



Manchester University
NHS Foundation Trust

ESTATE AND FACILITIES STRATEGY

2023-2028

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Document Control

Document Approval Log

Approval Body	Date Submitted	Date Approved
Estates Group Management Board	22 November 2022	24 November 2022
Trust Board	29 November 2022	12 December 2022

1.0 Executive Summary

I am very proud to see the development of the first Estate and Facilities (E&F) Strategy for Manchester University NHS Foundation Trust (MFT). The Trust has undergone significant growth and organisational change since 2017 and estates and facilities support to that growth and change is key in the long term success of MFT's strategic aims.

The aim of the strategy is to set the forward view for not only the MFT estate but for the digitisation of the estate and estates functions and future proofing our E&F activity via our Workforce Strategy. The MFT Green Plan is also woven into the E&F strategy to ensure that sustainability is a key priority of estates delivery. The Strategy has been developed to ensure we have an estate that is fit-for-purpose, digitally advanced, future-proofed, cost efficient and sustainable.

A well thought out E&F Strategy enables us to provide safe, secure, high-quality buildings which support current and future healthcare needs for the benefit our patients, visitors and, just as importantly, our staff. It will also then support clinical strategies of MFT and the wider Greater Manchester health economy.

Our Estates and Facilities team work hard to manage our properties and land in a safe,

effective and efficient way, delivering excellent services at all times. Although much of this work is carried out 'behind the scenes', it makes a vital contribution to making sure that all those who come into contact with the Trust have a good experience of our services and our people.

Our Strategy identifies the key deliverables we will aim to achieve.

These are:

- Modernising all our accommodation where possible
- Creating safe, secure and effective environments
- Improving the quality and clinical suitability of existing estate for patients and staff
- Improving the way all space is utilised
- Supporting health and wellbeing
- Investing in the E&F workforce to make it more agile in its approach
- Enhancing the digital solutions for E&F services
- Providing a high standard of compliant service across our estate
- Delivering our Green Plan towards Net Zero Carbon

Rob Jepson

Group Director of Estates and Facilities

2.0 Introduction and Trust Overview

All NHS Trusts have a statutory responsibility for the management of their assets, and in this regard, the development of a strategy for the operation of the estate is essential. It ensures in the long term that there are high quality, well located buildings, in the right condition to facilitate the delivery of excellent patient care.

The purpose of this document is to collaboratively develop an all-encompassing strategy which covers the expanded estate in full, setting it within the national and local context and pulling together a significant number of existing Manchester University NHS Foundation Trust (MFT) strategies together in a coherent plan.

This document starts by providing an overview of the Trust including the new context of the Integrated Care Board (ICB) as well as the Trust's own clinical service strategies. The strategy then considers the overall 'guiding principles' from an estate and facilities management perspective, setting out the 'cross cutting' themes which will inform our estate decision making process before then looking at each site in turn to explore the current development programme and future potential. Finally, it will consider our approach to the delivery of this strategy over the next 5 years.

2.1 Trust Overview



MFT is a large, multi-site organisation established on the 1st October 2017, following the merger of the former Central Manchester University Hospitals NHS Foundation Trust (CMFT) and the University Hospitals of South Manchester (UHSM).

The merger was the first phase of a plan agreed with commissioners to create a single hospital service for Manchester, the second phase was the incorporation of North Manchester General Hospital into the group on the 1st April 2021. We provide community and secondary care services to the populations of Manchester and Trafford, and specialist services to patients from Greater Manchester, the North West and the rest of the United Kingdom.

We comprise of ten hospitals plus the Manchester and Trafford Local Care Organisations (LCOs), and operate as a 'group' as shown below:



Manchester
Royal Infirmary
Secondary and
tertiary services



Manchester
Royal Eye
Hospital
Specialist eye
hospital



Saint Mary's
Hospital
Specialist
Women's
hospital and
genomics



Royal
Manchester
Children's
Hospital
Specialist
Children's
hospital



University
Dental Hospital
of Manchester
Specialist Dental
hospital



Wythenshawe
Hospital
Secondary and
tertiary services



Withington
Community
Hospital
Diagnostic
day-case and
community



Trafford
General
Hospital
Secondary care
services



Altrincham
Hospital
Diagnostic and
outpatient
services



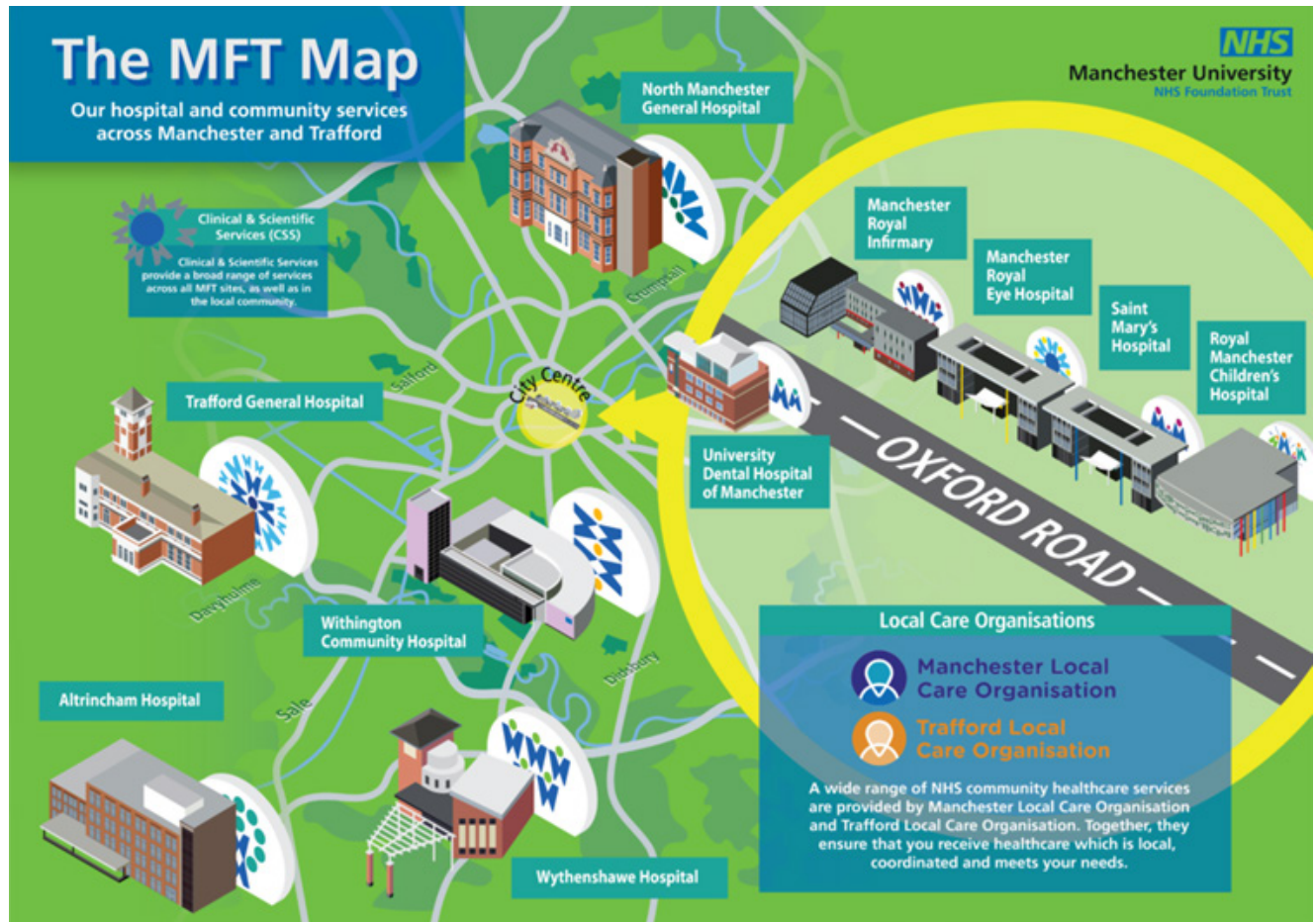
North
Manchester
General
Hospital
Secondary care
services



Manchester Local Care
Organisation



Trafford Local Care
Organisation



Greater Manchester Integrated Care Partnership



The Trust is part of the care system which works across Greater Manchester, led by the Greater Manchester Integrated Care Partnership (ICP), established in 2022.

The core purposes of the Greater Manchester ICP are to work across the ten local authority place-based partnerships to:

- Improve outcomes in population health and healthcare
- Tackle inequalities in outcomes, experience and access
- Enhance productivity and value for money
- Help the NHS support broader social and economic development

2.2 Vision and Values

The Trust has a clear vision supported by a set of strategic aims across the Group:

VISION	Our vision is to improve the health and quality of life of our diverse population by building an organisation that: Excels in quality safety, patient experience, research innovation and teaching
STRATEGIC AIMS	<ul style="list-style-type: none">• Attracts, develops and retains great people• Is recognised internationally as leading healthcare provider• To improve patient safety, clinical quality and outcomes• To improve the experience of patients, carers and their families• To develop our workforce enabling each member of staff to reach their full potential• To develop singe services that build on the best from across all our hospitals• To develop our research portfolio and deliver cutting edge care• To complete the creation of a Single Hospital Service for Manchester / MFT with minimal disruption whilst ensuring that the planned benefits are realised in a timely manner• To achieve financial sustainability

Our vision is underpinned by our values statement which is “**Together Care Matters**”, which informs the associated behaviours in the creation of compassionate, inclusive and high-quality care culture which we strive for at MFT. Our values can be broken down into the following areas:

EVERYONE MATTERS	WORKING TOGETHER	DIGNITY AND CARE	OPEN AND HONEST
<ul style="list-style-type: none"> • I listen and respect the views and opinions of others • I recognise that different people need different support and I accommodate their needs • I treat everyone fairly • I encourage everyone to share ideas and suggestions for improvements 	<ul style="list-style-type: none"> • I listen and value others views and opinions • We work together to overcome difficulties • I effectively communicate and share information with the team • I do everything I can to offer my colleagues the support they need 	<ul style="list-style-type: none"> • I treat others the way they would like to be treated – putting myself in their shoes • I show empathy by understanding the emotions, feelings and views of others • I demonstrate a genuine interest in my patients and the care they receive • I am polite, helpful, caring and kind 	<ul style="list-style-type: none"> • I admit when I have made a mistake, and learn from these • I feel I can speak out if standards are not being maintained or patient safety is compromised • I deal with people in a professional and honest manner • I share with colleagues and patients how decisions were made

We are one of the largest Acute Trusts in the UK, employing over 30,000 people (including NMGH) and treating over 2 million patients every year across our ten Hospitals.

We are the main provider of hospital care in Manchester and Trafford and provide hospital care to around 750,000 people every year. We are also the single biggest provider of specialised services in the North West of England and our scope of specialised services include: Cardiac, Breast Care, Paediatrics, Respiratory, Ophthalmology, Urology Cancer, Women’s Services, Genomic Medicine and Vascular.

The Population We Serve

We are responsible for the provision of local hospital and community services via the LCO to the populations of South, Central and North Manchester, and Trafford, covering a combined population of c.750,000 people. For our more specialist services, our reach extends across GM, regional and national populations.

Many of our secondary and tertiary services serve patients from across GM. For several tertiary services, such as cardiac surgery, we are the sole provider across the GM Health Economy. This covers a population of over 2.8 million and an area of approximately 25 miles square.

We employ over 30,000 staff members across our sites, who fulfil a wide variety of roles, clinical and non-clinical. Our workforce is continuously working hard to manage our estate and deliver safe and high-quality care for patients. They are integral to the design and delivery of the Trust's vision and our key driving force.

Staff are directly employed by MFT and encapsulate a range of roles and services such as clinicians, nurses, Clinical & Scientific Services, Research and back office staff.

Our workforce continues to expand as we integrate new sites and services in line with population growth and the growth of demand for our services year on year. The estate will need to be able to accommodate for this growth as this is something which is already causing significant pressures on our sites.

2.3 Trust Services

An important aspect of the single hospital service is that hospitals are managing services across sites. This means we should have regard to services across all sites, and not just on a site-by-site basis. In addition, a dedicated Managed Clinical Service for Clinical and Scientific Support Services has been established and operates across the Trust. This arrangement ensures consistency of clinical standards, guidelines and pathways across the breadth of the organisation.











MFT is also one of the major academic research centres and education providers in England.



Research and Innovation is at the heart of everything we do. It enables us to ensure that our patients have access to the latest high-quality care and clinical trials, to attract the best staff and in turn to deliver the best outcomes for patients. It also allows us to attract investment and develop relationships with industry to our mutual benefit.

The creation of MFT following the merger of CMFT and UHSM and the subsequent acquisition of NMGH has created some real opportunities to change the way that we deliver services across the City of Manchester and Trafford. These include:

- On-going care wherever you are treated
- High standards of services across all hospitals
- Teams working together
- Attracting and keeping the best staff
- More joined up patient records
- Less repetition and waste across sites

OPERATIONAL UNIT / MANAGED SERVICE		SERVICES (Hospitals will be managing services across sites)
	Clinical and Scientific Services (CSS)	Manage services including Anaesthesia, Critical Care, Laboratory Medicine, Imaging across multiple sites
	Manchester Royal Eye Hospital (MREH)	Adult and Paediatric Ophthalmology
	Royal Manchester Children's Hospital (RMCH)	Children's Services
	Saint Mary's Hospital (SMH)	Genomics, Gynaecology, Newborn Services, Obstetrics and the Sexual Assault Referral Centre
	University Dental Hospital of Manchester (UDH)	Dental Surgery and Oral Medicine
	Manchester Royal Infirmary (MRI)	Adult Medical & Surgical Services
	North Manchester General Hospital (NMGH)	Adult & Child Medical and Surgical Services
	WTWA Operational Unit: Wythenshawe Hospital, Trafford General Hospital, Withington Community Hospital and Altrincham Hospital	Adult Medical & Surgical Services
 	Local Care Organisation (LCO) Manchester LCO and Trafford LCO	

The formation of MFT provided a 'once in a life-time' opportunity to think about how we can reshape and develop our services to improve care for our patients and create rewarding roles for our staff. The first stage of this process was to develop a Group Service Strategy to set out our vision and a framework for how services should develop over the next 5 years, followed by the development of strategies for each of our clinical services.

2.4 Overview of Clinical Service Strategies

The Trust's overarching Service Strategy has been developed to align with our Trust vision and values and it provides a framework for the development of our more detailed clinical service strategies. The document must be considered in the context of other Trust strategies which collectively constitute our organisational strategy.

The service strategy draws insight from, and refers to, other areas within the organisation where these directly relate to and support our clinical services such as the following strategies; Clinical Service, Research & Innovation and Education & Training strategy, which is underpinned by our Workforce, OD, Estates, IM&T and Finance strategies.

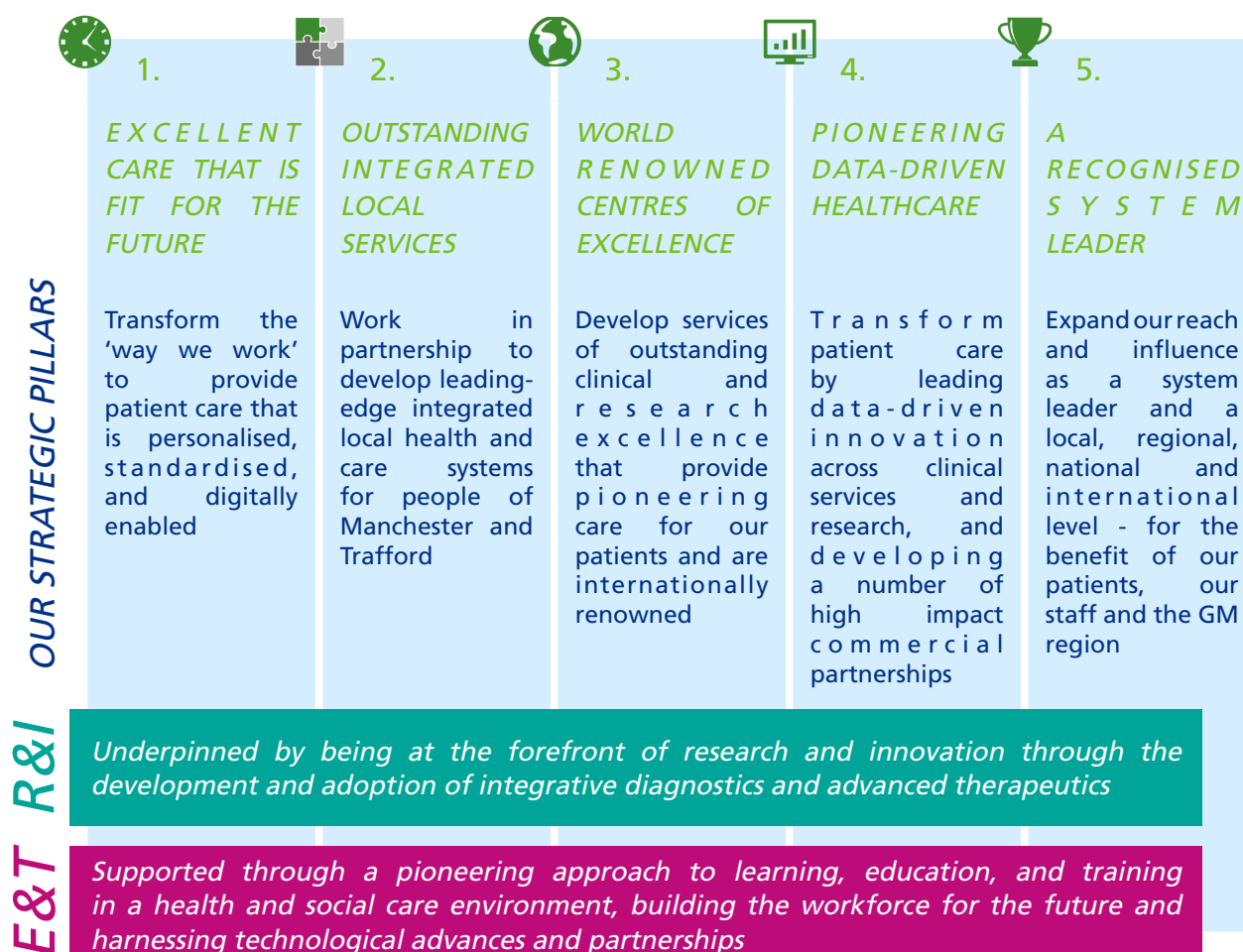
The diagram shows the five key areas that form the pillars of our Group Service Strategy. Each pillar highlights what we want to accomplish and our plan to achieve it:

OUR VISION

To excel in quality, safety, patient experience, research, innovation and teaching

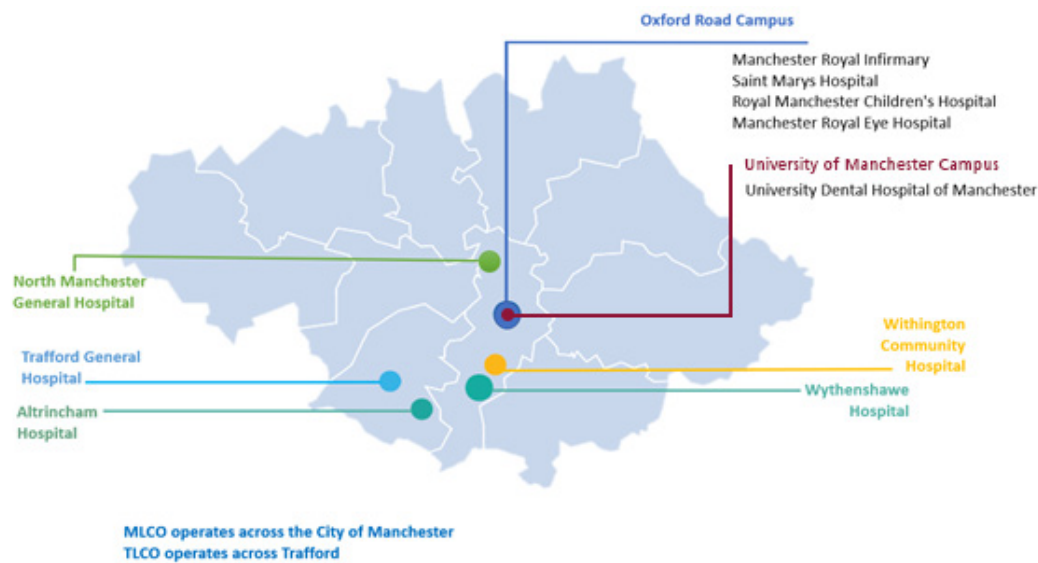
To attract, develop and retain great people

To be recognised internationally as a leading healthcare provider



2.5 Trust Estate Overview

The ten hospital sites and their location across Manchester and Trafford can be seen in the map of Greater Manchester below, with MLCO operating across the City of Manchester and TLCO operating across Trafford.

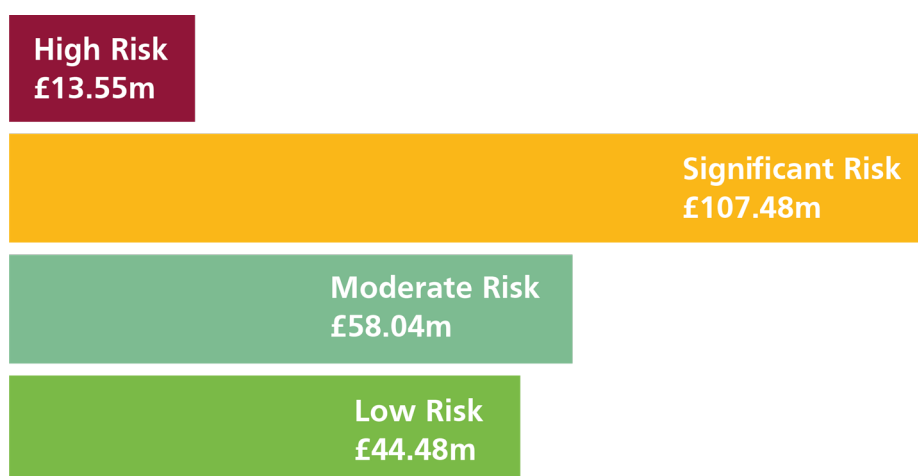


Similarly, to other Trusts nationwide, the age profile of MFT’s estate is varied and spans more than a century. As a proportion of our total GIA, 12% of our estate dates back to pre-1948 (before the formation of the NHS). In addition, about 60% of our estate has been built since 1995.

The graph below represents the overall age profile of the Trust’s estate.



As an organisation over our whole portfolio we require over £211m of investment to address backlog maintenance as reported in the ERIC data returns. Whilst high-risk figures present only 6.5% of the overall sum, this still poses potential risks to patients and NHS staff alike and dealing with the challenge to eradicate the backlog need to remain at the forefront of any future estate strategies.



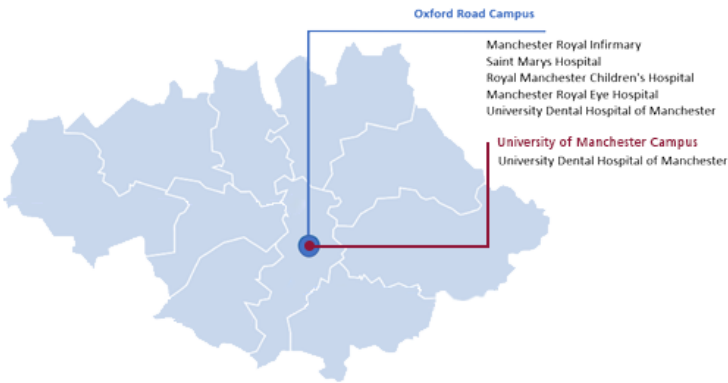
2.6 The Trust Sites: Key Facts

Oxford Road Campus

The Oxford Road Campus (ORC) is home to the Manchester Royal Infirmary (MRI), Saint Mary's Hospital (SMH), Royal Manchester Children's Hospital (RMCH), University Dental Hospital of Manchester and Manchester Royal Eye Hospital (MREH). A major redevelopment of the ORC was completed in 2009 which was the culmination of a four year programme of work broken into phases which saw circa £500m of investment through a PFI arrangement into the estate providing new homes for MRI, MREH, RMCH and SMH.

MFT has one of the largest laboratories in the United Kingdom, performing more than 21 million tests each year across three sites, one of which is the Clinical Services Building located at ORC. Our wide range of tests and our ability to perform specialist testing make us a pathology one-stop shop.

Some of the services we provide are not found anywhere else in the UK and we are able to perform this specialist testing because of the expertise of our staff, many of whom are leaders in their fields and sit on national and international panels and boards. As a result we are able to provide a full interpretative service, with access to that expert advice.



KEY FACTS ABOUT THE CAMPUS		
The largest hospital site in North West	Backlog (2022 return)	
292,119m² Gross internal floor area c. 19% non-PFI (Trust Retained)	Low	£11,862,088
	Moderate	£9,045,428
5% of the floor area is empty or underused	Significant	£7,378,868
	High	£0
89% of the estate was built between 1995 - 2004	Total	£28,286,384

Manchester Royal Infirmary

Secondary and tertiary services



MRI has been providing care for over 250 years, having been founded, with just 12 beds in 1752. It has become the city's largest general hospital, providing an extensive range of specialist services including the Heart Centre, which is a major provider of cardiac services in the region, specialising in cardiothoracic surgery and cardiology.

It works in an integrated way with other hospitals/MCSs in the MFT Group, and is a significant hospital in its own right, with 762 inpatient/day case beds over 35 wards, 54 critical care beds, 18 operating theatres and 4 (will reduce to 3 in the coming year) catheter labs, and providing 140,000 A&E attendances, over 310,000 outpatient attendances and over 80,000 inpatients/day cases per year.

The facilities are a mixture of 1980s development and more recent expansions. The emergency department, outpatient department and most of the wards date from the 1990s. The PFI accommodation from 2009 contains certain specialised wards and departments such as Manchester Heart Centre, renal and haematology/BMTU. The rehabilitation unit (Patrick Cryne) has also been recently developed.

The MRI has grown to become a major research and teaching hospital working with Manchester University's Medical School and a regional and national centre for services as diverse as renal medicine, kidney and pancreas transplants, haematology/bone marrow transplant, vascular, major trauma, liver and pancreas surgery, rheumatology and sexual health/HIV care.



Saint Mary's Hospital *Specialist women's hospital and genomics*



Saint Mary's Hospital was founded in 1790 and, over the years, has successfully developed a wide range of world class medical services for women, babies, and children as well as a comprehensive Genomics Centre and an internationally recognised teaching and research portfolio. The team provide the highest standards of care for patients and their families from the North West and beyond.

Each year the team at Saint Mary's delivers over 13,000 babies, undertake 1,400 surgical procedures, provide care for 2,600 sick new born babes and support 120,000 outpatient and antenatal appointments. Our leading-edge services are tailored to meet the needs of the local population but also those referred to the Hospital with complex medical conditions from Greater Manchester, the North West and beyond.

Saint Mary's has over 2,000 staff members including doctors, nurses, midwives, scientists, clinical and non-clinical support staff, working across maternity, gynaecology and neonatal at three main locations, enabling care to be provided at more suitable locations.

As a teaching hospital, Saint Mary's is committed to the teaching of medical staff and has close links with the University of Manchester Medical School.

The Old Saint Mary's building on Oxford Road houses the Trust's Department of Reproductive Medicine, established in 1982 and was the first fully-NHS funded IVF unit in the UK.

Each year the Department provides around 1,200 cycles of in vitro fertilisation (IVF) treatment, 500 cycles of frozen embryo replacement (FER), 100 cycles of insemination with partner or donor sperm (IUI) and 200 fertility preservation procedures for males and females.

The Department also contains our Andrology laboratory, which provides diagnostic clinical pathology services, one of the largest long-term sperm banks for cancer patients in the UK, and also houses the UK's national external quality assurance for Reproductive Science (UK NEQAS RS).



Royal Manchester Children Hospital *Specialist children's hospital*



Royal Manchester Children's Hospital (RMCH) can trace its foundations back to 1829. Until relatively recently, their services were provided in three different hospitals across the city: Saint Mary's, Pendlebury & Booth Hall. In 2009 the hospitals merged and moved into a brand new, state of the art hospital, alongside the other Manchester University Hospitals on Oxford Road, creating the largest single-site children's hospital in the UK.

The new hospital has 371 beds, with an additional 60 neonatal cots, providing specialist healthcare services for children and young people throughout the North West, as well nationally and internationally. This provides the opportunity to deliver integrated services for families, from prenatal care through birth and beyond.

The hospital sees around 185,000 patients each year across a range of specialist including oncology, haematology, bone marrow transplant, burns, genetics and orthopaedics.

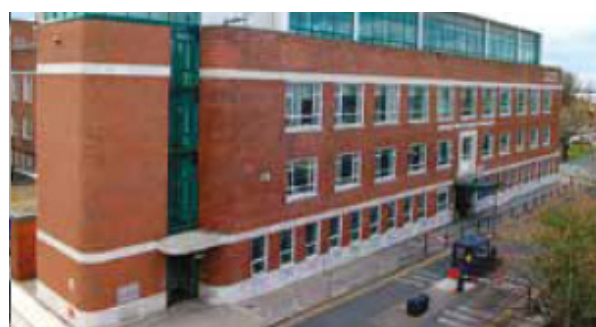


University Dental Hospital of Manchester *Specialist dental hospital*



The University Dental Hospital of Manchester is one of the major teaching hospitals in the UK, undertaking the training of postgraduate and undergraduate dental students, student dental nurses and hygienist therapists. In all, a dental team of approximately 300 staff work in the hospital, attending to more than 90,000 patients every year.

The hospital provides specialist treatment and the highest standards of care for patients of Greater Manchester in several areas including oral and maxillofacial specialities, restorative dentistry, and child dental health, including teaching and training for dental and oral healthcare students and organises and produces high quality research.





Manchester Royal Eye hospital *Specialist eye hospital*

Manchester Royal Eye Hospital has provided world class ophthalmic care to the people of Manchester, the surrounding region, and UK since its inception in 1814. It is one of the largest eye teaching hospitals in Europe.

The hospital is designed to provide a wide range of eye services for both adults and children, through a variety of outpatient services, regular treatments, and care for inpatients, which are carried out by consultant surgeons who are leaders in their respective fields of ophthalmology. The facilities and services include the Emergency Eye Centre, Acute Referral Centre, Ophthalmic Imaging, Ultrasound Unit, Electrodagnosis, Laser Unit, Optometry, Orthoptics, the state of the art Manchester Eye Bank and Ocular Prosthetics.

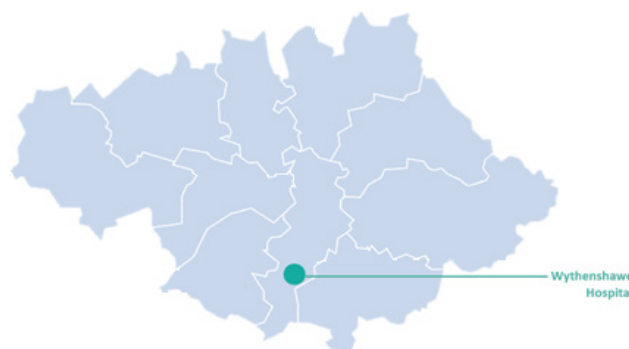


Wythenshawe Hospital



Wythenshawe Hospital is a major acute teaching hospital located in South Manchester. It is recognised as a centre of clinical excellence, providing district general hospital services and specialist tertiary services to the local community and beyond.

The hospital's field of specialist expertise include, cardiology and cardiothoracic surgery, heart and lung transplantation, respiratory conditions, burns and plastics, cancer, and breast care services. The hospital is recognised in the region and nationally for the quality of teaching, research, and development. Their major research programmes focus on clinical and academic strengths in cancer, lung disease, cardiovascular, wound management, and medical education.



KEY FACTS ABOUT WYTHENSHAWE HOSPITAL

The second largest acute hospital in Greater Manchester	Backlog (2022 return) - Wythenshawe, Withington, & Altrincham	
Gross internal area of 148,664 m ² c. 77% non-PFI (Trust Retained)	Low	£7,966,942
Site area of 28ha	Moderate	£14,003,801
55% built between 1955 & 2004 8% developed pre-NHS (1948)	Significant	£12,495,255
	High	£0
	Total	£34,465,998

Withington Community Hospital



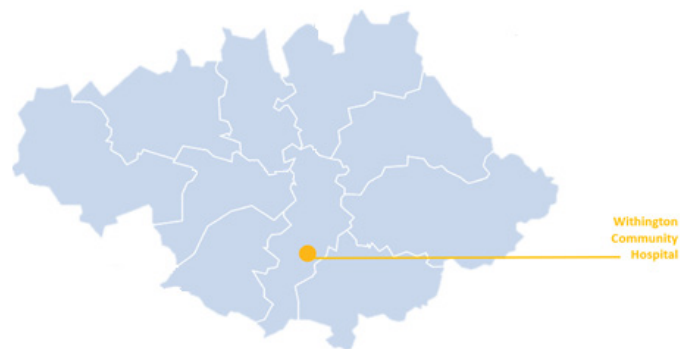
Withington Community Hospital is in West Didsbury, South Manchester and provides specialist care to patients requiring diagnostic treatment, day surgery and community services via the main hospital, Buccleuch Lodge and Dermott Murphy Centre.

The original hospital was once the largest teaching hospital in Europe due to its affiliation with The University of Manchester. Following a decision in the late 1980s to have only one hospital serving South Manchester, many services were transferred to Wythenshawe Hospital and the old hospital was demolished and rebuilt as a treatment and diagnostic centre. The new hospital on the current site was officially opened by Princess Anne in September 2005.

We currently have approximately 350 full time staff and see around 155,000 patients in our clinics and departments every year. Our main specialisms include dermatology, urology, audiology, ear nose throat (ENT) and therapies.

We also host services from other NHS hospitals and partners. We have one theatre and a large Outpatients Department.

Both sites, Buccleuch Lodge and Dermott Murphy Centre, operate from older estates built in the 1970s. Although this is not uncommon across the NHS, the age of Withington Community Hospital's sites is the oldest across the MFT portfolio.



KEY FACTS ABOUT WITHINGTON COMMUNITY HOSPITAL

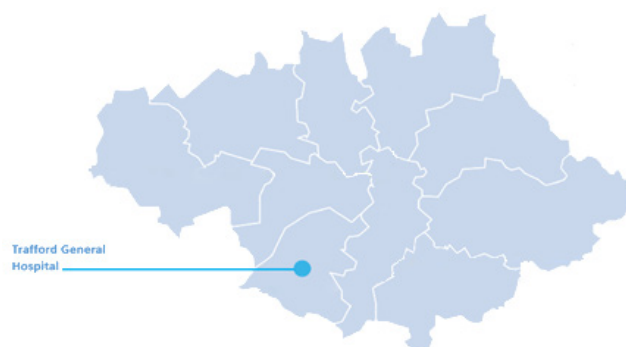
Gross internal floor area of 8,223m ² (Hospital)	Backlog (2022 return)	
Site area of 42,500m ²	Low	£647,594
	Moderate	£378,494
Total to backlog for Withington Community Hospital is £1m with £380k for significant risk items.	Significant	£0
	High	£0
	Total	£1,026,088

Trafford General Hospital



Trafford General Hospital was opened in 1948 by Aneurin Bevan and is the birthplace of the NHS. The Hospital has approximately 230 inpatient beds, providing a range of services to patients in its community, including general and specialist medicine, general and specialist surgery, a paediatric hospital service for children and young people, cardiology, elderly care, dermatology, and rheumatology. The Hospital employs around 1,352 staff, which serve a population of approximately 226,600 people located in the surrounding area of Trafford, Altrincham, and GM.

There is an Urgent Care Centre (UCC), providing treatment for adults and children who have a need for care that is none life-threatening. The centre can be visited for the treatment of a wider range of conditions from minor injuries and illnesses to suspected fractures and wounds.



KEY FACTS ABOUT TRAFFORD GENERAL HOSPITAL

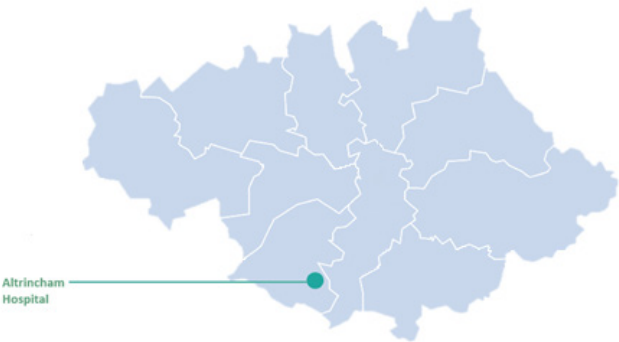
Gross internal floor area of 47,411 m ²	Backlog (2022 return)	
29% of the estate was built between 1985 & 1994	Low	£5,191,109
	Moderate	£5,253,750
Only 2.2% built since 2005, therefore, a relatively aged estate	Significant	£8,606,250
	High	£0
Total to eradicate backlog is £19.1m with £8.6m for significant risk items.	Total	£19,051,109

Altrincham Hospital



Altrincham Hospital opened in 2015 and is a purpose-built facility providing a high quality, modern, user-friendly environment for patients and staff and a range of general and specialist outpatient and diagnostic services. Altrincham Hospital is situated in the borough of Altrincham and serves a population of approximately 226,600 people residing in the surrounding area of Trafford, Altrincham, and GM. The hospital has no overnight stay beds.

The hospital services including a minor injuries facility, renal dialysis unit and outpatient services to both adults and children.



KEY FACTS ABOUT ALTRINCHAM HOSPITAL

Gross internal floor area of 10,831 m²	Backlog (2022 return)	
Purpose-built facility opened in 2015	Low	£125,000
	Moderate	£0
	Significant	£0
	High	£0
Total to eradicate backlog for Altrincham Hospital is £125k with £125m for low risk items.	Total	£125,000

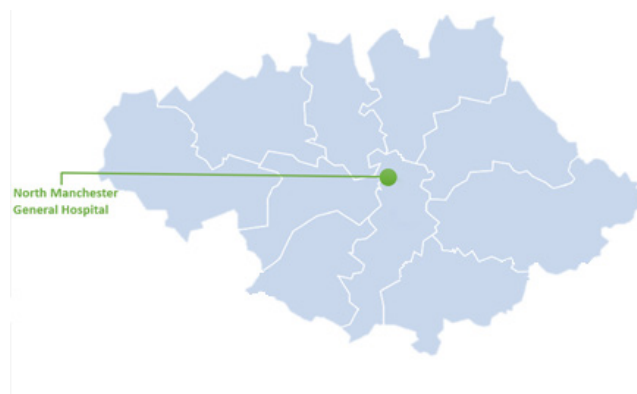
North Manchester General Hospital



NMGH was acquired by the Trust on the 1st April 2021 and is located to the north of Manchester City Centre. NMGH was built as a workhouse in the 1800s, over 150 years ago and comprises of 27 hectares of land. The hospital was formed in 1975 through an amalgamation of Crumpsall Hospital, Springfield Hospital and Delaunays Hospital.

The hospital employs around 2,000 staff members, providing a full range of general and acute surgical services, including an accident and emergency department and a specialist infection disease unit. The site has also recently developed the neonatal, maternity, and labour and children's wards, as well as its intermediate care facilities.

NMGH experiences day-to-day challenges in its operation due to the age of the large majority of the estate. The urgent need for substantial investment has been recognised in the government's New Hospital Programme and £70m of funding has already been approved to begin the required decants, demolitions and enabling works in readiness for the delivery of the new NMGH masterplan proposals as set out in more detail in Section 5.



KEY FACTS ABOUT NORTH MANCHESTER GENERAL HOSPITAL

Gross internal floor area of 62,489 m ² (utilised)	Backlog (2022 return)	
27 hectare site	Low	£18,682,539
33% of the estate built before 1948, with piecemeal developments thereafter	Moderate	£29,364,544
26% created between 1985 & 1994	Significant	£79,007,592
Total to eradicate backlog is £127m with £13.55m for high risk and £18.68m for significant risk	High	£13,550,000
	Total	£127,054,675

2.7 Corporate Estate

The COVID-19 pandemic has caused seismic shifts in how we work. In April 2020, 46.6% of people in employment in the UK incorporated elements of home working into their jobs (ONS website).

Traditional office working became impossible overnight and thousands of our office-based teams had to urgently rethink their day-to-day working arrangements. Whilst the pandemic created wholesale operational challenges for our teams across the Trust, the opportunities afforded by existing technology meant that we were able to maintain services across the board.

The NHS People Plan reports that the average number of weekday remote meetings rose from 13,500 to over 90,000 meetings per week in the first 8 weeks of lockdown. 'Many colleagues across the NHS have noted that this has been more productive, with less time spent travelling (with the additional benefit of reduced air pollution) and better turnout at meetings, as well as improved work-life balance' We Are The NHS People Plan 2020/21 (p10).

The Trust is committed to taking forward the lessons learned from the pandemic to embed and enable smarter, more flexible working arrangements in the future. Creating opportunities for our staff to work flexibly is an important part of creating a modern, appealing environment which supports and retains a diverse workforce.

With alignment to the Trust's digital and People Plan objectives, we will strive to continue to provide:

- Flexible, well-utilised and cost-effective office estate
- Office layouts that support smarter working practices and collaboration through open plan environments
- Offices and meeting spaces that are digitally enabled
- Effective utilisation of the office estate across the MFT Group including provision of 'hot desking' at each site to increase flexibility

2.8 Community Portfolio

The community and off campus portfolio encapsulate the LCO and the wider estate which supports these services and the Trust. The community portfolio covers the health and social care services delivered to Central, North and South Manchester and Trafford in a wide range of properties.

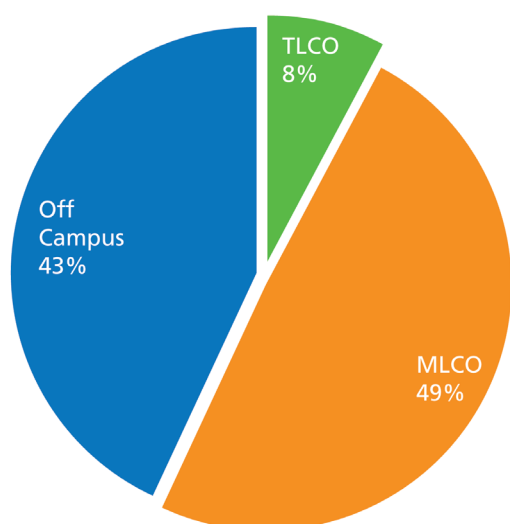
The MLCO and Trafford TLCO bring together a wide range of community health, mental health and social care services in and around the city. They are the largest integrated health and social care workforce under one organisation and offer an extensive range of NHS community roles for children's and adults, such as Health Visiting, Community Therapy services, Intermediate Care, School Nursing, Community and District Nursing and Allied Health Professionals. Their services are delivered in patient's homes, health clinics, and GP surgeries to ensure the healthcare received is coordinated and meets patients' needs.

The community teams are made up of around 3000 employees from community nurses, physiotherapists, occupational therapists, speech, and language therapists and many more roles.

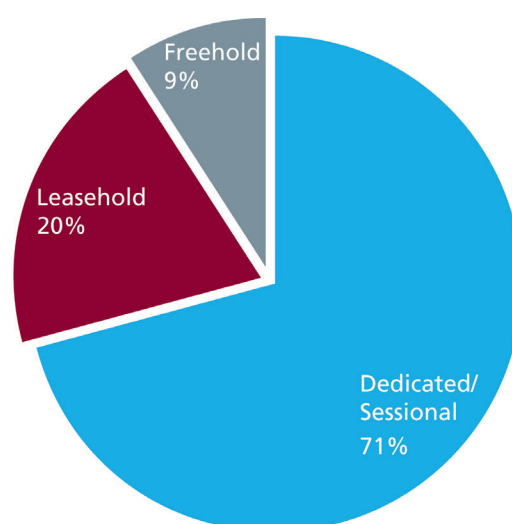
In addition to the above, there are a range of supplementary services and properties owned or leased by the Trust to support the delivery of these and other services by the Trust. They are referred to as the Off Campus Portfolio. Some of these services include IT, medical record storage, office accommodation, car parks, lab and retail space.

In addition to the above, there are a range of supplementary services and properties owned or leased by the Trust to support the delivery of these and other wider services. They are referred to as the Off Campus Portfolio. Some of these services include IT, medical record storage, office accommodation, car parks, lab and retail space.

The diagrams below show the breakdown of the community portfolio, in terms of service delivery and the tenure of the estate.



Community Portfolio



Tenure

2.9 Recent Estate Development

The Trust has achieved a significant amount over the past years and delivered on all the planned projects from the previous Estate Strategy:

Space Utilisation – Bed Capacity reviews were undertaken at regular intervals to identify Clinical Service Units with pressure and those with spare bed capacity.

PFI Life Cycle/Health & Safety and Environment Improvements – The PFI have delivered on their annual and five-year scheduled programme of maintenance that includes life-cycle backlog in order to maintain the PFI estate in good condition and in line with this the Trust have been addressing any condition and compliance issues in the remainder of the estate.

Estates Priorities – Significant developments were undertaken to meet the key objectives stated in the previous Estate Strategy:

- **Group**
 - Implementation of Project Digital to upgrade the ICT system and Electronic Patient Records (HIVE EPR)
- **Oxford Road Campus**
 - Site-wide
 - Electrical Infrastructure network improvements and resilience (c£6m)
 - Extension to Grafton Street Multi-storey car park (c£10m)
 - Refurbishment of Cobbett House to provide additional office space (c£2m)
 - Extension of the Oxford Road Campus Mortuary, to provide additional facilities (c£3m)
 - Demolition of dilapidated sections of Old Saint Mary's Hospital to enable Citylabs development, parking and public realm improvements. (c£1m)
 - ORC Helipad, charitable-led programme of work; following a £3.9m appeal. It is expected to see an estimated 312 patients airlifted to the site each year. (c£7.7m)
 - Healthier Together. Part of the five-year vision for GM, as articulated in the 'Taking Charge Together'. The programme aims to improve the variation and outcomes for general surgery, acute and emergency services. (c£10.3m)
 - LIME Arts reprovision, charitable-led refurbishment in the Peter Mount Building. Scope included provisions for staff health and wellbeing enhancements (c£350k)

- **Manchester Royal Infirmary (MRi)**

- Creation of 2No hybrid Theatres (c£7m)
- Refurbishment and expansion of Critical care unit (c£22m)
- Refurbishment of oncology centre (c£2.3m), wards (c£various), A&E (c£0.8m), Main Entrance & Outpatients (c£0.8m)
- Peter Mount Building (former Edale House) - Redeveloped to accommodate the Head and Neck Centre (c£3.2m), Manchester Ward (c£2m), Endocrine and Diabetes Centre (c£2.8m)
- Royal Manchester Children's Hospital
- Project PED Phase 1 – expansion of Paediatric Emergency Department (c£5.2m)
- Royal Eye Hospital (REH) and University Dental Hospital of Manchester (UDH)
- UDH infrastructure upgrades (c£2m)
- Saint Mary's Hospital
- Public realm and Outpatients improvements (c£0.8m)
- Citylabs 1.0 & 2.0
- Developed to accommodate laboratory and other research facilities (£varies)

- **Wythenshawe**

- Electrical Infrastructure network improvements and resilience (c£3m)
- Expansion of Emergency Department (c£17m)
- Creation of 1No hybrid Theatre (c£4m)
- Creation of a new theatre block above the recently completed ED, providing 3No new theatres and 6-bed recovery unit, linked to the existing Acute theatre block. (£10.1m)

- **Trafford**

- Electrical Infrastructure network improvements and resilience (c£3m)
- Development of a new orthopaedic centre (c£3.8m)
- Refurbishment of out-patient facilities (c£2.5m)
- Increase in provision of day surgery (c£3m)
- Continuing provision of services for the frail elderly and rehabilitation services (c£2.8m)
- Implementation of high dependency and special care facilities and Urgent Care Centre (c£3m)

3.0 Estates & Facilities Strategy

Our strategy will need to respond to a range of strategic drivers both national and local over the next 5 years. This section describes the context of these National, Local and Trust strategic priorities that guide and support the service and system changes in Manchester and Trafford to enable the transformation of the system in order to improve patient outcomes.

There is widespread recognition that the NHS has been under sustained pressure for several years. Although healthcare spending has been protected relative to other public services there are concerns that increasing demand for services, coupled with rising costs, threaten the stability and sustainability of the NHS and the services it provides.

3.1 Policies and Strategic Drivers

As an organisation we are influenced by a number of drivers, caused by a combination of external and internal factors, many of which are common to providers across the NHS.

Growing Demand & Post-Pandemic Factors

Patient volumes and overall workload are increasing faster than population growth. This is driven by increased treatment demand, an ageing population, and the rising risk of long-term conditions. The pandemic has also led to increased backlogs for non urgent elective procedures.



National & Local Policy

The NHS Long Term Plan was published in 2019, setting the direction for the next 10 years. Integrated care systems (ICS), with a clear direction of travel towards increasing provider collaboration have now been formalised. The Greater Manchester 'Taking Charge' Plan sets out our collective priorities.



Workforce

Pressure on the NHS workforce is increasing there are significant pressure in recruiting and retaining of suitable high quality. The Trust's Estates and Facilities 2,000 strong workforce includes directly employed staff and those employed through our partners.



Financial Pressure

NHS providers face significant financial challenges; demand forecast to outstrip growth in real-term fundings and pressure on Local Authorities also impacts on social care and public health spending in Manchester and Trafford.



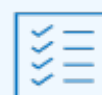
Data and Digital

Continued national agenda to advance digitisation and data-driven services across the NHS. MFT will introduce an Electronic Patient Record system across the group via HIVE in 2022 which will fundamentally change the way the Trust operates.



Safety & Compliance

The Trust must comply with national legislation and guidance on Safety & Compliance including HSE, CQC and DoH HTM's and HBN's.



Estates and Facilities Division has a robust governance structure in place, to support the wider MFT governance structure, to ensure safety and compliance issues are identified, assessed and actioned upon.

Technological Development

Technology is changing the way we provide care and treatment both now and in the future to improve patient outcomes and efficiency. Including development in equipment and also supporting systems such as artificial intelligence.



Local Demographics

We provide service to an incredibly diverse population many of whom live in income-deprived households with poor levels of life expectancy, and the likelihood of suffering from chronic illness.



3.2 Strategy Suite

The Estates & Facilities Strategy forms part of a suite of Trust documents which set the wider context or provide further detail for specific aspects of the strategy:

- The MFT Vision & Values, Clinical Strategy and Workforce Strategy provide Trust, Group wide context
- The Code Green Plan (2022)
- The E&F Workforce Strategy (2022)
- The North Manchester Strategic Regeneration Framework (2021)
- The Wythenshawe Campus Strategic Regeneration Framework (2021)



3.3 Estates & Facilities Guiding Principles

Our estate will need to support the delivery of the organisational ambitions to provide clinical excellence to our patients whilst also improving efficiency by enabling our staff to deliver services in high-quality fit-for-purpose buildings.

The demands on the healthcare estate are increasing and ever evolving and it critical to the quality of patient care that the estate is able to flex and respond to challenging backdrop of change. It is clear that flexibility, adaptability and future proofing will have to be embedded into our strategy.

This strategy has been developed to underpin the Trust's vision:

To improve the health and quality of life for our diverse population by building an organisation that:

- Excels in quality, safety, patient experience, research, innovation and teaching
- Attracts, develops and retains great staff
- Is recognised internationally as a leading healthcare provider

The strategy will support the organisation to deliver this vision from an estates and facilities perspective by articulating the delivery of:

- A flexible and responsive estate, able to deliver against service delivery strategies
- Operational excellence for delivery of Facilities Management (FM) services at each site, regardless of delivery model
- Excellence in capital delivery across all sites, regardless of delivery model
- Excellence in contract management, with a specific focus on management of the two private finance initiatives (PFI) contracts
- Ensuring staff are able to develop their skills and capability and have appropriate career development opportunities

The Trust has developed six themes for the maintenance and development of the estate which will guide plans for the coming years:



Delivering Compliance, Safety and Efficiency



Developing a Flexible, Digitally Enabled Estate



Maintaining a Sustainable and Accessible Estate



Prioritising Patient Experience



Maximising Partnership Opportunities



Supporting a Diverse Workforce

3.4 Delivering Compliance, Safety & Efficiency to Support Clinical Services

To facilitate compliance with external legislation, national guidance and internal Trust policies, the Estates and Facilities Division has adopted, but is not limited to, the following guidance:

- The NHS Premises Assurance Model (PAM): designed to provide assurance for the healthcare environment, and to ensure patients, staff and visitors are protected against risks associated with hazards such as unsafe premises.
- HTM 00 and the series of Health Technical Memorandum (HTMs) and Health Building Notes: the series provides best practice engineering standards and policy to enable management of this duty of care which provides specific advice and guidance on the design, installation, and effective operation of a healthcare facility from an engineering technology perspective.
- Health Building Note 00-08: Identifies the efficient management of healthcare estates and facilities
- A Risk-Based Methodology for Establishing and Managing Backlog (NHS Estates 2004) and Establishing and Managing Backlog (NHS Estates 2004): Guides the systematic approach to managing backlog maintenance.
- Strict compliance with the Trust Risk Strategy and Policy is also delivered so a common language is used in the escalation of complex technical matters through the Trust's governance assurance framework to board c/o of the Group Risk Oversight Committee, along with compliance with the Group Incident and Investigation Policy and Group Alerts Policy.
- PFI Project Agreements, contract specifications and associated performance monitoring reports, auditing, surveys, along with operational manuals and similar are designed and utilised in line with best practice to provide suitable evidence against the PAM and CQC inspection.

Good quality design has the opportunity to create a highly efficient environment minimising delays and maximising quality and utilisation, enhancing the outcomes for staff and patients. Well-designed health buildings consider both the internal and external environment, including such features as accessibility, green space, waiting areas and wayfinding alongside the clinical spaces themselves. Having a well-calculated hospital design is an essential requirement for an optimal healthcare environment.

The quality of the design has the possibility to support patient safety, infection control and optimised workflows based on the technological and environmental systems in place and the room and departmental placements and functional adjacencies. It provides the workforce an opportunity to be more efficient, better care providers, reduce patient stress and improved staff working and rest environments, to support staff recruitment and retention. For patients the quality of design has the potential to positively influence their mindset, healing rates and reduce length of stay.

As such any new developments will need to demonstrate how:



Design solutions will reflect patient, visitor and staff needs in terms of “sense of place and space”.



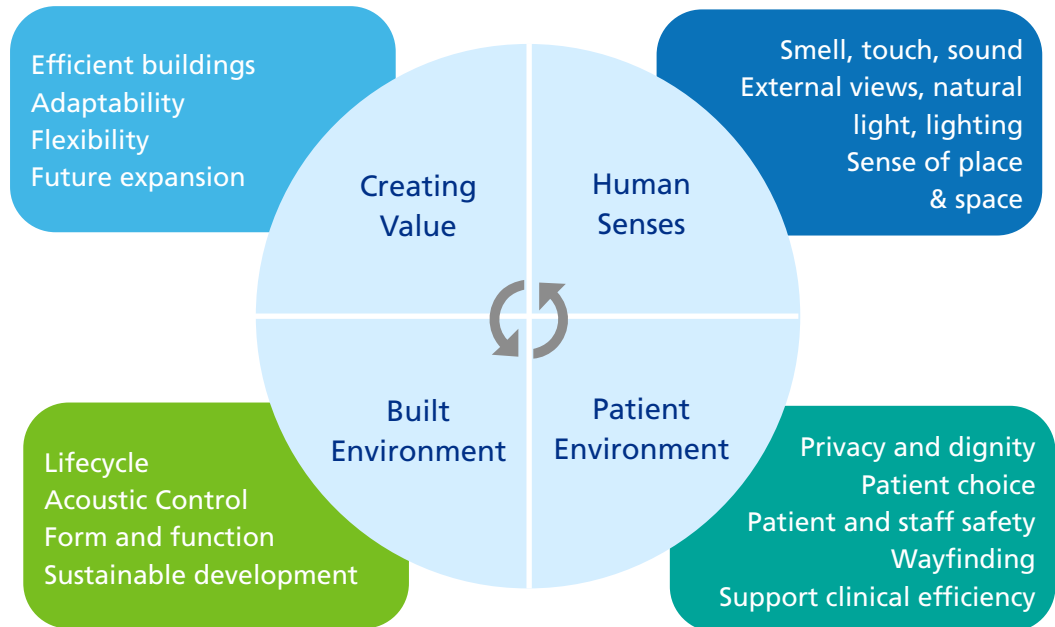
Design solutions will be sensitive to the physical, emotional and well-being needs of patients, visitors and staff.



Design solutions will include and respond to the requirements of the “human senses” and the opportunities that art and the performing arts can offer.

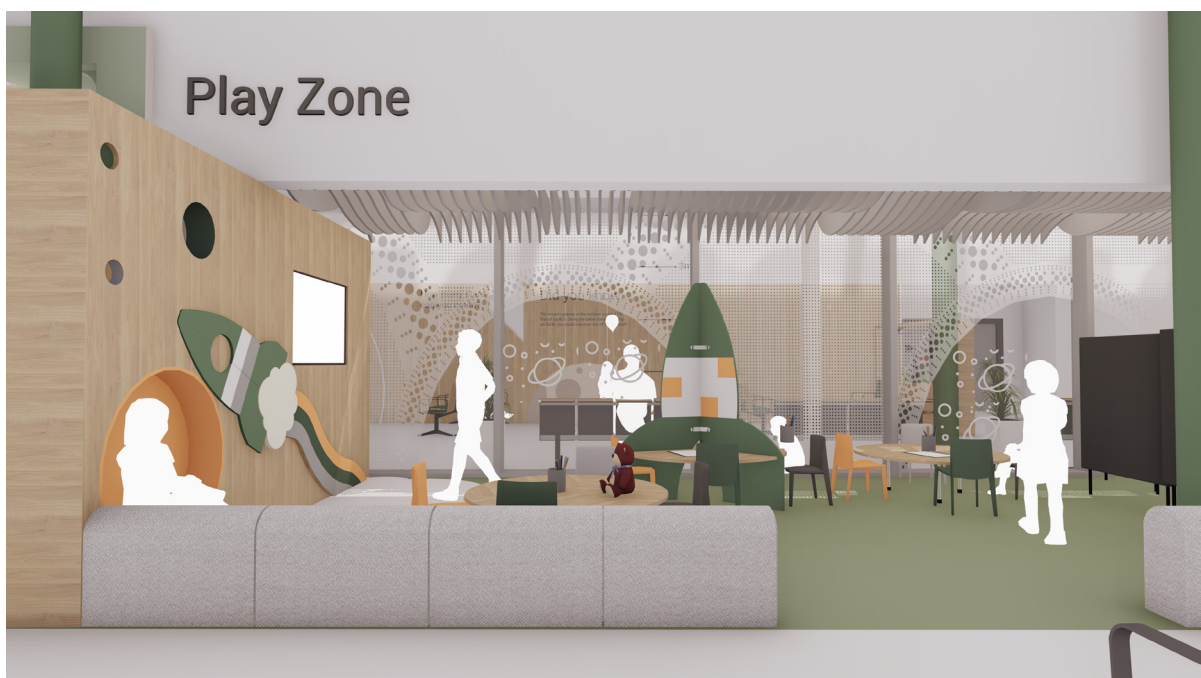


Design solutions will take on board environmental needs and be sensitive to the characteristics of the local and immediate surrounding area.



The design of any health facility is reliant on a full understanding of the relationship between the clinical, service and equipping aspects that are required within the operational facility. As we develop new facilities we will ensure that the principle of 'Form follows Function' will be considered at all stages of the planning process to ensure that our buildings are shaped by internal functions and processes not by a built form.

The below image highlights an example of the proposed RMCH re-design.



It will also be important to address issues around how future facilities can be made to be adaptable and flexible in use so our future developments will need to consider:

Safety & Compliance

All estate development will continue to be underpinned by safety & compliance requirements and guidance.

Adaptability

Consideration of how space may change from its current use to something different in the future. It is evident that healthcare needs will change during the life of our facilities:

- Activity and changes in clinical needs are the biggest influencing factor on use of space.
- A change in the Model of Care within health economies will also affect where clinical activity takes place.
- Advances in equipment, design and general medical technology places pressure on rooms to become more generic in nature.

Growth

Consideration will need to be given of how buildings can expand their capacity:

- Consideration should be given to soft space, preferably already designed into the project, or alterations, possibly to new builds. Also, as part of a site planning exercise future expansion space and how this could be delivered most effectively and with minimum disruption will be considered.
- The resilience and excess capacity requirements in building services will need to be factored in to future development and how they may impact wider areas such as power and heat.

Flexibility

Consideration of how space may be changed to allow a change in use or to allow more than one function to take place within a room. The design team should consider how:

- Building structures and envelopes, services and partitions, ceiling and flooring systems need to be designed and subsequently constructed in a manner that will allow for changes to room layouts, services, outlets, fixtures and fittings to take place.
- To design a structural system that does not restrict future changes and those services are available for alternative uses.
- Designs should allow for rooms to be flexible in use where possible.

3.5 Developing a Flexible, Digitally Enabled Estate

Digital capabilities will empower patients and carers by providing greater visibility, control and personalisation of care journeys supporting more proactive management of conditions, enabling the shift to preventative care and wellness. Empowering patients, their families and facilitating the delivery of tailored care will enable a truly patient-focused approach.

Clinicians within MFT are undergoing substantial digital transformation due to the implementation of the Hive System. This implementation will initiate new ways of working, and provide significant digital benefits:

1. No paper charts

The hospital no longer uses paper charts to deliver and manage patient care and has a mixture of discrete data, document images, and medical images within its EMR environment.

2. Data warehouse for analysing clinical patterns

Data warehousing is being used to analyse patterns of clinical data to improve quality of care, patient safety, and care delivery efficiency.

3. Clinical information shared using interoperability standards

Clinical information can be readily shared via standardised electronic transactions (i.e. CCD) with all entities that are authorized to treat the patient, or a health information exchange (i.e. other non-associated hospitals, outpatient clinics, sub-acute environments, employers, payers and patients in a data sharing environment).

4. Summaries shared across all departments

The hospital demonstrates summary data continuity for all hospital services (e.g., inpatient, outpatient, ED, and with any owned or managed outpatient clinics).

5. Clinical documents and orders to reach 90% digitisation

Physician documentation and CPOE has reached 90% (excluding the ED).

6. Closed loop processes to reach 95% digitisation

The closed-loop processes have reached 95% (excluding the ED).

The HIMSS Maturity Model offers healthcare organisations a strategic pathway to measure the capabilities an organisation has gained from installation of technology and surrounding processes, and the implementation of the Hive system will enable clinical colleagues to achieve HIMSS Level 7. This designation means an organization has not only established strong analytic capabilities but is using the technology in a meaningful way. In future activities the Trust and E&F will follow this example.

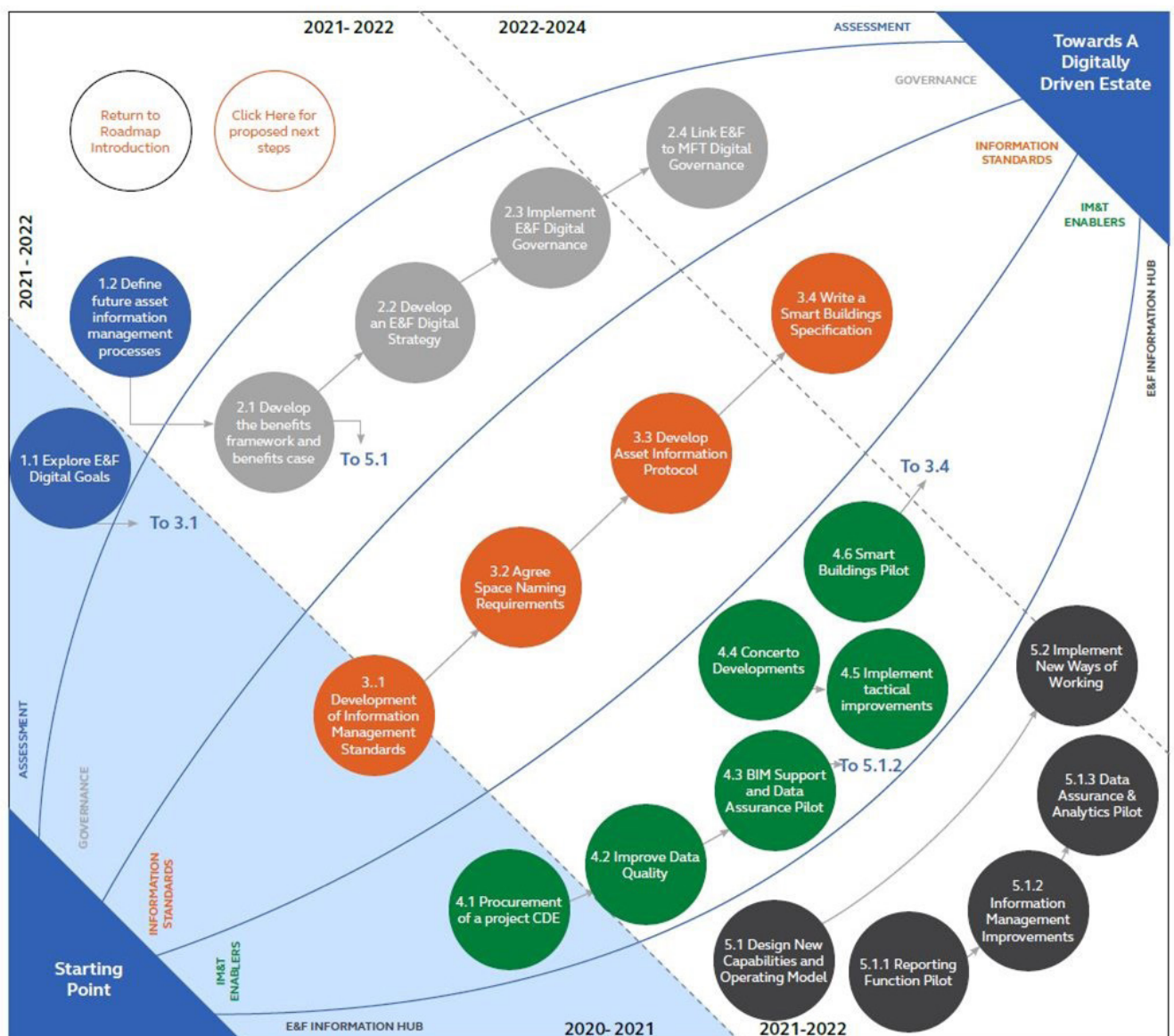
The Trust recently developed a Digital Strategy for the redevelopment of the North Manchester General Hospital site and we will now build on this knowledge and vision across the Trust:

OUR STRATEGIC OUTCOMES				
STRATEGIC PRIORITIES TO ACHIEVE EACH OUTCOME	Empowering Patients and carers	Consistent delivery of high quality care	Optimised efficiency and productivity	Integrated working and joined up care
	Provide full visibility of personal health data and pathways	Enable clinicians and staff to maximise the impact of remote and proactive care	Release time to care for patients by digitising and automating manual tasks	Improve the accessibility and quality of patient data to make the right data available at the right time
	Develop new digital ways for patients to access health services	Enable clinicians and staff to deliver the highest quality and safest healthcare for patients in hospital	Improve communication and co-ordination between clinicians and amongst teams	Create frictionless data sharing with key external partners and databases
	Customise physical environments for each patient	Enhance care delivery through advanced digital solutions	Ensure patients are cared for at the right place, at the right time to minimise length of stay	Address patients' end-to-end pathway needs beyond acute care
	Shift towards personalised care and precision medicine	Improve the standard of training available to staff through new technologies	Optimise the way our workforce and resources are managed	
	Foster digital inclusion and tackle digital poverty			

As Healthcare services transform, the digitisation of clinical activity will produce powerful data sets, which can be analysed alongside contemporary estates and facilities data, to enable better data driven decision making and outcomes. To achieve this E&F has developed its own digital strategy.

The Digital Estates Strategy (DES) is designed to bring digital capabilities to teams, whilst ensuring the approach meets international, national and Trust requirements. A Transformation Roadmap has been produced which highlights the required activities to transform E&F, so that the department meets the challenge to establish strong analytic capabilities and meaningful use of technology.

The E&F Digital Transformation Roadmap



As with the physical estate, the digital estate requires a supporting infrastructure to maintain its various facets. To ensure that teams remain lean, centralisation of roles relating to systems management, data analysis and reporting, and upkeep of digital records such as CAD and BIM documentation will be a requirement, as well as the implementation of a governance structure to monitor the performance of digital activities.

E&F teams will utilise Enterprise systems that they are familiar with, to perform daily activities. However, E&F will also require new capabilities to validate and automate the flow of data into reporting systems and combine the diverse range of E&F and Trust data sets. By connecting clinical and estates data together decision making will be supported by organised and validated data, and for the first time data will viewed from one portal. This functionality will be governed and maintained by the centralised digital team.

Outline of MFT Strategic Systems Approach

'Homepage'

- Data is geo-located and made available for stakeholders to view and navigate
- A 'view only' homepage with links to data sources and enterprise systems



- Assets
- Spaces
- Condition data
- Sensors
- Soft FM

Validation and Automation

- Data is collected and organised for data assurance and governance
- Rules and logic are applied for analytics and insights
- Processes are automated to improve efficiency



Morta

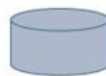
- Data processing and analytics
- Process automation

E&F Systems

Trust Systems

Enterprise Systems and Data

- Data made available from key enterprise applications



Concerto

- Helpdesk
- Assets
- Spaces
- Condition
- Asbestos



Asite

- Design
- Drawings
- Models



HomeLINK

- IOT Sensors



Soft FM

- Portering
- Catering
- Cleaning
- Security



Integra

- Financial



HIVE

- Clinical system to achieve HIMSS Level 7

allowing asset data to be compared, analysed and reported upon in a consistent fashion. Importantly though our approach will link this asset data to our other data sets, therefore creating more powerful data for analysis.

These benefits include:

- Delivery of buildings which supports the move towards digital ways of working thereby enabling operational processes
- Delivery of sustainable, low carbon technologies which complement and enhance its function as a health building
- A digitally enabled health service, which prevent patients having to attend in person, providing choice for patients, increasing access and reducing non-attendance
- Empowering clinicians to monitor patients remotely and reduce the need for in-person appointments
- Reduction in the amount of time doctors and nurses spend on administrative work through quick analysis of scans and patient records, freeing-up time to deliver patient care
- Improvements to patient experience through parking, wayfinding and self-check-in applications
- Full implementation of an EPR system that improves service delivery in many ways (e.g. clinical decision support, implementation of patient safety initiatives, for example sepsis bundle, improved transfers of care, better co-ordination of appointments)

The DES is being designed to bring these benefits to MFT, ensuring that our digital approach is in line with international standards, classifying our data so that it meets national reporting requirements, and also providing assurance to our internal teams that we are compliant and meeting our responsibilities.

An excellent example of how digital transformation will benefit E&F, relates to our future management of maintainable assets. Through creation of a common policy, employed across our operational and capital delivery teams, we will implement a structured and consistent methodology that ensures all assets are identified, classified and maintained within the same systems based approach.

This will provide a data bridge linking all of our teams, allowing asset data to be compared, analysed and reported upon in a consistent fashion. This will be achieved by defining our maintainable assets within our BIM (Building Information Modelling) Information Requirements document, which incorporate the relevant International Standards, and form part of our capital delivery processes. Assurance around the data will be undertaken via an automated process to ensure accuracy and consistency, and also avoid human error.

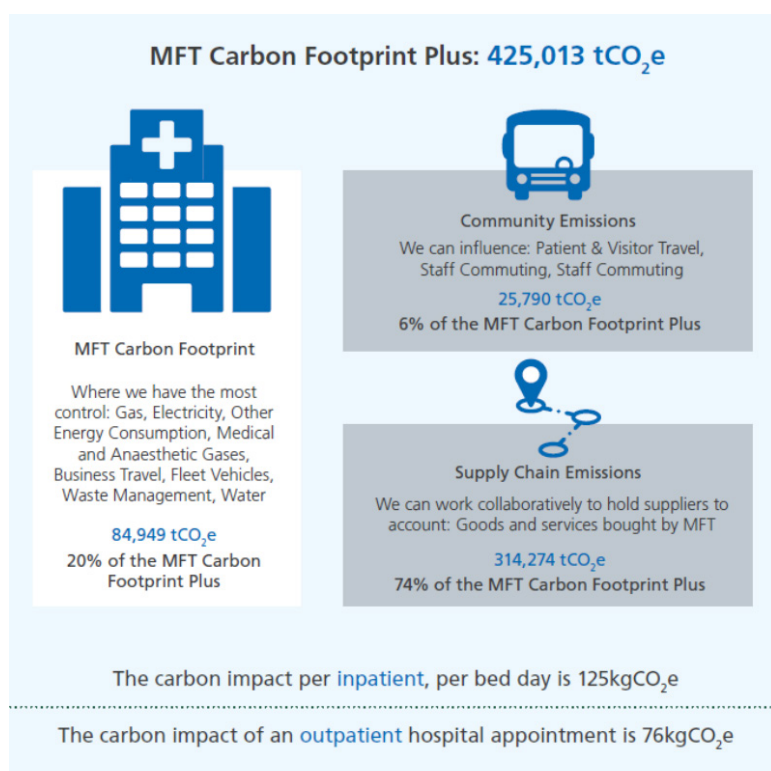
The data will then be passed to our operational teams via the CAFM system for their update and use, linking the assets with reactive and PPM processes and standards such as SFG20. The data within our BIM models will be continually updated as data passes back from the CAFM system, via the automated process. This organised approach to data will also allow us to have full visibility of the lifecycle of an asset, with the data informing future design and operational decision making.

The DES will ultimately make our teams more efficient in how we deliver services, and allow us to better deliver an improved patient experience.

3.6 Maintaining a Sustainable and Accessible Estate

The NHS has acknowledged that the climate emergency is a health emergency. We must prepare our services for increased demand and also limit our own carbon contributions. The Trust's ambitious Code Green Plan was approved in January 2022 and sets out our vision, strategy, and objectives for delivering sustainable healthcare and the progress the Trust will need to make during the next three years to achieve two overarching ambitions:








- To achieve a net zero MFT Carbon Footprint by 2038
- The MFT Carbon Footprint refers to the emissions the Trust directly control
- To achieve a net zero MFT Carbon Footprint Plus by 2045
- The MFT Carbon Footprint Plus incorporates emissions controlled by our supply chain



As part of the overall push to reduce carbon emissions through energy consumption, the Trust is undertaking a comprehensive study of the energy strategy at Trafford General Hospital.

Through the completion of this project, the Trust will make significant steps towards delivering net zero carbon energy infrastructure for the site in accordance with the Trust's commitment to net zero carbon by 2038. This will also help deliver reduced fixed costs, address energy demand and update its ageing infrastructure through a range of net zero technology interventions.

The Green Code Areas of Focus and Objectives are set out below:

Area of Focus	Headline Objective	Reporting Measures
 Sustainable Models of Care	Pilot the redesign of at least 3 care pathways to reduce carbon. 2% of patients discharged to a PIFU pathway.	<ul style="list-style-type: none"> CO₂e of avoided travel PIFU data Number of staff undertaking training
 Digital Transformation	Deliver 25% of all first outpatient appointments and 60% of all follow up appointments virtually. Embed circular economy considerations within the procurement and disposal of IT equipment, including the development of reporting metrics.	<ul style="list-style-type: none"> % of virtual outpatient appointments Tonnes of WEEE waste
 Supply Chain & Procurement	Apply a social value weighting of at least 10% to all new purchasing contracts and work collaboratively with partners and suppliers to drive down our carbon footprint plus.	<ul style="list-style-type: none"> CO₂e from supply chain Number of staff undertaking training Recycled paper purchasing data
 Medicines	Reduce the carbon footprint of medicines that have a high GWP at the point of use (metered dose inhalers, medical gases, and volatile anaesthesia)	<ul style="list-style-type: none"> CO₂e from medicines Number of clinical sustainability leads Sustainability programmed activity (PA) time
 Food & Nutrition	Reduce the carbon impact of food, minimise food waste and eliminate unnecessary single use plastics from catering.	<ul style="list-style-type: none"> % of plant-based meals/number of meals served Tonnes of food waste £ spent on plastic catering consumables/number of items
 Estates & Facilities	Reduce carbon emissions from the building estate by at least 30% by 2024/2025 and ensure major schemes are energy efficient and low or zero carbon. Implement innovative treatment technologies for waste and increase the recycling and reuse rate from 17% to 25%.	<ul style="list-style-type: none"> Projected CO₂e savings from designed projects In use CO₂e from buildings kWh on site renewables generation Waste tonnage
Area of Focus	Headline Objective	Reporting Measures
 Travel & Transport	Reduce the carbon emissions of travel and transport activities (business travel, fleet mileage, staff commuting and patient and visitor travel) by 25%. Achieve a "Good" rating for the Clean Air Hospital Framework.	<ul style="list-style-type: none"> CO₂e from travel Cycle parking capacity Staff commuting modal split
 Climate Change Adaptation	Ensure our organisation is preparing to deal with the impacts of climate change by delivering and embedding the Climate Change Adaptation Plan (CCAP) and associated action plan.	<ul style="list-style-type: none"> £ invested in climate change resilience infrastructure Over-heating incidents
 Green Spaces & Biodiversity	Maximise the quality of on-site green spaces, identifying and delivering schemes that address one or more of the following priorities; improves local biodiversity, supports staff wellbeing and/or patient recovery, combats climate change or provides opportunities for social prescribing.	<ul style="list-style-type: none"> Number of green space and biodiversity initiatives Biodiversity value Number of trees
 Workforce, Networks and System Leadership	Continue to educate and engage the workforce to understand the net zero ambition of the NHS. At least 50% of staff with major influence or responsibility for carbon intensive areas to undertake training and/or CPD.	<ul style="list-style-type: none"> Number of staff engaged through communications/campaigns Number of staff and trainees undertaking sustainability training

A significant portion of the heating and heat distribution infrastructure on site at Trafford General has come to its end of life and requires modernisation to align with NHS and Trust objectives for net zero carbon. Several hospitals within Manchester University NHS FT are undergoing major redevelopment and the Trust wishes to align Trafford General with these aspirations.

The Trust has utilised ETL's Net Zero Carbon Delivery Framework to identify Siemens as a delivery partner in developing a solution for the site that replaces the site energy infrastructure to deliver a long-term solution to ageing infrastructure while optimising overall energy performance.

Key priorities for the Trust include removal of fossil fuels from the site, maximising on site generation and future proofing the site towards delivering grid independence. As part of the proposed solution, opportunities to drive innovation will be maximised within the estate including deployment of 'Internet Of Things' principles.

Accessibility

The Trust is committed to ensuring that the estate is accessible as it can be for all patients, visitors and staff and achieves this in a number of ways:

- Compliance with the Health Building Notes and Health Technical Memoranda when designing refurbishment projects or new build facilities.
- Regular patient and user group meetings to provide a forum for valuable feedback for those using the estate.
- Monitoring the Trust Patient Advice and Liaison Service (PALS) feedback system to capture specific feedback on estate accessibility.
- Provision through the Estates & Facilities Equality, Diversity and Inclusion Committee to monitor feedback, take action, guide future developments and escalate through Trust governance as appropriate.

3.7 Prioritising Patient Experience in Facilities Management

As an organisation we are experiencing a period of significant growth across our estates portfolio with further expansion planned in the future. This growth has led to a review of our estates and facilities management strategies and the services we deliver at each of our facilities. As we continue to expand our estates capability and capacity we are mindful of overcoming the various challenges this presents to ensure the groups vision and values are retained and galvanise the services we deliver, both now and in the future.

Our objective is to promote a collaborative group working environment for our people by operating a unique blend of group management while retaining site by site based solutions. The groups leadership and governance coupled with this degree of autonomy at individual sites, allows us to deliver our services in line with our vision and values which are vitally important to us and our patients.

Our delivery model drives knowledge sharing, lessons learned, best practices and a proactive working environment across the groups estates and facilities management teams. The approach of our tailored restructure aims to enhance a consistent patient experience and quality service comparable at all our sites.

In order to measure our performance as a group accurately, we are currently working through our digitalisation project. This project focuses on achieving both pioneering data driven healthcare provision and becoming a systems leader within our industry via the implementation of our innovative group wide management systems.

The outcome of this project will significantly increase our capability to produce uniform reporting and data management processes at group level, harnessing quality data and driving operational improvements.

We employ a number of internal operatives and management staff members for the delivery of our FM services. With our current delivery standards considered to be good generally, we are working towards achieving outstanding levels of service provision. This requires targeted investment in our people and enhancing our ability to recruit and retain the highest quality expertise.

A summary of the services delivered are:

- Mechanical & electrical
- Building services
- Cleaning & environmental
- Helpdesk
- Security
- Catering

The FM budget is the second largest cost after pay costs and therefore represents a significant proportion of the Trust's expenditure.

We are already delivering a 'good' level of services as a group following our most recent premises assurance model (PAM) review and we are now actively working towards an 'outstanding' standard of services delivered as one of our key objectives.

Trust Objectives and FM Pillars

TRUST OBJECTIVES	KEY TRUST DRIVERS
Excellent care that is fit for the future	Operational Excellence & Reputation
Outstanding integrated local services	Excellence in Capital Delivery
World-renowned centres of excellence	Sophisticated Contract Management and Quality Services
Pioneering data-driven healthcare	Development and Retention of a Highly Skilled Workforce
Recognised system leader	
FM PILLARS	KEY FM DRIVERS
Compliance Providing a safe and inviting Health Care Environment for Patients	Clear maintenance strategies and defined standards for delivery of the Clinical Strategy
Quality and Performance Social Value centric with measurable outcomes and governance	Suitable and relevant Performance & Contract Management through robust data capture
Flexibility and Sustainability Adaptable services and sustainable solutions that support clinical strategies and care pathways	Flexible service delivery with robust change processes integrated at mobilisation
Improved Ways of Working harnessing data to provide innovative solutions	Proactively addressing change, managing skills and resource to achieve the desired outcomes

FM SERVICE DELIVERY

As part of our 'good' to 'outstanding' objective we have given careful consideration to the areas requiring our focus and how best to improve these in conjunction with our wider strategy. The table below aims to provide a clear summary of what we will continue to work on in the near future.

AREAS TO IMPROVE	HOW	WHY
CONSISTENCY AND COMMUNICATION 	Introducing a governance board for FM delivery and defining a clear group communication strategy.	This will support a cohesive group-wide approach to the overall FM service delivery standard, while retaining the required flexibility at a local level.
COMPLEX OUTSOURCED ARRANGEMENTS 	Group FM strategy – demonstrate how all outsourced services will be managed to meet the service objectives.	To provide the principles and structure to achieve harmonised service delivery across all sites.
VARIABLE PATIENT EXPERIENCE 	Group FM strategy – demonstrating the ultimate objectives for each service delivered and how they will be measured.	Strategic and co-ordinated services driven at a group level to achieve consistency across all site.
VARIABLE FM SERVICE DELIVERY 	Group FM strategy – to clearly define the required outputs to be measured across the group.	Delivering a cohesive service with increased management capability at group level and universal standards.
SILOED WORKING ARRANGEMENTS 	Group FM strategy – to demonstrate the required interactions between the estates and FM teams across the group.	To provide a collaborative delivery model across the estate with all maintenance teams suitably informed of all group objectives.

To demonstrate how we intend to deliver on our FM pillars, we have considered each pillar and what will make the difference throughout our service delivery model. The FM pillars are the drivers to be when developing the group FM strategy.

COMPLIANCE



By continuing with the positive work we have been doing and ensuring the benefits of our digitalisation project are realised from a risk and compliance perspective. The enhanced data capability will allow us to identify risks effectively and to address them minimising any potential impact promptly. This will form an integral part of the Group's FM strategy.

QUALITY AND PERFORMANCE



The digitalisation exercise underway provides a significant opportunity for us to enhance our methods for measuring quality & performance. We can use our insights to pin point, at a granular level, where services require our focus and obtain a 'live' view of the patient experience which allows us to monitor and adapt effectively. This level of quality management will form an integral part of our Group FM strategy supporting compliance.

FLEXIBILITY AND SUSTAINABILITY



A further arm of the group FM strategy will focus on how the services are delivered, ensuring flexible services can be adapted effectively in response to wider operational changes. The policies and practices that manage this delivery will also focus on sustainable outcomes and achieving greater efficiency of resource utilisation.

IMPROVED WAYS OF WORKING



The Group FM strategy and digitalisation also brings benefits to how the CAFM system currently operates and manages the delivery of estates and FM services. The quality of data uploaded has a direct impact on the information it provides, thus by increasing the accuracy of our maintenance and asset data we can drive better ways of working in a data driven environment.

3.8 Maximising Partnerships to Deliver Economic Growth

As a Trust we are at the cutting-edge of healthcare research, innovation, and life-sciences in the UK. Through clinical, commercial, and academic expertise and funding, we are improving the health and quality of life of our diverse population by developing and delivering new treatments, innovations, products, and services.

Research and Innovation (R&I) is conducted across our group hospitals and local care organisations, covering general care and hospital specialisms, including emergency care, respiratory disease, cancer, cardiology care, musculoskeletal disorders, genomics, women's health and pregnancy, children's health, eye and dental health. This work is supported by over 500 staff, comprising of our Research Office, Innovation Team, and Research Delivery teams including Trial Co-ordinators and Research Nurses, along with our colleagues from other organisations.

We host one of the largest National Institute for Health Research (NIHR) portfolios in the country, composed of:

- NIHR Manchester Biomedical Research Centre (BRC)
- NIHR Manchester Clinical Research Facility (CRF)
- NIHR Clinical Research Network Greater Manchester (CRN GM)
- NIHR Applied Research Collaboration Greater Manchester (ARC GM)

We also host Health Innovation Manchester (HInM), GM's academic health science and innovation system which includes the Manchester Academic Health and Science Centre (recently re-designated from April 2020 up to 2025). Led by our researchers, Manchester BRC and Manchester CRF have just completed successful third years, and provide funding and facilities to MFT research staff to conduct experimental medicine and transform scientific breakthroughs into diagnostic tests and life-saving treatments. Cutting-edge research studies have taken place across our hospitals, including:

- The world's first emergency bedside genetic test to predict if new-born babies receiving antibiotics in intensive care are at risk of irreversible hearing loss (RMCH, supported by the NIHR Manchester BRC)
- Two-year old patient is the first in the world to receive pioneering gene therapy treatment for the rare and life-limiting genetic condition, MPSIIIA (RMCH)
- First patient in the world recruited to new Cystic Fibrosis therapy trial at to help researchers understand a triple drug treatment aiming to reduce the level of mucus thickness (Wythenshawe Hospital)

As a well-established and internationally recognised centre of expertise for HSCT in children, MFT is ideally placed to lead further research and increase access to ground-breaking treatments for rare diseases through Advanced Therapy Medicinal Products (ATMPs). Following expansion of Gene Therapy capacity for newly commissioned metabolic treatments and clinical trials in children, further expansion is ongoing. As many of the world's leading gene therapy clinical trial companies chose MFT to lead early and later phase first treatments. Early involvement

in trials leads to commissioned services and - examples include CAR-T and Metachromatic Leukodystrophy (MLD). This growth will require bespoke inpatient estate capacity for long, and short; inpatient treatments with immunocompromised patients and expansion of biomedical science and laboratory capacity.

To continue to support our R&I ambitions as a Trust this Estate Strategy needs to support and build on the success of the ground breaking Citylabs which was the vision of the late Keith Chantler to develop an internationally relevant innovation campus.

Following the success of Citylabs 1.0 in the former Royal Eye Hospital, Citylabs 2.0 was developed as the second phase of the Citylabs programme and was completed in May 2020 providing 8600m² of Grade A office and laboratory space and is an integral part of Manchester's new genomics campus which will create more than 1,500 high value jobs over the next decade, adding over £150m to the city region's economy. The facility is fully let to global diagnostics company QIAGEN and their expansion will enable a world-leading hub for the UK in precision medicine, genomics, and translational medicine.

As part of our Estate Strategy, we will continue to develop the Citylabs Campus under separate development agreements and long lease arrangement between Bruntwood and the Trust. Citylabs 4.0 has now received planning approval and will be built at the south of the MFT Oxford Road Campus, adjacent to Citylabs 2.0, and provide seven floors of office and laboratory space where brilliant research will be translated into new healthcare diagnostics and treatments which can then be quickly adopted into Manchester's health system. This will then be followed by Citylabs 3.0 being delivered once we are able to provide vacant possession of the site.



3.9 Supporting a Diverse Workforce through the Estates & Facilities Workforce Strategy

There are over 2,000 Estates and Facilities colleagues working for and with the Trust across the Group.

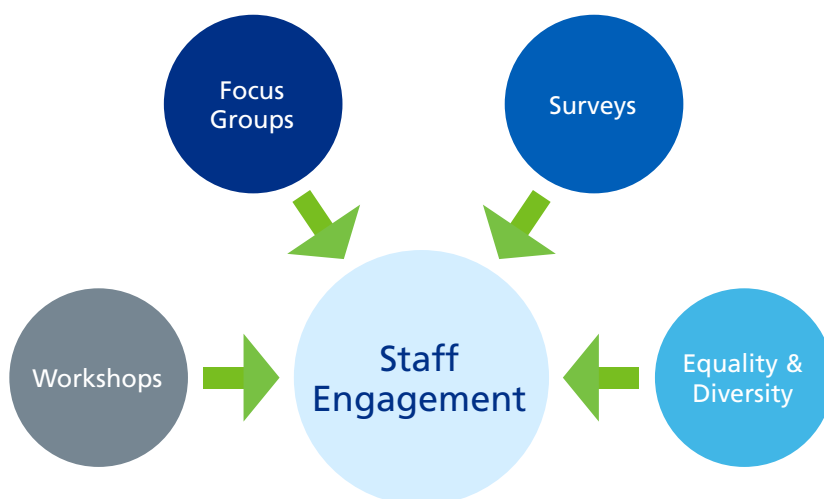
A recent national survey of NHS Estates and Facilities staff by the Health Estates and Facilities Management Association HEFMA showed that whilst 50% of employees working within estates and facilities management are female, only 20% occupy senior positions. In addition, only 20% of the workforce are from a Black, Asian, and Minority Ethnic (BAME) background. The study also identified specific challenges relating to an ageing workforce and lack of career pathways.



The MFT workforce also reflects these national challenges and we are proactively developing an E&F Workforce Strategy which seeks to address them to ensure that we have a resilient workforce ready to maximise all current and future opportunities to continually improve our services.

During 2022, the E&F Workforce Strategy has developed through a series of workshops with staff, surveys, liaison with the Equality & Diversity Committee and a team Away Day.

The Workforce Strategy embraces the Trust's 'All Here For You' framework, highlighting a series of specific areas of focus for Estates & Facilities.



We Feel Valued and Heard	Regular staff surveys with a 'You Said, We Did' cascade
	Focus groups to identify key challenges and improved approaches
	Annual appraisal conversations with six monthly reviews
We Look After Each Other	Embracing agile and flexible ways of working
	Zero tolerance to workplace bullying and harassment
	Ensuring the highest standards of safety in the workplace
We Are Supported To Be Our Best	Introducing new apprenticeship pathways
	Diverse recruitment panels
	Delivering comprehensive training provision
We Can Shape The Future	Understanding the future E&F skills needed
	Create career pathways to improve staff retention
	Increase diversity of staff to better represent our communities
We Want To Work Here	Increase placement opportunities
	Maximise recognition of staff achievement
	Increased visibility of opportunities to our communities

The Trust as an Anchor Organisation

As a leading local Anchor Institution, we play an important role beyond the boundaries of our estate, in contributing to a greener, healthier and more prosperous GM.

Manchester is one of the most deprived unitary authorities in England and the dominant causes of morbidity and mortality are now chronic and preventable long-term conditions, which are exacerbated by poverty, stress, air quality and dietary and lifestyle factors such as obesity and inactivity. The population is ageing, and by supporting people to live well for longer, and addressing health and social inequalities present in our local communities, we can help to reverse this trend and improve health outcomes.

These ambitions correlate with the Greater Manchester Social Value Framework 2020, which has established guiding principles to rebuild our economy and society in GM following the crisis caused by Covid-19. It looks to use social value to tackle the inequalities around us and work towards providing good, fair, and sustainable outcomes. The framework encourages every organisation in GM to carry out its primary activity, managing the resources that it controls and drawing in investment, in such a way that it encourages them to create lasting benefits for the

people of GM, improve the local economy, whilst positively contributing (or at least minimising damage) to the environment.

We are dedicated to enhancing social value across the system to generate the best health and quality of life for all who live and work within and beyond the communities we serve. As the largest employer in GM, we have the power and resources to address these wider determinants to help reduce inequalities and poor health by addressing the following areas:

Working with our communities



We can enhance our role and impact in the community by thinking and working beyond the boundaries of our ten hospitals in GM. We can work collaboratively with our community partners, such as housing providers, job centres, educational institutions, leisure centres and retail to maximise the growth in our local areas.

Working in partnership with contractors



We have substantial purchasing power and the choices we make can have a significant impact on the health and wellbeing of the local population. The use of local, sustainable, and ethically sourced goods, such as working the local community and voluntary sector organisations and small and medium enterprises to supply the provision we need will maximise social value.

Enhance Local Employment



We aim to promote social value and community wealth by maximising the number of jobs offered to local people and enterprises. Too many residents are in low paid insecure roles with little opportunity to progress and we hope to tackle these issues by providing employment opportunities, whether you join us as an apprenticeship or later in your career, you will benefit from leading training and development opportunities, a huge variety of career options and different ways to progress. You will also thrive in a supportive, collaborative, flexible Trust that takes care of the wellbeing of its own people, as well as its patients and communities.

Apprenticeships

At MFT we believe that everyone should have the opportunity to develop their skills, knowledge, and expertise. An apprenticeship sets people up to achieve their long-term career aspirations.

That is why we offer apprenticeships to everybody and at all levels- from school leavers taking their first steps into the health service, through to existing members of staff who want to enhance their prospects.

Our team is equipped to deliver expert training and development leading to professional skills and qualifications, working with a range of education providers.

As an approved Employer Provider of apprenticeship programmes on the Register of Apprenticeship Training Providers, our track record speaks for itself. Over 90% of apprentices who successfully completed programmes with us went on to secure a permanent role here.

As we've developed our E&F workforce strategy this year we've identified a priority to use trainee roles to attract the workforce we need. The plan to do this includes continuing and expanding apprenticeship opportunities. As part of this we have been joined by five new apprentices this autumn, who are based at WTWA with roles including PM, Electrical and Building Services.

"My apprenticeship at the NHS has been an incredible experience, it has given me the opportunity to gain invaluable skills and knowledge, whilst allowing me to carry out my qualifications in project management.

I have had the opportunity to work alongside amazingly skilled people, including having time on placement with a construction consultancy company, which has only expanded my knowledge further of working in this industry.

Working in the NHS means that not only am I a part of a dedicated and hard-working team, but I am able to see how my work can impact people in such a positive way and that can be very rewarding.

I can't wait to see how my career with the NHS develops and to continue to learn."

Izzy Bromhall - Apprentice Project Manager



4.0 Site Developments

Over the next 5 to 10 years a wide range of developments are being undertaken to achieve the vision and objectives set out in this and the Clinical Strategy. The projects include operational and transformational projects that are included within the current capital programme or the longer-term visions for our hospitals which will have a significant impact on the delivery of services.

Our current capital programme includes several significant schemes which will deliver transformational change across the Group with an investment of circa £259m over a five-year period with just over £172m of investment in the 2021/22 financial year alone.

These projects are being funded from a range of sources including:

- Internal MFT Capital
- Loans
- PFI Life Cycle
- Health Infrastructure Programme (HIP) funding
- Healthier Together and UEC Public Dividend Capital
- Charitable monies
- Managed Equipment Service Contract
- Salix Funding

4.1 Oxford Road Campus

Capital Programme

PROJECT	£m	DESCRIPTION
 <p>PROJECT RED</p>	56,180,549	Project RED commenced in late-2021, it covers the expansion of the MRI's Emergency Department including new build, refurbishment and associated enabling works (including public realm and infrastructure). The new build elements are to be delivered via the P-22 Framework.
 <p>PROJECT PED</p>	32,515,059	This project's aim is to improve flow and capacity within the Paediatric Emergency Department (PED). Phase 1 was completed in Jan-22, the remaining scope includes the refurbishment and expansion of the existing PED within the Children's Hospital.
 <p>EXPANSION OF THE BONE MARROW TRANSPLANT UNIT</p>	7,900,000	Expansion of the existing Bone Marrow Transplant Unit, within Manchester Royal Infirmary. Due to open late-2022.
 <p>TRUST HQ</p>	3,500,000	Refurbishment and expansion of corporate services accommodation. Informed by group-wide admin capacity review.
 <p>3RD HYBRID SUITE</p>	5,500,000	Refurbishment of existing theatre accommodation to form a new (additional) hybrid suite within MRI.
 <p>CLINICAL SCIENTIFIC SERVICES</p>	£tbd	Full lifecycle and expansion of the existing Clinical Scientific Block(s).
 <p>RMCH ATRIA</p>	£tbd	Charitably-led refurbishment of the atria and public realm to RMCH.

Alongside these major schemes over the next 5 years, we are also undertaking a programme of other projects which are of equal importance in delivering our Vision and Strategies, these include:

- Prioritised backlog programme
- Alterations to the Peter Mount Building to enable the transfer of services (SARC) from the Old Saint Mary's Hospital, provision of decant space to enable the delivery of project PED. Work associated with the decommissioning of the old Saint Mary's Hospital to enable future development opportunities (such as Citylabs 3.0)
- Enabling works for a new VIE, to improve resilience
- Ongoing refurbishment of Trust Headquarters, Cobbett House
- Improvements to the boiler house and photovoltaic (PV) works, to support the sustainable operation of the campus. Consideration of a programme aimed to de-steam the ORC campus
- Upgrade of the atrium area at the Children's Hospital funded through charitable donation and delivery of an iMRI facility in the hospital
- Extensive equipment replacement programme, to be delivered through the Radiology MES and Cardiac Catheter Labs
- Delivery of the Antimicrobial Resistance Project

Planning Into The Future

We also have ambitious plans for the Oxford Road Campus, this is primarily focused on the South side of the site and linked to our Partnership with Bruntwood and the delivery of the Citylabs Campus.

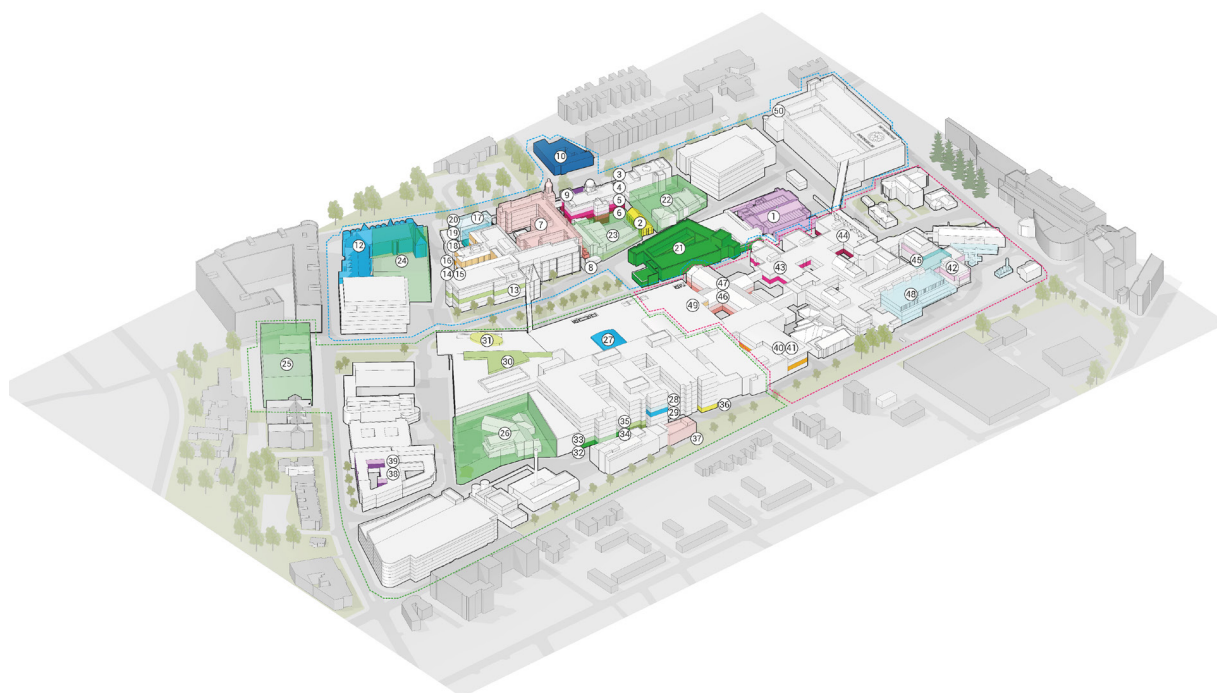
Citylabs 1.0 and 2.0 are complete and Citylabs 4.0 has planning approval and will shortly start on site. Citylabs 3.0 will be delivered once we are able to provide vacant possession of the old Saint Mary's Hospital site. The vision for the Citylabs campus is to create a world leading biomedical research and development (R&D) campus co-located on our Oxford Road Campus leveraging the fact we are Europe's largest teaching hospital and the adjacencies to Manchester's two Universities. The success of these projects is measured in the quality, and speed; in which ideas spin-out of clinical and academic environments and are commercialised, and ultimately the extent to which industry and R&D helps to support us to innovate and push the boundaries of healthcare.

We also have long-term ambitions to provide a new facility for the University Dental Hospital of Manchester, which is currently located off the Oxford Road Campus on the University site.



OXFORD ROAD CAMPUS (ORC)

GENERAL/FUTURE DEVELOPMENT



RETAINED ESTATE

- ① Undergraduate Building Fabric Upgrades
FY 2023 / 2025
- ② The Chapel Fabric Upgrades
FY 2022 / 2023
- ③ Cobbett House North - Level 2 Refurb
FY 2022 / 2023
- ④ Cobbett House North - Level 1 Refurb
FY 2023 / 2024
- ⑤ Cobbett House North - Level 0 Refurb
FY 2024 / 2025
- ⑥ Cobbett House North Façade upgrades
FY 2024 / 2025

- ⑦ Cobbett House South Lifecycle, All levels
FY 2022 / 2025
- ⑧ Glazed Corridor Refurbishment
FY 2023 / 2024
- ⑨ The Lodge Fabric Upgrades
FY 2025 / 2026
- ⑩ Chest Clinic Fabric Upgrades
FY 2022 / 2025

MISC

- ⑪ Training facility, Existing Oxford
Road Retail Unit
FY 2022 / 2027

CSB

- ⑬ Anti Microbial Resistance, CSB 2, Level 2
FY 2022 / 2023
- ⑭ Hard Tissue Lab, CSB 1, Level 1
FY 2022 / 2023
- ⑮ Virology, CSB 1, Level 1
FY 2025 / 2026
- ⑯ Adult Histopathology, CSB 1, Level 3
FY 2024 / 2025
- ⑰ CSS Admin Block, CADET
FY 2027 / 2028
- ⑱ Medical / Legal Team Move
FY 2023 / 2024
- ⑲ Plantroom Extension Project, CSB 1
FY 2024 / 2025
- ⑳ Mortuary High Risk Extension, CSB 1
(To go into ground floor of Plantroom
Extension Project)
FY 2027 / 2028

FUTURE DEVELOPMENT

- ㉑ Potential Development Site
- ㉒ Proposed Administration Block
First Steps Day Nursery Building
- ㉓ Education & Admin Hub / Hotel Development
Post Graduate / Library / Chapel site
- ㉔ City Lab 3 Construction, Old St Marys Hospital Site
FY 2024 / 2026
- ㉕ City Lab 4 Construction, Old Diabetes Site
FY 2023 / 2025
- ㉖ Potential Development Site

ST MARYS HOSPITAL

- ㉗ St Marys Atrium Refurbishment
FY 2022 / 2023
- ㉘ MEAM Relocation, 5th Floor
FY 2024 / 2025
- ㉙ St Marys 3rd Floor Redevelopment
FY 2023 / 2024

RMCH

- ㉚ RMCH Atrium Refurbishment
FY 2023 / 2024
- ㉛ RMCH 3rd Floor Garden
FY 2023 / 2024
- ㉜ PED Phase 1, Level 0
FY 2022 / 2023
- ㉝ HSCOT, Level 1
FY 2024 / 2025
- ㉞ PED Phase 2, Level 0
FY 2024 / 2025
- ㉟ IMRI, Level 1
FY 2024 / 2025

MANCHESTER ROYAL EYE HOSPITAL

- ㊱ Outpatient Rationalisation Works
FY 2025 / 2027

MISC

- ㊲ DSSD Refurbishment, FMC Level 1
FY 2022 / 2023
- ㊳ SARC Relocation, Peter Mount Level 1
FY 2022 / 2023
- ㊴ RMCH Admin Relocation, Peter Mount Level 2
FY 2022 / 2023



MANCHESTER ROYAL INFIRMARY

- ㊵ Cath Labs Refurbishment, Level 2
FY 2023 / 2024
- ㊶ 3rd Hybrid Theatre, Level 2
FY 2024 / 2025
- ㊷ Ward Life cycling - Ward 7 & 8, Level 2
FY 2022 / 2023
- ㊸ Ward Life cycling - Ward 14 & 15, Level 2
FY 2024 / 2025
- ㊹ Outpatients Life cycling, Level 0
FY 2027 / 2028
- ㊺ MRI Plant room Expansion, Roof level
FY 2023 / 2024
- ㊻ Ward Life cycling - AM 1 & 2, Level 0
FY 2025 / 2026
- ㊼ Ward Life cycling - AM 3 & 4, Level 1
FY 2026 / 2027
- ㊽ Project RED - Refurbishment, Level 0
FY 2025/2027
- ㊾ BMU
FY 2022 / 2023
- ㊿ MRI Envelope Upgrades, All levels
FY 2022 / 2028

4.2 Wythenshawe



As one of our major delivery sites we will be continuing to invest in the Wythenshawe Hospital Campus despite having longer term ambitions for a new facility, some of the key projects in the capital programme are described below.

PROJECT	£m	DESCRIPTION
ENDOSCOPY REFURBISHMENT 	6,500,000	Upgrade and expansion of the existing Endoscopy unit, to ensure JAG Compliance.
BREAST IMAGING ACADEMY 	4,400,000	Investment in Breast Care Services to allow the facility at Wythenshawe to become the National Breast Imaging Academy. Aimed to develop and train a highly-skilled workforce.

Alongside these schemes we are also undertaking a programme of other projects which include:

- Prioritised backlog programme
- Delivery of a range of sustainability schemes including air-source heat pumps (ASHP) and photovoltaic (PV) works funded by Salix
- Delivery of the Antimicrobial Resistance Project
- Refurbishment and equipment replacement within the existing Decontamination Suite
- Extensive equipment replacement programme, to be delivered through the Radiology MES
- Refurbishment of Cardio Theatres 3 & 4
- Demolition of under-utilised and poor quality assets (Chimney, Baguely Buildings)

Planning Into The Future

Working with our Development Partner and in consultation with Manchester City Council and other key stakeholders we have developed a masterplan and strategy to support the transformation of Wythenshawe Hospital Campus as a sustainable health village over a 10 to 15 years period, enhancing the Hospital whilst diversifying uses to include complementary commercial, leisure and retail set within a high quality, greener public realm.

The Strategic Regeneration Framework (SRF) has been developed to build on the existing strengths of the Hospital and the devolution of health and social care to significantly improve health outcomes whilst reducing the obstacles that poor health creates.

The developments have been created to address the wider determinants of health through and establish opportunities that benefit local residents and City Region, whilst also placing a key focus on net zero carbon ambitions for the campus.



Our vision is to evolve Wythenshawe Hospital Campus to enable the delivery of the following:

- Create an enhanced clinical environment delivering Exceptional Health Care and Clinical Facilities that are modern, welcoming and in line with strategic priorities and objectives
- To develop a highly Sustainable Campus committed to achieving net zero carbon by 2038 in line with the key stakeholder requirements
- To deliver inclusive growth, through a Diversified Range of Uses ensuring the local community benefits from the investment through job creation, residential development, leisure facilities and educational opportunities
- To Support the Local Community, through a masterplan that provides a range of jobs and skills, including the creation of employment in other sectors such as Retail and Social Care
- Provide a Place that is Attractive and Legible to all by maximising public realm and the quality of the built environment
- Growth that is underpinned by Effective Transport and Car Parking Strategies
- Supporting Healthy Communities through access to Green Infrastructure
- Create a 'SMART' Hospital which is technologically advanced
- To create World-class Research and Innovation Facilities to stay at the forefront of innovation development, whilst supporting the work of clinicians and academics
- Globally Competitive Location for complementary business to grow and thrive
- To Enable the Delivery and Growth in the Wider Sphere of Influence through the maximisation of available opportunities to develop MFT land for commercial

The Wythenshawe Campus has the opportunity to become a sustainable health village, building on its strength and advantages in terms of the clinical, research and innovation excellence to make a significant contribution to Greater Manchester's identified health and social care priorities, as well as established economic, social and environmental objectives with in local and national policy.





WYTHENSHAW HOSPITAL

GENERAL/FUTURE DEVELOPMENT

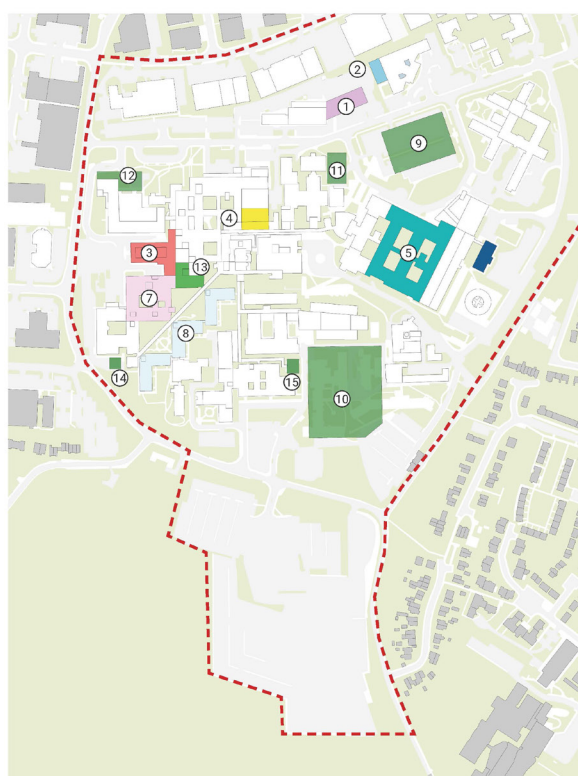


GENERAL DEVELOPMENT

- ① MEU
FY 2023/2024
- ② National Breast Imaging Centre Extension, Nightingale House
FY 2023 / 2024
- ③ Cardio Theatre 3 & 4 Refurbishment
FY 2022/2024
- ④ Endoscopy Refurbishment and Expansion, Level 0
FY 2023/2024
- ⑤ PFI Building Theatre Lifecycle
FY 2022 / 2026
- ⑥ Bagley House Decant Move
- ⑦ F Block Theatre Lifecycle
FY 2024/2028
- ⑧ F Block Ward Lifecycle
FY 2022/2025

FUTURE DEVELOPMENT

- ⑨ Multi-storey car park
ED Carpark
- ⑩ Potential development Site
Existing Bagley House site
- ⑪ Possible service expansion zone
Land adjacent to Block 77 & 74
- ⑫ North West Heart Centre Extension
- ⑬ CCU Expansion
Existing Surgical Admissions Lounge
- ⑭ Modular Expansion Site
Children's Vanguard Theatre Site
- ⑮ Modular Expansion Site
Vanguard Theatre site





4.3 North Manchester General Hospital

NMGH joined the MFT Group of Hospitals on the 1st April 2021, as with Wythenshawe we have longer term ambitions to reimagine the way that health services are delivered on the site for the North Manchester population. To support this vision for a new facility at NMGH there will be significant capital investment required both in terms of enabling works for the new hospital project and backlog maintenance to ensure the hospital can provide a suitable environment for the delivery of clinical services in the short term, these include:

PROJECT	£m	DESCRIPTION
HEALTH AND SAFETY BACKLOG MAINTENANCE	18,191,000	Delivery of the prioritised backlog maintenance programme to ensure the existing hospital is safe and able to deliver clinical services in the short term.
NORTHERN ENABLING WORKS AND SOUTHERN ENABLING WORKS	38,413,490 19,478,050	Delivery of enabling works to support the delivery of the site masterplan and the new hospital project in the Northern and Southern Zones of the site which is being funded through the New Hospital Programme.

Planning Into The Future

We are aware that the current hospital site needs radical redesign and investment to enable the delivery of high-quality services and modern, joined-up and integrated care.

The North Manchester General Hospital Site Strategic Regeneration Framework (SRF) sets out the blueprint for the wholesale redevelopment of the site and was subject to public consultation prior to the formal endorsement by Manchester City Council's Executive Committee in March 2021. The SRF sets out the once in a generation opportunity to create a modern healthcare environment at NMGH which will not only serve patients but the wider community in Crumpsall and North Manchester aiming to:

- Deliver modern health and social care services
- Promote healthier lifestyle and wellbeing
- Deliver a more inclusive economy
- Build a stronger and safer community

The hospital is a critical **Anchor Institution** and has the opportunity to address long-standing health inequalities which have been further exacerbated by COVID-19. The redevelopment of the site is a key component to tackling these inequalities and the recovery of the surrounding economy.

The vision is to profoundly redesign healthcare services and provide an environment which encourages collaboration and ensures continuity of care. The aim is to build a high quality and sustainable campus where people want to get well, learn, work, and live rather than just a hospital complex. There is an opportunity for the redevelopment to be a focal point for the community and support the co-location of hospital, mental health, intermediate and community services and primary care.

It will also provide the opportunity for a Wellbeing Hub to guarantee local people are supported to get well and stay well by addressing the root cause of ill health. There will also be the opportunity to link in with the Voluntary, Community and Social Enterprise (VCSE) organisations to expand their impact.

The vision for the re-imagined site which is articulated in the SRF proposes:

- A new acute hospital and a modern mental health hospital providing a best-in-class healthcare environment; embracing integration, innovation and technology; and transitioning to a net zero carbon estate.
- A wellbeing hub to deliver modern, integrated community health, care and wellbeing services; responding to the specific health and care needs of the local population. The new building will become a destination for the local community, through its mixed service offer, meeting spaces and community café.
- An education hub to support the necessary training for staff and maximising the opportunity for local employment at the site.
- An inviting, publicly accessible estate that will integrate seamlessly with the surrounding neighbourhood to ensure local people can walk or cycle to the site effortlessly and without any barriers.
- As part of the redevelopment, there will be a new neighbourhood offer which will integrate with the wider health and social care proposition, playing its part to help tackle the fight against health inequalities with a focus on healthy ageing. This will include residential uses such as, key worker accommodation, affordable housing, step-down care, and extra care. There will also be the opportunity for new high quality commercial space to support local small and medium enterprises (SMEs).
- A village green. This will become a high-quality outdoor space, acting as a focal point for the Campus and links with our ambitions to enhance biodiversity and green space, and adapt to climate change.



4.0 Site Developments



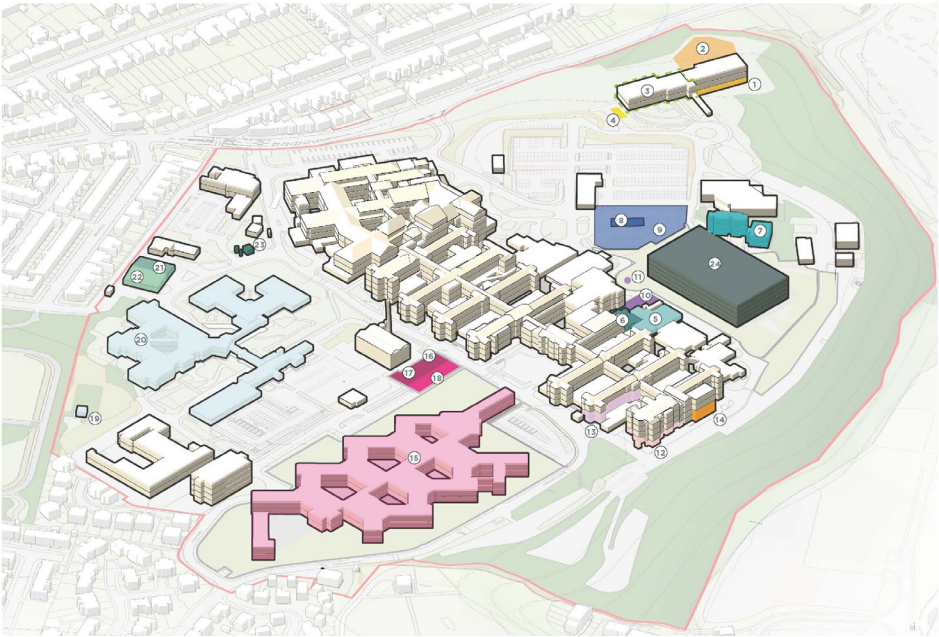
NORTH MANCHESTER GENERAL HOSPITAL
DEVELOPMENT PLAN

SITEWIDE

- A PEDESTRIAN SEGREGATION - 2022-2024
- B STREET LIGHTING - 2022-2024
- C LINE MARKING - 2022-2024
- D POT HOLE REPAIRS - 2022-2024

- 13 MORTUARY AHU REPLACEMENT BLOCK 17
- 14 BUILD NORTH VIEW - 2022-2024
- 15 NEW SUBSTATION 8A - 2022-2023
- 16 NEW SUBSTATION D-G
- 17 WESTERN RD BELL MOUTH - 2022-2023
- 18 UV TREATMENT TO WATER TANKS - 2022-2023
- 20 DEMOLISH PARK HOUSE - 2025-2026

- 21 DECANT ID TO F7 - 2023-2024
- 22 DECANT RADIO TO F7 - 2023-2024
- 23 JEWISH MEMORIAL - 2023-2024
- 24 BUILD MULTI-STOREY CARPARK - 2022-2023



- 1 CRUMPSALL VALE GP PRACTICE - LG - 2023
- 2 CRUMPSALL VALE PARKING - 2023
- 3 WINDOW REPLACEMENT - OLDER WING - 2023-2025
- 4 ELECTRICAL / GENERATOR BACKUP WORKS - 2023-2025
- 5 THEATRES 1-2 LIFECYCLE - 2023-2024
- 6 THEATRES 5-6 LIFECYCLE - 2023-2024
- 7 DEMOLISH BLOCKS 70 & 71 - 2024-2027
- 8 DEMOLISH ID - 2023-2024
- 9 TCPOS - 2022-2023
- 10 MOBILE THEATRE PAD (EVANGUARD) LIMBERT CIRCLE - 2023-2024
- 11 LIMBERT CIRCLE ENTRANCE
- 12 LIFECYCLE SWITCH GEAR - BASEMENT 14/15 - 2023-2024
- 13 B1 B3 WARDS - BLOCK 14 - 2023-2024

4.4 Withington Community Hospital



Capital Programme

Withington Community Hospital supports the Group by delivering a wide range of outpatient, diagnostic treatment, day surgery and community services and as such we are investing in several projects to support our vision of delivering care closer in the community, including:

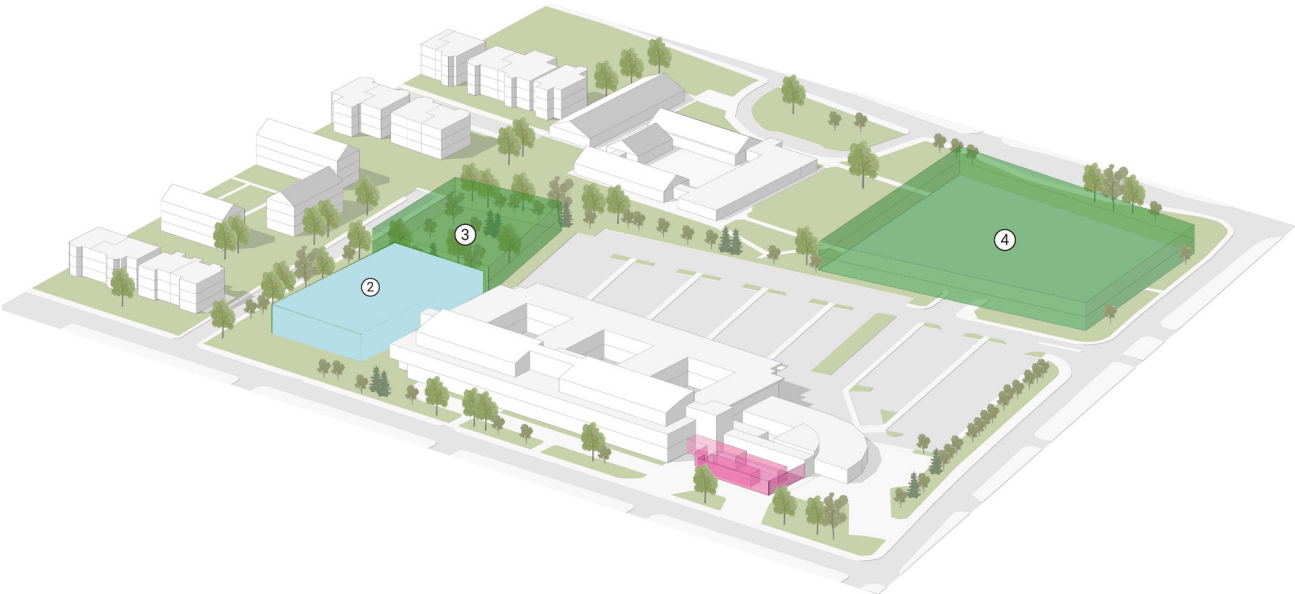
- Prioritised backlog programme
- Provision of a mobile CT scanner and associated enabling works
- Delivery of a range of sustainability schemes including window replacement and installation of photovoltaic (PV) works funded by Salix
- Consideration of increasing Green Capacity to support CV-19 recovery planning
- Support National Community Diagnostics Programme

<i>PROJECT</i>	<i>£m</i>	<i>DESCRIPTION</i>
COMMUNITY DIAGNOSTICS CENTRE	14,900,000	A c.2000sqm, two-storey, new build development, providing a JAG compliant Endoscopy department, with associated decontamination and Cardio-Respiratory service.





WITHINGTON COMMUNITY HOSPITAL
GENERAL/FUTURE DEVELOPMENT



GENERAL DEVELOPMENT

- ①  SMIT Unit Relocation - ongoing work
FY 2022/2023
- ②  Cardiorespiratory and Endoscopy
New Build
FY 2023/2025
-  FUTURE DEVELOPMENT
- ③ Potential Development Site
- ④ Potential Development Site



4.5 Trafford General Hospital



Capital Programme

To support our service strategy of Trafford General Hospital being utilised by the group as an elective centre we are investing in several schemes including:

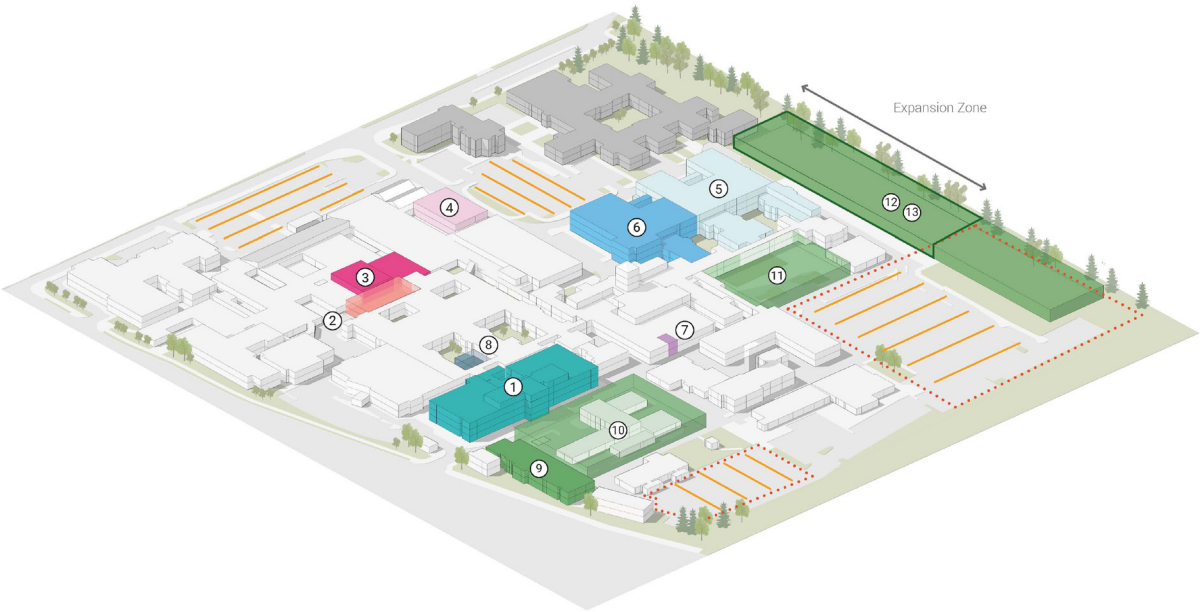
<i>PROJECT</i>	<i>£m</i>	<i>DESCRIPTION</i>
 <p>NEW THEATRE BLOCK & IN-PATIENT WARDS</p>	13,800,000	Development of 2No new theatres, which brings the total to thirteen on the site, along with an additional 28No In-patient beds. All to support CV-19 recovery funded from the national Targeted Investment Fund (TIF).
 <p>UPGRADE OF THEATRES</p>	2,800,000	Upgrade of theatres 5 and 6 as part of the Lifecycle programme across the site.

Alongside these schemes we are also undertaking a programme of other projects which include:

- Prioritised backlog programme
- Delivery of a range of sustainability schemes including de-steaming works and installation of Solar photovoltaic (PV) works funded by Salix
- Replacement of key pieces of medical equipment including an MRi Scanner
- Electrical Infrastructure upgrade – HV/LV
- Demolition of under-utilised and poor quality assets (former Ward 7 & 8)
- Consideration of increasing Green Capacity to support Covid-19 recovery planning



TRAFFORD GENERAL HOSPITAL
GENERAL/FUTURE DEVELOPMENT



GENERAL DEVELOPMENT

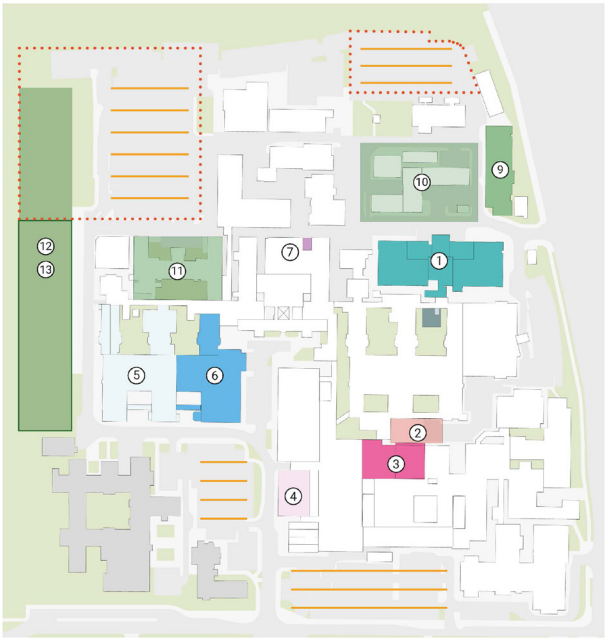
- ① Adult Inpatient Accommodation Life-cycle, level 0
FY 2023/2024
- ② Theatres and Recovery expansion
FY 2023/2024
- ③ Theatre 5 and 6 Lifecycle
FY 2022/2023
- ④ Theatre 10 and 11 Refurbishment
FY 2022/2023
- ⑤ Ward 1-4 Life-cycle
FY 2025 - 2028
- ⑥ Ward 5/6 Fire Restoration works
FY 2022/2024
- ⑦ Standby Switchroom Expansion
FY 2023/2024
- ⑧ MEAM and Bed Store Relocation
FY 2022/2023

FUTURE DEVELOPMENT

- ⑨ Potential Expansion Site
- ⑩ Potential Expansion Site
- ⑪⑫ Potential Expansion Site/
Net Zero Infrastructure Works
- ⑬ Greenway Building Redevelopment

• • • • • Bore-hole Away & Energy Centre

— — — — — Solar PV Array



4.6 Community Property

The LCO currently delivers its services from a varied portfolio made up of Freehold, Leasehold and Sessional locations, which is constantly evolving as services are delivered from different locations. The Northern Sexual Health Service, which is a single service across MFT and is managed by MRI, also uses many community premises and not just across Manchester and Trafford because it provides services for Stockport and Tameside also. Our longer term plan for health and social care services across Manchester and Trafford is to support the delivery of our services from a network of integrated Hubs.

Our vision to deliver services from hub buildings is based on a “place based” approach which supports some of our key priorities across both MLCO and TLCO, these include:

- Co-location and integration of health and social care services.
- Co-location with complimentary services including mental health, education, employment, housing and the Voluntary Care Sector.
- Improved access to primary care provision.
- Reducing demand on acute services.
- Promoting and supporting the transformation of primary care.

There are some key principles which should be considered when utilising a hub approach to the delivery of public sector services, these include:

- They should be a connection point in the community for a range of public, third sector and possibly private sector services.
- Provide a base for the delivery of integrated services NOT just co-located.
- There is no single prescriptive, formulaic solution; facilities should reflect the needs of specific communities from a socio-economic, health prevalence and demographic perspective.
- Enhance and become intrinsically part of the communities they serve, allowing people to take greater control, focusing on better life opportunities and better outcomes.
- The co-locating and integrating of services should significantly reduce the number of “front doors” the individual will need to enter.
- All services do not need to be delivered in one building but a well thought out hub service strategy should signpost people to where they can access those services.

We are currently supporting the planning of hub solutions for schemes across Manchester, including:

- **North Manchester Health and Wellbeing Hub** - Subject to Treasury funding Hub will be an integral part of the redevelopment of the North Manchester General Hospital redevelopment and will provide accommodation for a wide range of services including; primary care, community services, community dentistry, sexual health, children's advocacy, community mental health services and the voluntary sector.
- **Gorton Hub** Subject to funding and business case approval this project will support the improvement of health outcomes, regeneration and improved integration of public sector services for the residents of Gorton. The facility will provide accommodate for a range of services and partners including; library, adult education, café, DWP One Manchester, primary care and community health services.

5.0 Delivery of Our Strategy

We appreciate that the effective management of our estate and delivery of this strategy are inherently complex undertakings. Robust governance processes and management methodologies based on proven standards and quality management are in place to ensure that long term that there are high quality, well located buildings, in the right condition to facilitate the delivery of excellent patient care.

5.1 Business Planning Process

As an organisation we have a strong business planning process which is focused around business or service change being owned by the operational unit management teams in the first instance. If the annual planning process identifies a requirement for change within their specific operational units, then a business case is produced which is approved through the Group business case process.

This utilises a two stage approach, comprising:

- Stage 1 - Statement of Case (SoC) – The SoC is developed by the business case leads within each of the Managed Clinical Services or Hospital operational units. It sets out the broad case for change.
- Stage 2 - Business Case – Following approval of the SoC all investment cases for change require an appropriately detailed business case to be developed.

Business cases can be approved by the Hospital / MCS or at Group level. Triggers are in place to determine whether a case requires Group level approval or not. All cases that require capital must have Group level scrutiny and approval; this takes place through the Group Management Board. Other triggers for Group level approval include financial thresholds, IM&T or new contracted activity. There may also be other wider issues to consider around the requirement for Group approval including:

- Schemes which affect other hospitals or MCS's.
- Schemes which carry significant financial, strategic, quality, operational or reputational risk.
- Schemes which have implications for MFT's work with external partner organisations or agreed service configurations across Greater Manchester or the region.

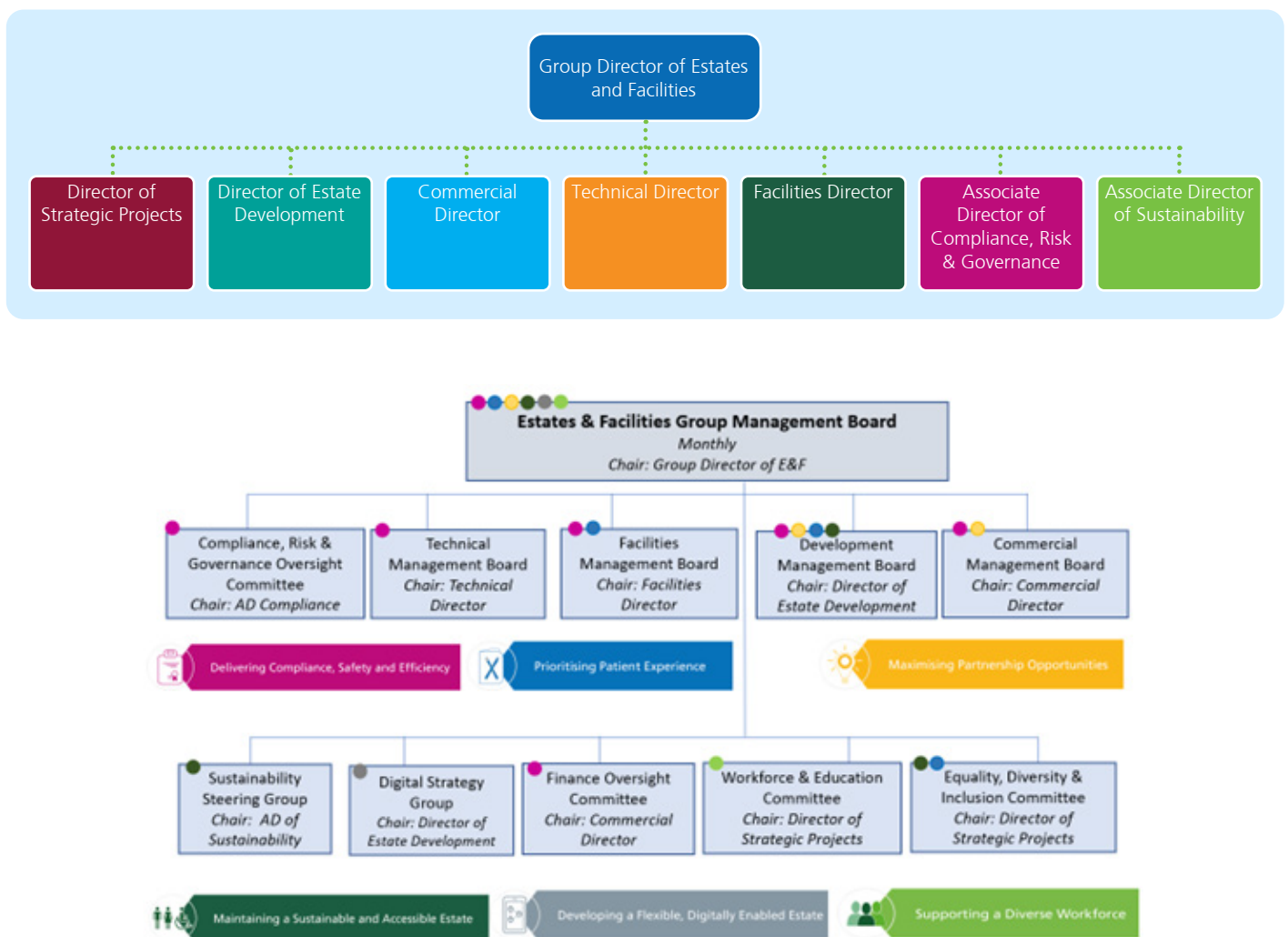
The strategy team maintains a register of all SoCs and business cases reviewed at Group level.

Those business cases which would require capital funding and have a material estate implication must obtain Capital Management and Monitoring Group (CMMG) approval as part of the Business Case. Once a case has been approved by the Group Management Board, it will be prioritised as part of the annual capital planning process.

Those business cases which would require capital funding and have a material estate implication will need to obtain Capital Management and Monitoring Group (CMMG) approval as part of the Business Case Clearing House review. Once approved this will then be prioritised as part of the annual capital planning process.

5.2 Estate and Facilities Structure & Governance

In order to deliver our Estates and Facilities strategy and the organisational estate needs on behalf of the group we understand the importance of leadership and management principles within the E&F team. We have therefore developed a robust management structure accordingly and this is shown in the structure below.



To fully support the work of Estates & Facilities through appropriate governance structures, the group operates through the following monthly cycle. The 'coloured dot' references show how the delivery of the strategic Guiding Principles as set out in this strategy are led by a series of Management Boards, Committees and Steering Groups. This ensures that the strategy is taken forward through a series of dynamic action plans which include robust benchmarking to demonstrate current performance and an agreed set of objectives to work through during the lifetime of the strategy.

5.3 Partnership Working

Bruntwood

To support our property ambitions across the group we formed a Strategic Estate Partnership (SEP) in 2016 with Bruntwood initially for a 10-year timeframe.

It enables us to draw on a wide range of services though Bruntwood from consultancy services to the design, funding and construction of commercial, residential and clinical accommodation. This partnership is proving beneficial in supporting the Trust with the front-end strategic process before the details of specific projects commercial rationale or contractual structure are known, with the real focus on repurposing parts of clinical estate no longer needed for clinical uses into uses related to our aspiration and strategies.

Bruntwood are currently working with us on several projects across the Group, however the key ones that have been brought forward include the Citylabs 1.0, 2.0, 3.0 and 4.0 along with the Grafton Street multi-storey car park (MSCP).

Case Study: Citylabs

Following the success of the Citylabs 1.0 project in 2014, we worked with Bruntwood collaboratively to solve our off-site parking arrangements. The solution was delivery of a 936 space MSCP on an existing surface car park on the Oxford Road campus together with a staff cycle hub. A sale and lease back model was put in place such that the car park could be built without the need for the Trust to raise capital for the construction costs. The ongoing liability was then funded via the re-division of revenue already being paid for off-site parking.

The project included 936 secure parking spaces for staff and visitors to the hospital including a significant proportion (10% space) of DDA spaces to reflect the healthcare nature of the site.

A 100 space staff cycle hub including cycle storage, showers, drying spaces and lockers was also developed as part of the scheme.

The scheme was delivered on time and on budget and an overage provision gave rise to a c£1.3m overage payment to the Trust.

The roof of the MSCP has subsequently become the ideal location for our new helipad which provides direct bridge access into the Emergency Department.



Oxford Road Corridor

The Oxford Road Corridor is Manchester's innovation district located south of the city centre and home to a unique concentration of science and technology businesses, academics, clinicians and world-leading health institutions, MFT being one of them.

The development of Citylabs 1.0 was a significant contribution to the vision of Manchester's Oxford Road Corridor as it formed part of the Life Science Enterprise Zone, with Manchester Science Park (MSP).

The Zone specialises in life sciences, which is key to the economic priority for the corridor and the wider Greater Manchester region. It provides a competitive advantage to drive future growth in the sector, including its physical infrastructure through to its supply chains, skills and knowledge base.

Its location is crucial to the appeal as it provides direct access to the clinicians, patients, universities and students.

Our Charities

The Manchester Foundation Trusts Charity provides support to those patients most in need across the entire group. Their mission is to support the excellence in treatment, care and research which MFT provides to their patients each and every day, to make a real difference to the people by ensuring they continue to receive the very best treatment in the very best facilities.



The charity aims to do this by:

- Supporting research projects to improve the understanding of illnesses and how best to treat them
- Helping to create a more friendly environment
- Providing state-of-the art equipment for diagnosis and treatment
- In line with this, the charity has supported numerous people and projects across the estate

Case study: Helipad

In 2016, £3.9 million was raised to build the helipad on top of the Grafton Street car park at the Oxford Road Campus. The helipad, the first of its kind in the North West, enables critically ill patients to be airlifted straight to the Trust's hospitals in Manchester city centre and has been used by the Air Ambulance over 70 times since opening in May 2021.

The helipad allows patients to be seen within minutes by trauma specialists which can be vital to help save lives and improve outcomes during time critical situations.

This is a major milestone for the Trust It is the first helipad of its kind in central Manchester and has a high-level link bridge straight across to our Emergency Departments in Manchester Royal Infirmary and Royal Manchester Children's Hospital.



6.0 Conclusion

As a group we are committed to delivering the highest quality healthcare services to our patients across our portfolio and we have established a strong position in order to do so. As we continue to develop under the guidance of our highly skilled people and sophisticated management systems, we will remain critical of our performance and measure ourselves on a continual basis.

We will continue to form lasting relations with our providers to ensure the same high levels of service standards are demanded regardless of the individual, working collaboratively to achieve our objectives.

Throughout all of these objectives there is one central focus and that is to provide excellent healthcare facilities and services to our patient both now and long in to the future.

Useful Document Links

Ctrl + Click to follow each of the below links:

[Trust Website](#)

[Code Green 2022](#)

[Wythenshawe Campus Strategic Regeneration Framework 2021](#)

[North Manchester General Hospital Site Strategic Regeneration Framework 2021](#)