



**Scottish
Ambulance
Service**
Taking Care to the Patient



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Public Board Meeting

**May 2019
Item No 08**

THIS PAPER IS FOR APPROVAL

**PROPERTY AND ASSET MANAGEMENT STRATEGY (PAMS) –
INTERIM UPDATE 2019**

Lead Director Author	Julie Carter, Director of Finance and Logistics Emma Stewart, National Finance Trainee
Action required	The Board is asked to 1. Approve the Property and Asset Management Strategy Interim Update 2019.
Key points	<p>A full Property & Asset Management Strategy (PAMS) covering the period 1 April 2017 to 31 March 2022 was submitted to and approved by the Board in May 2017. This Interim Update 2019 provides a progress report on the management of existing assets and updates on new and existing projects. The attached report addressed the following points:</p> <ul style="list-style-type: none">• An update on progress towards developing an integrated PAMS document by end of the current calendar year (2019)• Changes/improvements to asset performance (including backlog maintenance) over the last 12 months.• Progress with any ongoing or new investment projects, particularly highlighting any specific achievements or anticipated benefits.• A copy of Strategic Assessments for all investment projects not currently underway identified within the 5 year investment projects. <p>This summary document also describes how the Service's investment plans continue to be developed to ensure future asset requirements are led by strategic objectives and deliver best value for money.</p>
Timing	<p>The PAMS document has been approved by the Service's Executive Team and the Service's Capital Programme Governance Group.</p> <p>Once approved by the Board, the PAMS will be submitted to Health Facilities Scotland (HFS) for review and assessment of the quality of information provided within it. A review meeting with HFS and</p>

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	<p>representatives from the Service will be held during the summer of 2019. The outcome of the assessment will be presented to the Board once this is available.</p> <p>The information contained within the Scottish Ambulance Service PAMS will be used by HFS to develop the annual State of NHS Scotland Assets and Facilities Report which will be published in early 2020.</p>
Link to Corporate Objectives	<p>The Corporate Objectives this paper relates to are:</p> <ul style="list-style-type: none"> • 1.1 Engage with partners, patients and the public to design and co-produce future service. • 2.4 Develop our mobile telehealth and diagnostic capability • 5.3 Continue to work with partners in local communities to strengthen resilience • 6.3 Invest in technology and advanced clinical skills to deliver the change. •
Contribution to the 2020 vision for Health and Social Care	<p>Efficient and effective use of resources is important to the Scottish Ambulance Service to enable it to deliver change in service delivery to meet the aspirations of the 2020 vision.</p> <p>The PAMS sets out the implications for Property, Fleet, medical equipment and IM&T assets as a result of the Service's 2020 vision.</p>
Benefit to Patients	<p>Efficient and effective use of assets enables the Scottish Ambulance Service to provide the best level of safe and effective care to patients as it can within the resources available.</p>
Equality and Diversity	<p>An Equality Impact Assessment was conducted for the full PAMS submitted in 2017 which found that a full EQIA assessment was not required. This previous assessment is reviewed annually and was considered in relation to this interim update report. The EQIA is attached as an appendix to this document.</p>

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SCOTTISH AMBULANCE SERVICE BOARD

**PROPERTY AND ASSET MANAGEMENT STRATEGY (PAMS) -
INTERIM UPDATE 2019**

JULIE CARTER, DIRECTOR OF FINANCE AND LOGISTICS

SECTION 1: PURPOSE

A full Property and Asset Management Strategy (PAMS) covering the period 1 April 2017 to 31 March 2022 was submitted to and approved by the Scottish Ambulance Service Board in May 2017. The purpose of this Interim Update 2019 provides a progress report on the management of existing assets and updates on new and existing projects.

SECTION 2: RECOMMENDATIONS

The Board is asked to discuss and approve the Property and Asset Management Strategy Interim Update 2019. Following approval, this document will be submitted to Health Facilities Scotland (HFS) for review and assessment.

SECTION 3: BACKGROUND

All Health Boards are required to develop a Property and Asset Management Strategy (PAMS) which must be reviewed and approved biennially by their respective Board. Interim update reports are required in each intervening year.

Following discussions between NHS Boards and Scottish Government Health and Social Care Directorate (SGHSCD), a single integrated Property and Asset Management Strategy (PAMS) document covering the National Boards has been proposed. In recognition that these new arrangements may take longer to implement, Scottish Government have extended the submission deadline for the full PAMS. An interim update report is required in June 2019, with the full PAMS submission required in December 2019.

SECTION 4: DISCUSSION

The following table summarises the performance of the current assets utilised by the Service over the past year, with key points noted below:

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Property						
Number of sites		137				
Net Book Value (£m)		24				
Floor Area (Sq.m.)		2018/19	47,742			
		2017/18	45,754			
Age Profile		Up to 10 years	10-30 years old	30-50 years old	Over 50 years old	
	2018/19	9%	42%	44%	5%	
	2017/18	10%	38%	46%	6%	
Tenure Type		Owned	Leased	PPP/PFI	Other	
	2018/19	70%	30%	0%	0%	
	2017/18	72%	28%	0%	0%	
Physical Condition		A	B	C	D	
Ranking	2018/19	12%	73%	14%	1%	
	2017/18	13%	71%	15%	1%	
Functional Ranking		A	B	C	D	
	2018/19	10%	78%	10%	2%	
	2017/18	15%	72%	11%	2%	
Quality Ranking		A	B	C	D	
	2018/19	27%	53%	20%	0%	
	2017/18	27%	52%	21%	0%	
Space Ranking		Empty	Under-used	Fully Used	Overcrowded	
		2018/19	0%	1%	85%	14%
		2017/18	0%	1%	84%	15%
Statutory Compliant Risk		Low Risk	Moderate Risk	Significant Risk	High Risk	
Profiled Backlog Costs		Low Risk	Risk	Risk	Risk	
£000		781	215	21	0	
% 2018/19		77%	21%	2%	0%	
£000				Total	1,017	
£000		783	211	20	0	
% 2017/18		77%	21%	2%	0%	
£000				Total	1,014	
Backlog Maintenance (£000)		Low Risk	Moderate Risk	Significant Risk	High Risk	
2018/19		2,496	874	29	0	
				Total	3,399	
2017/18		2,292	824	78	0	
				Total	3,194	

Vehicles				
Number of vehicles		1,418		
Net Book Value (£m)		43		
Age Profile			Less than 2 years old	2-5 years old
		2018/19	32%	35%
		2017/18	30%	22%

¹ This is the cumulative figure of owned operational vehicles and staff car scheme fleet

ICT					
Number of assets		N/A ²			
Net Book Value (£m)		2.9			
Age Profile			Less than 3 years	3-5 years old	5-10 years old
		2018/19	44%	43%	8%
		2017/18	85%	4%	9%

² Some ICT assets are group together and some held as individual assets therefore a 'number of assets' is not meaningful in this context

Medical Equipment - Defibrillators					
Number of Assets		542			
Net Book Value (£m)		0			
Age Profile			Less than 3 years	3-5 years old	5-10 years old
		2018/19	0%	1%	99%
		2017/18	0%	1%	99%

Medical Equipment - ScotSTAR					
Number of Assets		50			
Net Book Value (£m)		0.24			
Age Profile			Less than 3 years	3-5 years old	5-10 years old
		2018/19	30%	52%	12%
		2017/18	50%	31%	19%

In addition to the Service's ongoing investment projects, a number of upcoming projects have been identified over the next 5 years. These are summarised as follows:

Asset	Development/Project
Property Assets	Ambulance Station Replacement Programme
	Demand and Capacity Review – Estates Capital Requirements
	Glasgow South Station
Fleet	Fleet Replacement Programme
IM&T	Ambulance Telehealth
	Replacement of A&E and PTS National Computer Aided Despatch (CAD) Systems
	Refreshed eHealth Strategy Capital Requirements
	Collaboration Tools (e.g. Microsoft Office 365)
Medical Equipment	Patient Transport Shock Boxes
Other	Re-procurement of Air Ambulance Services

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SECTION 5: CONSULTATION

The PAMS has been developed in consultation with the Head of Estates, General Manager for ICT and the General Manager for Fleet.

The document has been approved by the Service's Executive Team and the Service's Capital Programme Governance Group.

In June 2019, the PAMS Interim Update will be submitted to Health Facilities Scotland for review and assessment and feedback will be given at a review meeting with representatives from the Service during the summer of 2019.

APPENDICES:

Appendix 1 Property and Asset Management Strategy – Interim Update 2019

Appendix 2 Equality Impact Assessment for the Property and Asset Management Strategy – Interim Update 2019

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Property & Asset Management Strategy Interim Update 2019

Release: Version 2.3
Date: May 2019

Author: Emma Stewart, National Finance Trainee

**Executive Sponsor: Julie Carter, Interim Director of
Finance & Logistics**

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Approver:	Scottish Ambulance Executive Team and Board
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0.01	11/03/19	Initial Draft	ES	No
1	30/04/19	Incorporated info received from managers & added asset tables	ES	No
2	02/05/19	Reviewed by JC – changes incorporated into the document	ES	No
2.1	03/05/19	Correction of error in PAMS tables (estates and ICT assets)	ES	No
2.2	08/05/19	Line added against fleet assets referencing need for continued investment	ES	No
2.3	17/05/19	Draft Board paper review	ES	No

Approvals: This document requires the following signed approvals.

Name:	Date:	Version:
Scottish Ambulance Service Capital Programme Governance Group	08/05/19	2.1
Scottish Ambulance Service Executive Team	10/05/19	2
Scottish Ambulance Service Board		

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Name:	Date of Issue:	Version:
Director of Finance & Logistics	01/05/19	V1
Head of Estates, IT and Fleet	13/05/19	V2.2

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Equality and Diversity Impact Assessment:

Date Completed: 12/05/17 (subsequently reviewed on 16/04/18 and 05/04/2019)

1.0 Introduction

Following discussions between NHS Boards and Scottish Government Health and Social Care Directorate (SGHSCD), a single integrated Property and Asset Management Strategy (PAMS) document covering all of the National Boards has been proposed, with similar discussions with the regions. In recognition that these new arrangements may take longer to implement, Scottish Government has extended the submission deadline for the full PAMS. This therefore means that an interim update report is required in June 2019 (submission 7th June), with the full PAMS submission required in December 2019.

The letter issued by SGHSCD to Health Boards advising of these changes is included at Appendix A.

Scottish Government has advised that the following points should be addressed in this interim report:

- An update on progress towards developing a regional / integrated PAMS document by the end of the calendar year.
- Changes / improvements to your asset performance (including backlog maintenance) over the last 12 months. This should align with the performance data included within your asset pro-forma returns.
- Progress with any ongoing or new investment projects, particularly highlighting any specific achievements or anticipated benefits.
- As an annex to this report, Boards should also include Strategic Assessments for all investment projects identified within their 5-year investment programme.

Also included in this document is a high level overview of governance arrangements in place in relation to maintenance and estates issues.

A full PAMS covering the period 1 April 2017 to 31 March 2022 was submitted and approved in May 2017. An Interim Update Report was submitted to the Health and Social Care Department of Scottish Government in June 2018. This report provides a further update on the progress made by the Service in relation to the current PAMS (covering 2017 – 2022).

A full PAMS document will be submitted in December 2019.

2.0 Integrated PAMS Document

The Scottish Ambulance Service (the Service) will engage in discussions with the National Boards regarding the suitability, format and appropriateness of an integrated PAMS document in meeting individual boards needs and recognising the need for integration.

The Service currently co-locates with other National Boards, with some Territorial Boards and with other emergency services, and therefore understands the benefits of describing this integrated approach. This approach is also a key feature of our developing Estates Strategy.

It is important however to highlight that the Service's asset base is significantly different to that of the other National Health Boards, comprising of a large volume of fleet assets and ambulance stations. The format of the December report will be agreed through the National Board Collaboration Programme Board and will take cognisance of the National Boards Delivery Plan and the work carried out by the National Board collaborations.

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3.0 Summary of Asset Performance over the last 12 months

The following table summarises the performance of the current assets utilised by the Service over the past year, with key points noted below:

Property					
Number of sites		137			
Net Book Value (£m)		24			
Floor Area (Sq.m.)		2018/19	47,742		
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Medical Equipment - ScotSTAR					
Number of Assets		50			
Net Book Value (£m)		0.24			
Age Profile		Less than 3 years	3-5 years old	5-10 years old	Over 10 years old
	2018/19	30%	52%	12%	6%
	2017/18	50%	31%	19%	0%

3.1 Estates

Overall Square Meterage of Estate

The addition of 7 satellite stations and the replacement of 2 leased properties, has accounted for the increase in the overall square meterage of the estate. Only 2 sites were removed from the Estates and Asset Management System in 2018/19.

Physical Condition

There are some minor changes to the physical condition of the estate due to previous new builds and refurbishments which were categorised as condition A but have now moved to condition B. They are now 2 years old and over, and as per the guidance they have moved to Condition B. The small decrease in Condition C is due to continued improvement works being completed during 2018/19.

Functional Ranking/Suitability

There is a significant change in the percentage of Condition A properties, moving from 15% to 10%. This is again due to new builds and refurbishments falling into the Condition B category as they are now more than 2 years old. This is also reflected in the Condition C properties which have improved to Condition B due to some minor improvement works being completed.

Space Utilisation

The small decrease in overcrowding is due to the establishment of the Satellite Stations at Scottish Fire and Rescue Service Stations where one crew is based at each site. This has reduced overcrowding at the base Ambulance Stations. This direction will continue into 2019/20 and beyond.

Quality

The improvements in quality are attributable to improvement works completed during 2018/19.

Backlog Maintenance

At 2017/18 the physical condition costs amounted to £3,194m; in April 2019 Health Facilities Scotland (HFS) applied an inflationary rate of 3.71%. During 2018/19, 20% of the estate was further surveyed, with 17 of the surveys being undertaken in-house. The results of the surveys and the inflationary increase have led to an overall increase in backlog works of £205k.

The table below details the comparisons and variance in costs of the in-house surveys where applicable, however a further 8 sites were surveyed through the HFS Phase 10 Property Survey Framework and now require to be uploaded to the Estates and Asset Management System (EAMS) and will be incorporated into the December update. This is part of an ongoing process.

It is important to note there are no high risk backlog works identified within the estate.

Station	Physical Condition Costs Previous Survey	Physical Condition Survey Costs 2018/19	Variance
Aboyne	67,694	22,628	-45,066
Alford	9,133	2,530	-6,603
Aviemore	42,403	41,120	-1,283
Clydebank	693	3,400	2,707
Coatbridge	4,108	1,600	-2,508
Dalkeith	66,949	89,470	22,521
Douglas	41,843	40,927	-916
Glasgow East	652	0	-652
Law	25,141	77,496	52,355

Livingston	6,523	76,881	70,358
Rothsay	133,148	145,131	11,983
Total Costs	398,287	501,184	102,897

This is showing that the backlog physical condition costs for the properties surveyed have increased by £102k.

3.2 IM&T Assets

The total number of IM&T assets held by the Service is not a meaningful number because some assets are grouped together and others are held as individual assets. A number of IT assets were purchased and capitalised during 2018/19 as a result of Ambulance Control Centre upgrade and expansion work. This included networking and telephony equipment.

In addition, a significant number of desktop and laptop PCs have been purchased as part of a rolling Windows 10 upgrade programme, deployment is ongoing. However, these are revenue funded and are therefore not included in the figures above.

3.3 Fleet

There has been a significant investment in the Fleet through the Fleet Replacement Business Case which has facilitated a notable reduction in the proportion of vehicles over 5 years old. This is reflected in the % above. Continuing investment will be required to maintain the current reduction in fleet revenue costs.

3.4 Medical Equipment

The majority of the Service's medical equipment is attached to vehicles and is not classed as a separate asset and is therefore covered under fleet assets within this document. The exceptions to these are described in the section below:

Cardiac Defibrillators

The MRX Cardiac Defibrillators currently held by the Service are now reaching the end of their useful life. The units are currently being maintained through an ongoing maintenance contract with the current manufacturer and supplier.

A Full Business Case for the Replacement of ALS Monitors/Defibrillator units was approved by Scottish Government on 17th October 2018. The Service has secured £11million of capital funding to procure and install 600 new units and dispose of existing units during 2019/20. This will significantly improve the age profile of the units. In addition, the number of units will increase to accommodate new developments included in the Service's Strategic Framework.

This project also provides significant patient benefits which are detailed in section 6.4 (Medical Equipment).

ScotSTAR Equipment/Air Ambulance

The Service receives an additional £250,000 annual capital allocation from Scottish Government to fund medical and training equipment required by SCOTSTAR.

During 2018/19 several pieces of equipment were purchased. These include mechanical CPR devices, infusion pumps and medical gas cylinders. An additional SCOTSTAR base in the North of Scotland at Aberdeen became operational on 23rd April 2019. As a result, additional equipment was purchased in 2018/19 to equip the base prior to its 'go live' date.



4.0 Estates Strategy Development

A Property Forum was established in 2018/19, as part of the wider Best Value Programme. The purpose of the Forum is to continually review estates provision and develop strategy linked to the National Estates Strategic Plan. The primary focus is to develop a five year estates strategy.

Core membership of the Forum includes the general managers for the Estates, ICT and Fleet departments.

Initial meetings have been held and terms of reference agreed. To date, baseline assessments of all properties have been carried out to allow for the development of a prioritised strategy.

5.0 Estates Governance Arrangements

The following sub-sections provide a high level summary of governance arrangements in relation to strategy development, maintenance and general estates issues.

5.1 Strategy Development

In terms of strategy development the governance arrangements have been strengthened with the establishment of Property Forum to consider specifically:

- A service led review of the current estates provision. This is chaired by our Regional operations teams
- Opportunities for co-location with other healthcare providers and emergency services
- Linking to our Service wide demand and capacity review. This is to ensure the stations are located in the most optimum place for the most efficient use of staff and vehicle resources leading to improved response times
- Ensuring that we are connecting to the National and Regional developments and
- Maximising all savings opportunities through sharing space, rationalisation and energy efficiencies

This forum reports to our Capital Group so we can direct our limited capital resources to the most appropriate locations. The Property Forum is also taking a lead in developing our Estates Strategy.

5.2 Maintenance

A Planned Preventative Maintenance (PPM) annual programme is in place for estates maintenance. This includes, but is not restricted to, the following:

- Mechanical
- Electrical (including fixed electrical and PAT)
- Fire alarms/fire fighting equipment
- Garage doors
- UPS
- Generators
- Workshop equipment
- Water sampling/testing and monthly temperature testing
- Security Access Systems/CCTV and electronic gates
- Air-conditioning
- Lifts

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5.3 Reactive Works

Calls for reactive works from Stations are routed through an in-house estate help desk. The purpose of the help desk is to take the calls, contract with suppliers, arrange the works and assess completion including scrutiny of costs. High priority works will be identified at start of process. The Estates Department will recommend works to be carried out and Budget Holders will prioritise based on available funding.

5.4 Policies and Procedures

The following provides a non-exhaustive list of policies and procedures in place to support estates management:

- Management of Contractors
- Management of Asbestos
- Safe Working with Electrical Systems
- Maintenance of Water Systems & the control of Legionella
- Confined Spaces
- Permits to Work

5.0 Progress on Current Investment Projects

The following tables detail the progress on current investment projects across our asset base including a summary of key benefits delivered:

6.1 Property Assets

Development / Project	Summary	Key Benefits Anticipated/Delivered
Stirling Care Village	<p>Stirling Care Village is a project developed to take forward an integrated care model that combines primary and community healthcare with older people's care to create a joined up holistic approach to service delivery between the two organisations. This has resulted in the formation of a Care Village based on the existing Stirling Community Hospital site.</p> <p>The Ambulance Station was successfully relocated in the summer of 2018 and is fully operational. The construction of the workshop has commenced with an anticipated completion of summer 2019.</p>	<ul style="list-style-type: none"> • Improves support to allow people to live independently • Improves quality of care provided • Increases proportion of people being treated at home or in a homely setting • Improves financial performance • Increased staff satisfaction • Improves functional suitability of the healthcare estate • Improves the physical condition and quality of the
Ambulance Station Replacement Programme	<p>Cumnock</p> <p>Options for refurbishing the existing building are being explored and feasibility costs are being calculated.</p>	
Enhancing Capability Programme	<p>Aberdeen and Dundee SORT</p> <p>As part of the Enhancing Capability Programme, capital refurbishment works were required to the Specialist Operations and Response Team (SORT) base in Aberdeen. The project has now commenced with completion due in 2019/20.</p> <p>The Enhanced Capability Programme also identified a need for a new SORT base in the Dundee area. Option appraisals were carried out in 2018/19 and are being evaluated with the expectation that a preferred site will be identified soon. It is anticipated that capital refurbishment works will be completed in 2019/20 prior to the site becoming operational.</p>	

Development / Project	Summary	Key Benefits Anticipated/Delivered
Ambulance Control Centres (ACCs)	<p>The Service has been working collaboratively with NHS 24 on an Ambulance Control Centre Development programme to evaluate options for refurbishment of the existing Norseman and Cardonald sites.</p> <p>Refurbishment and ICT works at Norseman were carried out and completed in 2018. Further snagging works were carried out and completed during 2018/19 financial year. The upgrade allows for the expansion required by the Clinical Response Model and for Business Continuity with regard to the West ACC at Cardonald.</p> <p>The Service is collaborating with NHS 24 to redesign the layout of the West ACC to mirror the Norseman accommodation.</p>	<p>estate</p> <ul style="list-style-type: none"> • Reduces emergency hospital admissions and attendance at A&E • Supports collaborative working with health and emergency services partners • Enables the optimal deployment of assets – staff, finance, vehicles and ICT.
Co-locations with NHS Partners	<p>Currently there are six locations with NHS partners in development; these projects are a combination of new builds and existing properties being extensively refurbished. The new Hospital at Kirkwall is near completion with an occupation date for the Service in May 2019. The other locations are Aviemore, Broadford, Barra, Wick and Thurso; these projects are all at different stages, some at outline business case (OBC), full business case (FBC) or initial design for discussion.</p> <p>The Service was included in these projects from an early stage; this has enabled the Service to design fit-for-purpose accommodation and facilities and provide an opportunity to work closer with NHS partners.</p> <p>The Service is actively exploring other opportunities for co-location and collaboration.</p>	
Co-locations with Emergency Services Partners	<p>Co-locations completed in 2018/19 with SFRS are two new satellite Stations at Clarkston and Castlemilk and two full time co-locations at Lerwick and Balmossie.</p> <p>Capital works were required to enhance the estates to meet the needs of the Service. This included network, telephony and ICT works.</p>	

6.2 Fleet Assets

Development / Project	Summary	Key Benefits Anticipated/Delivered
<p>Fleet Replacement Strategy</p> <p>(2016/17 to 2021/22)</p>	<p>The Fleet Replacement Business Case identified funding requirements for the proactive planning and introduction over a five year period of vehicles and equipment essential to supporting the best possible patient care. The third year of investment was successfully implemented to schedule before 31st March 2019.</p> <p>With the forward planning that this funding allows, it was possible to place orders to secure the Accident & Emergency ambulances necessary to meet the 2019/20 needs to the required specification to be available prior to the anticipated Brexit date. This gave the Service a unique and enviable position to mitigate any potential implications from interruption of the supply chain.</p> <p>The fourth year of the Fleet Replacement Business Case has commenced with the early introduction of the Accident & Emergency vehicles planned in April/May and Scheduled Care vehicles in May/June. In addition, further patient care and support vehicles will be introduced throughout the year.</p> <p>The Scottish Ambulance Service is fully committed to embracing the Scottish Government direction that they will “Take the lead in promoting the use of ultra-low emission vehicles (ULEVs) and phase out the need for new petrol and diesel cars and vans by 2032.” The Service was the first ambulance service to introduce electric rapid response vehicles through the introduction of paramedic response cars in Edinburgh, Glasgow and Aberdeen. Building on this, with the support of Transport Scotland, the Service will introduce 50 pure electric vehicles by September 2019.</p>	<ul style="list-style-type: none"> • Improves functionality of fleet • Improves financial performance by reducing maintenance, fuel and logistical costs by providing new, more reliable vehicles • Improves availability of vehicles, reducing off-road downtime due to aged vehicles • Provide the correct mix of vehicles to respond to each incident appropriately • Reduce vehicle emissions and airborne pollution • Supports corporate strategy by treating more patients outside a hospital setting
Electric Vehicle Charging Points	To ensure the effective use of new electric vehicles, encourage engagement and their wider use, the Service is investing in the electric vehicle charging infrastructure at key locations nationally.	

6.3 Information Management & Technology (IM&T) Assets

Development / Project	Summary	Key Benefits Anticipated/Delivered
Clinical Response Model (CRM)	<p>The Clinical Response Model Project is complete. It was delivered in three stages. Stage 1 and 2 were completed during 2017/18.</p> <p>Stage 3 was completed during 2018/19, it involved:</p> <ul style="list-style-type: none"> • Implementation of the 'Key Phrases' module to allow more Immediate Life Threatening (ILT) calls to be identified earlier in the call cycle • Transition to business as usual from the current project management structure <p>Although the original CRM project is now complete, work on improving the way that the Service responds to calls continues.</p>	
Emergency Services Network (ESN)	<p>Like all other GB emergency services, the Service currently use the Airwave Service provided by Airwave Services Limited for the provision of critical mobile voice and mobile short-data services (i.e. mobile radio provision). The current Service contract was due to run until December 2020; however a GB-wide agreement was negotiated which included a national shutdown of the Airwave service for all users at the end of December 2019. This has now been extended until December 2022.</p> <p>Service staff are currently working closely with counterparts from Scottish Government, Police Scotland, Fire Scotland and the UK Government in order to minimise risk by taking a coordinated approach to planning the Scottish migration to ESN. Scottish transition was scheduled to take place over the twelve month period Q3 2018/19 and Q3 2019/20 but it is now apparent that it is unlikely to start until 2022/23.</p> <p>Given the current uncertainty around the transition timeline it is difficult to predict the full scale of the financial impact of replacing the current Airwave solution with</p>	

Development / Project	Summary	Key Benefits Anticipated/Delivered
	<p>the ESN or when the costs will be incurred. More clarity on the scale and timing of the costs is expected when the revised ESMCP FBC is approved and published. This was expected to be around September 2018; however it has been delayed and is now expected in autumn 2019. ESN costs continue to be a very significant risk to the three Scottish emergency services and the Scottish Government.</p>	
Integrated Control Centre System (ICCS) Replacement	<p>ACC staff currently use a Capita DS2000 Integrated Communication Control System (ICCS) to communicate with operational Service staff. The provision of a compatible ICCS is a prerequisite for migration to the new Emergency Services Network (as discussed above).</p> <p>Having looked at various options, including collaboration with Police and Fire partners in Scotland, a decision has been taken to join other GB Ambulance Trusts in participating in the UK Government Department of Health and Social Care contract for the supply of a Frequentis LifeX ICCS. Service staff are now engaged in finalising contractual arrangements and planning the implementation for late 2020.</p>	
Cyber Resilience	<p>Due to the current threat landscape, the publication of the EU Network Information Systems (NIS) regulations and the current Scottish Government focus on cyber resilience, there is still a requirement to significantly increase efforts and activities in relation to cyber security over the next 12-18 months in general and the next 3-6 months in particular.</p>	
e-Health Strategy Delivery	<p>The Service e-Health ICT Strategy was approved by the Board in March 2016, running until 2020. A mid-term stock-take and refresh was carried out during late 2018 and early 2019. It takes cognisance of the new Scottish Government Digital Health & Social Care Strategy published in 2018 and a number of other relevant changes that have occurred since the current strategy was approved in 2016. An update addendum to the current strategy was approved by the Board in March 2019.</p> <p>Work completed during 2018-19 includes: upgrading the Ambulance Control</p>	

Development / Project	Summary	Key Benefits Anticipated/Delivered
	<p>Centre (ACC) local area network (LAN); implementing the electronic interface to Northern Ireland Ambulance Service; implementing the interface between the unscheduled care and scheduled care systems within the ACCs; further expanding and upgrading our video conferencing capability; as well as enhancing our command and control and patient transport systems.</p>	
ACC ICT Developments	<p>There were a number of ACC developments planned for completion during 2017/18, however most of these were put on-hold when a project was commissioned to improve resilience and increase capacity within the East ACC in South Queensferry. This project involved significant ICT, electrical & building work. The work was delivered over two phases and was completed during 2018/19.</p> <p>ACC developments planned for 2019/20 include: Upgrading the corporate telephony platform including call recording, replacing the wide-area network (WAN) which interconnects our three ACCs and completing the Ambulance Control Centre back-up telephony project.</p> <p>Work is currently ongoing to determine and agree the future of the West ACC. Depending on the scope and scale of any upgrade or expansion work, the requirement for ACC ICT resources and investment may be considerable over the next 1-2 years.</p> <p>In 2012-13, the Service engaged with NHS 24 regarding the implementation of a single clinical triage system (SCTS) to be used by both organisations. The project to deliver the SCTS, and a related 2-way data transfer mechanism, was put on hold during 2014 at the request of NHS 24 due to delays with the implementation of their new ICT infrastructure. This work is currently back on track and will be progressed during 2019-20.</p>	
Patient Transport Service (PTS) Mobile Data	<p>The current patient transport fleet of circa 460 vehicles are fitted with cab-based technology which includes mobile data provision and a tablet which is interfaced to the PTS system in the ACCs. The aim being to assist crews in managing and</p>	

Development / Project	Summary	Key Benefits Anticipated/Delivered
Replacement Project	<p>coordinating the pick-up and drop-off of patients for routine hospital appointments.</p> <p>The current mobile data equipment and software (purchased in 2012 with an expected useful life of 5-7 years) is no longer supported by the manufacturers and the existing maintenance contract expires in 2019.</p> <p>The process of building a business case to secure funding to replace the current solution is ongoing. An Initial Agreement has been submitted to the Scottish Government Capital Investment Group for approval at their May meeting. The FBC is planned for completion during 2020 with roll-out expected in 2021. Initial estimates indicate that capital funding of circa £2.5m will be required. However this estimate will be refined at OBC stage.</p>	

6.4 Medical Equipment

Development / Project	Summary	Key Benefits Anticipated/Delivered
ALS Monitor/Defibrillator Replacement Project	<p>ALS monitors / defibrillators form a part of the Service's primary response equipment and, as such, is taken to the patient in every emergency and urgent call. The current units utilised by the Service are at the end of their life and the current unit is no longer being manufactured so replacement parts are becoming increasingly difficult to source.</p> <p>The Full Business Case for this replacement project was approved in October 2018 (as described in section 3.4 Medical Equipment). The Service has secured £11m of capital funding from the Scottish Government Capital Investment Group in 2019/20 to purchase 600 ALS monitors/defibrillator units. The project is currently on track to complete by the end of 2019/20.</p>	<ul style="list-style-type: none"> • Improved support to allow people to live independently • Increased 'See & Treat' • Improved patient outcomes • Improved financial performance • Increased patient safety • Optimises resource usage • Service development potential • Increased time for staff to spend on patients' clinical needs due to the auto-population functionality • Reduced maintenance and repair costs

6.0 Planned Investment Projects

7.1 Anticipated Projects

The Service's 5 year investment plan contains the following investment projects:

Asset	Development / Project	Description
Property Assets	Ambulance Station Replacement Programme	<p>The Service's existing estate profile comprises of 137 sites across the geography of Scotland, the majority of which are ambulance stations. There is an ongoing requirement to refurbish, replace or relocate operational ambulance stations to ensure they remain fit for purpose and enable staff to deliver the aims and objectives set out in the Strategic Framework.</p> <p>A revised Strategic Assessment is attached as Appendix B.</p>
	Demand and Capacity Review – Estates Projects	<p>The Service commissioned an external expert consultancy firm, ORH, in 2017 to conduct a Demand and Capacity review. The main scope of the review was to determine the overall capacity and workforce requirements to respond to current and future projected demand.</p> <p>During 2019/20, the estate implications arising from the Demand and Capacity review will be identified and prioritised. There is an expectation that capital funding will be required to deliver the specific projects. Estimated capital requirements are expected from 2020/21 onwards. The requirements will be finalised once the results of the Demand and Capacity review are known.</p> <p>A Strategic Assessment for this project is included in Appendix C. This will be refined once the results of the review are known.</p>
	Glasgow South	<p>Glasgow South station has been identified as a high priority area for refurbishment within the Estates Strategy due to its current condition. This project was originally included in the 2018/19 capital programme; however the preferred option became unavailable. The Service is currently undertaking a further options appraisal at pace to determine the preferred way forward through staff and stakeholder consultation. Due to the size of the project, the refurbishment will take place over 2 years with a business case planned for September 2019.</p>

Asset	Development / Project	Description
		<p>In order to alleviate some of the issues with the current site, co-locations within two Scottish Fire and Rescue Service (SFRS) sites have been identified and due to become operational in early 2019/20.</p> <p>A Strategic Assessment for this project is included at Appendix D.</p>
Fleet	Fleet Replacement Programme	<p>A 5 year Fleet Replacement Programme will be submitted on completion of the existing programme to secure funding for the ongoing replacement of vehicles. This will be subject to the stage Business Case Process as dictated by the Scottish Capital Investment Manual (SCIM) issued by Scottish Government.</p> <p>Preparations have commenced to prepare the next Fleet Replacement Business Case to allow the continued proactive planning of vehicles aligned to the Scottish Ambulance strategy for taking care to the patient beyond 2020. Through our National Vehicle Design and Equipment Group the next Fleet Replacement Business Case will be supported by a number of stakeholder engagement events taking place during the summer of 2019, an options appraisal exercise establishing the specification for each of the vehicle types leading to competitive tender exercises to appoint suppliers for each of the required vehicles types.</p> <p>A Strategic Assessment for this programme is included in Appendix E.</p>
IM&T	Ambulance Telehealth	<p>There will be a requirement to replace the Telehealth equipment installed in emergency ambulances once they reach the end of their useful economic life. The Business Case Process outlined in the SCIM will be followed and work on the Initial Agreement is expected to commence in 2020/21 with expected project delivery beginning in 2022/23.</p> <p>A Strategic Assessment for this programme is included in Appendix F.</p>
	Replacement of ACC Systems (A&E and PTS)	<p>A Computer-Aided Despatch (CAD) system is used to manage and deploy resources to unscheduled care (A&E) calls. Calls are triaged using an electronic triage system in the ACCs. Scheduled care (PTS) resources are also deployed using a computer based resource management and planning solution.</p>

Asset	Development / Project	Description
		<p>The contracts for these systems expire during 2019/20. A full retendering process is required to comply with procurement regulations. This provides an opportunity to consider the suitability of a single system for A&E and PTS calls, supporting the clinical response model which reduces demarcation between A&E and PTS.</p> <p>A Strategic Assessment for replacing these systems is attached at Appendix G.</p>
	eHealth Strategy	<p>The Service approved the refreshed eHealth digital strategy at the March 2019 Board meeting. Work is now commencing on the new 2021-2030 strategy and through this work ICT capital requirements will be determined</p> <p>A Strategic Assessment is attached at Appendix H. This will be refined as the new strategy develops and specific capital requirements are identified.</p>
	Collaboration Tools (e.g. Microsoft Office 365)	<p>Service staff currently have access to the Microsoft Office suite of applications. The current model is the traditional 'on premise' one whereby the applications are installed on local hardware. Licenses are currently purchased 'outright' on a 'per device' basis as this offers the best value for money given the current ratio of ICT users to devices.</p> <p>However, a decision has been taken that NHSScotland will migrate from the 'on premise' model to a Microsoft Office based 'cloud' model based on Microsoft Office 365. A national O365 Programme has been established led by NHS National Services Scotland (NSS) to help deliver this.</p> <p>Whilst this strategic leadership and direction setting is welcome, it does present a number of issues and challenges for the Service in terms of affordability and the ability to resource and manage the change within the expected timescales.</p> <p>The requirement to maintain an up to date current infrastructure is a pre-requisite from a cyber resilience perspective, this includes ensuring that operating systems and applications are not 'end of life' and that security updates are still available. The O365 programme helps meet this objective.</p>
Medical Equipment	Patient Transport Shock	<p>The Patient Transport Service fleet is currently equipped with 450 Automatic External Defibrillators (AEDs)/ shock boxes. These are basic defibrillation devices which can be used on patients</p>

Asset	Development / Project	Description
	Boxes Revenue Funded	suffering a cardiac arrest. The current units were originally purchased in 2009/10 and have a useful economic life of 10 years. The units will need replaced once they reach the end of their useful life. Each unit is individually valued at under £5,000 so will be funded through the Service's revenue budget.
Other	Re-procurement of Air Ambulance Services Revenue Funded	The Air Ambulance responds to primary and secondary missions across the geographic scope of Scotland. The aircraft and supporting infrastructure is provided by one supplier under a managed service contract. The current contract expires on 31 May 2023 and a retendering process is required to fully comply with procurement regulations. The primary objective of this project is to ensure the continuity of the Air Ambulance services but also provides opportunity to enhance patient service through additional functionality. An initial Strategic Assessment is attached as Appendix I for this project.

7.2 Anticipated Capital Receipts

The Service's 5 year Capital Investment Plan includes the anticipated disposal of three properties. These are detailed in the table below. It should be noted that additional properties may be disposed of as a result of the Demand and Capacity Review currently being undertaken.

Source of Capital Receipt	2019-20	2020-21	2021-22	2022-23	2023-24
Dunfermline Ambulance Station	£115,000				
Daliburgh			£10,000		
Aviemore			£69,000		

7.0 Conclusion

This summary document describes how the Service's investment plans continue to be developed to ensure future asset requirements are led by strategic objectives and deliver best value for money.

Appendix A: State of the NHSScotland Assets and Facilities Report 2019 (SAFR 2019) – Submission Requirements

Health Finance, Corporate Governance and Value
Directorate
Christine McLaughlin, Director



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Pauline Howie
Chief Executive
Scottish Ambulance Service

9 April 2019

Dear Colleague

State of NHSScotland's Infrastructure

Each year Health Facilities Scotland, on behalf of Scottish Government, notify you of the arrangements for the State of NHSScotland's Infrastructure (SAFR) programme and future submission requirements, which then forms the basis of the published information in this area. However, given the recent focus on estates and maintenance issues, it would be helpful if additional information could be provided in respect of high-risk backlog maintenance and the local governance arrangements in place for maintenance and estates.

High Risk Backlog Maintenance

Backlog maintenance is categorised into risk ratings which relate to clinical service and safety. High risk is where repairs or replacement must be addressed with urgent priority in order to prevent catastrophic failure, major disruption to clinical services or deficiencies in safety, which are liable to cause serious injury and/or prosecution.

Given the seriousness of high-risk backlog, I would expect that all high-risk backlog is reported on your corporate risk register and that there is a mitigation plan in place to address these high-risk areas; the attached pro-forma has been changed to capture this requested information.

Governance Arrangements

In addition to the specific issue on high-risk backlog, it would be helpful to understand what local governance arrangements are in place to provide you and your Board with the necessary assurance that maintenance and estates issues are being managed appropriately. Please provide a narrative that explains the controls that you have in place to provide that assurance.

Submission Requirements

I am also notifying you of changes to the State of NHSScotland's Infrastructure (SAFR) programme and future submission requirements. It should be disseminated to those responsible for the preparation and submission of your Property and Asset Management Strategy (PAMS) and associated pro-forma returns.

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www.gov.scot



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Until 2020



Doc: Interim Report Property and Asset Management Strategy	Page 22	Author: E Stewart
Date:	Version 2.3	Review Date: Annually

The programme is responding to the evolving planning arrangements taking place across NHSScotland, and the expectation for a more integrated approach to service and infrastructure change at local, regional and national levels.

The main proposed change is for Regional PAMS documents to be prepared and submitted on behalf of the territorial Boards, plus an Integrated PAMS document covering the National Boards. National Boards whose infrastructure is service specific (e.g. The State Hospital) may continue to submit an individual PAMS document if they so wish. It is anticipated that these new arrangements will take longer to implement and so new submission deadlines are proposed.

The new programme and submission requirements are as follows:

- Friday 7th June 2019 – submission of local pro-forma information by each NHS Board (continuing on an annual basis).
- Friday 7th June 2019 – submission of a local PAMS Update document by each NHS Board (similar to that submitted for this year's 2018 programme).
- Friday 20th December 2019 – submission of regional / integrated PAMS documents (draft versions will be accepted prior to formal governance approvals).

The pro-forma accompanying this letter are the same as in previous years, except there is no requirement for submitting an IM&T pro-forma this year and we have added a section to capture the above request relating to high risk backlog and proposed mitigation / resolution plans in place.

The PAMS Update report required by June 2019 is expected cover the following points:

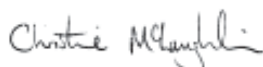
- An update on progress towards developing a regional / integrated PAMS document by the end of the calendar year.
- Changes / improvements to your asset performance (including backlog maintenance) over the last 12 months. This should align with the performance data included within your asset pro-forma returns.
- Progress with any ongoing or new investment projects, particularly highlighting any specific achievements or anticipated benefits.
- As an annex to this report, Boards should also include Strategic Assessments for all investment projects identified within their 5-year investment programme.

The Regional / Integrated PAMS document will follow a similar format to a full local PAMS whilst also demonstrating an integrated, regional approach to health, care and infrastructure planning. It should also be aligned with any service change proposals described within the most current Regional Delivery Plan.

These proposals are not intended to restrict local reporting arrangements out with this programme. General queries on the above can be addressed to Paul Mortimer who leads this programme on behalf of Scottish Government and the National Infrastructure Board:
paulmortimer@nhs.net

Boards are thanked for their continued support with this programme.

Yours sincerely



Christine McLaughlin
Chief Finance Officer NHS Scotland, and Director of Health Finance, Corporate Governance and Value

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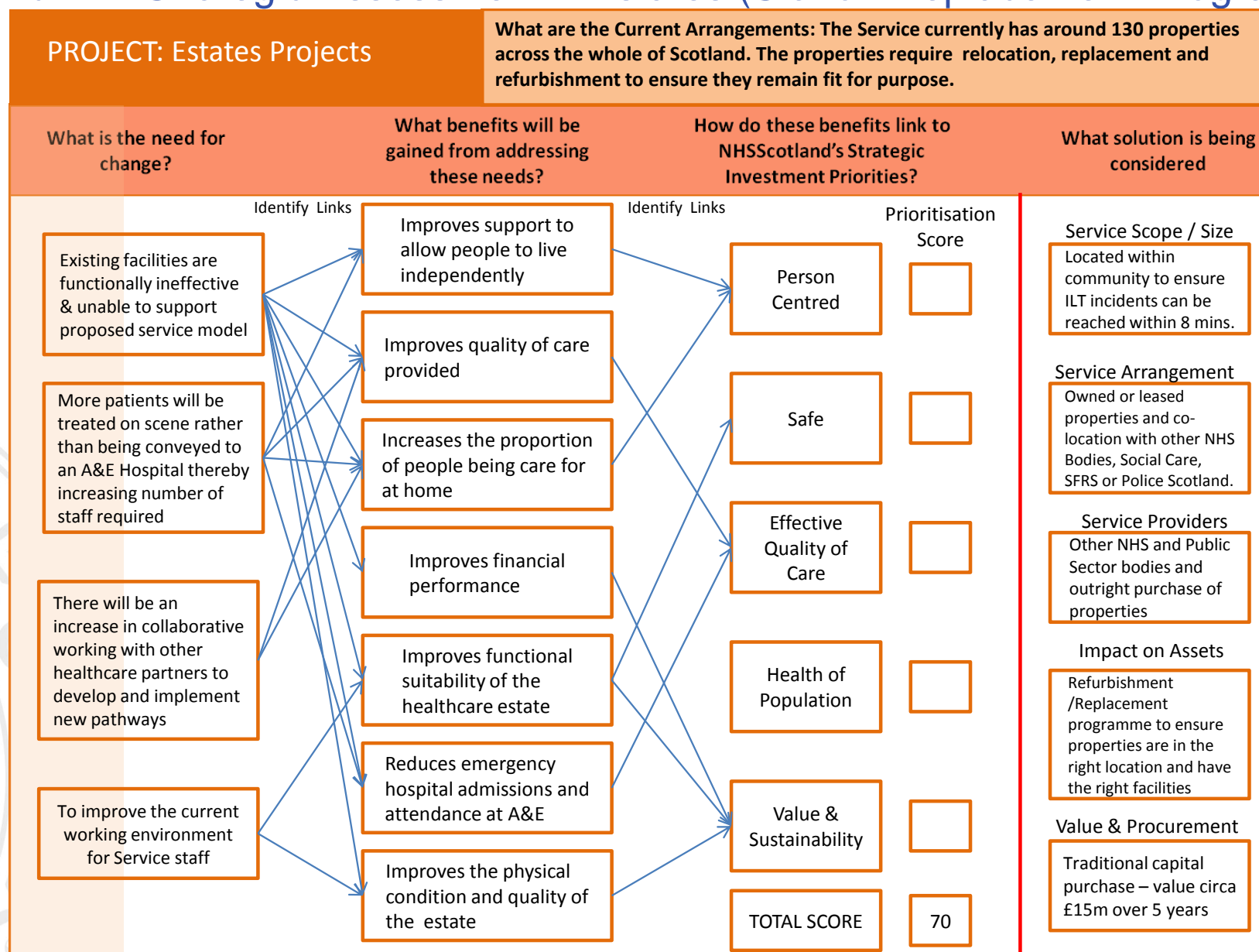


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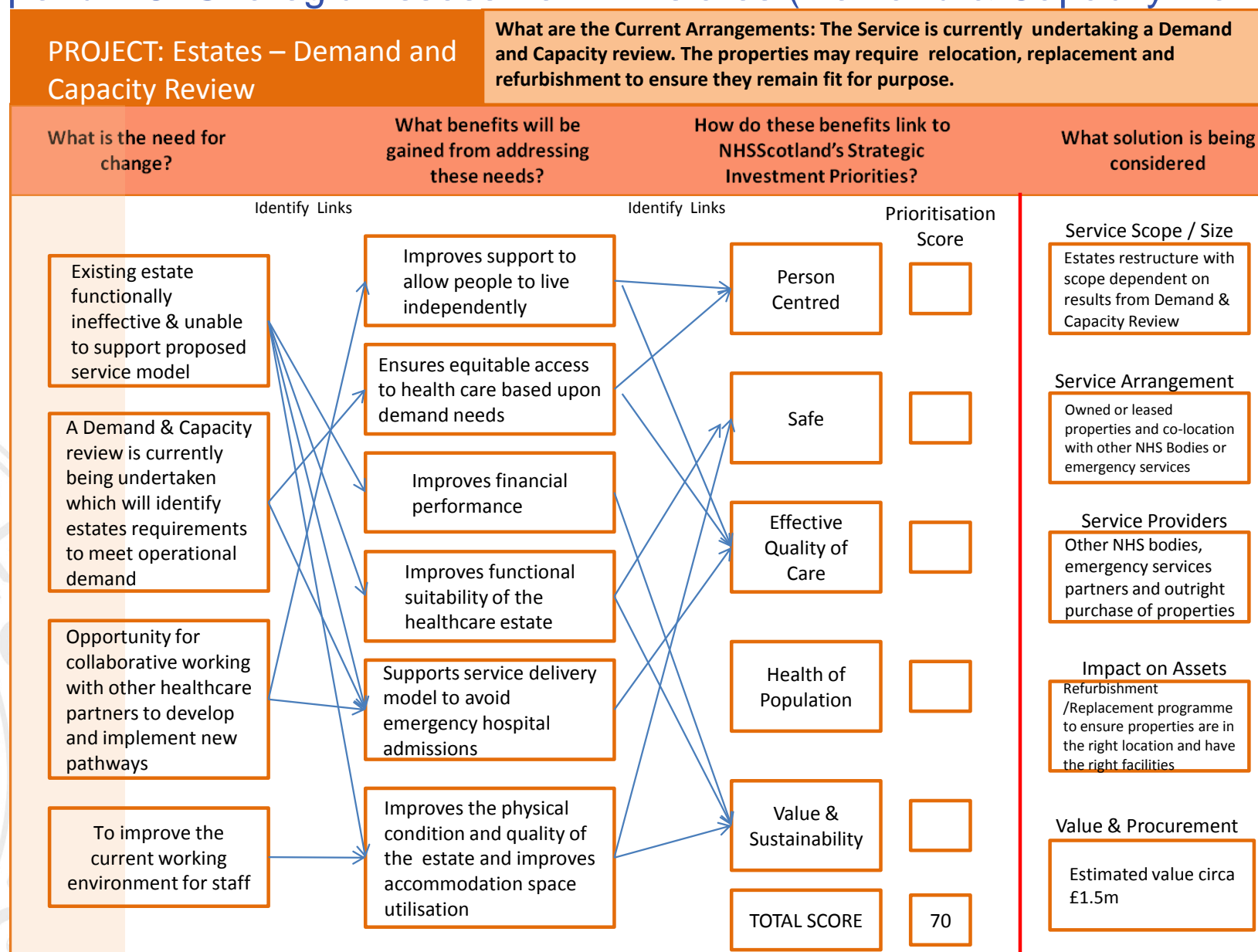
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Appendix B: Strategic Assessment – Estates (Station Replacement Programme)



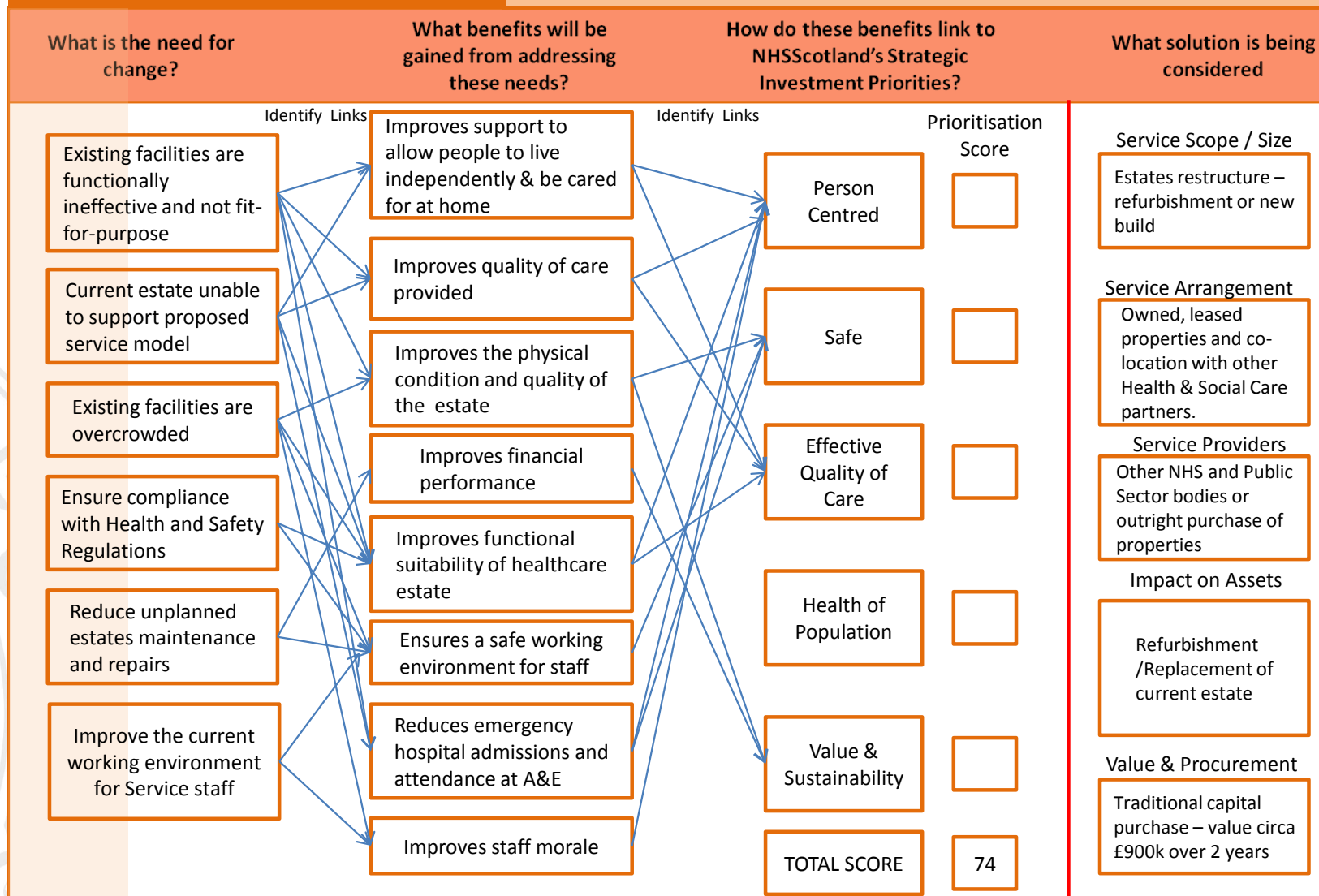
Appendix C: Strategic Assessment – Estates (Demand & Capacity Review)



Appendix D: Strategic Assessment – Glasgow South

PROJECT: Estates Projects

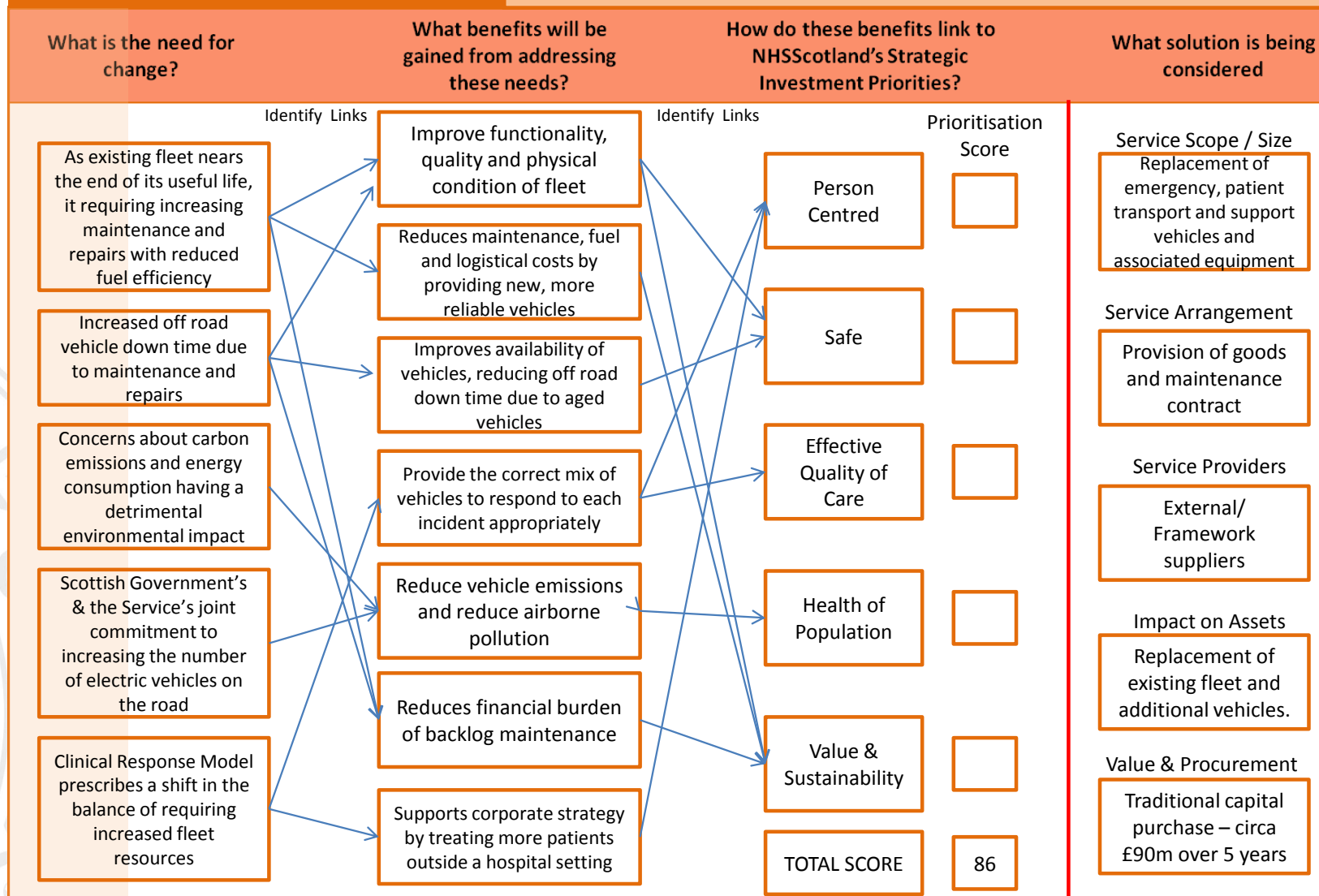
What are the Current Arrangements: Glasgow South Station is a high priority area for refurbishment due to the current condition of the property.



Appendix E: Strategic Assessment – Fleet Replacement Programme

PROJECT: Replacement of Emergency, Patient Transport and Support vehicles

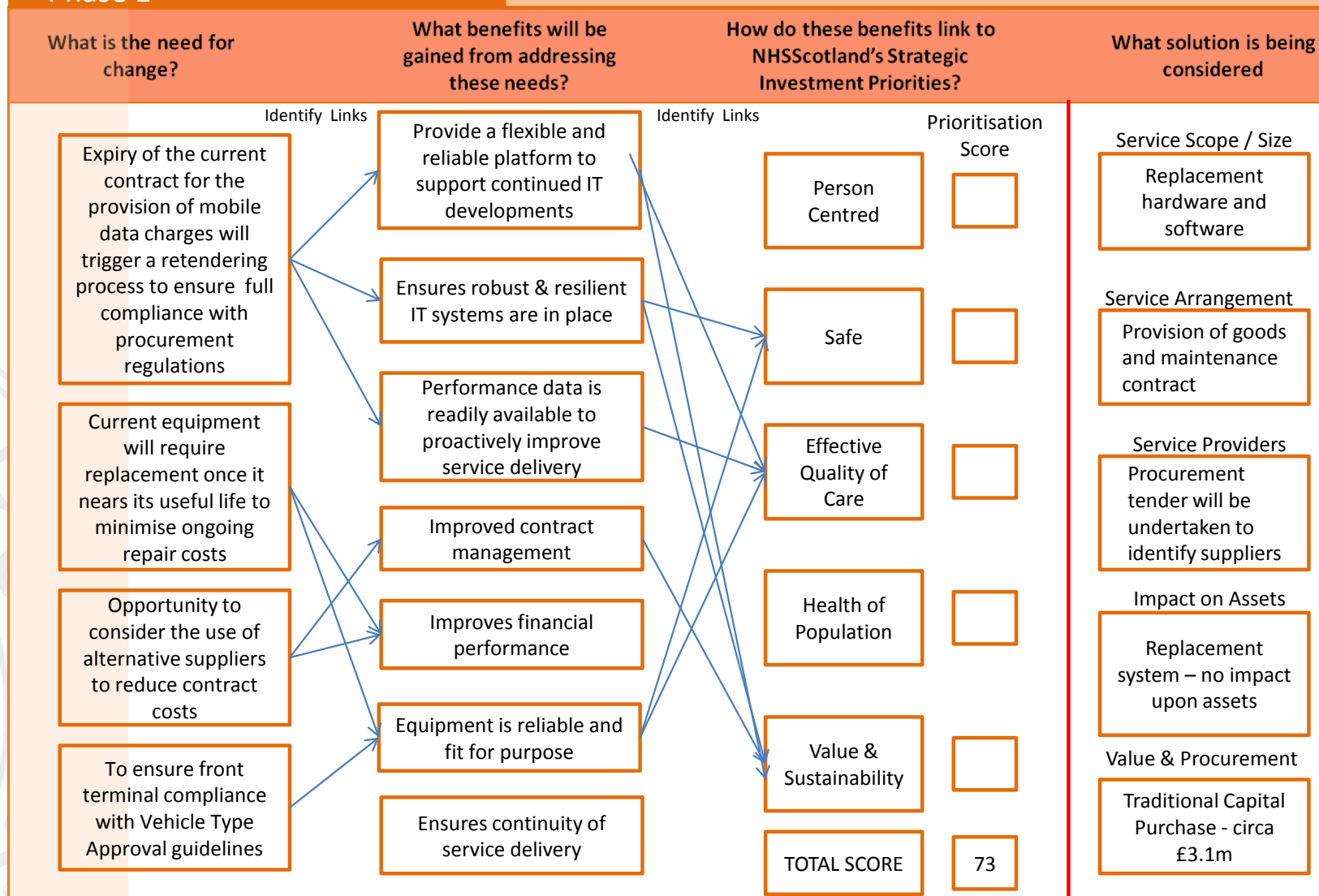
What are the Current Arrangements: Service holds a fleet of over 1,450 vehicles which are comprised of emergency, patient transport and support vehicles. The vehicles will require replacement as they reach the end of their useful life.



Appendix F: Strategic Assessment – Ambulance Telehealth

PROJECT: Ambulance Telehealth Phase 1

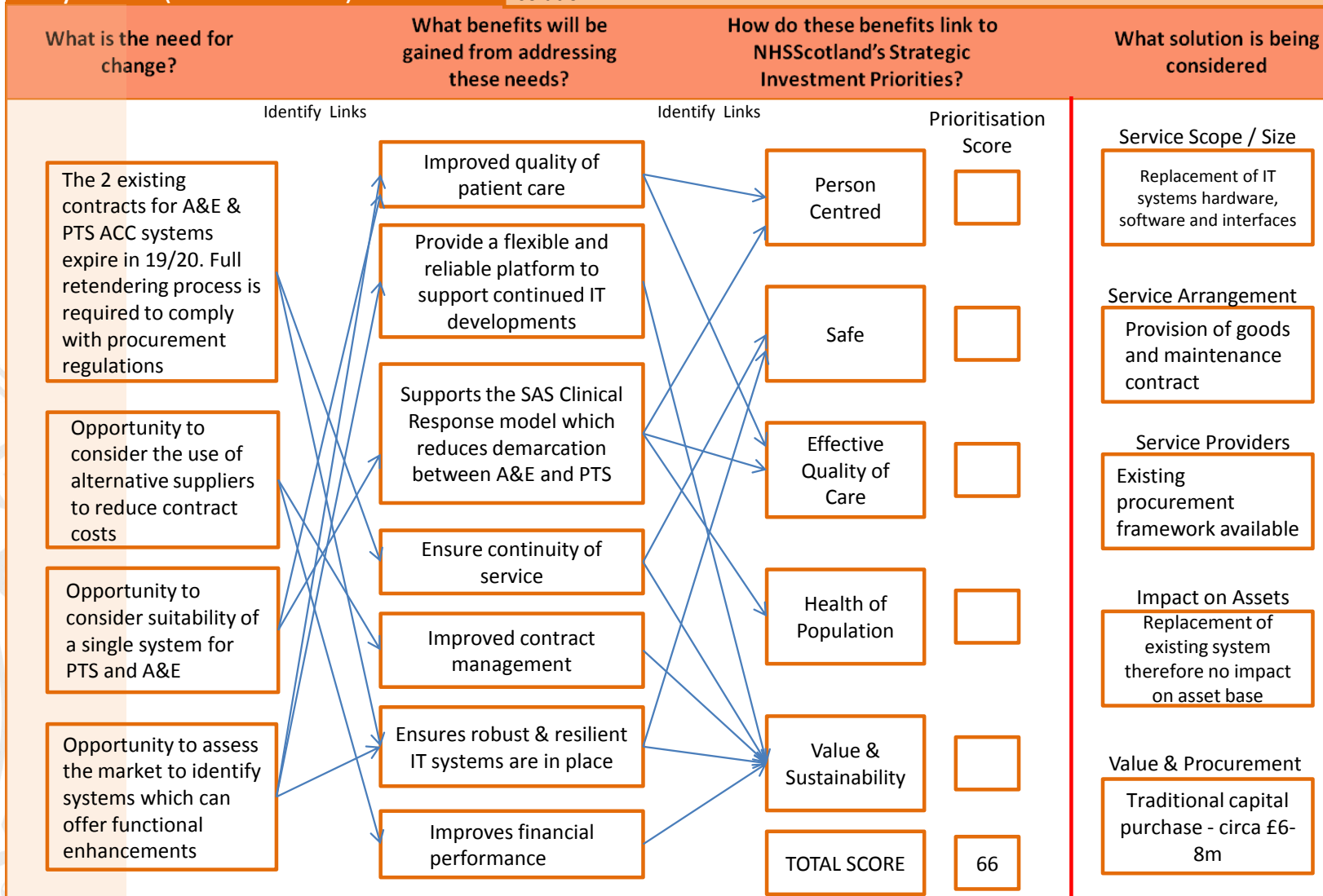
What are the Current Arrangements: Emergency ambulance vehicles are currently fitted with electronic tablets, an in-vehicle communications hub and printer, incident management software and have access to an Electronic Patient Record (ePR).



Appendix G: Strategic Assessment – ACC Systems

PROJECT: Replacement of ACC Systems (A&E and PTS)

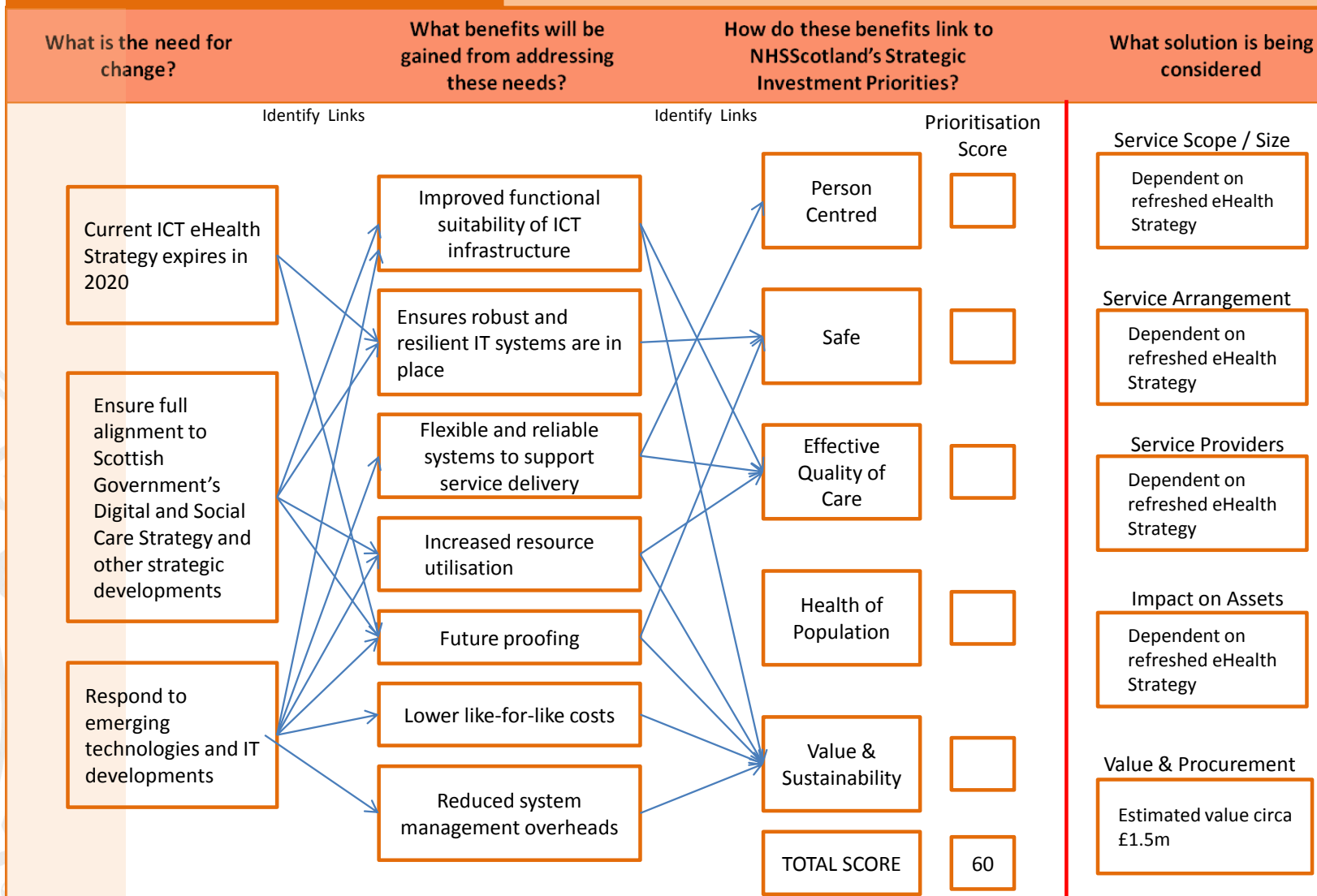
What are the Current Arrangements: A Computer-Aided Despatch (CAD) system is used to manage and deploy resources to unscheduled care (A&E) calls. Scheduled care (PTS) resources are also deployed using a computer based resource management and planning solution.



Appendix H: Strategic Assessment – eHealth Strategy

PROJECT: eHealth Strategy

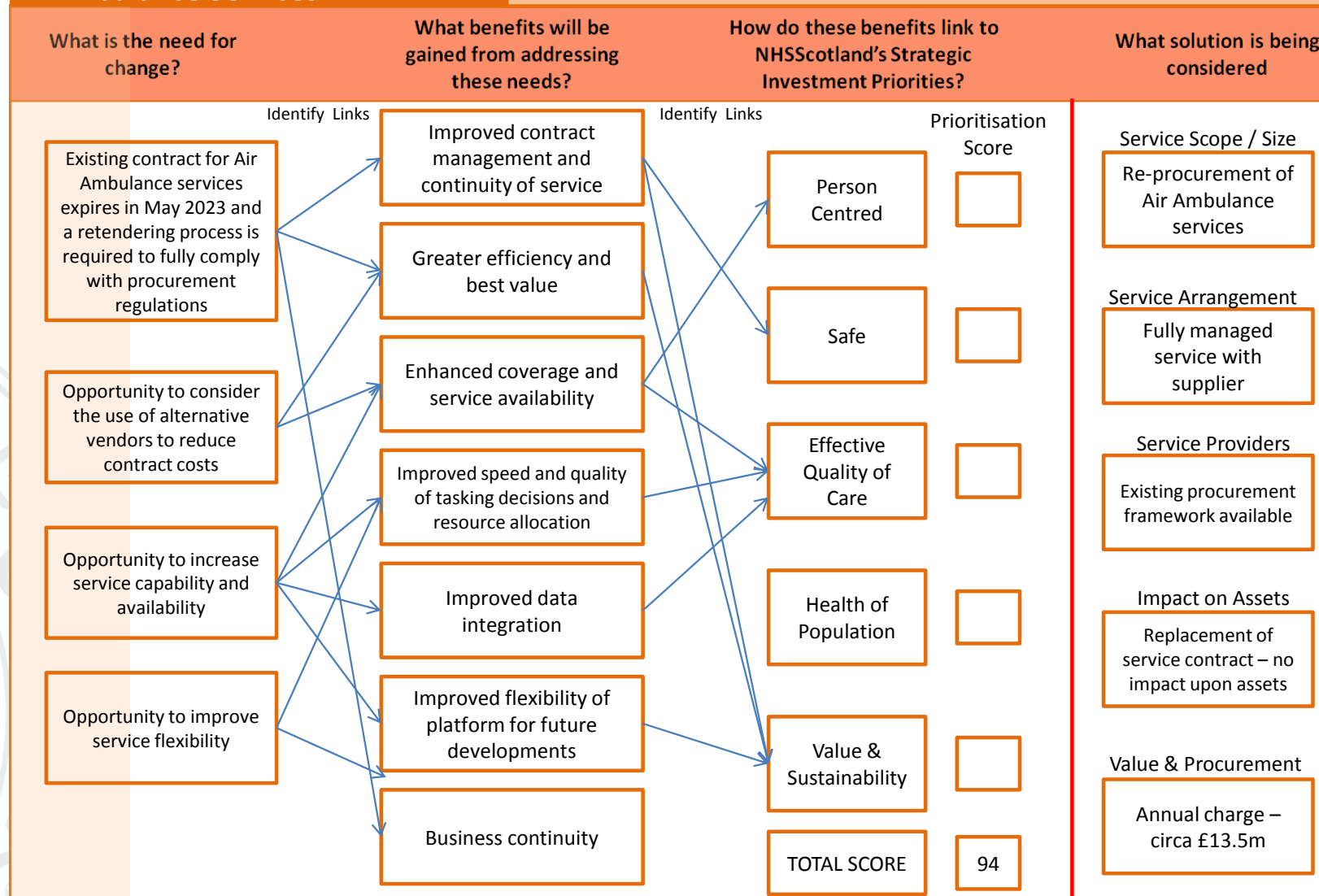
What are the Current Arrangements: The Service is currently developing a refreshed eHealth Strategy. It is anticipated that capital spend will be required to fund developments required by this strategy.



Appendix I: Strategic Assessment – Air Ambulance Re-procurement

PROJECT: Re-procurement of Air Ambulance Services

What are the Current Arrangements: The Air Ambulance currently responds to primary and secondary missions across the geographic scope of Scotland. This is provided by one supplier under a managed service contract.





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Equality Impact Assessment

**for the Property & Asset Management Strategy
2017 – 2022 and subsequent Interim Updates
(2018 and 2019)**

May 2019, V3.0

1. Introduction

Equality Impact Assessment is concerned with anticipating and identifying the equality consequences of particular policy / service initiative and ensuring that as far as possible any negative consequences for a particular group or sector of the community are eliminated, minimised or counterbalanced by other measures.

This document constitutes the Equality Impact Assessment for the Property & Asset Management Strategy 2017. This document has been subsequently reviewed for the Property & Asset Management Strategy Interim Updates 2018 and 2019.

2. Background

The Scottish Ambulance Service is required to publish an annual Property & Asset Management Strategy (PAMS) under the instruction of CEL 35 'A Policy for Property and Asset Management in NHS Scotland'.

The main aims of the Property & Asset Management Strategy are:

- To ensure NHS Scotland assets are used efficiently, coherently and strategically to support Scottish Government's plans and priorities and identified clinical strategies and models of care
- To provide, maintain and develop a high quality, sustainable asset base that supports and facilitates the provision of high quality health care and better health outcomes.
- To ensure that the operational performance of assets is appropriately recorded, monitored and reviewed and, where appropriate improved
- To ensure an effective asset management approach to risk management and service continuity
- To support and facilitate joint asset planning and management with other public sector organisations

3. Progress

The Property & Asset Management was submitted for review to Health Facilities Scotland in June 2017. The information contained within the PAMS is used to inform the annual State of the NHS Assets and Facilities report (SAFR) published annually each year by Health Facilities Scotland.

An Interim Update Report was submitted to the Health and Social Care Department of Scottish Government in June 2018, with a further update to be submitted in June 2019.

4. Key Findings

The PAMS is a high level strategy which documents the proposed investments and disinvestments in property and other tangible assets over the next 5 years.

The PAMS does not approve individual projects and individual business cases are still required for formal approval to proceed. An EQIA assessment will be carried out at this business case stage and any positive or negative impacts will be identified at that time.

5. Conclusions

From the above narrative and the attached assessment, it is concluded that, a full EQIA is not required for this strategy.



Equality Impact: Screening and Assessment Form

Section 1: Policy details - policy is shorthand for any activity of the organisation and could include strategies, criteria, provisions, functions, practices and activities including the delivery of our service.

a. Name of policy or practice (list also any linked policies or decisions)	Property & Asset Management Strategy (PAMS)
b. Name of department	Finance & Logistics
c. Name of Lead	Gerry O'Brien (Director of Finance & Logistics)
d. Equality Impact Assessment Team [names, job roles]	Melanie Barnes (Project Accountant) Emma Stewart (Finance Trainee) – Reviews only
e. Date of assessment	30 April 2015 – subsequently reviewed 01/04/18 & 01/05/19
f. Who are the main target groups / who will be affected by the policy?	Staff
g. What are the intended outcomes / purpose of the policy?	<ul style="list-style-type: none">• Provides a review of the number and condition of all tangible assets, i.e. property, fleet, ICT & medical equipment• Provides a strategy for future investment and disinvestment decisions on assets going forward
h. Is the policy relevant to the General Duty to eliminate discrimination? advance equality of opportunity? foster good relations?	No
If yes to any of the three needs complete all sections of the form (2- 7) If no to all of the three needs provide brief detail as to why this is the case and complete only section 7 If don't know: complete sections 2 and 3 to help assess relevance	<u>General duty to eliminate discrimination</u> Any investment/disinvestment projects included in the PAMS will require a separate business case to be submitted and approved before the project can proceed. An individual EQIA will be required to be completed at business case stage for all individual projects <u>Advance equality of opportunity</u> The PAMS does not include details of the preferred options for

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<p>investments/disinvestments. A full option appraisal will be required as part of the individual business case and the needs of different groups will be assessed and an individual EQIA will be completed as part of the business case process</p> <p><u>Foster good relations</u> As stated above, the PAMS only details high level investment plans. Plans to tackle prejudice and promote understanding will be developed as part of the individual business case</p>			
<p>Section 2: Evidence, consultation and involvement Please list the available evidence used to assess the impact of this policy, including the sources listed below. Please also identify any gaps in evidence and what will be done to address this.</p>			
<p>a. Previous consultation / involvement with community, including individuals or groups or staff as relevant. Please outline details of any involvement / consultation, including dates carried out and protected characteristics</p>			
Details of consultations - where, who was involved	Date	Key findings	Protected characteristics
			Age
			Disability
			Gender reassignment
			Gender / sex
			Marriage / civil partnership *
			Pregnancy / maternity
			Race
			Religion / belief
			Sexual orientation
			Cross cutting - e.g. health inequalities - people with poor mental health, low incomes, involved in the criminal justice

			system, those with poor literacy, are homeless or those who live in rural areas. Other?
			Available evidence
b. Research and relevant information			
c. Knowledge of policy lead			
d. Equality monitoring information -- including service and employee information			
e. Feedback from service users, partner or other organisations as relevant			
f. Other			
g. Are there any gaps in evidence? Please indicate how these will be addressed			
Gaps identified			
Measure to address these; give brief details. Further research? Consultation? Other			
Note: specific actions relating to these measures can be listed at section 5			
Section 3: Analysis of positive and negative impacts Please detail impacts in relation to the three needs specifying where the impact is in relation to a particular need - eliminating discrimination, advancing equality of opportunity and fostering good relations			
Protected characteristics	i. Eliminating discrimination	ii. Advancing equality of opportunity	iii. Fostering good relations
Age			
Positive impacts			
Negative impacts			
Opportunities to enhance			

equality	
Disability	
Positive impacts	
Negative impacts	
Opportunities to enhance equality	
Gender reassignment	
Positive impacts	
Negative impacts	
Opportunities to enhance equality	
Gender / sex	
Positive impacts	
Negative impacts	
Opportunities to enhance equality	
Marriage / civil partnership	
Positive impacts	
Negative impacts	
Opportunities to enhance equality	
Pregnancy / maternity	
Positive impacts	
Negative impacts	
Opportunities to enhance equality	
Race	
Positive impacts	
Negative impacts	

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Opportunities to enhance equality	
Religion / belief	
Positive impacts	
Negative impacts	
Opportunities to enhance equality	
Sexual orientation	
Positive impacts	
Negative impacts	
Opportunities to enhance equality	
Cross cutting - e.g. health inequalities people with poor mental health, low incomes, involved in the criminal justice system, those with poor literacy, are homeless or those who live in rural areas.	
Other	
Positive impacts	
Negative impacts	
Opportunities to enhance equality	
Note: specific actions relating to these measures can be listed at section 5	
Section 4: Addressing impacts Select which of the following apply to your policy and give a brief explanation - to be expanded in Section 5: Action plan	

		Reasons			
a. No major change - the EQIA shows that the policy is robust, there is no potential for discrimination or adverse impact and all opportunities to promote equality have been taken					
b. Adjust the policy – the EQIA identifies potential problems or missed opportunities and you are making adjustments or introducing new measures to the policy to remove barriers or promote equality or foster good relations					
c. Continue the development and implementation of the policy without adjustments – the EQIA identifies potential for adverse impact or missed opportunity to promote equality. Justifications for continuing without making changes must be clearly set out, these should be compelling and in line with the duty to have due regard. See option d. if you find unlawful discrimination. Before choosing this option you must contact the Equalities Manager to discuss the implications.					
d. Stop and remove the policy - there is actual or potential unlawful discrimination and these cannot be mitigated. The policy must be stopped and removed or changed. Before choosing this option you must contact the Equalities Manager to discuss the implications.					
Section 5: Action plan Please describe the action that will be taken following the assessment in order to reduce or remove any negative / adverse impacts, promote any positive impacts, or gather further information or evidence or further consultation					
Action	Output	Outcome	Lead responsible	Date	Protected characteristic /

					cross cutting issue*

* list which characteristic is relevant - age, disability, gender reassignment, gender / sex, marriage and civil partnership, pregnancy and maternity, race, religion / belief, sexual orientation or cross cutting issue e.g. poor mental health, illiteracy etc

Section 6: Monitoring and review

Please detail the arrangements for review and monitoring of the policy

	Details
a. How will the policy be monitored? Provide dates as appropriate	
b. What equalities monitoring will be put in place?	
c. When will the policy be reviewed? Provide a review date.	

Section 7: Sign off

Please provide signatures as appropriate

Name of Lead	Title	Signature	Date
Melanie Barnes	Project Accountant		30/04/15
Emma Stewart	National Finance Trainee	<i>E Stewart</i>	01/04/2018
Emma Stewart	National Finance Trainee	<i>E Stewart</i>	01/05/2019
Completed form: copy of completed form to be retained by department and copy forwarded to Equalities Manager for publication on Service website			
Provide date this was sent			