some time in the future; timeframe has still to be resolved but could be within the next 5 years. The requirement would be for the provision of a suitable building to provide 2 Linac chamber areas (although only one would be used at any one time), waiting area, changing rooms, office space, etc. Some provisional drawings have been reviewed and some initial discussions have been held with the local planning officers about possible locations on the Pembury site. The possible sites for the location of the Linac Unit at TWH are very limited, possibly 2 areas; both towards the Southern edge of the site.

Provision of Intermediate Discharge Lounge Areas

Work on the provision of two intermediate Discharge Lounge areas is currently underway, where the existing reception areas between Wards 10-11 and 21-22 will be converted to provide the required facilities. This work will consist of building a wall which will divide the reception area and provide the Discharge Lounge and adjacent corridor; double door access will be provided into the Discharge Lounge area.

Affordability

The affordability of all the required works on the estate to bring it up to the required standard should be a main concern for the Trust. Years of continuing neglect and lack of spend on the core estate have left the buildings at Maidstone in a very poor condition and requiring significant capital investment. However, the lack of foresight and investment has meant that there are now a large number of competing bids for the available capital.

At Annex A is the latest MTW Capital Programme and Capital Cash Management Plans 2012/13 to 2021/22. It should be noted that not all of the developments covered previously in 'The Next 10 Years' section of this document are included in Annex A; additionally, where some of the items are included the allocated funding will not meet the costs of the required works. Furthermore, there is only very limited funding allocated to backlog maintenance, although a few of the Schemes do have elements of backlog within them. More importantly, it should be noted that allocation of Capital for the Ward Reconfigurations & Refurbishments, together with the allocation for Maidstone – Theatres, will only address 12 of the 16 floor areas of the 8 Core Block that require refurbishment by the end of the 10-year plan. This will still leave 4 areas needing urgent updating and which will be, by then, over 40 years old! Finally, other significant areas of Maidstone Hospital will need to be refurbished during the next 10-year period, as discussed earlier in this document, and this will have a major impact on the current 10-year Capital allocation.

The problem of not having fully formulated plans to address the backlog maintenance and other estates issues will be a major obstacle to the Trusts application for Foundation Trust Status. Indeed, a major contributing factor to the number of Foundation Trust Applications that are deferred or postponed is related to estate issues. A number of trusts have not had estate strategies that were sufficiently developed for Monitor's Board to feel comfortable that risks and issues relating to often complex and aging estates were being tracked and dealt with appropriately. Having significant levels of backlog maintenance is a considerable drain on cash resources and trusts are expected to present coherent and credible strategies for addressing the backlog within a reasonable timeframe.

6.
Security – Corps Security Jul 2017 – Aug 2022,
Car Parking APCOA Jul 2017 – Aug 2022.
Estates -

Contractor	Service Performed
T&T Pumps	Pembury sewage works - Quarterly service (including tankering and jetting) From 01/04/2018 to 31/03/2019
Evolution Water	Call off PO to undertake Legionella sampling at MSH and Pseudomonas samples at MSH and TWH - From 01/09/2019 to 31/08/2020
Health Technical Ltd	Provision of medical gas audit for MGH and MGPS AP assessment 01/04/2019 to 31/03/2020
Powermain	Renewal of annual maintenance contract for 5 standby generators. 4 at Maidstone Hospital and 1 at Parkwood Laundry. From 01/04/2019 to 31/03/2020
AidCall	To provide a platinum planned and reactive maintenance service to 10 x Aidcall nurse call systems. From 01/04/2019 to 31/03/2020
Wychwood Water	Annual service contract for water softeners in 5 x plantrooms. From 01/04/2019 to 31/03/2020
Heightsafe Systems Ltd	Annual test and inspection of fixed access ladders and edge protection at Maidstone Hospital from 01/06/2019 to 31/05/2020
ACP Environmental Ltd	To carry out the servicing of the fire dampers within A&E Block at Maidstone Hospital - ongoing
Adrem Industrial	To carry out the hydraulic tests of the large & small ironers at Parkwood Laundry - from 01/07/2019 to 30/06/2020
Zurich Municipal	Renewal of insurance Inspections for Maidstone Hospital, Parkwood Laundry and Medical Record Centre. From 01/07/2018 to 30/06/2020
UK Power Networks	Renewal of service contract for the high voltage system. Period of contract 3 years From 01/09/2019 to 31/08/2022
Spirax Sarco & Co Ltd	To undertake the service of the Parkwood Laundry boiler house. 3 year contract From 01/08/2019 to 31/08/2022
Powermain	Annual load bank test on Swan LV standby generator at Maidstone Hospital and FGW LV standby generator at Parkwood Laundry From 01/08/2019 to 31/07/2020

Powermain	Annual load bank test on two x new standby generators at Maidstone Hospital plus service From 01/08/2019 to 31/07/2020
Shastid Energy	3 Year service contract for 2 x Wee Chieftain burners and controls at Parkwood Laundry from 01/08/2019 to 31/07/2022
Shastid Energy	Annual service contract for 3 x delivery burners and control systems in Main Boilerhouse at Maidstone Hospital. From 01/08/2019 to 31/07/2020
Spirax Sarco & Co Ltd	3 Year maintenance contract for Spirax Sarco steam equipment at Maidstone Hospital 01/08/2019 to 31/07/2022
P&S Electrical	To carry out PAT and microwave testing at Parkwood Laundry 17/08/2019
Track and Test	To carry out PAT and microwave testing at Medical Records Paddock Wood 17/08/2019
L8 Guard	Water management Annual Licence from 01/09/2019 to 31/08/2020 Annual Licence
Tech Asset Management Ltd	To carry out 20% of the estates 5 year fixed wiring testing. Annual contract ongoing
Maidstone Borough Council - Grounds Maintenance	To undertake road sweeping to Maidstone Hospital ring road. 6 x monthly visits from September 2019 to March 2020
ANDEL	To carry out test and inspection of oil storage tanks and associated equipment
UK Power Networks	3 year service contract for the high voltage system. From 01/09/2019 to 31/08/2022
Allsop & Francis	Annual service and certification of 4 x gas tumble dryers at Rowan House - 13/09/2019
P&S Electrical	For 2019 portable appliance testing (PAT) at Maidstone hospital. Approx 13000 items From 15/09/2019
Lantei	To undertake PAT within the Renal Unit. From 18/09/2019
Track and Test	For 2019 portable appliance testing (PAT) at Tunbridge Wells hospital. Approx 11000 items. From 26/09/2019
Tech Asset Management Ltd	To carry out PAT and microwave oven tests at Crowborough Birth Centre -From 29/09/2019
M&S Water Services	Annual boiler testing of chemicals at Maidstone Hospital from 01/10/2018 to 30/09/2019
M&S Water Services	Annual boiler testing of chemicals at Parkwood Laundry from 01/10/2018 to 30/09/2019
M&S Water Services	Annual heating and chilled water systems testing of chemicals at Maidstone Hospital from 01/09/2018 to 31-08/2019

Total Control Maintenance	Maidstone hospital BMS system - 5 year maintenance contract from 01/04/2015 to 31/03/2020
Leaseguard	Procurement + contract management services LGS076-01 service agreement fees in respect of the negotiation of various maintenance agreements Payment 5
Aether Medical Gases	For annual recommissioning of Anaesthetic Gas Scavenger Systems (AGSS) in Maidstone Hospital from 01/10/2018 to 30/09/2019
Quantum Access Ltd	Inspection of boiler room 4 x chimney stacks - 01/10/2019
M&P Fire protection	To undertake the service to dry risers and fire hydrants at Maidstone Hospital. From 01/10/2018 to 30/09/2019
Tech Asset Management Ltd	Carry out portable appliance testing and microwave emission testing at Abbey Court - 20/10/2019
Kent Gritting Ltd	Inclusive contract to grit Maidstone Hospital and Parkwood Laundry from 01/11/2019 to 31/03/2020
KKL Services	Annual service of 2 x power factor correction units in EEMU- 05/11/2019
Senseco	5 year service of the MSH fire alarm system panels including all detectors and call points from 01/12/2017 to 30/11/2022
Howorth Air Technology	2 year Service cover of Howorth Theatre Laminar Air Flow system in MOU Theatre. Annual Service & Suite Verification 2018 & 2019. Bi-Annual Service & Grid Velocity from 01/01/18 to 31/12/2019
Adrem Industrial	To carry out the hydraulic tests of the large, medium & small ironers at Parkwood Laundry 01/01/2020
Senseco	Annual contract for redcare monitoring at the Maidstone residences 6 x £119. From 1st April 2019 to 31st March 2020
HRD Security	Annual service contract for 28 x automatic doors, 15 x roller shutters and 9 sectional doors. Commence 01/04/2019 to 31/03/2020
Capital Fire Protection	Annual Fire Extinguisher Maintenance for Parkwood Laundry - annual contract 2019-20
M&S Water Services	Call-off contract for the supply of boiler treatment chemicals at Parkwood Laundry from 01-04-19 to 31-03-20
M&S Water Services	Call-off contract for the supply of boiler treatment chemicals at Maidstone Hospital from 01-04-19 to 31-03-20
Salt Express	Call off order for the supply of 10 tonnes of tanker salt for Parkwood Laundry from April 2019 to March 2021

Salt Express	Call off order for Maidstone Hospital for the supply of 10 kg bags of salt from April 2019 to March 2021
B.G.L. Reiber	3 year contract to cover the maintenance for 3 x tilting kettles and 1 x conveyor in main kitchen 01/04/19 to 31/03/22
Interflow	2 x 6 monthly service and filter maintenance to 81 x water coolers within MTW campus. From 01/04/2019 to 31/03/2020
Critical Airflow Europe Ltd	5 Year maintenance contract to service the Phoenix VAV Laboratory & Strobic Airflow Control System in Cell Path. 01/06/2019 to 31/03/2024
Sauter Automation	12 x maintenance visits for Sauter BMS at Maidstone Hospital. One year contract from 01/05/2019 to 30/04/2020
Heightsafe Systems Ltd	Test and inspection of Parkwood Laundry lightning protection system 01/04/2020
Heightsafe Systems Ltd	Test and inspection of 32 High St Pembury lightning protection system 01/04/2020
Heightsafe Systems Ltd	Statutory testing of lightning protection system at Maidstone Hospital. 01/04/2020
Clean Air Technologies Ltd	3 year service agreement to attend 2 x yearly. Microbiology CL3 laboratories and calibration service to ensure compliance. 01/06/2017 to 31/05/2020
Western Sussex Hospital - (Pharmacy Quality Control Department)	4 x Quarternary routine testing of medical air at the main medical air plant from 01 April 2019 to 31/03/2020
Kent Boilercare Ltd	Renewal of boiler maintenance agreement for 3 x gas boilers at Medical Records Centre 01/07/2019 to 30/06/2020
Kent Boilercare Ltd	To undertake the annual commercial gas boiler servicing. 27 x Maidstone Hospital and 3 x Paddock Wood. Contract from 01/07/2019 to 30/06/2020
Kent Catering Services	To carry out annual service to 30 assets in the main kitchen equipment at Maidstone Hospital during Sept 2019
Allsop & Francis	To carry out annual planned maintenance over to the TWH Laundry equipment. 2 x Electrolux washers & 2 x Electrolux electric heat pump dryers from 13/06/2019 to 12/06/2020
Capital Fire Protection	Annual Fire Extinguisher maintenance at Maidstone Hospital. 01/07/2019
Capital Fire Protection	Annual Fire Extinguisher Maintenance for Maidstone Accommodation Blocks 01/07/2019
Capital Fire Protection	Annual Fire Extinguisher Maintenance for 32 High Street Pembury 01/07/2019
Capital Fire Protection	Annual Fire Extinguisher Maintenance for Medical Records, Eldon Way 01/07/2019

CSB Engineering Services Ltd	Maidstone steam boiler no.1, 2 & 3 annual strip down and inspection - 01/07/2019 to 30/06/2020
CSB Engineering Services Ltd	Parkwood steam boiler no.1 & 2 annual strip down and inspection From 01/07/2019 to 30/06/2020
Dupal	Supply 170 x recycleable shower heads and hose at 4 monthly intervals at £9 each. Total 510 From 01/07/2019 to 30/06/2020
RM Associates	3 Year contract to act as AE for water hygiene for the trust. Carry out the annual audit, and attend quarterly Water Hygiene Steering Group meetings. Advise on any water related projects. From 01/08/17 to 31/07/2020
P&J Dust Extraction Ltd	Carpenters workshop Dust Extraction Annual Mauntenance & Inspection 01/10/17 to 30/09/20 - 3 year contract
H&C Contracts	3 year service contract. Routine maintenance for air conditioning and chiller for MRI from 01/10/17 to 30/9/20
Global Associates	BMS service contract for containment level 3 labs in pathology dept. Includes two service visit per year. from 01/01/2019 to 31/12/2021 - 3 year contract
VernaCare	3 year maintenance contract for 23 x bed pan macerators at Maidstone from 01 April 2018 to 31/03/2021
Airis Q	Service agreement renewal for critical ventilation to theatres and various locations at Maidstone Hospital 01/04/18 to 31/03/21 - 3 year contract
Power Control Ltd	3 year contract for planned and reactive maintenance to 2 x Borri UPS systems 01/04/18 to 31/03/21. Also to provide 2 x planned maintenance visits to Academic Centre UPS system Riello MLT from 01/06/18 to 31/05/21
Nationwide Refrigeration	3 year contract from 01/04/18 to 31/03/2021 to provide 2 x PPM visits p.a. and reactive cover to approx 200 x AC & refrigerant plant at Maidstone Hospital
Starkstrom	3 year contract for planned and reactive maintenance to 10 x IPS, 8 x UPS and 4 xTCP systems systems. From 01/04/2018 to 31/03/2021
Uniflair	For 2 x planned maintenance visits for 3 x chillers serving microbiology. From 01/06/2018 to 31/05/2019 annual contract
Constant Power Services	3 year contract for planned and reactive maintenance service to 3 x UPS systems from 01/07/18 to 30/06/21
Allsop & Francis	3 year contract. Annual Dishwasher servicing to 24 x ward dishwashers From 1st July 2018 to 30th June 2021

Siel Energy Systems	3 year contract for planned and reactive maintenance to ROBOT, Microbiology and Pharmacy UPS From 01/07/2018 to 30/06/2021
Bender UK Ltd	3 year contract for planned and reactive maintenance to 9 x IPS systems. From 01/04/18 to 31/03/2021
Aether Medical Gases	7 year contract. Year 5 of 7 Sept 2018 to Aug 2019 Medical Gas Service & Maintenance For Plant and Systems at MGH and TWH
Rubax Lifts	5 year contract for lift maintenance for 12 x PGL's and 3 x service lifts (contract Jan 2017 to December 2021)
Stannah Microlifts Ltd	3 year contract for lift maintenance for Medical Records, Eldon Way, Paddock Wood From 16/01/2019 to 15/01/2022
Height, Lift & Shift Ltd	3 year planned maintenance and service of the Estates Hugo lift. 2 service visits per year. 01/04/2019 to 31/03/2022
Advanced Fire & Security Services Ltd	32 High Street, Pembury - To undertake weekly fire alarm sounder test, fire alarm maintenance and monitoring, 10 x monthly emergency light activation test 1 x 6 monthly and 1 x annual emergency light battery discharge test 3 Year contract 01/04/2019 to 31/03/2022
Advanced Fire & Security Services Ltd	32 to 36 Eldon Way Paddock Wood - To undertake the weekly fire alarm sounder test, 10 x monthly emergency light activation test 1 x 6 monthly and 1 x annual emergency light battery discharge test 3 year contract from 01/04/2019 to 31/03/2022
Hobart	3 Year service "Plus" contract for 3 x Hobart steam ovens in main kitchen at Maidstone Hospital from 01/04/2019 to 31/03/2022
Fulbourn Medical	3 Year maintenance contract for the Operating Theatre Lights, Examination Lights, Pendant Systems and/or Battery Backup Units at Maidstone Hospital. 2 x visits per year from 01/04/2019 to 31/03/22
Quirepace	3 Year maintenance contract for the Maidstone Hospital pneumatic tube system. 6 visits per year. from 01/04/19 to 31/03/2022
Brook Security	3 Year maintenance contract to undertake the annual CCTV, fire and security maintenance and monitoring from 01/04/2019 to 31/03/2022
BGL Reiber	3 Year maintenance contract for 3 x tilting kettles and 1 x conveyor in main kitchen Maidstone Hospital from 01/04/2019 to 31/03/2022

Ingersoll Rand	3 Year PlannedCARE Maintenance & Diagnostics Program maintenance contract to service the Parkwood Laundry compressors. From 01/05/2019 to 30/04/2022
Satec	Planned maintenance of water softeners at Parkwood Laundry. Contract from 1st July 2019 to 30th June 2022
Pumps UK Ltd	3 year contract to carry out two x service visits per year on water booster sets, pressurisation units & vessels From 01/07/2019 to 30/06/2022
Adrem Industrial	To carry out the NDT test and inspection of steam boiler no 1 at Maidstone Hospital Every 5 years Due July 2023
Adrem Industrial	To carry out the NDT test and inspection of steam boiler no 2 at Maidstone Hospital Every 5 years Due July 2023
Adrem Industrial	To carry out the NDT test and inspection of steam boiler no 3 at Maidstone Hospital Every 5 years Due july2023
Adrem Industrial	To carry out the NDT test and inspection of steam boiler no 1 at Parkwood Every 5 years Due July 2023
Adrem Industrial	To carry out the NDT test and inspection of steam boiler no 2 at Parkwood Every 5 years Due July 2023

7. The Trust entered into an EPC in 2016 but this was subsequently cancelled in 2017