SH4	**With regard to Health & Safety at Work can the organisation evidence the following?**	**Yes or No selection**	**Bernard Bhukal**	**Action Due Date**	**Status**	**Cost**
SH4.5	Do you have a regular audit regarding your Health & Safety at Work?	No	Proceeding with an independent annual audit by BDO, subject to agreement, with the findings reported through the Estates and Trust Health and Safety Groups. An independent review would provide an objective assessment, identify recurring themes and help drive organisational ownership of the actions. We will continue to progress the appointment of a staff-side Health and Safety Representative, reinforce expectations through toolbox talks and ensure there is clear ownership for actions arising from inspections and audits. The PAM action can now be closed on the basis above, and the wider Health and Safety improvement work should continue through the Estates Health and Safety Group with agreed governance and assurance arrangements.	MN recommended use BDO for H&S audit - waiting for date to proceed	In progress - on target	TBC
SH4.6	Do you have an action plan in place, for work driven out of your annual audit?	No	See above		In progress - on target	
SH4.7	Are high risk actions or those that will not be completed in less than one month entered on relevant risk registers?	No	See above		In progress - on target	
SH4.8	Are all of the actions on your action plan less than twelve months old, other than those that are a multi-year project and are being monitored by a project specific action plan?	No	See above		In progress - on target	
SH5	**With regard to Asbestos can the organisation evidence the following?**	**Yes or No selection**	**Chris Green, Martin Lovell**	**Action Due Date**	**Status**	**Cost**
SH5.19	Do you have an action plan in place, for work driven out of your annual audit?	No	Awaiting update due to leave		In progress - on target	
SH5.21	Are all of the actions on your action plan (if there are any) less than twelve months old, other than those that are a multi-year project and are being monitored by a project specific action plan?	No	Awaiting update due to leave		In progress - on target	
SH6	**With regard to Medical Gas Systems can the organisation evidence the following?**	**Yes/No/NA selection**	**Peter Arnold, Nick Bolton**	**Action Due Date**	**Status**	**Cost**
SH6.6	Are all Trust staff who require Medical Gas related training according to your policy/plan currently up to date to the correct level?	No	Awaiting update from Sarah O'Connor re clinical staff training compliance and response from Steve Lee regarding Portering training compliance	Aug-26	In progress - on target	
SH6.15	Can you confirm in the past 12 months there has been no medical gas systems incidents that have specifically impacted clinical activity on site?	No	Oxygen incident at Poole	N/A	Closed	
SH7	**With regard to Natural Gas and specialist piped systems can the organisation evidence the following?**	**Yes or No selection**	**Martin Nash**	**Action Due Date**	**Status**	**Cost**
SH7.9	Do you have up to date site plans detailing the location of your Natural Gas and specialist piped systems?	No	SOP required for Capital handover to ensure clarity on where tightness testing for new builds resides		In progress - on target	
SH7.11	Do you have a safety group in place, covering Natural Gas and specialist piped systems?	No			In progress - on target	
SH7.12	Do you have an overall risk assessment in place covering Natural Gas and specialist piped systems for your site/s?	No			In progress - on target	
SH7.14	Do you have an annual audit regarding Natural Gas and specialist piped systems?	No	Poole complete. RBH scheduled for end August	Sep-26	In progress - on target	
SH7.15	Do you have an action plan in place, for work driven out of your annual audit?	No	Once above complete		In progress - on target	
SH7.16	Are high risk actions or those that will not be completed in less than one month entered on relevant risk registers?	No	Once above complete		In progress - on target	
SH7.17	Are all of the actions on your action plan less than twelve months old, other than those that are a multi year project and are being monitored by a specific project action plan?	No	Once above complete		In progress - on target	
SH9	**With regard to Water Systems can the organisation evidence the following?**	**Yes or No selection**	**Chris Green**	**Action Due Date**	**Status**	**Cost**
SH9.9	Do you have up to date site plans detailing your Water Systems?	No	ML to obtain costs for external surveyor to update schematic on Poole site. Available funding currently focussed on higher risk tasks.	Dec-26	In progress - on target	£30,000
SH9.22	Are all water systems statutory PPM's up to date?	No	49% performance in July 26			
SH10	**With regard to Electrical Systems can the organisation evidence the following? (this includes High Voltage and Low Voltage)**	**Yes or No selection**	**Richard Owen, Chris Green**	**Action Due Date**	**Status**	**Cost**
SH10.6	Do you have an up to date electrical systems asset register for all buildings?	No	Undertaken by Quantec as part of T&I. 3 years into 5 year programme of which asset reg is being updated	Jun-28	In progress - on target	
SH10.8	Do you have up to date site plans detailing your Electrical Systems?	No	Undertaken by Quantec as part of T&I. 3 years into 5 year programme of which asset reg is being updated	Jun-28	In progress - on target	
SH10.16	Can you confirm in the past 12 months there has been no Electrical Systems incidents that have specifically impacted clinical activity on site?	No	https://datix.uhd.nhs.uk/poole/live/index.php	N/A	Closed	
SH10.22	Are all electrical systems statutory PPM's up to date?	No	91% performance in July 26			£250,000
SH11	**With regard to wet heating systems, can the organisation evidence the following?**	**Yes or No selection**	**Chris Green**	**Action Due Date**	**Status**	**Cost**
SH11.6	Do you have an up to date wet heating systems asset register for all buildings?	No	Majority of assets such as pumps etc are on CAFM system. No requirment to capture radiator assets in my view as cost / benefit limited. Ongoing asset data capture project		On hold/blocked	£150,000
SH11.8	Do you have up to date site plans/system schematics detailing your wet heating systems?	No	CAD drawings are available but out of date. Would require full survey and update of plans. Low risk - cost / benefit poor, available funding needed on higher priority actions		On hold/blocked	£30,000
SH11.12	Do you carry out an annual audit on wet heating systems across your site/s?	No	High risk items covered withon other sections. Pipework / rads etc considered low risk - cost / benefit poor, available funding needed on higher priority actions		On hold/blocked	£10,000
SH11.13	Do you have an action plan in place, for work driven out of your annual audit?	No	See above		On hold/blocked	See above
SH11.14	Are high risk actions (where risks arise) or those that will not be completed in less than one month entered on relevant risk registers?	No	See above		On hold/blocked	See above
SH11.15	Are all of the actions on your action plan less than twelve months old, other than those that are a multi-year project and are being monitored by a project specific action plan?	No	See above		On hold/blocked	See above
SH11.17	Are all wet heating systems statutory PPM's up to date?	No	No Stat A PPM of wet system, covered in other areas. No plans to change PPMs within Planet		On hold/blocked	
SH12	**With regard to Ventilation, Air Conditioning and Refrigeration Systems can the organisation evidence the following?**	**Yes or No selection**	**Peter Arnold, Chris Green**	**Action Due Date**	**Status**	**Cost**
SH12.6	Do you have an up to date Ventilation, Air Conditioning and Refrigeration Systems asset register for all buildings?	No	To get aircon from EPTA, but assets will still need tagging	Mar-27	In progress - on target	£6,000
SH12.8	Do you have up to date site plans detailing the location of your Ventilation, Air Conditioning and Refrigeration Systems?	No		Jul-27	In progress - on target	£50,000
SH12.14	Can you confirm in the past 12 months no incidents have specifically impacted clinical activity on site in relation to Ventilation, Air Conditioning and Refrigeration Systems?	No	https://datix.uhd.nhs.uk/poole/live/index.php	N/A	Closed	
SH12.20	Are all Ventilation, Air Conditioning and Refrigeration Systems statutory PPM's up to date?	No	65% performance in July 26			
SH13	**With regard to lifting equipment (including Lifts/Hoists/Conveyance Systems) can the organisation evidence the following?**	**Yes or No selection**	**Chris Green, Hanna Wilkinson**	**Action Due Date**	**Status**	**Cost**
SH13.1	Do you have a lifting equipment policy in place which conforms to all relevant legislation and guidance?	No	Manual handling/patient hoist policy due for review		In progress - on target	
SH13.6	Are all Trust staff who require lifting equipment related training according to your policy/procedure currently up to date to the correct level?	No	Trust-wide currently 77% (June 2026). Plan to secure training room for have consistently available training.		In progress - on target	
SH13.13	Can you confirm no incidents have specifically impacted clinical activity on site in the past 12 months in relation to Lifts, Hoists and Conveyance Systems	No	https://datix.uhd.nhs.uk/poole/live/index.php Due to lack of patient slings, unable to move patients	N/A	Closed	
SH13.19	Are all Lifts, Hoists and Conveyance Systems statutory PPM's up to date?	No	65% performance in July 26			
SH14	**With regard to Pressure Systems can the organisation evidence the following?**	**Yes or No selection**	**Peter Arnold, Chris Green**	**Action Due Date**	**Status**	**Cost**
SH14.5	Are all Trust staff who require Pressure Systems related training according to your policy/procedure currently up to date to the correct level?	No	B Sykes trained and appointed as AP to SSD. J Mundy trained awaiting appointment.	Sep-26	In progress - on target	
SH14.12	Do you have a safety group in place covering Pressure Systems?	No	Requested to be added to Estates H&S and compliance quarterly meeting as agenda item.	Dec-26	In progress - on target	
SH14.20	Are all Pressure Systems statutory PPM's up to date?	No	0% performance in July 26			
SH15	**With regard to Fire Safety can the organisation evidence the following?**	**Yes or No selection**	**Bernard Bhukal**	**Action Due Date**	**Status**	**Cost**
SH15.6	Have all Trust staff received Fire Safety related training according to your policy/procedure/training needs analysis (HTM 05-03 part A) and are currently up to date to the correct level?	No	Taining Matrix being developed	Sep-26	In progress - on target	
SH15.9	Does your organisation have up to date site plans detailing your Fire Safety equipment?	No	Site Plans continuously being updated due to site transformation work	Oct-26	In progress - on target	
SH15.13	Are primary and secondary fire risk assessments in place for all areas?	No	Currently Only New Build – Existing Estate being review estimated completion Q2 2027	Jul-27	In progress	
SH15.14	Are substantial (defined in HTM 05-03 part K) actions arising from primary and secondary fire risk assessments entered on relevant risk registers?	No	AE to advise	Jan-27	In progress	
SH15.15	Are there plans and procedures in place to remediate or mitigate all actions / findings from Primary and Secondary fire risk assessments?	No	Action being developed - AE to advse	Sep-26	In progress - delayed	
SH15.18	Can you confirm in the past 12 months Fire Safety incidents **have not** specifically impacted clinical activity on site?	No	https://datix.uhd.nhs.uk/poole/live/index.php	N/A	Closed	
SH15.24	Are all Fire safety statutory PPM's up to date?	No	94% performance in July 26			
SH16	**With regard to Medical Devices and Equipment can the organisation evidence the following? (Medical devices are defined as different items within the HTMs and HBN within the evidence column)**	**Yes or No selection**	**George Atkinson, Rachel McNaught**	**Action Due Date**	**Status**	**Cost**

SH16.4	Are your organisation staff who require Medical Devices and Equipment related training according to your policy/procedure currently up to date to the correct level?	No	new device training assessed as part of procurement process. User training records currently being reviewed as part of ongoing UHD corporate project - Q1 2027 Technical support staff - yes, users - unknown.	Mar-27	In progress	N/A
SH16.5	Do you have an up to date Medical Devices and Equipment asset register for all buildings?	No	site wide medical equipment audit is being undertaken as part of corporate devices review - Poole end August, RBH Q1 2027.	Mar-27	In progress	N/A
SH16.12	Are at least 90% of Medical Devices and Equipment PPM's up to date?	No	High risk critical devices at 93%, remainder are subject to asset audit completion - potentially 70-80% complete, target Q1 2027.	Mar-27	In progress	N/A
SH17	**With regard to Hard FM Resilience, Emergency and Business Continuity Planning can the organisation evidence the following?**	**Yes or No selection**	**Mark Taylor**	**Action Due Date**	**Status**	**Cost**
SH17.4	Do the Trusts carry out black starts on buildings?	No				
SH21	**With regards to reducing harm in Mental Health Services can the organisation evidence the following?**	**Yes or No selection**	**Leanne Aggas, Martin Lovell**	**Action Due Date**	**Status**	**Cost**
SH21.1	Do you have a policy/procedure linked to the Mental Health requirements for your organisation?	No	Leanne Aggas leads on Mental Health workstream, awaiting update on creation of policy		In progress	
SH21.2	Are sufficient members of the Hard FM team trained in the requirements for mental health services, in line with your policy/procedure?	No	Awaiting policy	TBC	Not started	
SH21.4	Can you confirm in the past 12 months incidents related to mental health services **have not** specifically impacted clinical activity on site?	No	https://datix.uhd.nhs.uk/poole/live/index.php	N/A	Closed	
SH22	**With regard to Mortuaries can the organisation evidence the following?** **Does your organisation have one or more mortuaries and/or body store? This includes Mortuaries in PFI or other out-sourced regimes.**	**Yes/No/N A selection**	**Jonathan Lustig**	**Action Due Date**	**Status**	**Cost**
SH22.10	Are you compliant with recommendation 5 **Security and monitoring:** Please confirm your organisation is compliant with the Fuller Inquiry recommendation 5: All NHS trusts should consider putting in place systemic operational barriers that prevent the security and dignity of deceased people being compromised. An example of this would be implementation of a rule that prevents electronic devices such as phones or cameras being taken into a mortuary, other than for approved reasons. Please answer yes if you have implemented systematic barriers and are complaint with recommendation 5 or no if not.	No	It was agreed that the confiscation of any electronic devices from visitors to the mortuary could result in damage or loss of visitor property. It was agreed that additional signage would be put in place instructing that no videos or photos are permitted to be taken in the mortuary. This is also in the disclaimer at the top of the visitor logbook and in the visotrs to mortuary SOP - https://intranet.uhd.nhs.uk/systems/policies/mortuary/access-to-mortuary-supervision-visitors.pdf Some workers and funeral directors also use their electornic devices to undertake their duties and therefore removing these devices fomr them would affect their ability to carry out their duties. Full CCTV coverage, restricted access, staff trianing for those who have access and signage are in place as systemic operational barriers.	N/A	Closed	
SS2	**With regard to Decontamination Processes can the organisation evidence the following?**	**Yes or no Selection**	**Tami Shepherd**	**Action Due Date**	**Status**	**Cost**
SS2.4	Roles & Responsibilities: Does the organisation have appropriately qualified, competent and formally appointed people with clear descriptions of their role and responsibility which are well understood?	No	There is currently no nominated Decon lead for the Trust. Ongoing conversations between Clare Bone and Karen Hill.		In progress	
SS3	**With regard to Cleanliness and Infection Control applying to Premises and Facilities can the organisation evidence**	**Yes or No Selection**	**Allun Lloyd**	**Action Due Date**	**Status**	**Cost**
SS3.25	Cleaning Standards 2025: Have you undertaken efficacy audits in a minimum of 95% in each FR categories 1 - 4?	No	Quality & Audit Team looking at Efficacy Audits for FRC1 & 2 in next 12 months. Therefore, won't be completed before PAM submission.	Jun-27	In progress - on target	
SS3.26	Cleaning Standards 2025: Have you undertaken efficacy audits in a minimum of 95% in each FR categories 1?	No	See above	Jun-27	In progress - on target	
SS3.27	Cleaning Standards 2025: Have you undertaken efficacy audits in a minimum of 95% in each FR categories 2?	No	See above	Jun-27	In progress - on target	
SS3.28	Cleaning Standards 2025: Have you undertaken efficacy audits in a minimum of 95% in each FR categories 3?	No	See above	Jun-27	In progress - on target	
SS3.29	Cleaning Standards 2025: Have you undertaken efficacy audits in a minimum of 95% in each FR categories 4?	No	See above	Jun-27	In progress - on target	
SS4	**With regard to Linen and Laundry Services can the organisation evidence the following?**	**Yes or No Selection**	**Paul Huckle**	**Action Due Date**	**Status**	**Cost**
SS4.1	Policy & Procedures: Does the organisation have a current, approved Policy and an underpinning set of procedures that comply with relevant legislation and published guidance?	No	Policy started will need cross-departmental input. PH has sent draft policy to ICT and Cleaning team.	Jan-27	In progress	
SS4.2	Does the organisation have a current approved Laundry and Linen policy that has been reviewed regularly inline with your organisational policy timelines/legislation/guidance updates?	No	Relies on policy, see above	TBC	On hold/blocked	
SS4.3	Does the organisation have a current approved Laundry and Linen policy that has been reviewed within the last 2 years?	No	Relies on policy, see above	TBC	On hold/blocked	
SS4.4	Does your policy provide guidance on mortuary linen use?	No	Relies on policy, see above	TBC	On hold/blocked	
SS4.5	Does your policy provide guidance on bed changes?	No	Relies on policy, see above	TBC	On hold/blocked	
SS4.6	Does your policy provide guidance on minimum and maximum levels for wards, main stores and storage containers?	No	Relies on policy, see above	TBC	On hold/blocked	
SS4.7	Does your policy provide guidance on onsite linen management?	No	Relies on policy, see above	TBC	On hold/blocked	
SS4.9	Is there a designated clinical representative for linen management within your organisation?	No	Relies on policy, see above	TBC	On hold/blocked	
SS4.10	Risk Assessment: Has there been a risk assessment undertaken and any necessary risk mitigation strategies applied and reviewed regularly, inline with your organisational policy timelines/legislation/guidance updates?	No	Relies on policy, see above	TBC	On hold/blocked	
SS4.11	Is a risk assessment regularly carried out in relation to laundry and linen activities?	No	Relies on policy, see above	TBC	On hold/blocked	
SS4.17	Is there a full in- date, training matrix documenting staff training?	No	Relies on policy, see above	TBC	On hold/blocked	
SS4.18	Resilience, Emergency & Business Continuity Planning: Does the organisation have resilience, emergency, business continuity and escalation plans which have been formulated and tested with the appropriately trained staff?	No	Have a plan but not tested	TBC	On hold/blocked	
SS4.19	Have these plans been appropriately tested within the last 12 months?	No	Have a plan but not tested	TBC	On hold/blocked	
SS4.20	Review Process: Is there a robust annual review process to assure compliance and effectiveness of relevant standards, policies and procedures?	No	Have a plan but not tested	TBC	On hold/blocked	
SS6	**With regard to Pest Control can the organisation evidence the following?**	**Yes or No Selection**	**Martin Lovell**	**Action Due Date**	**Status**	**Cost**
SS6.6	Risk Assessment: Has there been a risk assessment undertaken and any necessary risk mitigation strategies applied and regularly reviewed?	No	Awaiting update due to leave	Aug-26	In progress - on target	
SS6.7	Are risk assessments undertaken regularly?	No	Awaiting update due to leave	Aug-26	In progress - on target	
SS6.9	Does the organisation have resilience, emergency, business continuity and escalation plans in the event of pest control failure to service needs?	No	Awaiting update due to leave	Aug-26	In progress - on target	
SS6.10	Have these plans been tested within the last 12 months? (desk top exercise/drill will suffice)	No	Awaiting update due to leave	Aug-26	In progress - on target	
SS6.11	Do you have a formal contract in place for your contingency plans?	No	Awaiting update due to leave	Aug-26	In progress - on target	
C3	**With regard to improved efficiencies in capital procurement, refurbishments and land management can the organisation evidence the following?**	**Yes or No selection**	**Richard Callaghan**	**Action Due Date**	**Status**	**Cost**
C3.12	**Net Zero Carbon** Do you have site Level heat decarbonisation plans?	No			In progress	
C8	**With regard to having a well-managed robust approach to management of land and property can the organisation evidence the following?**	**Yes or No selection**	**Norman Gillespie**	**Action Due Date**	**Status**	**Cost**
C8.4	**Disposal of land and property** Do you have evidence of a short and long term estate strategy supporting clinical, financial and investment objectives?	No	Master planning in progress		In progress - on target	
C8.6	**Disposal of land and property** Has your organisation got evidence of masterplans for large sites which identify areas for retention, development and disposal?	No	Master planning in progress		In progress - on target	
C8.7	**Disposal of land and property** Do you have involvement of District Valuer?	No			In progress - on target	
C8.8	**Disposal of land and property** Can you demonstrate re-investment of income?	No	No disposals planned		In progress - on target	
C8.13	**Disposal of land and property** Do you have adequate measures for appropriate action when land and/or property is subject to compulsory purchase powers or potential or actual applications for registering as a town or village green?	No			In progress - on target	
C8.14	**Disposal of land and property** Do you have adequate measures for where non-NHS facilities are used for NHS patients, that policies to ensure NHS standards regarding the built environment are adopted and implemented?	No			In progress - on target	

C8.18	**Acquisition of land and property** Has your organisation got policy and procedures relevant to E&F services relevant to the trust/site;	No	Master planning in progress		In progress - on target	
C8.22	**Acquisition of land and property**. Has your organisation got evidence of masterplans for large sites which identify areas for retention, development and disposal?	No	Master planning in progress		In progress - on target	
C8.23	**Acquisition of land and property** Has your organisation have Involvement of District Valuer?	No	3rd party used		In progress - on target	
C9	**With regard to having a suitable Sustainability approach in place and being actioned.**	**Yes or No selection**	**George Atkinson**	**Action Due Date**	**Status**	**Cost**
C9.6	**Energy** Do you have plans to cover up to 90% of your energy consumption through building-level and floor-level submeters, as set out in the Estates Net Zero Carbon Delivery Plan?	No	short term this is restricted to the development areas, long term investment required		In progress	
C9.8	**Energy** Has your trust energy policy been reviewed, and amended where necessary, within the last 2 years and is compliant with HTM07-02 and new guidance and legislation?	No	The energy targets and strategy are linked to the sustainabilty plan (green plan) and the Decarbonisation strategy. https://intranet.uhd.nhs.uk/uploads/sustainability/documents/uhd2577_updates_to_green_plan_2025_final.pdf		In progress	
C9.18	**Waste** . Can the organisation evidence staff waste training, - training and development: does the organisation have an up to date training and development plan in place covering all relevant roles and responsibilities of staff, that meets all safety, technical and quality requirements in relation to waste management?	No	Waste training is in place, but not mandatory and unlikely to become so. Higher risk areas, more aware of risk of improper disposal and are engaged and these areas have local training. Lower risk areas, such as wards, less engaged but there is an element of waste training in IPC mandatory training.	N/A	Closed	
C9.26	**Climate Change Adaptation** Has the trust used the climate adaptation framework for NHS organisations in England, to enable estates to prepare for and respond to the impacts of climate change?	No	In progress now		In progress	