



PWYLLGOR DATBLYGU STRATEGOL A CHYFLENWI GWEITHREDOL STRATEGIC DEVELOPMENT AND OPERATIONAL DELIVERY COMMITTEE

DYDDIAD Y CYFARFOD: DATE OF MEETING:	29 February 2024
TEITL YR ADRODDIAD: TITLE OF REPORT:	Capital Programme 2023/24, Plan for 2024/25 and Capital Governance Update Report
CYFARWYDDWR ARWEINIOL: LEAD DIRECTOR:	Lee Davies – Director of Strategy and Planning / Cyfarwyddwr Gweithredol Strategaeth a Chynllunio
SWYDDOG ADRODD: REPORTING OFFICER:	Eldeg Rosser, Head of Capital Planning

Pwrpas yr Adroddiad (dewiswch fel yn addas)

Purpose of the Report (select as appropriate)

Ar Gyfer Penderfyniad/For Decision

ADRODDIAD SCAA

SBAR REPORT

Sefyllfa / Situation

This report is presented to the Strategic Development and Operational Delivery Committee (SDODC) detailing:

- Update on the 2023/24 Capital Programme
- The proposed allocation of the Discretionary Capital Programme (DCP) for 2024/25 update on the Capital Resource Limit (CRL) for 2023/24
- The All Wales Capital Prioritisation process instigated by Welsh Government (WG)
- The capital schemes governance update
- Update on the status of the Reinforced Autoclave Aerated Concrete (RAAC) Schemes, Withybush Hospital (WGH)

Cefndir / Background

This report provides an update on the 2023/24 Discretionary Capital Programme. It follows on from the report and discussion at the SDODC meeting held on 21 December 2023 and the Capital Sub-Committee (CSC) meeting held on 22 January 2024.

The available capital allocation for 2023/24 will provide Hywel Dda University Health Board (HDdUHB) with a significant challenge and risk in trying to address the historical backlog in:

- Medical and non-medical equipment
- Informatics and Digital infrastructure and equipment
- Estates, statutory and infrastructure

Risk

The corporate risk 1196 states:

There is a risk the Health Board is not able to provide safe, sustainable, accessible and kind services. This is caused by insufficient investment to ensure appropriate facilities, medical equipment and digital infrastructure of an appropriate standard. This could lead to an impact/effect on the Health Board's ability to deliver its strategic objectives, service improvement/ development, statutory compliance (ie fire, health and safety) and delivery of day-to-day patient care.

Discretionary Allocation Use

The terms of the Discretionary Capital Allocation letter from WG state:

Discretionary capital is that allocated directly to NHS organisations for the following priority obligations across all healthcare settings: Meeting statutory obligations, such as health and safety and Firecode; maintaining the fabric of the estate; and the timely replacement of equipment.

The prioritisation process for DCP includes representation from Executive portfolios at the Capital Planning Group (CPG) which reports to the CSC, and the position set out is consistent with that reported to the Sustainable Resources Committee (SRC).

Asesiad / Assessment

Capital Resource Limit 2023/24

The CRL for 2023/24 has been issued with the following allocations:

Allocation	£m
All Wales Capital Programme (AWCP)	34.562
Discretionary Programme (gross allocation)	5.435
IFRS 16 Leases	1.184
Total	41.181

Since the last report the following adjustments have been made to the CRL:

Scheme	£m	Description
Withybush Fire Enforcement Phase 1 – additional funding	2.669	Additional funding to cover expenditure in November, December and January.
Withybush Decant Ward	0.144	Utilisation of remaining contingency
Glangwili Fire Enforcement Phase 1	0.278	Utilisation of WG held contingency
Diagnostic Equipment	1.323	Number of items of diagnostic medical equipment
Emergency Department and MIU Improvements	0.397	End of Year funding provided for improvements
IFRS 16 leases	0.350	Additional funding for new and renewed leases
Total	5.161	

Additional funding of £2.5m has recently been received from Welsh Government for replacement medical equipment, replacement digital hardware / infrastructure and some minor Estates works. These are not yet reflected in the above CRL.

Current Forecast

The following table illustrates the budget versus forecast of capital schemes with an explanation of the key reasons for any variances.

	Capital Scheme	Budget £m	Forecast £m	Variance £m	Explanation
AWCP	WGH Fire Decant	7.143	7.523	0.380	- Overspend on the construction of the Decant ward at Withybush
	WGH Fire Phase 2	0.383	0.633	0.250	- Overspend against the allocation for the production of the business case for Withybush Fire Enforcement project Phase 2
	Other Schemes	27.036	26.915	(0.121)	- Planned contributions to AWCP schemes and paybacks to DCP
DCP	All Schemes	5.435	4.926	(0.509)	- Contributions to and paybacks from AWCP
IFRS 16	All schemes	1.184	1.184	0.000	
Total		41.181	41.181	0.000	

This will be updated as the year progresses, and any mitigating actions required to offset variances will be highlighted.

Capital Expenditure Plan

The table below reflects the current expenditure plan as reported to WG. Since funding for the WGH Fire Enforcement Phase 1 is being granted monthly in arrears, reported planned spend for the project is capped at that invoiced to the end of January 2024.

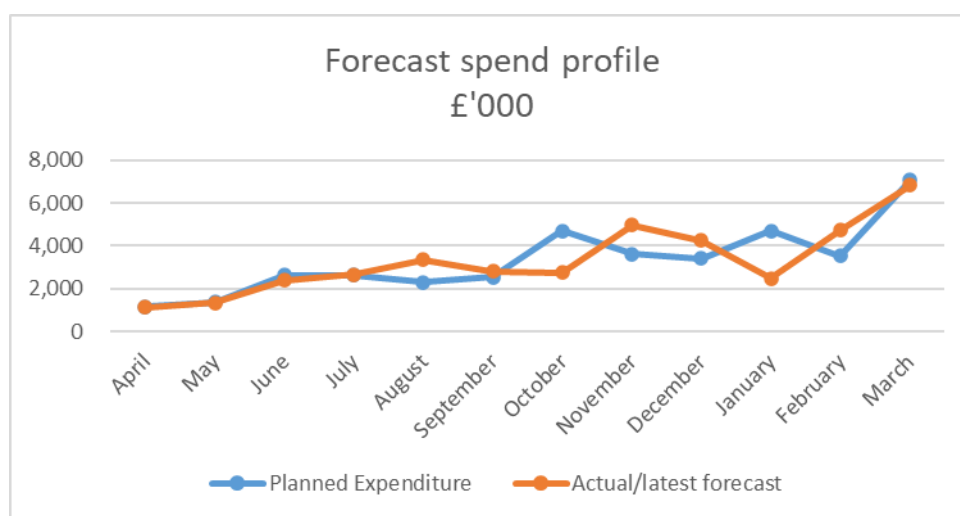
It should be noted that the planned spend reflects any DCP contributions towards AWCP schemes and the payback required between the DCP and AWCP in 2023/24:

Scheme	Planned Spend 2023/24 £'m	Cumulative Spend Apr - Jan £'m	Spend Jan £'m	Remaining balance £'m
AWCP				
WGH - Fire Enforcement Phase 1	5.324	5.324	0.314	0.000
WGH - Fire Decant	7.523	6.314	0.385	1.209
WGH - Fire Enforcement Phase 2 Fees	0.633	0.606	0.013	0.027
GGH - Fire Enforcement Phase 1	6.327	4.727	0.501	1.600
GGH - Fire Enforcement works - Phase 2 - Fees	0.496	0.189	0.001	0.307
Cross Hands Health and Wellbeing Centre	0.986	0.905	0.023	0.081
Sanctuary Provision for Children and Young People	0.309	0.263	0.005	0.046
Estates Funding Advisory Board (EFAB) - Infrastructure	2.261	0.370	0.034	1.891
EFAB - Fire	1.027	0.383	0.007	0.644
EFAB - Decarbonisation	0.828	0.771	0.001	0.057
National Programme – Decarbonisation	0.063	0.063	0.000	0.000
Women and Children's Phase 2	0.728	0.558	-0.082	0.170
Withybush - RAAC Fees and Works	6.532	4.771	0.753	1.761
Diagnostic Equipment	1.323	0.167	0.167	1.156
Emergency Department and MIU Improvements	0.397	0.009	0.009	0.388

Sub-total AWCP	34.757	25.420	2.131	9.337
Discretionary				
IT	1.573	0.530	0.012	1.043
Equipment	1.513	1.226	0.185	0.287
Estates – Statutory	0.386	0.224	0.034	0.162
Estates Infrastructure	0.946	0.277	0.042	0.669
Other	0.822	0.454	0.063	0.368
Sub-total Discretionary	5.240	2.711	0.336	2.529
IFRS 16 Leases	1.184	0.834	0.000	0.350
TOTAL	41.181	28.965	2.467	12.216

Expenditure Profile Forecast

The below chart illustrates the forecast spend profile for the year:



Expenditure was lower than forecast in January 2024 with expenditure lower than expected for:-

- EFAB schemes (£1.2m) which is predominantly due to delays in receiving invoices from contractors as opposed to any delays in programme,
- the Decant ward (£0.3m) which was due to a delay of the power connection to the new unit,
- RAAC schemes (£0.2m) due to higher than expected expenditure in December 2023 which contributed to a lower than expected figure for January in some areas.

Expenditure is expected to increase over February and March 2024 to compensate for slippages.

Other Risks associated with Capital Schemes

Equipment to be Vested / Bonded at Year End

All suppliers have provided assurances to the Procurement team that any orders made can be fulfilled in full by the end of March 2024, however given the high value of unexpected WG funding received in early February there is a risk that transfer of title documents may need to be completed if suppliers experience issues in delivering before the 31 March 2024.

This position will be monitored and reported to relevant committee's as and when required.

Capital Programme 2023/24

All Wales Capital Programme (AWCP)

Hywel Dda University Health Board current All Wales Capital Allocations for 2023/24 is detailed in the table above 2023/24.

Discretionary Capital Allocation (DCP)

Progress is now being made on placing orders against the expenditure plan approved by Board on 30 March 2023.

An initial review of the outturn position on projects undertaken by Finance has resulted in £0.350m being available for re-distribution to the highest priority projects in the following areas:

- £0.200m – replacement roof at GGH Kitchen
- £0.100m – medical equipment
- £0.050m - digital

A further review of slippage has been undertaken and a further £0.509m has been made available for re-distribution:

- £0.065m purchase of equipment for cook-freeze in WGH
- £0.300m Desktop replacement
- £0.100m Teams
- £0.115m Laptop replacement

Contingency Reserve

Additional items funded from the contingency reserve since the last report are:

Item	Allocation £m
GGH Lift Repairs	0.042
Emergency Unit and ITU Chillers	0.022
Mortuary door	0.010
Brynmair Clinic Boiler	0.032
ENT Theatre Drill and Console	0.039
Nuclear Medicine equipment	0.012
Nuclear Medicine Compliance audit work	0.021
GGH MRI Helium	0.028
Works in Bronglais Hospital (BGH) following car accident	0.043
Works in Theatre 1 WGH	0.025
Oncology hot water storage GGH	0.020
Baby tagging System BGH	0.027
Point Cloud Scanner	0.068
Frost Coil replacement WGH	0.025
Roof repairs Hospital Sterilisation and Decontamination Unit (HSDU) BGH	0.028
Roof repairs X-Ray BGH	0.023
Roof Repairs Offices BGH	0.017

Diagnostic Equipment

Progress is being made on the schemes funded through the £1.3m allocation received.

Emergency Department (ED) bids

HDdUHB was successful in the bid made for £0.397m for enhancing the patient environment in Emergency Departments. Progress is now being made on the schemes funded through this allocation. Appendix A contains a schedule of these schemes.

End of Year bids

Based on a request from WG in early January 2024 a schedule of bids that are deliverable by 31 March 2023 has been submitted. The bids submitted are detailed in Appendix B. A first tranche of approvals has been received for the following:

Item	Allocation £m
Outpatient endoscopic biopsy equipment head and neck cancer	0.028
Yttrium Aluminum Garnett (YAG) laser	0.040
Bronchoscope	0.030
GGH Chemotherapy Sluice Room	0.055
Replacement Guttering Blocks 5 and 6 GGH	0.033
Repairs to Cardiology /Renal Block Roof	0.017
Enlli/Y Banwy Roof Repairs	0.008
2 Image Intensifiers	0.186
Trans Urethral Laser Ablation (TULA) equipment	0.014
Total	0.411

A second tranche of digital schemes has also been approved for the following:

Item	Allocation £m
Subject Access Request and Information Governance management portal	0.090
Data Centre Nexus 9k switch replacement	0.500
Main Site Firewall replacement	0.700
Laptop replacement	0.113
Total	1.403

A third tranche of funding was approved 6 February 2024 as follows:

Item	Allocation £m
Provision of equipment to support Cook Freeze Solution	0.065
Bladder Scanner	0.019
Bladder Scanners	0.202
Total	0.286

Further allocations for the following have now also been confirmed for medical and diagnostic equipment as follows:

Item	Allocation £m
Electromyography (EMG) Machine - Neurophysiology	0.023
Hospital Sterilisation and Decontamination Unit (HSDU)	0.008
Endoscopy adjustable sink	
Patient Controlled Analgesia (PCA) Pumps	0.054
Magnetic Resonance Imaging (MRI) Upgrade – BGH	0.091
Magnetic Resonance Imaging (MRI) Upgrade - WGH	0.091
Ultrasound Prince Philip Hospital (PPH)	0.057

Ultrasound GGH	0.508
Ultrasound BGH	0.102
Ultrasound Sexual Health Services BGH	0.055
Digital Radiography Room A&E BGH	0.267
Total	1.256

And the following for Digital investment:

Item	Allocation £m
In-house scanning bureau	0.241
Desktop replacement	0.287
Teams meeting Room	0.100
Total	0.628

The additional allocations, a total of £3.984m, received since mid-January 2024, does increase the risk that HDdUHB may have to vest equipment items off site at the end of the financial year.

Capital Programme 2024/25

Discretionary Capital Allocation (DCP)

2024/25

The confirmed capital allocation for HDdUHB to allocate in 2024/25 is £7.421m.

This allocation is the allocation prior to the adjustment made for the Estates Funding Advisory Board schemes, where the Health Board funds 30% and Welsh Government funds 70% of the scheme costs.

	£m
Original DCP Allocation	7.421
EFAB Infrastructure	(0.817)
EFAB Fire	(0.366)
EFAB Decarbonisation	(0.050)
Adjusted DCP allocation	6.188

The available allocation will provide HDdUHB with a significant challenge and risk in trying to address the backlog in:

- Medical and non-medical equipment
- Informatics and Digital infrastructure and equipment
- Estates, statutory and infrastructure

Current estimated value of the backlog is:

- £136.8m Estates backlog
- £32m Medical Devices
- £15m - £18m Digital backlog

In line with the Capital Sub Committee's Terms of Reference to:

Provide assurance to SDODC that risk is considered as part of prioritisation of capital expenditure items and that where risks are not addressed by capital funding, these risks have been reviewed to assess whether further mitigation actions should be taken (to

minimise the impacts should the risk materialise), contingency measures can be strengthened (in case the risk materialises to minimise disruption) and reflect whether the risk is being tolerated or further treated.

The Capital Planning Team, as part of the capital planning cycle, has circulated the capital themed Risk Registers to the relevant capital leads to assist them with the prioritisation of projects:

- Digital Director
- Deputy Director of Operations
- Director of Estates
- Members of Capital Planning Group

With this risk in mind the Capital Planning Group, which has representation from the Operational Directorates, Digital Team and Estates has carefully considered the distribution of the 2024/25 DCP allocation.

Noting that with the current level of DCP resource available **this will not** enable HDdUHB to mitigate all of the capital risks that are currently highlighted on the Health Board's Risk Registers as capital themed risks.

Pre-commitments for 2024/25

HDdUHB currently has a range of Pre-Commitments for 2024/25 based on decision that have already been taken:

	£m
EFAB 2024/25	1.233
BGH Clinical Decisions Unit (CDU)	0.346
Replacement morcellator	0.049
GGH MRI Chiller	0.210
Welsh Intensive Care System	0.117
Paediatric Consultation	0.400*
CDU BGH associated moves	0.160
Isolators	0.098
Fees to develop Sexual Assault Referral Centre (SARC) and Aseptic BJC	0.100
Balance	0.249
Total	2.962

*Split over 2 financial years

In addition to the pre-commitments there is a requirement to ring-fence an element of our allocation

Ring-fenced allocations	£m
Contingency reserve	1.500
Development of business cases	0.100
Capital support	0.200
Dealing with issues in residential accommodation	0.200
TOTAL	2.000

It is proposed to increase the allocation for the contingency reserve up to £1.500m for 2024/25 due to the call on this reserve in 2023/24. This leaves a balance of £2.459m to be allocated over the following categories:

- Medical and non-medical equipment replacement
- Digital and IT
- Estates Statutory

Based on the level of Pre-Commitments faced by the Health Board options for the distribution of the remaining discretionary programme were developed and the preferred option supported by the Capital Sub-Committee and presented to the Executive Team is as follows:

	£m
Pre-Commitment	2.962
Contingency	1.500
Residential Accommodation	0.200
Business Case Development	0.100
Capital Support	0.200
Statutory programme	0.450
Equipment	1.000
Digital	0.509
Initial estates improvements programme - Wards	0.500
Total	7.421

This will enable HDdUHB to progress against its current pre-commitments but splits the financial consequences of the Paediatric consultation over two years and into 2025/26 but will enable the delivery of the following in 2024/25:

- The replacement of the balance of endoscopy equipment and stacks to be completed
- Enables some light touch refurbishments in clinical areas to be undertaken
- Any funds becoming available through the year through slippage, underspends from Pre-Commitment be initially targeted at increasing the digital allocation.

The allocation of the resources in this way will enable the following items to be progressed:

Statutory Programme

The following programme of works has been prioritised based on Risk Scores:

	£m
Fire Contingency LoFSM (Letters of Fire Safety) Risk 813	0.020
Legionella Compliance and Water Fittings (Risks 1051/1062/1065/1103/949/1180/1135/1546/1262/1265)	0.060
Asbestos Compliance (Risks 934/1182 HBW 222)	0.055
ISO 14001 Compliance (Risk 547)	0.015
Lift Compliance (Risks 1134/1573/1050/1071/1102)	0.040
Medical Gas Compliance (Risks 1132/1138/1057/1069/1106)	0.040
Fixed and PAT Testing Compliance (Risks 1353/1348/1131/1127/1697/1149/1061/1056/ 465/1070/1068/1067/1020/1101/1098/1099/505)	0.120
Ductwork Cleaning and Damper Compliance (Risks 1617/913/1323/215/1153/1145/369/483/1759)	0.070
F-Gas Compliance	0.020

(Risk currently being reviewed)	
Radon Compliance (NOD issue)	0.010
Total	0.450

Equipment Programme

The following equipment schemes have been prioritised for delivery in the next financial year. Justification for these items has been provided below:

	£m
Replacement Anaesthetic Machines	0.095
To enable the completion of anaesthetic machine replacement at WGH which are now outside of service life.	
Replacement gastroscopes and stack systems	0.584
Allowing the completion of the replacement programme within WGH which commenced in 2022/23. Risk score: 20 Risk ref: 1521	
Anti Ligature Mental Health Beds	0.014
Mental Health reports the highest falls rate within HDdUHB. This specialist equipment would help to mitigate the risk of falls and avoid potential injury leading to increased length of stay. Risk score: 9 Risk ref: 1288	
Dental Chair (Winch Lane Clinic)	0.020
Equipment would enable the vulnerable cohort of patients treated within this service to access the dental chair with greater ease, maintaining patient dignity and minimising the risk to staff should lifting aids be required.	
Ophthalmic Trolley	0.090
Benefits clinicians while undertaking surgery as the trolley will allow easier access to the patients during operations resulting in reduced treatment times.	
Body Plethysmography Program (Body Box)	0.040
Currently the service is reliant on the temporary loan of equipment which is in constant threat of removal. The removal would result in patients experiencing delays to test results and not being placed on the correct treatment pathway in a timely manner. Risk score: 9 Risk ref: 105	
Blood Bank Freezer and Plasma Fridge	0.024
To enable completion of the blood bank replacement scheme which will reduce the risk of service disruption should the current equipment experience a failure due to age and exceeding service life. Risk scores: 12 and 6 Risk ref: 1673 and 1459	
Urodynamic System	0.043
Replacement of equipment which has become unreliable and deemed end of life. A lack of timely replacement should a complete failure occur would result in the disruption of Urology Service. Risk score: 9 Risk ref: 1608	

Meera Theatre Tables	0.090
To replace old equipment that has been out of manufacturers support for between 2-6 years. The new equipment would benefit patients and improve treatment due to enhanced characteristics. Risk score: 9 Risk ref: 770	
Total	

Digital Programme

The following digital projects have been prioritised based on digital equipment that is coming to end of life and needs to be replaced to maintain compliance with Network and Information System (NIS) 2018 regulations.

	£m
General IT Equipment Replacement Programme	0.509
Total	0.509

Other projects

At the January 2024 Executive Team meeting the issues surrounding the need to invest in security systems across several sites was highlighted at an estimated cost of £1.500m. The Capital Planning Team is working with the Security Team to develop a fully costed project plan that is broken down by site and by function – digital, equipment, estates, that can be reviewed and prioritised. There may be a need in 2024/25 to utilise some of the contingency allocation to progress elements of this work.

All Wales Prioritisation

Following the submission of 10 Year Capital plans into WG nearly two years ago which, across Wales, called out a capital requirement that was treble the current NHS capital budget of £375m annually, all Health Boards have now been asked to participate in a prioritisation process.


WG have developed a framework for a common basis for investment decision making. This has been developed with input from the Health Economics and Welsh Treasury Teams in WG.


Details on the process developed and the internal approach are included in the presentation attached as Appendix C.

The presentation also includes the outcome of the ranking exercise undertaken to inform the completion of project proformas that will need to be submitted to WG as part of our submission.

Capital Governance – Project Updates

At the January 2024 meeting of the Capital Sub-Committee (CSC), the Projects with a current red RAG status were reported as follows:

Project	Overall RAG	Matters for Sub Committee attention
	Current RAG	
Chemotherapy Day Unit	Trend 	Tender return costs have come in significantly higher than expected. Impact will be on the project's cost, timeline and potential quality of what can be delivered. This is currently being reviewed by key project group leads. The permanent re-location of staff from Leri ward is a dependency noted for this project.

Project	Overall RAG	Matters for Sub Committee attention
	Current RAG	
Aseptics	Trend 	Delays seen due to both BJC review and RAAC survey work. The CSC are asked to note the project timeline has changed from the planned completion date of November 2024 to August 2026. The impact of this delay will affect the increased length of time the service is required to manage risks, if the units were to fail.

Projects led by other organisations

Project	Overall RAG	Matters for Sub Committee attention
Carmarthen Hwb	Current RAG	Due to a considerable increase in project costs, to include redesign fees, additional funding is being sourced from WG IRCF. The submission of the BJC has been delayed due to demise changes, redesigning of the areas, Stage 4 packs to be redeveloped, procurement tender packs to be revisited to gain cost certainty all prior before submission. It is currently anticipated that the BJC will be completed and available for submission to WG in early March 2024

Reinforced Autoclave Aerated Concrete (RAAC) Schemes WGH

A detailed programme of work has been developed to remediate all critical and high-risk planks. In addition, where it has been able to safely temporarily prop areas, these facilities have also been reopened pending future repair works.

The works underway are all progressing to programme which is summarised below:

Task Name	Duration	Start	Finish
WGH RAAC: 2023/24 CONSTRUCTION PHASE SUMMARY	220 days	Mon 15/05/23	Fri 15/03/24
POTWASH ADVANCED WORK (COMPLETE)	50 days	Mon 15/05/23	Fri 21/07/23
EMERGENCY PROPPING/ADVANCED WORK (COMPLETE)	50 days	Mon 24/07/23	Fri 29/09/23
WARD 9 (COMPLETE)	86 days	Mon 12/06/23	Sun 08/10/23
WARD 12 (COMPLETE)	91 days	Mon 10/07/23	Sun 12/11/23
TEMP KITCHEN ENABLEMENT WORK (COMPLETE)	40 days	Mon 11/09/23	Fri 03/11/23
TEMP KITCHEN FACILITY (OPERATIONAL)	81 days	Mon 14/08/23	Mon 04/12/23
SPH ADDITIONAL BED CAPACITY (COMPLETE)	50 days	Mon 16/10/23	Fri 22/12/23
WARD 7 (COMPLETE)	55 days	Mon 09/10/23	Fri 22/12/23
WARD 11 (COMPLETE)	55 days	Mon 09/10/23	Fri 22/12/23
WARD 8 (CONSTRUCTION PHASE)	75 days	Mon 04/12/23	Fri 15/03/24
WARD 10 (CONSTRUCTION PHASE)	75 days	Mon 04/12/23	Fri 15/03/24
MAIN KITCHEN (ENABLEMENT WORK STAGE)	195 days	Mon 08/01/24	Fri 04/10/24
OPD A (CONSTRUCTION PHASE)	75 days	Mon 29/01/24	Fri 10/05/24
WGH RAAC: PROFESSIONAL SERVICES: STRUCTURAL SURVEY/DESIGN & SUPERVISION	230 days	Mon 15/05/23	Fri 29/03/24

The remaining areas requiring remediation on the ground floor will be added to this programme as the programme of works is agreed.

The programming of the future inspection regime is now being planned in some detail. The initial view on this is for the areas already completed (ward areas) and therefore due for survey in the 2024/25 financial year.

The survey work on the first-floor wards is likely to cost in the order of £154k for 2024/25 financial year. This is fully inclusive of any Estates and domestic costs in managing this survey work.

The remaining works where remediation is planned for 2024/25 will require surveys to be undertaken in 2025/26. Current estimates of this cost are of the same order as noted above.

Given the current guidance to inspect annually it is reasonable to assume at this point that these annual costs for all RAAC areas will be in the order of circa £300k inclusive of Estates and domestic costs.

These indications of costs have recently been received by HDdUHB who will be making WG aware of these ongoing costs and seeking their support for this. An update on the outcome of this discussion will be available in future update reports to this Committee.

Progress on the RAAC schemes is regularly reported to the Health and Safety Committee.

Argymhelliad / Recommendation

The Strategic Development and Operational Delivery Committee is asked to:

- **NOTE** the update on the Capital Programme for 2023/24.
- **ENDORSE** the placing of orders for the additional WG funding received, should they be over the £0.500m threshold for onward ratification to Board.
- **ENDORSE** the Capital programme for 2024/25 for onward ratification to Board.
- **NOTE** the update on the All Wales Capital Prioritisation process and the draft ranking of projects.
- **NOTE** the capital schemes governance update.
- **NOTE** the RAAC update.
- **ENDORSE** the submission of the BJC for Phase 2 FEN's and LoFSMs at WGH to Board for further approval in advance of submission to WG.

Amcanion: (rhaid cwblhau)

Objectives: (must be completed)

Committee ToR Reference: Cyfeirnod Cylch Gorchwyl y Pwyllgor:	3.11: Consider proposals from the Capital Sub Committee on the allocation of capital and agree recommendations to the Board.
Cyfeirnod Cofrestr Risg Datix a Sgôr Cyfredol: Datix Risk Register Reference and Score:	Corporate Risk 1196 - not be able to provide safe, sustainable, accessible and kind services. This is caused by insufficient investment to ensure we have appropriate facilities, medical equipment and digital infrastructure of an appropriate standard. Score 16 Corporate Risk 1745 - of not being able to deliver safe, effective and timely services across the Health Board estate, including acute, community and mental health facilities. This risk also impacts the HB's non clinical estate, educational facilities and managed practices. Risk Score 15
Parthau Ansawdd: Domains of Quality Quality and Engagement Act (sharepoint.com)	1. Safe
Galluogwyr Ansawdd: Enablers of Quality:	5. Whole systems perspective

Quality and Engagement Act (sharepoint.com)	
Amcanion Strategol y BIP: UHB Strategic Objectives:	6. Sustainable use of resources
Amcanion Cynllunio Planning Objectives	5a Estates Strategies
Amcanion Llesiant BIP: UHB Well-being Objectives: Hyperlink to HDdUHB Well-being Objectives Annual Report 2021-2022	8. Transform our communities through collaboration with people, communities and partners

Gwybodaeth Ychwanegol: Further Information:	
Ar sail tystiolaeth: Evidence Base:	Included within the report
Rhestr Termau: Glossary of Terms:	Not Applicable
Partïon / Pwyllgorau â ymgynhorwyd ymlaen llaw y Pwyllgor Datblygu Strategol a Chyflenwi Gweithredol: Parties / Committees consulted prior to Strategic Development and Operational Delivery Committee:	CSC Sustainable Resources Committee Capital Planning Group

Effaith: (rhaid cwblhau) Impact: (must be completed)	
Ariannol / Gwerth am Arian: Financial / Service:	Capital values noted within the report. Included within individual business cases and Capital prioritisation process.
Ansawdd / Gofal Claf: Quality / Patient Care:	Included within individual business cases and capital prioritisation process.
Gweithlu: Workforce:	Included within individual business cases and capital prioritisation process.

Risg: Risk:	Risk assessment process is integral to the capital prioritisation process and the management of capital planning within HDdUHB also included within individual business cases and capital prioritisation process.
Cyfreithiol: Legal:	Included within individual business cases and capital prioritisation process.
Enw Da: Reputational:	Included within individual business cases and capital prioritisation process.
Gyfrinachedd: Privacy:	Included within individual business cases and capital prioritisation process.
Cydraddoldeb: Equality:	Equality assessments are included within individual business cases and capital prioritisation process when required.

Emergency Department and MIU Capital Bids - November 2023

Category	Project Description	Benefits of Investment	Lead Officers	Service / Ward / Dept	Site	Capital Cost £
	GGH ED					
Equipment Additional	Socamel Junior Food Trolley	Currently we have no smaller "junior" sized food trolleys to help serve patients waiting in ED. These units will support food for patients on a limited basis with excessive waits, improving patient experience, flow and environment.	Peter Jones	ED	GGH	8,204
Equipment Additional	Beverage Trolley	These beverage trolleys are to support patients who are waiting for long durations. Currently we have no trolleys for this service and the number of tea rounds has gone up excessively, causing a dirty environment, long waits and patient discomfort.	Peter Jones	ED	GGH	6,060
Equipment Additional	Rotowash Floor Cleaner	ED specific floor cleaner/scrubber/dryer which expedites cleaning times and can be used in and around congested areas for specific ED use, improving patient environment	Peter Jones	ED	GGH	6,599
Estates Improvement	Works to Main A&E Doors	Improvement to A&E door controls	Simon Day	ED	GGH	60,000
Estates Improvement	Additional electrical sockets for clinical equipment	Operational improvements and accessibility to sockets	Simon Day	ED	GGH	
Estates Improvement	Replacement stock room	There is insufficient space for the equipment currently required so equipment overflows into clinical areas and on the floor of the stock room. Replacement stockroom would provide greater efficiencies for accessing items in a time critical manner whilst also decluttering the clinical areas which provides a nicer environments to the patients	Caryl Bowen / Julian Wheeler Jones	ED	GGH	36,913
	WGH ED					
Equipment Additional	Socamel Junior Food Trolley	Currently we have no smaller "junior" sized food trolleys to help serve patients waiting in ED. These units will support food for patients on a limited basis with excessive waits, improving patient experience, flow and environment.	Peter Jones	ED	WGH	8,204
Equipment Additional	Beverage Trolley	These beverage trolleys are to support patients who are waiting for long durations. Currently we have no trolleys for this service and the number of tea rounds has gone up excessively, causing a dirty environment, long waits and patient discomfort.	Peter Jones	ED	WGH	6,060
Equipment Additional	Rotowash Floor Cleaner	ED specific floor cleaner/scrubber/dryer which expedites cleaning times and can be used in and around congested areas for specific ED use, improving patient environment	Peter Jones	ED	WGH	6,599
	BGH ED					

Equipment Additional	Socomel Junior Food Trolley	Currently we have no smaller "junior" sized food trolleys to help serve patients waiting in ED. These units will support food for patients on a limited basis with excessive waits, improving patient experience, flow and environment.	Peter Jones	ED	BGH	8,204
Equipment Additional	Beverage Trolley	These beverage trolleys are to support patients who are waiting for long durations. Currently we have no trolleys for this service and the number of tea rounds has gone up excessively, causing a dirty environment, long waits and patient discomfort.	Peter Jones	ED	BGH	6,060
Equipment Additional	Rotowash Floor Cleaner	ED specific floor cleaner/scrubber/dryer which expedites cleaning times and can be used in and around congested areas for specific ED use, improving patient environment	Peter Jones	ED	BGH	6,599
Estates Improvement	Improvements to Main Entrance Doors	Improvement to A&E door controls	Elfyn Jones	ED	BGH	13,200
Estates Improvement	Redecoration of Patient Waiting Area	Upgrade and modernise facilities in Emergency and Urgent Care Department to include; redecoration of patient waiting and staff base, and to replace aging and unreliable uninterruptible power supply backup system.	Elfyn Jones	ED	BGH	21,600
	PPH MIU / AMAU					
Estates Improvement	Toilet / wet room reinstatement	To provide a shower facility for patients awaiting medical bed	Stewart Evans	MIU	PPH	16,960
Estates Improvement	Changing all doors in MIU to enable trolleys	To enable patient trolleys to be placed in these rooms	Stewart Evans	MIU	PPH	37,500
Equipment Additional	Socomel Junior Food Trolley	Currently we have no smaller "junior" sized food trolleys to help serve patients waiting in ED. These units will support food for patients on a limited basis with excessive waits, improving patient experience, flow and environment.	Peter Jones	MIU	PPH	8,204
Equipment Additional	Beverage Trolley	These beverage trolleys are to support patients who are waiting for long durations. Currently we have no trolleys for this service and the number of tea rounds has gone up excessively, causing a dirty environment, long waits and patient discomfort.	Peter Jones	MIU	PPH	6,060
Equipment Additional	Rotowash Floor Cleaner	ED specific floor cleaner/scrubber/dryer which expedites cleaning times and can be used in and around congested areas for specific ED use, improving patient environment	Peter Jones	MIU	PPH	6,599
Estates Improvement	Upgrade LED Lighting, decoration and flooring in MIU and AMAU	Upgrade of LED lighting , Decoration and flooring replacement , door replacement to Minors 1 & 2 Minor Injuries Department .Flooring and Decoration AMAU	Stewart Evans	MIU	PPH	42,120
Estates Improvement	Extend the waiting room, to provide room for patients	Adequate seating area for patients	Stewart Evans	MIU	PPH	20,684
	ALL SITES					
Enabling Works	Vending Machines enabling works	Two vending machines to be installed in each acute site providing food and beverage facilities for patient and public nutrition and hydration during long ED waiting times	Simon Chiffi	ED	All Sites	25,000

Estates Improvement	Visualite Sensory and Well-being feature ceiling lighting	Visualite systems create an amazing lighting effect and ambience, incorporating the light source and bespoke image into one. Providing a calming environment particulary for children or patients with sensory issues or learning disabilities	Julian Wheeler Jones	ED	All Sites	40,000
Total						397,428

EOY Bids - January 2024

Category	Project Description	Benefits of Investment	Lead Officers	Service / Ward / Dept	Site	Capital Cost £	Priority £
Equipment Replacement	HSDU Endoscopy double height adjustable sink (CO131)	The current endoscope decontamination sink is not designed for endoscope decontamination, is circa 15 years old, shows sign of rusting, equipment being condemned would result in service disruption to Endoscopy. Sinks do not adjust in height sufficiently to protect taller members of staff and is therefore a Health and Safety concern due to staff back injury/concerns.	Philip Flear	HSDU	BGH	£8,352	14
Equipment Additional	Outpatient endoscopic biopsy for head and neck cancer (CO109)	Faster diagnosis of head and neck cancer by allowing biopsies to be taken under local anaesthetic. Positively impacting cancer waiting times and the Single Cancer Pathway Tier 1 target.	Lynwen Williams	ENT	GGH	£28,356	1
Equipment Replacement	Ultrasound Machine Samsung EVO machine (CO022)	Limitations of the current equipment pose a risk of the mismanagement/missed diagnosis. Improve services ability to provide 'one stop' shop. Benefits more than one service. Potentially takes away need for an x ray appointment and additional visits. Patients currently requiring treatment in Theatre due to the limited functions available on current equipment in Outpatients.	Lydia Davies	Orthopaedics	PPH	£56,700	10
Equipment Replacement	PCA Pumps (CO118)	All PCA pumps out of support and are currently failing resulting in a reduced number available for use. Resulting in increased pressure on nursing staff and delays in a patients receiving pain relief.	Alex Walsby	Various	All Acute	£54,000	12
Equipment Replacement	EMG Machine - Neurophysiology (CO084)	Current equipment has become unreliable. Due to age no service contact or parts are available.	Donna Morris	Neurophysiology	GGH	£23,458	9
Equipment Replacement	Bladder Scanner (CO013)	Current equipment is experiencing intermittent faults and are no longer within support.	Dawn Jones	Meurig Dyfi Wards	BGH	£19,058	15
Equipment Replacement	Ultrasound machine for Gynaecology & Sexual Health Aberystwyth (CO96)	Better image quality resulting in improved service provision and improved patient throughput. Reducing multiple visits and earlier diagnosis will decrease the need for medical intervention leading to the need for inpatient admission.	Sarah Rees	Gynaecology	BGH	£55,200	13
Equipment Replacement	Body Plethysmography Program (Body Box)	Patients being diverted to neighbouring HBs for thoracic surgery or cancer treatment, we would usually be required to perform these tests locally but are having to ask for this to be done as part of the referral therefore risk is increased of USC patients not being identified early as possible.	Nerys James	Respiratory	GGH	£37,401	11
Equipment Replacement	Bladder Scanners	Replacement of aged equipment throughout HB, which has reached the end of serviceable life.	Jon Wilson	Various	All Acute	£201,977	16
Equipment Replacement	YAG Laser (CO75)	This equipment enables better glaucoma control which reduces the need for regular Outpatient consultations. Allows patients to have laser surgery which avoids the need for daily eye drops for life and side effects associated with these. Reduction in revenue cost of £20k per annum	Marta Barriero	Ophthalmology	GGH	£40,360	2

Category	Project Description	Benefits of Investment	Lead Officers	Service / Ward / Dept	Site	Capital Cost £	Priority £
IT & Digital	Subject Access Request & IG request management portal	To provide an effective and efficient management system of all subject access requests (SAR's), Legal requests and third party requests within the organisation. Reducing the amount of administrative time required to manage each request, increasing the use of electronic means to complete requests and providing a comprehensive audit trail. With built in redaction facilities it will reduce the burden on the IG team and support the ability to complete requests in line with GDPR legal timeframes. The portal is not isolated to use within the health records and IG services and could be expanded for use within patient support, legal, FOI, Corporate, Patient comms and various other services/departments. The range of benefits, efficiencies and increased performance across the Health Board could be quite significant and provide our residents and users with a much improved service.	Steve Bennett	Health Records/IG (plus others)	Health Board wide	£90,000	6
IT & Digital	Purchase of scanners for in-house scanning bureau	To purchase the requisite scanning equipment to enable the establishment of an internal scanning bureau which is necessary to progress the longer-term goal of implementing a comprehensive digital solution for the day forward scanning and storage of the remaining paper copies of health care records, in line with government retention criteria.	Karen Roberts	Health Records/IG (plus others)	Health Board wide	£241,200	7
Equipment Replacement	Bronchoscopes (x2)	Avoidance of loan / hire as well as replacing equipment that is beyond its useable life and has been at the centre of a recent series of infections	Sara Edwards	Respiratory	GGH	£121,000	3
Equipment Replacement	Trophon Replacement System	A fully enclosed system that makes reprocessing in the patient areas acceptable. No shadowing of the probe during decontamination, allowing the disinfectant to reach all parts of the probe. Consistently achieve disinfection efficacy as specified within ISO 15883/4 and WHTM 0106. Chemical/biological indicator available at end of each decontamination activity. Digital traceability (RFID) technology, records operator, probe and cycle data to capture and demonstrate user compliance. All ultrasound probes used within the Health Board are compatible with Trophon 2.	Philip Flear	HSDU	Health Board wide	£213,012	8
Estates Improvement	GGH Chemotherapy Day Unit. Upgrade of dirty utility provision and relocation due to IP&C concerns. Current sluice room is also a storage room which must be addressed. The capital work will involve a) converting the current sluice room into a dedicated storage room and b) creating a new sluice by dividing a large shower room into a sluice and separate bathroom. This approach has been approved by the Senior Nurse for IP&C.	A) Reduce risk of contamination of clinical equipment from waste disposal in the sluice area (e.g. urine from measuring, dip sticking and obtaining samples. B) Reduce risk to vulnerable patients from contamination of clinical equipment. C) Increased storage space to reduce clutter from clinical area. D) Improved and safer working environment for staff. E) More appropriate disposal of clinical waste.	Bry Phillips (Senior Nurse Manager Oncology)	Cancer Services	GGH	£55,000	1
Infrastructure	Replacement Guttering Blk 5 & 6	Address the remaining areas which are leaking into Theatres and Recovery area causing disruption to Theatre lists. This roof is difficult to access and completing these works would reduce the risk to staff needing to access this area to address leaks on a piecemeal basis.	Kevin Jones	Facilities	GGH	£32,900	1
Infrastructure	Repairs to Cardiology/Renal Blk Roof	Permanent solution to address the areas leaking into Cardiology and Renal which are affecting the safe delivery of key patient services. This solution should ensure the future use of this building.	Kevin Jones	Facilities	GGH	£17,200	2
Infrastructure	Enlli/Y Banwy Roof Repairs	Repairs required to roof above 12 bed ward to address damage caused by inclement weather. Ward closed until works completed.	Elfyn Jones	Facilities	BGH	£8,200	3
Infrastructure	Replacement Roof Catering Block	Numerous temporary/patch repairs have been carried out in recent years but now at the stage of requiring an extensive roof replacement to eliminate the risk of leaks and ensure the delivery of a catering service to patients, visitors and staff. These leaks also affect the site Main Stores and put stored stock at risk.	Kevin Jones	Facilities	GGH	£198,500	4
Infrastructure	Repairs to HSDU Roof	Existing roof leaking in several places. Scheme will install fibreglass liquid membrane to building roof to ensure a safe environment for staff.	Elfyn Jones	Facilities	BGH	£27,700	5
Infrastructure	Repairs to Xray Roof	Existing roof leaking in several places. Scheme will install fibreglass liquid membrane to building roof to ensure a safe environment for patients and staff.	Elfyn Jones	Facilities	BGH	£23,200	6
Infrastructure	Repairs to HQ Building Roof	Existing roof leaking in several places. Scheme will install fibreglass liquid membrane to building roof to ensure a safe environment for staff to work in.	Elfyn Jones	Facilities	BGH	£16,900	7
Infrastructure	Install Emergency Lighting	Provide appropriate emergency lighting to escape routes as identified in Fire Risk Assessment.	Paul Evans	Facilities	Llandovery	£17,900	8

Category	Project Description	Benefits of Investment	Lead Officers	Service / Ward / Dept	Site	Capital Cost £	Priority £
Infrastructure	Provision of equipment to support Cook Freeze Solution	Provision of additional oven and freezer capacity to enable site to move to Cook Freeze provision. Problems of recruitment and retention of staff at this site plus savings benefits from this scheme.	Peter Jones	Facilities	BGH	£64,900	9
Infrastructure	Replacement Windows Ael Y Bryn	Building used by a range of services included Finance, Waiting List management and Rural Health. Existing windows have been repaired numerous times but are beyond economic repair. Proposal will meet Health and Safety legislation.	Elfyn Jones	Facilities	BGH	£22,900	10
Infrastructure	Replacement Window & Doors Lys Steffan	Building used by both staff and patients. Existing windows and doors have been repaired numerous times but are beyond economic repair. Proposal will meet Health and Safety legislation and will provide a more pleasant environment for staff and patients.	Elfyn Jones	Facilities	BGH	£23,200	11
IT & Digital	Desktop Replacements	Would allow some desktops across the estate to be compatible with Windows 11. Windows 10 is EOL Oct 2025. This would allow the HB to maintain the latest version of windows to keep up to date with security patches and reduce our cyber vulnerabilities.	Gavin Jones	Digital Service	All Acute Sites	£287,028	1
IT & Digital	Laptop Replacements	Would allow some laptops across estate to be compatible with Windows 11. Windows 10 is EOL Oct 2025. This would allow the HB to maintain the latest version of windows to keep up to date with security patches and reduce our cyber vulnerabilities.	Gavin Jones	Digital Service	All Acute Sites	£112,855	2
IT & Digital	Teams Meeting Room	Replacement of end of life and unsupported polycom meeting room equipment with Teams Meeting Room devices. This would ensure that our existing meeting conference rooms remain capable of video conferencing.	Gavin Jones	Digital Service	All Acute Sites	£100,000	4
IT & Digital	Data Centre Nexus 9k switch replacements	Replacement of End of Life network switches to maintain a supportable and security patched network.	Gavin Jones	Digital Service	BGH GGH WGH	£500,000	3
IT & Digital	Main Site Firewall replacements	Replacement of End of Life network firewalls to maintain a supportable and security patched network.	Gavin Jones	Digital Service	All Acute Sites	£700,000	5
Equipment Replacement	2 x Image Intensifier	Current intensifiers are end of life and subject to frequent breakdowns. This means that surgical cases may not be able to be performed.	Gail Roberts-Davies/Sarah Procter	Radiology	BGH	£186,000	4
Equipment Replacement	1 x image intensifier	Current intensifiers are end of life and subject to frequent breakdowns. This means that surgical cases may not be able to be performed.	Gail Roberts-Davies/Sarah Procter	Radiology	WGH	£93,000	6
Equipment Replacement	Ultrasound system x 2	There are two ultrasound sets which are 6 and 7 years old which can not be used for obstetric imaging (ASW standards). The image quality of the systems is not suitable for either obstetric or gynaecological imaging.	Gail Roberts-Davies/Sarah Procter	Radiology	GGH	£286,200	5
Equipment Replacement	Ultrasound System x 1	one ultrasound system is 7 years old which can not be used for obstetric imaging (ASW standards). The image quality of the systems is not suitable for either obstetric or gynaecological imaging.	Gail Roberts-Davies/Sarah Procter	Radiology	BGH	£143,000	7
Infrastructure	Creating reporting hub for registrars, radiologist and radiographers.	There is a shortage of offices for reporting of radiology images. This leaves us with issues with recruiting radiologists and the number of registrars we can accept. We also have to restrict the number of people who can report which reduces workload and leads to delays to reporting which has a detrimental effect to patient care.	Gail Roberts-Davies/Sarah Procter	Radiology	GGH	£19,163	12
Infrastructure	Electrical Infrastructure and Infrastructure Works Main Kitchen WGH to include emergency lighting	Address the infrastructure issues in the kitchen whilst it is closed for remedial works associated with RAAC	Julian Wheeler Jones	Facilities	WGH	£120,000	13

Total £4,245,820

NHS – All Wales Capital Prioritisation

SDODC 29 February 2024



- Challenging financial climate
- Reported backlog maintenance of £1.2bn across Wales
- Annual All Wales Capital Programme budget £375m annually
- 10 year investment plans submitted by organisations in March 2022 set out an ask of treble this budget
- PRIORITISATION IS ESSENTIAL NOW
- Infrastructure Investment Board (IIB) agreed a framework for a common basis for investment decision making. Developed with input from the Health Economics and Welsh Treasury Teams in Welsh Government (WG)
- All organisations asked to submit forms for all schemes where Full Business Case or Business Justification Cases have not been received
- By 14 February 2024 originally, now extended to 31 March, 2024

- Process has been developed is in line with the Duty of Quality
- **Multi Criteria Decision Analysis Tool**
 - Four Overarching Investment Objectives
 - Ensure **quality, safety and operational sustainability** of health and care services, prioritising areas with the greatest health and care needs, reducing inequalities to facilitate high standards of care.
 - Support the **shift in focus towards prevention** by providing more integrated services, in convenient and accessible settings for the population to take more responsibility for their own health and wellbeing.
 - **Transform services through innovation, technology and improved ways of working**, to deliver more efficient processes to support resilience, improved experiences and outcomes.
 - Deliver **value for money by increasing the efficiency and quality of the estate**, while improving the effectiveness of services for the population and workforce, targeting investment in long term priorities, aligning to environmental strategies, whilst minimising nugatory spend.
 - Set of weighted Criteria which will be scored

	1	2	3	4	5	6	
Criteria	Fit with Priorities & Policy	Clinical Impact	Value for money (VfM)	Statutory Compliance and Risk (SCR)	Equity & Community	Wider Benefits and Climate Change	Total
Weighting	25%	20%	16%	13%	13%	13%	100%



- Developed a Prioritisation Form
- One of these will need to be completed for each Scheme that we would like WG to consider
- As part of this process there is an expectation that the project is ranked in terms of the organisational priority. Current WG advice is that we can only have one Priority 1 and one Priority 2 etc.



- The basis of the work is the list of schemes that were submitted as part of the 10 Year Plan in March 2022, this list has been reviewed and is reflected in the prioritised list in slide 7 and 8.
- Based on WG advice excluded from the list are the community infrastructure schemes which will be subject to bids for Integration and Rebalancing Capital Funding (IRCF)
- Need to review the schemes listed on the March 2022 schedule to ensure nothing is missing or needs to be removed.
- Two internal workshops have taken place to consider the bids against the objectives and criteria issued to convert the long list into a draft prioritised list
- Draft ranked list has been
 - Discussed at Capital Sub Committee on 22 January
 - Reviewed in Executive Team 24 January
 - Shared with Andrew Carruthers, Keith Jones in parallel with Executive Team Papers
 - Refined following Executive Team



Issues include:

- Difficulty of balancing urgency versus importance (operational imperatives and strategic developments)
- The uncertainty of funding and timelines associated with A Healthier Mid and West Wales (AHMWW) Major Infrastructure Investment
- Likely investment requirements such as digital innovation, decarbonisation, clinical services plan where scheme specifics are not currently known.

Draft Ranking following Executive Team 24.01.24



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Scheme	Rank
New Urgent and Planned Care Hospital, repurposing Glangwili Hospital (GGH) and Withybush Hospital (WGH)	1
Major Infrastructure	2
Fire Compliance Phase 2 – WGH	3
Fire Compliance Phase 2 - GGH	4
Aseptic	5
Fire Compliance – Bronglais Hospital (BGH)	6
Diagnostic Programme	7
Fire Compliance – Prince Philip Hospital (PPH)	8
Sexual Assault Referral Centre (SARC)	9
Site Refurbishment - Condition/fabric upgrade Theatre Replacement - WGH	10
Reinforced Autoclaved Aerated Concrete (RAAC) – WGH	11
Network Upgrades and Cyber Security - Digital Infrastructure	12
Preseli Centre	13
Desktop Services inc telephones	14

Draft Ranking following Executive Team 24.01.24



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Scheme	Rank
Medical Equipment	15
Clinical Services Plan Impact - Functional suitability & changes Laminar Flow Theatres - PPH	16
Hospital sterilisation and decontamination unit (HSDU)	17
Substance Misuse Development Llanelli	18
Security inc CCTV	19
AHMWW Bronglais Modernisation (Outline Business Case (OBC))	20
AHMWW Prince Philip Modernisation (OBC)	21
Isolation Facilities	22
Welsh Government Building - Picton Terrace	23
Digital Transformation / Innovation	24
Decarbonisation	25
Dental School Aberystwyth University	26
Major Trauma GGH Landing area (To be confirmed)	27

Next Steps & Recommendations



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board

Next Steps

List to be :

- Shared with Strategic Development and Operational Delivery Committee (SDODC), February 2024
- Shared with Board as part of Annual plan, March 2024

P

Recommendations

- **NOTE** the work being undertaken to develop a schedule of prioritised All Wales Capital Projects and the draft ranking of projects



DIOGEL | CYNALIADWY | HYGYRCH | CAREDIG
SAFE | SUSTAINABLE | ACCESSIBLE | KIND



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Hywel Dda
University Health Board