

Policy Under Review

Please note that this policy is under review. It does, however, remain current Trust policy subject to any recent legislative changes, national policy instruction (NHS or Department of Health), or Trust Board decision. For guidance, please contact the Author/Owner.

Information Category	Detailed Information
Document Title:	Accommodation and Site Utilisation Policy V4.0
This document replaces (exact title of previous version):	Management of Space and Change of Use Policy V3.0
Date Issued/Approved:	27 July 2022
Date Valid From:	November 2022
Date Valid To:	May 2026
Author/Owner:	Operational and Strategic Estates. Ian Rowland, Head of QI and PMO.
Contact details:	01872 253400
Brief summary of contents:	Application for Accommodation and Space to ensure the Site is fully utilised.
Suggested Keywords:	Space; Office; Accommodation; Request.
Target Audience:	RCHT: Yes CFT: Yes CIOS ICB: Yes
Executive Director responsible for Policy:	Director of Estates and Facilities
Approval route for consultation and ratification:	Site Utilisation Group. Executive Leadership Team.
Manager confirming approval processes:	Director of Estates and Facilities
Name of Governance Lead confirming consultation and ratification:	Head of Performance Improvement, Governance and Compliance

Information Category	Detailed Information
Links to key external standards:	None required
Related Documents:	Flexible Working Home Working Policy
Training Need Identified:	No
Publication Location (refer to Policy on Policies – Approvals and Ratification):	Internet and Intranet
Document Library Folder/Sub Folder:	Estates and Facilities / Estates

This document is only valid on the day of printing.

Controlled Document.

This document has been created following the Royal Cornwall Hospitals NHS Trust Policy on Document Production. It should not be altered in any way without the express permission of the author or their Line Manager.

Accommodation and Site Utilisation Policy

V4.0

November 2022

Table of Contents

1.	Introduction	6
2.	Purpose of this Policy/Procedure	6
3.	Scope	6
4.	Definitions / Glossary	6
5.	Ownership and Responsibilities	7
5.1.	Role of the Director with designated responsibility for accommodation and space utilisation	7
5.2.	Role of the Site Utilisation Group	7
5.3.	Role of SRMs	7
5.4.	Role of Managers and Care Groups	8
5.5.	Role of Operational Estates	9
6.	Standards and Practice	9
6.1.	Space and Accommodation	9
6.2.	Office Accommodation	9
6.3.	Designated Clinical Accommodation	10
6.4.	Meeting Rooms	11
6.5.	Flexible Working/Remote Working	11
6.6.	Space and Accommodation for Non-Trust Staff	11
6.7.	Process for Change	12
6.8.	Site Utilisation Group	13
7.	Dissemination and Implementation	14
8.	Monitoring compliance and effectiveness	14
9.	Updating and Review	15
10.	Equality and Diversity	15
	Appendix 1. Governance Information	16
	Appendix 2. Equality Impact Assessment	19
	Appendix 3. Accommodation Request Process	22
	Appendix 4. Site Utilisation Group – Terms of Reference	23

Data Protection Act 2018 (General Data Protection Regulation – GDPR) Legislation

The Trust has a duty under the Data Protection Act 2018 and General Data Protection Regulations 2016/679 to ensure that there is a valid legal basis to process personal and sensitive data. The legal basis for processing must be identified and documented before the processing begins. In many cases we may need consent; this must be explicit, informed, and documented. We cannot rely on opt out, it must be opt in.

Data Protection Act 2018 and General Data Protection Regulations 2016/679 is applicable to all staff; this includes those working as contractors and providers of services.

For more information about your obligations under the Data Protection Act 2018 and General Data Protection Regulations 2016/679 please see the Information Use Framework Policy or contact the Information Governance Team

Royal Cornwall Hospital Trust rch-tr.infogov@nhs.net

1. Introduction

1.1. The consistent allocation, and re-allocation, of all clinical and non-clinical space on all 3 physical Trust sites is difficult to achieve without a clear policy to manage the process and supporting resources. This policy details a system for the management of space according to the business needs of the organisation and has been agreed and ratified by the Executive Leadership Team for use and consistent application within the Trust.

1.2. This version of the policy supersedes any previous versions.

2. Purpose of this Policy/Procedure

This policy aims to provide a consistent and fair method for managing all physical space within the Trust; allocating and re-allocating space according to organisational and business needs. This policy aims to use the physical estate most effectively; ensuring that all colleagues have a safe and effective space to support their working, training and rest needs and ultimately ensure the safe and efficient delivery of healthcare.

3. Scope

This policy applies to all members of staff (regardless of status or grade), located on any of the hospital sites under the management of the Royal Cornwall Hospitals NHS Trust and any other accommodation leased by the Trust.

4. Definitions / Glossary

Definitions and glossary of terms used are as follows:

Abbreviation	Description
ELT	Executive Leadership Team
JCNC	Joint Consultative and Negotiation Committee
SRMs	Senior Responsible Managers
SUG	Space Utilisation Group

5. Ownership and Responsibilities

Role of the Director with designated responsibility for accommodation and space utilisation

The Chief Strategy Officer has overall responsibility for matters relating to the allocation and utilisation of physical space within the Trust. This includes ensuring that all estate is utilised efficiently and managed effectively; and ensuring financial resources for the delivery and application of this policy are available based upon an objective assessment of organisational and regulatory priorities. This may involve the development of business cases to support optimal utilisation of the estate.

Role of the Site Utilisation Group

The Site Utilisation Group will manage the delivery of this policy by agreeing an annual programme of space utilisation projects. The Group will meet 6 times a year to review the progress of the annually agreed space utilisation programme of work and to deal with urgent change requests submitted outside the regular business planning cycle. The Space Utilisation Group will oversee the project management of agreed projects within the annual programme of work to optimise the use of the Trust estate and infrastructure and reduce costs where possible and appropriate.

Role of SRMs

Strategic Estates and Operational Estates SRMs are required to advise the SUG on the impact of all new space utilisation, and space change of use, requests against the following criteria:

- Does the request fit with the Strategic Estates Master Plan for RCHT both in terms of the physical part of the site under considerations, or in respect of the whole site infrastructure development plans?
- Does the request fit in the physical current Operational Estate in consideration of priority, need, productivity of space, infrastructure and clinical requirements Operational Estates advice. For clinical requirements this links to strategy and new models of care – also operational experience will provide some challenge here in terms what they really may require.
- Is the request technically possible within a value for money scope and reasonable budget?
- Does the request need specific locational need on site as requested?
- Does the request comply with current Approved documents/ HBNs/ HTMs/ Regulations?
- Does the request fit with Operational Estates capital programme and backlog maintenance programme?

- Does the request fit with the Strategic Estates capital programme?
- Does the request require land or allocated space within the Trust grounds for permanent and temporary changes?
- Is there an agreed budget and funding source to deliver the request to full building, IPAC, Security, fire and health and safety compliance and ongoing maintenance?
- Does the request displace other users and what is the (funded) plan for accommodating any displaced users?
- Does the request comply with Equality Act (Accessibility) legislation and what funding is required to meet?
- Is there sufficient project / management resource available to ensure the change is delivered via an assured project management process?
- Has the impact of the changes option appraisal been considered and best practise use?
- Has the impact on Trust signage and wayfinding been considered and is there funding for new signage required built into the request?
- Does the request impact on any existing building or land lease arrangements?
- Does the request align with agreed new models of care / place-based care arrangements?

Role of Managers and Care Groups

All Care Group and Corporate managers are responsible for the implementation and monitoring of this policy within their specific area of responsibility, and according to the agreed annual programme of space utilisation work. All managers will ensure that:

- The use of all space is reviewed on a 6 monthly basis, in line with the guiding principles of occupation outlined in part 4 of this policy, and in accordance with the agreed annual programme of space utilisation work being delivered by the Space Utilisation Group.
- Risk assessments, in relation to the use of accommodation and health and safety in the workplace regulations, are carried out, recorded and reviewed on a quarterly basis. Issues and concerns raised as a result of regular risk assessment reviews will be reported to and managed by the Site Utilisation Group.
- Space and accommodation management procedures, and safe working practices, are implemented in all physical areas within the Trust.

- All changes of occupation for all physical areas within the Trust are reviewed and agreed in advance of any moves taking place by the Site Utilisation Group. This process will be monitored by the Operational Estates team for minor works requested via the Estates Helpdesk and by the Strategic Estates team for all major capital and infrastructure projects. The emerging Building Information Modelling (BIM) systems for the Trust will record digitally the occupation of Trust space and will be updated and reviewed on a regular basis.
- As part of the Trust recruitment process, that any additional staff (headcount over and above baseline levels) must have identified, and appropriate, work space agreed by the Space Utilisation Group before taking up post.
- All business cases for additional headcount will be required to be reviewed and signed off by Site Utilisation Group

Role of Operational Estates

The Operational Estates Department will maintain records of all current allocations of space to Care Groups and Corporate departments on the relevant digital system. The maintenance of this system will be reviewed and managed in accordance with developing Building Information Modelling (BIM) systems and will inform and support the work of the Site Utilisation Group.

6. Standards and Practice

Space and Accommodation

- 6.1.1 The Trust aims to meet statutory, NHS and professional requirements and guidelines on the allocation and maintenance of accommodation for all staff teams, departments and services.
- 6.1.2 No individual member of staff or Care Group / Department 'owns' Trust space or accommodation. The estate is Trust property and all staff must comply if asked to relocate to support the requirements of the organisation. In the case of any dispute the Director of Strategy and Performance will make the final decision.
- 6.1.3 The establishment of generic or "hotdesking" space, which can be shared within and between Departments, will complement the Trust's "Flexible Working Policy and the Remote Working Policy", post the COVID pandemic". Generic office space, or multi-disciplinary meeting room space, will be supported by a digital booking system.
- 6.1.4 The occupation and utilisation of Trust on site and off site accommodation is based on the following principles:

Office Accommodation

- 6.2.1. Open plan offices for generic use will be the basic provision of non-

clinical desk based working. These areas will be supported, where possible, with designated quiet areas where telephone and video calls will not be permitted, and lockers for the security of personal items.

- 6.2.2. Single occupation offices will be allocated on a case by case basis by the Site Utilisation Group based on the requirements of the individual post. Factors may include: Seniority of role; the number of staff managed by the staff member, and the subsequent requirement for confidential discussions; and Statutory, NHS or professional requirements.
- 6.2.3. Single offices must be made available for the use of other staff for quiet or confidential work space when not required by the named occupant.
- 6.2.4. Where possible multidisciplinary and departmental meeting spaces should be separate from office accommodation.
- 6.2.5. Office accommodation for medical staff and medical administration staff, including all consultants, will be based on the amount of required and designated office-based activities within individual job plans and job descriptions. With the advent of the Electronic Patient Record and more digital remote working solutions, there will be less requirement to locate medical administration staff fully on a physical Trust site. 60% home working, or off-site office working, should be the normal work pattern for medical administration staff.
- 6.2.6. Staff members whose work patterns mean they do not fully utilise a desk or office will be required to use designated and bookable hot desk areas or share a desk/office space.

Designated Clinical Accommodation

- 6.3.1. Existing designated clinical and specialty specific accommodation has been specifically designed for existing use and is managed through the Clinical Site Development Plan (CSDP) and the developing Strategic Estates and Infrastructure Master Plan.
- 6.3.2. A review of the clinical accommodation requirement should be carried out by the Space Utilisation Group, following the process for change procedures highlighted in this policy, when:
 - Room usage is below 75% occupancy
 - Increase in service demand requires more space.
 - The existing space does not meet statutory, NHS or professional requirements.
 - The existing service provision is to cease and be decommissioned /relocated.

- There is a requirement to decant services to support a planned programme of site reconfiguration or backlog maintenance functions.

Meeting Rooms

6.4.1. All meeting rooms within the Trust are considered a shared resource.

6.4.2. The Knowledge Spa Management team manage the booking and monitoring of meeting room usage. Meeting room can be booked through the Trust's Bookwise application; this can be found [here](#).

Flexible Working/Remote Working

6.5.1. Flexible working patterns and remote working are to be considered for all roles. Individual decisions may be required and will be at the discretion of the line manager.

6.5.2. For guidance on home working please refer to the Trust's Flexible Working Policy and the Remote Working Policy that can be found in the Human Resource section of the Trust's document library of the Intranet and on the links below:

- <http://doclibrary-rchtintranet.cornwall.nhs.uk/DocumentsLibrary/RoyalCornwallHospital sTrust/HumanResources/FlexibleWorkingAndWorklifeBalance.pdf>
- <http://doclibrary-rchtintranet.cornwall.nhs.uk/DocumentsLibrary/RoyalCornwallHospital sTrust/HumanResources/RemoteWorkingPolicy.pdf>

Space and Accommodation for Non-Trust Staff

6.6.1. Space and accommodation for staff working with, but not employed by, the Trust (e.g. Estates contractors) may be allocated for operational reasons for agreed periods of time. Requests for the use of space by contractors will need to be made via the Site Utilisation Group on a Site Utilisation Request Form. The use of the space may be charged to the user at an appropriate rate and allocation will be subject to a decision by the Space Utilisation Group

6.6.2. All space occupied by non-Trust users, unless covered by a separate contract, will be charged at an appropriate rate, dependent on the type of accommodation used.

Process for Change

6.7.1. All requests for space, changes of use, bids or requests for new or additional space, whether they involve building alterations or not, will be managed under this policy.

6.7.2. In order to make the optimum use of space, and to ensure building and room allocations are based on clinical need and corporate objectives, a Site Utilisation Group has been established. Details on the function of this Board are covered in Section 6.7.

6.7.3. Any staff requesting changes in accommodation will be required to use the process outlined in Appendix. The Accommodation request form can be found [here](#).

6.7.4. The Site Utilisation Group will discuss the request at their next meeting. The Health and Safety team and the Operational Estates Department in conjunction with the requester, will carry out a feasibility study for each request.

6.7.5. In making a decision on all requests, the Site Utilisation Group will consider:

- How the proposal fits with the Trust's Clinical Strategy
- How the proposal fits with the Trust's Strategic Estates Master Plan.
- The financial and practical feasibility of the proposal.
- Alternative options to satisfy the requirement.
- Whether capital or revenue funding will be required, and where it may be sourced.

6.7.6. The Site Utilisation Group will recommend whether:

- The proposal is financially and practically feasible.
- There is better alternative.
- The proposal needs the support of the Strategic Estates Department as a major capital project; or whether it could be managed as a minor works scheme.
- And ultimately, whether the space is approved / allocated.

6.7.7. If the decision reached by the Site Utilisation Group is not acceptable to all parties, or the accommodation problem is not solved, an appeal can be made to the Director of Strategy and Performance and that decision will be final. Unsuccessful requests will be kept on file and reviewed periodically in the light of subsequent site developments.

6.7.8. Once a change in site utilisation has been agreed by the Site Utilisation
Accommodation and Site Utilisation Policy V4.0

Group, details of the project will be passed to the relevant Project Team (either Operational Estates or Strategic Estates – depending on scheme value). For all projects the proposing Department will need to meet all capital and revenue costs under £5,000.

6.7.9. Where major changes to the use of space are agreed, such as the reshaping or relocation of whole departments, these will constitute a major capital project and must follow the Trust Business Case Approvals Process. An agreed Business Case, signed off by the Building Brilliance Board, will be required before the project is passed to the Strategic Estates team for delivery.

6.7.10. The Operational Estates and Facilities team, the Strategic Estates team, and Cornwall IT Services (CITS) must not support the resourcing or delivery of any accommodation moves or changes unless the project has been authorised according to the process outlined in this policy.

Site Utilisation Group

6.8.1. The Site Utilisation Group will consider all submitted applications for change of space usage or new accommodation requests. Decisions will be made after due consideration of all the issues arising from the request, and in accordance with Trust clinical and business priorities. Judgments will be based on the merits of the proposal / request in relation to the Trust Clinical Strategy; clinical and service operational priorities; fit with the Strategic Estates Master Plan and any capital / revenue requirements.

6.8.2. Core membership of the Board will comprise:

- Chief Strategy Officer (Chair)
- Head of Hospital Reconfiguration (Joint Deputy Chair)
- Head of Operational Estates (Joint Deputy Chair)
- Corporate Finance Manager
- Corporate People Partner
- Strategic Estates Communications and Stakeholder Engagement Lead
- Staffside Representation
- Staff Accommodation Plan Manager
- Head of Information Governance

Individuals will be invited as required dependent on requests.

6.8.3. The board will meet every 8 weeks, however urgent requests may be

considered via Chair's action. Meeting notes will be circulated following each meeting to Board members.

6.8.4. Operational Board will have reports for information and will make decisions on any major requests/ move. Building Brilliance will be provided reports to ensure that any project dependencies are logged.

6.8.5. A copy of the Terms of Reference for the Site Utilisation Group is at **Appendix 2**.

6.8.6. Once a change in space utilisation has been agreed by the Site Utilisation Group, details of the project will be passed to the relevant Project Team (either Operational Estates or Strategic Estates – depending on scheme value).

7. Dissemination and Implementation

7.1. Once approved and ratified, a copy of this Policy will be stored electronically in the Trusts document library on the Intranet.

7.2. Communication via email will be sent to all managers when this Policy is issued; Care Group and Departmental managers are responsible for making staff members aware of this Policy, including those who do not have regular access to the email system.

7.3. The Joint Consultative and Negotiating Committee (JCNC) will be advised on the issuing of this Policy.

8. Monitoring compliance and effectiveness

	Detail of process and methodology for monitoring compliance
Element to be monitored	Regular generic and targeted reviews of accommodation usage, in-line with this Policy, will be carried out as part of the Site Utilisation Group's annual work plan. Only the Chair of the Site Utilisation Group, or nominated Deputy, has the authority to agree changes to the use of space, or the designation of new accommodation.
Lead	Site Utilisation Group
Tool	Smartsheet will hold a database of all information on change requests and decisions
Frequency	As per the Site Utilisation Group's annual work programme.
Reporting arrangements	Via the Site Utilisation Group

Acting on recommendations and Lead(s)	To be designated by the Site Utilisation Group.
Change in practice and lessons to be shared	Required changes to practice will be identified by the Site Utilisation Group and lessons will be shared with all the relevant stakeholders. This Policy will be updated at the point that any changes to practice are agreed by the Site Utilisation Group. Required changes to practice will be identified by the Site Utilisation Group and lessons will be shared with all the relevant stakeholders. This Policy will be updated at the point that any changes to practice are agreed by the Site Utilisation Group.

9. Updating and Review

This Policy will be reviewed annually from 12 months after initial ratification, or in response to legislative changes, national policy instruction (NHS or Department of Health) Trust Board decisions or following specific requests by the JSNC.

10. Equality and Diversity

10.1. This document complies with the Royal Cornwall Hospitals NHS Trust service Equality and Diversity statement which can be found in the ['Equality, Inclusion and Human Rights Policy'](#) or the [Equality and Diversity website](#).

10.2. Equality Impact Assessment

The Initial Equality Impact Assessment Screening Form is at Appendix 4.

Appendix 1. Governance Information

Information Category	Detailed Information
Document Title:	Accommodation and Site Utilisation Policy V4.0
This document replaces (exact title of previous version):	Management of Space and Change of Use Policy V3.0
Date Issued/Approved:	27 July 2022
Date Valid From:	November 2022
Date Valid To:	November 2025
Directorate / Department responsible (author/owner):	Operational and Strategic Estates Ian Rowland, Head of QI and PMO
Contact details:	01872 253400
Brief summary of contents:	Application for Accommodation and Space to ensure the Site is fully utilised
Suggested Keywords:	Space; Office; Accommodation; Request
Target Audience:	RCHT: Yes CFT: No CIOB ICB: No
Executive Director responsible for Policy:	Chief Strategy Officer
Approval route for consultation and ratification:	Site Utilisation Group Executive Leadership Team
General Manager confirming approval processes:	Simon Taylor Roberta Fuller
Name of Governance Lead confirming approval by specialty and care group management meetings:	Mark Scallan

Links to key external standards:	None required
Related Documents:	Flexible Working Home Working Policy
Training Need Identified?	No
Information Category	Detailed Information
Publication Location (refer to Policy on Policies – Approvals and Ratification):	Internet and Intranet
Document Library Folder/Sub Folder:	Estates and Facilities / Estates

Version Control Table

Date	Version Number	Summary of Changes	Changes Made by
11 Apr 2011	V1.0	New Policy - General Principles	Ian Rowland, Patient Facilities and Estates Division Project Manager
14 May 2011	V1.1	Changes post Site Utilisation Delivery Group actions	Ian Rowland, Patient Facilities and Estates Division Project Manager
25 Nov 11	V1.2	Amendments from TU Consultation	Ian Rowland, Patient Facilities and Estates Division Project Manager
22 Mar 12	V1.3	Final Amendments to reflect JLNC discussions	Ian Rowland, Patient Facilities and Estates Division Project Manager
18 Dec 14	V2.0	Policy revised and updated	Gill Pipkin, Site Utilisation Project Manager
Jan 2018	V3.0	Policy revised and updated to incorporate Global Location Numbering and Wayfinding	Phil Bond, Governance Lead

July 2022	V4.0	Policy revised and updated	Ian Rowland, Head of QI and PMO
-----------	------	----------------------------	---------------------------------------

All or part of this document can be released under the Freedom of Information Act 2000

This document is to be retained for 10 years from the date of expiry.

This document is only valid on the day of printing

Controlled Document

This document has been created following the Royal Cornwall Hospitals NHS Trust Policy for the Development and Management of Knowledge, Procedural and Web Documents (The Policy on Policies). It should not be altered in any way without the express permission of the author or their Line Manager.

UNDER REVIEW

Appendix 2. Equality Impact Assessment

Section 1: Equality Impact Assessment (EIA) Form

The EIA process allows the Trust to identify where a policy or service may have a negative impact on an individual or particular group of people.

For guidance please refer to the Equality Impact Assessment Policy (available from the document library) or contact the Equality, Diversity and Inclusion Team
rcht.inclusion@nhs.net

Information Category	Detailed Information
Name of the strategy / policy / proposal / service function to be assessed:	Accommodation and Site Utilisation Policy V4.0
Directorate and service area:	Corporate, Estates and Facilities
Is this a new or existing Policy?	Replaces the Management of Space and Change of Use Policy
Name of individual completing EIA (Should be completed by an individual with a good understanding of the Service/Policy):	Ian Rowland, Head of QI and PMO
Contact details:	ian.rowland@nhs.net

Information Category	Detailed Information
1. Policy Aim - Who is the Policy aimed at? (The Policy is the Strategy, Policy, Proposal or Service Change to be assessed)	The policy aims to provide a consistent and fair method for managing all physical space within the Trust; allocating and re-allocating space requirement according to organisational and business needs. This policy aims to use the physical estate more effectively; this will help ensure a primary focus on the creation, repair and maintenance of estate which is essential to the safe and efficient delivery of healthcare.
2. Policy Objectives	Establish a Functional group to implement the space utilisation policy ensuring that it is adhered to as a base line and then for all new/changed space requests going forward.
3. Policy Intended Outcomes	Consistent method for managing Trust space
4. How will you measure each outcome?	Process document within the Policy
5. Who is intended to benefit from the policy?	All Trust staff

Information Category	Detailed Information
6a. Who did you consult with? (Please select Yes or No for each category)	• Workforce: Yes • Patients/ visitors: No • Local groups/ system partners: No • External organisations: No • Other: No
6b. Please list the individuals/groups who have been consulted about this policy.	Please record specific names of individuals/ groups: Joint Consultative and Negotiating Committee
6c. What was the outcome of the consultation?	Approved
6d. Have you used any of the following to assist your assessment?	No

7. The Impact

Following consultation with key groups this policy does not have any impact on any protected characteristics.

Protected Characteristic	(Yes or No)	Rationale
Age	No	Decisions will be made in line with other current policies
Sex (male or female)	No	Decisions will be made in line with other current policies
Gender reassignment (Transgender, non-binary, gender fluid etc.)	No	Decisions will be made in line with other current policies
Race	No	Decisions will be made in line with other current policies
Disability (e.g. physical or cognitive impairment, mental health, long term conditions etc.)	No	Decisions will be made in line with other current policies

Religion or belief	No	Decisions will be made in line with other current policies
Marriage and civil partnership	No	Decisions will be made in line with other current policies
Protected Characteristic	(Yes or No)	Rationale
Pregnancy and maternity	No	Decisions will be made in line with other current policies
Sexual orientation (e.g. gay, straight, bisexual, lesbian etc.)	No	Decisions will be made in line with other current policies

A robust rationale must be in place for all protected characteristics. If a negative impact has been identified, please complete section 2. If no negative impact has been identified and if this is not a major service change, you can end the assessment here.

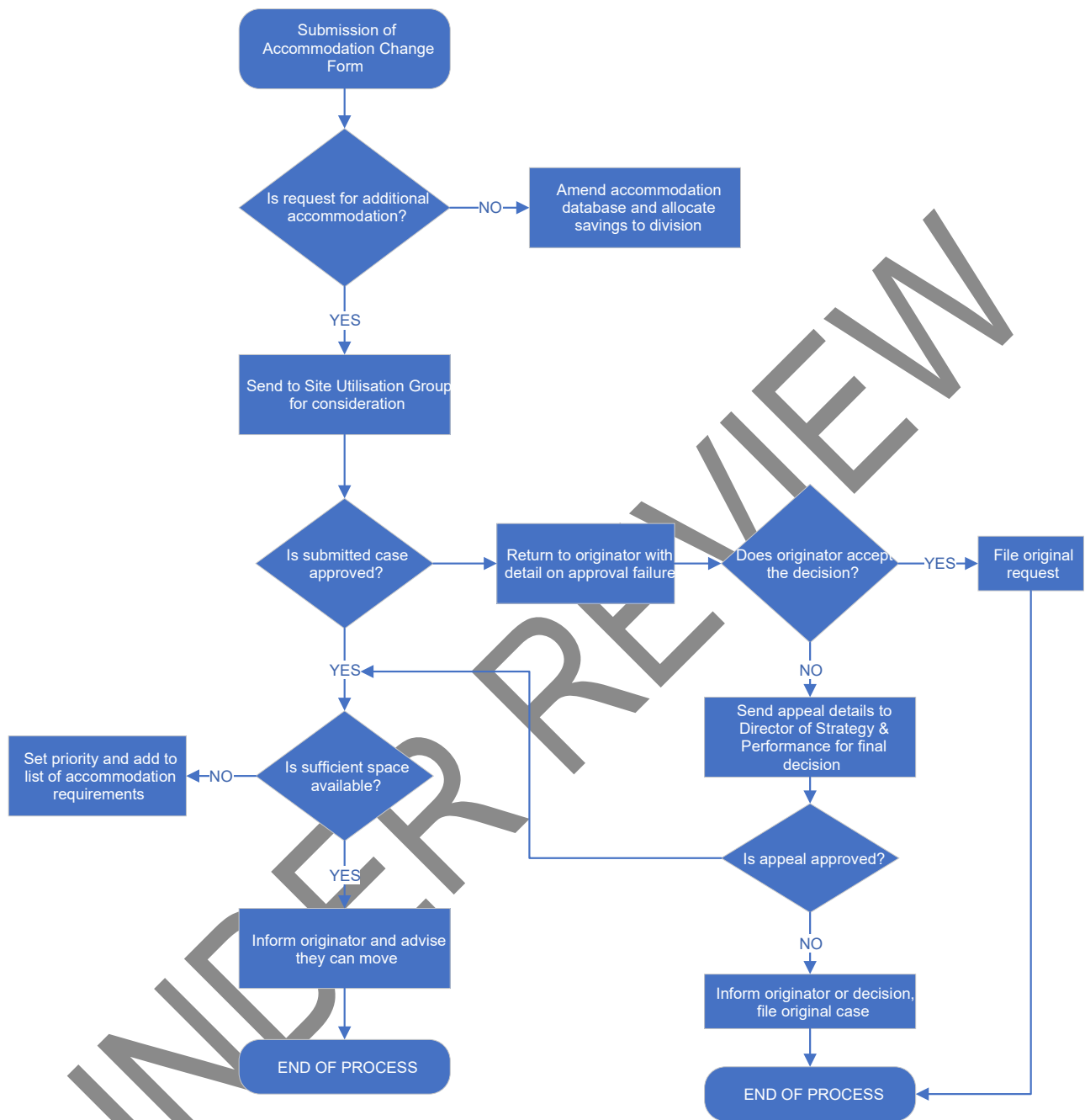
I am confident that section 2 of this EIA does not need completing as there are no highlighted risks of negative impact occurring because of this policy.

Name of person confirming result of initial impact assessment: **Ian Rowland**

If a negative impact has been identified above OR this is a major service change, you will need to complete section 2 of the EIA form available here:

[Section 2. Full Equality Analysis](#)

Appendix 3. Accommodation Request Process



Appendix 4. Site Utilisation Group – Terms of Reference

TERMS OF REFERENCE

Site Utilisation Group

CONSTITUTION

Purpose:

The group's aim is for every team within the Trust has appropriate space to meet their needs from a clinical, training, office, storage, and welfare perspective.

The Site Utilisation Group will consider all submitted applications for change of space usage or new accommodation requests. Decisions will be made after due consideration of all the issues arising from the request, and in accordance with Trust clinical and business priorities. Judgments will be based on the merits of the proposal / request in relation to the Trust Clinical Strategy; clinical and service operational priorities; fit with the Strategic Estates Master Plan and any capital / revenue requirements.

CONDUCT OF BUSINESS

Responsibilities:

The role of the group is to:

- Monitor site utilisation in line with the Site Utilisation Policy.
- Consider applications for change of space/ accommodation and decision on the way forward.

MEMBERSHIP AND QUORATE REQUIREMENTS

Core membership:

- Chief Strategy Officer (Chair)
- Head of Hospital Reconfiguration (Joint Deputy Chair)
- Deputy Director of Operational Estates (Joint Deputy Chair)
- Corporate Finance Manager
- People Partner
- Staff-side Representative
- Strategic Estates Communications and Stakeholder Engagement Lead

- Staff Accommodation Lead (Interim post)
- Senior Facilities Manager
- Head of Information Governance

Individuals will be invited as required dependent on requests.

Frequency:

- Meetings will be held on a bi-monthly basis.

Chairperson:

- Chief Strategy Officer

Secretary:

- Secretariat duties are to be undertaken by the Executive Assistant to the Chief Strategy and Performance Officer.

Attendance:

- If a Group member is unable to attend in person, it is expected that a suitable deputy will attend in their place.

Quorum:

- The group will be quorate when the following are present:
- **Chair/Deputy Chair**
- **SRMs or Deputy**
- **People Partner**
- **Staff-side Representative**

DUTIES**Strategic and Policy**

- Allocate accommodation in line with the Space Utilisation Policy and in support of the Trust strategy.

Implementation

- To make decisions in line with this policy and ensure best use of site utilisation.

Performance Monitoring

- Continue to monitor best use of the site in line with the strategy and this policy.

Review and Compliance

- Receive and review assurance against compliance with the policy.

Risk Management

- Review risks on current site utilisation and seek assurance on actions being taken to mitigate risk in line with risk management strategy.

ACCOUNTABILITY AND REPORTING ARRANGEMENTS

- ELT will receive reports for information and will make decisions on any major requests/moves where the SUG is not able to reach a decision with directly affected parties.
- Building Brilliance Board will be provided reports to ensure that any project dependencies are logged.

REVIEW ARRANGEMENTS

- The Terms of Reference will be reviewed annually from 12 months after initial ratification, or in response to legislative changes, national policy instruction, Trust Board decisions, or following specific requests by the JCNC.

SUB GROUP ARRANGEMENTS

- Staff Accommodation Group

LAST APPROVAL

DATE FOR REVIEW

05/10/2022

05/10/2023

UNDER REVIEW