

STANDARD OPERATING PROCEDURE ASSET CONTROL (ESTATES)

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Instigated by:	Physical Health and Medical Devices Group Health & Safety Group
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Consultation:	Rob Atkinson, Head of Estates Steve Leeman, Estates Officer (Building) Health and Safety Group
Ratified and Quality Checked by: Date Ratified:	Physical Health and Medical Devices Group 13 December 2023
Name of Trust Strategy / Policy / Guidelines this SOP refers to:	Medical and non-medical Devices Policy

VALIDITY – All local SOPS should be accessed via the Intranet

CHANGE RECORD

Version	Date	Change details
1.0	Dec 2023	New SOP. Approved at Physical Health and Medical Devices Group (13 December 2023).

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1. INTRODUCTION

The Estates Asset Control SOP outlines in detail the responsibilities, procedures, guidelines, and protocols that are intended to provide a framework that ensures that the agreed assets within the Trust are collated and recorded in such a manner as to enable the organisation to fulfil its statutory and contractual obligations and meet the goals set out in its mission statement in a consistent and coherent manner.

Asset management is the management of physical assets, from acquisition to operation, maintenance, inspection, renewal, or disposal, to optimise their operational performance, minimise their whole life cost and support the organisation's goals and objectives, risk management and business continuity strategies.

2. SCOPE

This standard operating procedure has been produced in order to facilitate the effective management of the Trust's assets. The purpose of this SOP is to ensure consistency of approach across the Trust ensuring all new or obsolete assets are recorded on the Estates Asset Register.

4 Stages to the Assets Life

1. Acquisition
2. Operation: the management and use of an asset to deliver services
3. Maintenance; maintaining the asset during its life.
4. Disposal; the end of the asset's life

Asset management is the management of physical assets, from their initial acquisition to their operation, maintenance, inspection, renewal or disposal. A good asset management strategy can optimise operational performance, minimise whole life cost and support the organisation's corporate goals and objectives. It can also manage risk and drive business continuity strategies.

Asset management provides the discipline required to maintain its asset base efficiently and effectively.

The objective of this SOP is to outline the estate and facility management governance, regulatory and assurance framework which will ensure the Estate and Facility service, as far as reasonably practicable:

- Remains compliant with legislation.
- CQC Regulation 15: Premises and Equipment
- Premise Assurance Management (PAM)
- Patient-Led Assessment of the Care Environment (PLACE)
- Minimises the risk arising from occupation and use of the built environment.
- Ensures the structure, fabric, and finishes remain in good repair and fit for purpose.
- Ensures that environmental conditions remain appropriate and conducive to allow the Trust to deliver its services safely and effectively; and
- Life Cycle Asset Management (LCAM)

This SOP applies across all estate and facilities provided by the Trust (including facilities occupied and used by other NHS organisations or third parties). The policy also applies to all other facilities, not provided by the Trust but used to deliver Trust operational service.

- Asset management;
- Building maintenance;
- Engineering maintenance;
- Waste Management

Assets are broadly covered in three specific areas.

1. Property Assets
2. Fixed Assets
3. Removable Assets

3. DUTIES AND RESPONSIBILITIES

The Asset Register has been compiled with the agreed Estates Assets List (Appendix 1) though an initial Asset Capture exercise and will be maintained through information on new purchases being supplied by the responsible

The Asset Register will be maintained by removing obsolete, transferred and condemned items through information supplied by services & Departments via the Asset

Staff will ensure that all equipment identified on the Estates Assets List is appropriately tagged and inform the Estates Department of any concerns or discrepancies. Building, Medical Devices and Loose Assets will be tagged with blue or Silver asset labels.

The Estates Department will ensure that the Asset Register is maintained and supervise the issue of Asset Stickers accordingly.

The Trust aims to provide a service that:

- meets the needs of the Trust be that in clinical or support services.
- meets statutory requirements.
- meets NHS and professional requirements and guidelines.
- offers best value

The Chief Executive (Duty Holder)

The Chief Executive is responsible for ensuring that there is a suitable management structure in place to manage the Asset Control SOP and its associated procedures. Responsibility for this is delegated to the Executive Director of Finance

Executive Director of Finance/Senior Information Risk Owner

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

Deputy Director of Estates and Facilities (DDEF)

The DDEF is accountable to the Executive Director of Finance for ensuring that procedures and systems are in place to ensure that all contractors' activities are conducted safely and in compliance with current legislation, regulations and good practice. The DDEF shall ensure that the Executive Director of Finance is kept informed at reasonable time intervals as to the effectiveness of the arrangements for the management of contractors and shall report any serious deviations as and when they arise. The DDEF shall ensure that regular audits are undertaken regarding the Asset Control SOP, including regular checks on adherence to the Trust Policies and Procedures.

4. PROCEDURES

All forms can be found on Humber Teaching NHS Foundation Trust's intranet links below.

Asset acquisition form: [Asset Acquisition Form \(humber.nhs.uk\)](https://humber.nhs.uk)

Asset disposal form: [Asset Disposal Form \(humber.nhs.uk\)](https://humber.nhs.uk)

Asset transfer form: [Asset Transfer Form \(humber.nhs.uk\)](https://humber.nhs.uk)

5. TRAINING

All Issuing Officers will be trained to standards appropriate to the discipline and in line with the appropriate Health Technical Memorandum HTM (where applicable) for specialist services and appointed in writing to perform the task of issue of Permits by the Executive Director of Finance.

6. MONITORING COMPLIANCE WITH THIS OPERATING PROCEDURE

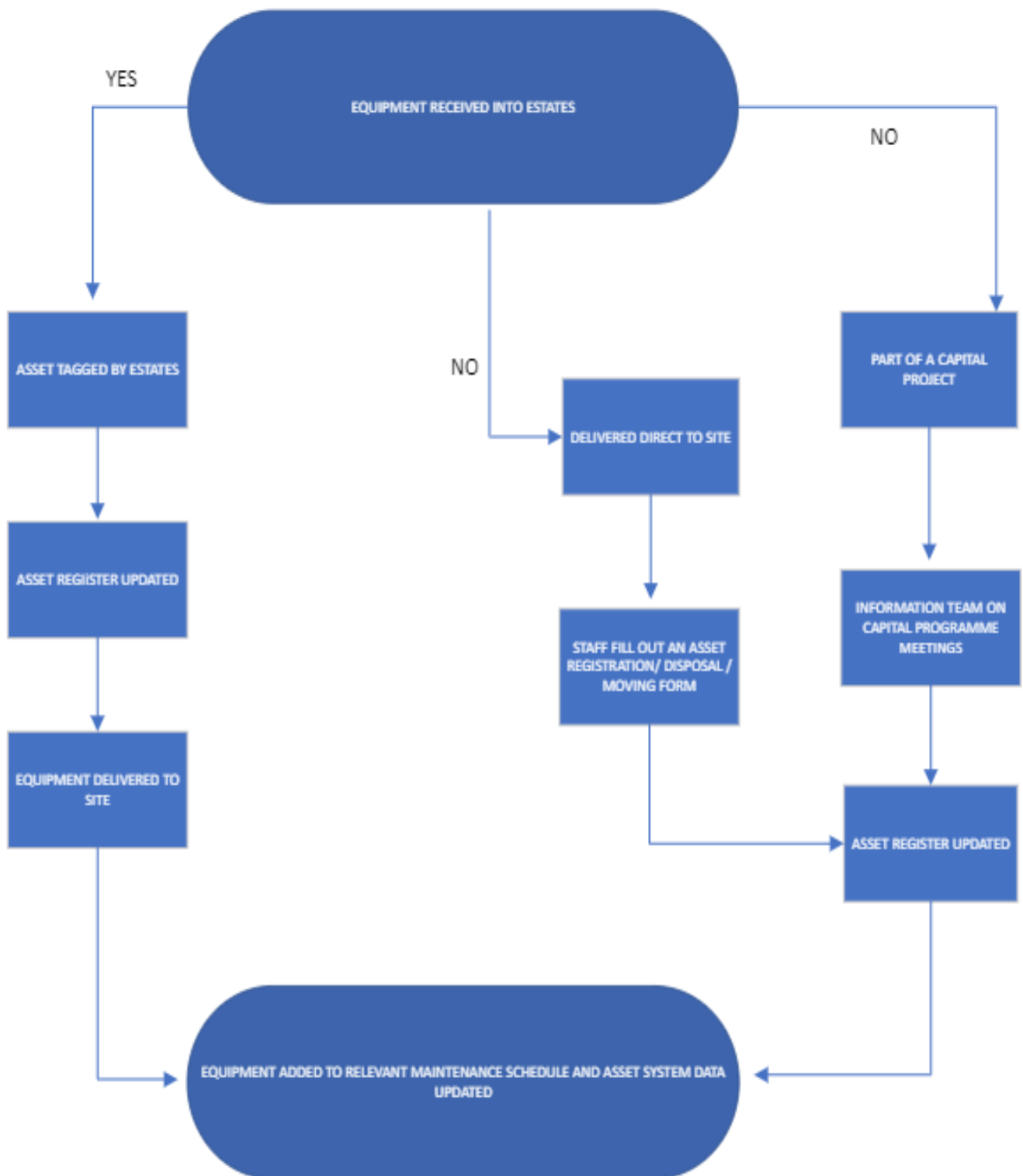
What is being Monitored	Who will carry out the Monitoring	How often	How Reviewed/ Where Reported to
Compliance and Effectiveness of this Policy	DDEF Estates Compliance Managers	Annually	Action plan with timeline. to the Executive Director of Finance
Review of Policy	Estates Operations Manager Estates Compliance Managers	Yearly or when significant change to process	In consultation with DDEF Reports to Health and Safety Group
Monitor Approved Contractors	DDEF Estates Operations Manager Estates Compliance Managers Safety and Information Manager	Annually Ad Hoc	Action plan with timeline. to the Executive Director of Finance Report any issues to Estates managers and contractors
Monitor Competent Persons	Authorised Persons Responsible Persons Estates Officers Projects Officers Nominated Officers	Annually	Action plan with timeline. To the DDEF
Audit Permits	Senior Authorised/Responsible Person or AE for Discipline	6 Monthly	Action plan with timeline. To the DDEF

Appendix 1 – Estates Asset List

ESTATES ASSET LIST

Air Handling and Air Conditioning Units
Alarms (Fire) – Site systems. panels, sounders, strobes
Automatic doors/Barriers/Roller Shutters
Bed Pan Washers and Macerators
Beds -Profiling, mechanical or electrical
Bed/Chair Alarms
Boilers/Still & Zip Boilers
Catering - Equipment in all Food preparation areas (Inc. Extract Fans)
Catering – Commercial ovens, hobs, Grills
Catering - Freezers
Catering - Fridges
Cold Rooms
Cold Water Storage Tanks
Commode chairs
Compressors
Daray lamps (Fixed)
Distribution Boards and Electrical Infrastructure
Domestic oven, hobs, grills
Drugs Fridges
Estates Tools & Equipment
EV Charge points
Evacuation Chairs
Examination Couches
Fan Heaters (fixed)
Gas Boilers & Heating Systems
Gym Equipment
Heating Installation – (boilers, pumps, actuators)
Hoists
Hot Water System – (tanks, boilers, calorifiers, point of use/instantaneous water heaters)
Ice makers
Intruder Alarms
Insectocutors
Ladders
Laundry Equipment
Lifting baths
Lifts
Lighting (Emergency) System & control panels inc Individual Emergency lighting location
Mattresses - Profiling
Medical Equipment
Nurse Call system (not peripheries)
Plant Rooms (inc. Generators, compressors, change over panels & pressurisation units), boost & sump pumps
Portable Heaters
Roller Shutters
Security Systems – escape alarms on fire doors
Showers & Shower Heads
Steam Cleaners & Equipment
Sterilisers
Valves - Blending
Weighing Scales
Wheelchairs
White Goods- Washers, Dryers, Fridges, Freezers

Appendix 2 – Asset Control Flow Chart



Appendix 3 – Equality Impact Assessment

For strategies, policies, procedures, processes, guidelines, protocols, tenders, services

1. Document or Process or Service Name: **Asset Control (Estates)**
2. EIA Reviewer (name, job title, base and contact details): **Paul Booth**
3. Is it a Policy, Strategy, Procedure, Process, Tender, Service or Other? **SOP**

Main Aims of the Document, Process or Service
SOP for the control of assets within the trust.
Please indicate in the table that follows whether the document or process has the potential to impact adversely, intentionally or unwittingly on the equality target groups contained in the pro forma

Equality Target Group	Is the document or process likely to have a potential or actual differential impact with regards to the equality target groups listed?	How have you arrived at the equality impact score?
1. Age	<p>Equality Impact Score</p> <p>Low = Little or No evidence or concern (Green)</p> <p>Medium = some evidence or concern (Amber)</p> <p>High = significant evidence or concern (Red)</p>	a) who have you consulted with
2. Disability		b) what have they said
3. Sex		c) what information or data have you used
4. Marriage/Civil Partnership		d) where are the gaps in your analysis
5. Pregnancy/Maternity		e) how will your document/process or service promote equality and diversity good practice
6. Race		
7. Religion/Belief		
8. Sexual Orientation		
9. Gender re-assignment		

Equality Target Group	Definitions	Equality Impact Score	Evidence to support Equality Impact Score
Age	Including specific ages and age groups: Older people Young people Children Early years	Low	The SOP is based on physical assets and written to ensure continuity of care
Disability	Where the impairment has a substantial and long term adverse effect on the ability of the person to carry out their day to day activities: Sensory Physical Learning Mental health (including cancer, HIV, multiple sclerosis)	Low	The SOP is based on physical assets and written to ensure continuity of care
Sex	Men/Male Women/Female	Low	The SOP is based on physical assets and written to ensure continuity of care
Marriage/Civil Partnership		N/a	The SOP is based on physical assets and written to ensure continuity of care
Pregnancy/ Maternity		N/a	The SOP is based on physical assets and written to ensure continuity of care
Race	Colour Nationality Ethnic/national origins	Low	The SOP is based on physical assets and written to ensure continuity of care
Religion or Belief	All religions Including lack of religion or belief and where belief includes any religious or philosophical belief	Low	The SOP is based on physical assets and written to ensure continuity of care
Sexual Orientation	Lesbian Gay men Bisexual	Low	The SOP is based on physical assets and written to ensure continuity of care

Equality Target Group	Definitions	Equality Impact Score	Evidence to support Equality Impact Score
Gender Reassignment	Where people are proposing to undergo, or have undergone a process (or part of a process) for the purpose of reassigning the person's sex by changing physiological or other attribute of sex	Low	The SOP is based on physical assets and written to ensure continuity of care

Summary

Please describe the main points/actions arising from your assessment that supports your decision.	
EIA Reviewer: Paul Booth	
Date completed: 15/03/2024	Signature: <u>P Booth</u>