

NHS Board  
25<sup>th</sup> November 2020

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**SUBJECT: Annual SCART Report 2020**

**1. PURPOSE**

This paper is coming to the NHS Board

For approval	<input checked="" type="checkbox"/>	For endorsement	<input type="checkbox"/>	To note	<input type="checkbox"/>
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This report has been prepared by the Director of Planning, Property and Performance.

The purpose of this paper is to report on the current position on Statutory Compliance as measured using the Statutory Compliance Audit & Risk Tool (SCART).

The purpose of SCART is to provide NHS Boards with a means of measuring their levels of compliance against a range of aspects of legal and best practice requirements/guidance in relation to hard FM (Building Facilities Management).

This will allow identification of areas of risk and thus allow a prioritised, focused approach to be taken to address areas of low compliance. Action plans, including training and investment priorities, can then be made.

**2. ROUTE TO THE NHS BOARD**

This paper has been:

Prepared	<input type="checkbox"/>	Reviewed	<input type="checkbox"/>	Endorsed	<input checked="" type="checkbox"/>
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By the Corporate Management Team and by the Area Partnership Forum.

**3. SUMMARY OF KEY ISSUES**

SCART was developed in 2009 by Health Facilities Scotland (HFS) to allow NHS Boards to monitor levels of compliance against existing legal requirements, codes of practice and current Scottish Health Technical Memoranda (SHTM) guidance for property and equipment assets. It is a structured form of technical audit against statutory and material guidance in relation to the maintenance of healthcare premises in Scotland.

Following review in 2014, to include an additional 7 topics, the total number of questions for NHS Lanarkshire is over 28,000 from the current 57 sites, with over 2000 audit reports to be populated within the SCART system, this includes 3 PFI and 3 Hub sites.

Question sets, answers and evidence are recorded securely on-line using the SCART reporting tool, which is used by all Scottish Boards.

NHS Lanarkshire's compliance level for the new combined SCART currently sits at 96.58%. This performance is an improvement on the 2019 compliance rating of 94.8% and is significantly above the National Average of 62.33 %.

The SCART manager is working through the 5 year audit work plan that was produced in 2018 based on risk, and is also working through the remaining unanswered technical questions introduced in SCART 2.

HFS set a target for boards to achieve 95% compliance by 2020, recognising that 100% will never be attainable due to older buildings limitations in being able to comply with today's standards, this target has been achieved by NHS Lanarkshire.

From the 510 questions over the 39 Topics, there were 6 unanswered technical questions reported in the 2019 report. In 2020 this has been reduced to 3, with the following Average Risk Ratings:

- 0 High Risk
- 3 Medium Risk
- 0 Low Risk

For each identified matter of non or partial compliance identified by a SCART audit, an Action For Improvement (AFI) is raised and then closed once addressed. There are currently 3 SCART questions in the process of being addressed through ongoing discussions with Maintenance Managers, direct instruction to the Head of Maintenance or are on the Audit Programme for future scrutiny.

During the reporting period from October 2019 to September 2020 the numbers of AFI's has been reduced from 9 to 6. In this period, 4 AFI's were added to the 9 existing from previous reports, and during the year 7 were closed off leaving 6 that have ongoing actions, with 4 for Pressure Systems, having the same actions for 3 individual workshop areas and University Hospital Monklands, and the remaining 2 for Slips, Trips & Falls and Control of Contractors being NHS Lanarkshire wide.

All current AFI's are classified as Category 2 – Minor risk to Organisation.

The group should also be aware that HFS's built in Risk Ratings system, there are 5 SCART questions that remain High Risk, a reduction from 15 in 2019/20, and a substantial number that are assessed as Medium Risk, despite the fact that NHS Lanarkshire are 100% compliant in these questions and are unable to further lower the risk due to inherent risk factors.

As SCART is a dynamic reporting tool, the process of updating SCART remains ongoing. This is due to factors such as the demolition of redundant sites, lease termination, sites being sold, the occupation of new premises and investment in backlog maintenance.

There are currently 57 sites where NHS Lanarkshire has maintenance responsibilities being reported through SCART. This includes the 3 HUBCO Health Centres at Hunter,

Houldsworth and Kilsyth CHC's, plus PFI sites Wishaw, Hairmyres and Stonehouse. Croy Clinic is no longer reported on SCART as it is no longer in the NHS Lanarkshire estate.

Scores that determine risk ratings have been recorded for all questions on each site. The process of addressing any shortfalls will continue through the planned Audit procedure. Information for University Hospital Hairmyres and Stonehouse Hospital continue to be entered into SCART.

The 5 year SCART audit plan, with risk based inspection periods of between 2 and 5 years, continues to be followed by the SCART Manager, with findings reported regularly to the Property & Support Services Division (PSSD) Statutory Compliance Group. The programme is currently in year 3.

#### 4. STRATEGIC CONTEXT

This paper links to the following:

Corporate objectives	<input checked="" type="checkbox"/>	LDP	<input type="checkbox"/>	Government policy	<input type="checkbox"/>
Government directive	<input type="checkbox"/>	Statutory requirement	<input checked="" type="checkbox"/>	AHF/local policy	<input type="checkbox"/>
Urgent operational issue	<input type="checkbox"/>	Other	<input type="checkbox"/>		

#### 5. CONTRIBUTION TO QUALITY

This paper aligns to the following elements of safety and quality improvement:

##### *Three Quality Ambitions:*

Safe	X	Effective	X	Person Centred	X
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##### *Six Quality Outcomes:*

Everyone has the best start in life and is able to live longer healthier lives; (Effective)	<input type="checkbox"/>
People are able to live well at home or in the community; (Person Centred)	<input type="checkbox"/>
Everyone has a positive experience of healthcare; (Person Centred)	<input checked="" type="checkbox"/>
Staff feel supported and engaged; (Effective)	<input checked="" type="checkbox"/>
Healthcare is safe for every person, every time; (Safe)	<input checked="" type="checkbox"/>
Best use is made of available resources. (Effective)	<input checked="" type="checkbox"/>

#### 6. MEASURES FOR IMPROVEMENT

The tests of change have been designed to improve the safety of our sites and minimise inappropriate and unsafe parking.

#### 7. FINANCIAL IMPLICATIONS

There are no additional financial implications from this report.

## 8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS

SCART Audits undertaken consistently show that NHS Lanarkshire perform to a high level, this is reflected in the above average compliance level score of 96.58% compared to the national average of 62.33%. Furthermore, the SCART Audits show that the compliance tasks are being carried out, with most Audit reports highlighting administration issues only.

NHS Lanarkshire continue to be involved in the SCART Steering Group at HFS. PSSD have also developed a full Audit and Reporting structure around SCART. NHS Lanarkshire has been recognised at the HFS SCART Steering Group as a frontrunner in SCART nationally.

The proposed West of Scotland SCART peer support group has not yet been formed due to the challenges of COVID-19. Once formed, this group will be attended by the SCART Manager. Ongoing involvement with HFS and peer Boards will ensure that NHS Lanarkshire remains a frontrunner in the use and development of SCART nationally.

In NHS Lanarkshire, SCART has shown continued progress and performs consistently above the national average, having achieved the HFS 2020 target of 95%. As SCART is dependent on an audit process, there will be natural fluctuations in the scoring that may trend down as well as up.

The Board are asked to note that in order to maintain the current level of SCART performance, despite the challenges posed by Covid-19, the SCART audit Schedule must be maintained as much as possible, and there should be continued close working partnerships between the SCART Manager and those responsible for maintenance and compliance throughout NHS Lanarkshire.

### Note:

SCART auditing and reporting assesses compliance with systems and processes that ensure that NHS Lanarkshire provide statutory maintenance of all tagged hard FM assets. There is an ongoing review of mechanical and electrical asset inventory as part of a wider review of statutory compliance and associated maintenance planning. Historical assets that had not been identified for Planned Preventative Maintenance PPM have been identified. The SCART Manager will ensure when auditing, that additional tagged assets have been added to PPM and maintenance schedules, to ensure ongoing compliance.

## 9. FIT WITH BEST VALUE CRITERIA

This paper aligns to the following best value criteria:

Vision and leadership	<input type="checkbox"/>	Effective partnerships	<input type="checkbox"/>	Governance and accountability	<input checked="" type="checkbox"/>
Use of resources	<input checked="" type="checkbox"/>	Performance management	<input type="checkbox"/>	Equality	<input type="checkbox"/>
Sustainability	<input checked="" type="checkbox"/>				

**10. EQUALITY AND DIVERSITY IMPACT ASSESSMENT**

Has an E&D Impact Assessment has been completed?

Yes   
No

This is available if required.

**11. CONSULTATION AND ENGAGEMENT**

The report has been endorsed by the Corporate Management Team and by the Area Partnership Forum.

**12. ACTION FOR THE NHS BOARD**

The NHS Board are asked to:

Approve	<input checked="" type="checkbox"/>	Endorse	<input type="checkbox"/>	Identify further actions	<input type="checkbox"/>
Note	<input type="checkbox"/>	Accept the risk identified	<input checked="" type="checkbox"/>	Ask for a further report	

the SCART report.

**13. FURTHER INFORMATION**

For further information about any aspect of this paper, please contact;

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