

North West Dumfries Primary Care Centre- Full Business Case

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Optimism Bias



NHS Dumfries & Galloway - North West Dumfries PCC Development Optimism Bias Workbook

08-Nov-10

Step 1 Calculate Upper bound

Step 2 Assess the level of mitigation

Step 3 Compute residual optimism bias

	Option 4
Build Complexity	3.00%
Location	3.00%
Scope of Scheme	6.00%
Extent of Service Changes	5.00%
Gateway RPA Category	0.00%
Upper Bound	17.00%
Mitigation Factor	21.00%
Residutal Optimism Bias	3.57%

UPPER BOUND

NHS DUMFRIES & GALLOWAY

North West Dumfries PCC

Actual % Upper Bound for this project Lowest % Upper Bound Upper % % PiW

Optimism Bias - Upper Bound Calculation for Build

Option 4 13% 40% 80% 17%

Choose 1 category Choo	Build complexity				Scope of scheme			
10	Choose 1 category		Option 4		Choose 1 category		Option	and a
2 to 4 years 2.00%	Length of Build	< 2 years	×	0.50%	Facilities Management	Hard FM only or no FM	×	%00.0
Choose 1 category Equipment Choose 1 category All equipment included All equipment inc		2 to 4 years		2.00%		Hard and soft FM		2.00%
Figure Choose 1 category Equipment Figure Choose 1 category		Over 4 years		2.00%				
Equipment Group 1 & 2 only A zerony					Choose 1 category			
1 or 2 Phases	Choose 1 caregory				Equipment	Group 1 & 2 only	×	0.50%
Sor 4 Phases	Number of phases	1 or 2 Phases	×	0.50%		major Medical equipment		1.50%
More than 4 Phases 5.00% IT Infrastructure & systems 5.00% Infrastructure & systems x 2.00% Infrastructure & system		3 or 4 Phases		2.00%		All equipment included		2.00%
Transport Tran		More than 4 Phases		2.00%				
ites involved Single site* 2.00% The structure & systems Thirdsstructure & systems The structure of systems The struc	Choose 1 Category				Unoose I category	No IT implications		0.00%
means new build is on same site as existing facilities means new build is on same site as existing facilities means new build is on same site as existing facilities ategory reen field New build x 3% Service changes - relates to service delivery e.g NSF's rown Field New Build Sw	Number of sites involved	Single site*		2.00%		Infrastructure	×	1.50%
More than 2 site	(i.e. before and after	2 Site	×	2.00%		Infrastructure & systems		2.00%
means new build is on same site as existing facilities Texternal Stakeholders 1 or 2 local NHS organisations Treen field New build x 3% Service changes - relates to service delivery e.g NSF's crown Field New Build Over 50% refurb 10% Over 50% r	change)	More than 2 site		2.00%		,		
ategory reen field New build x 3% rown Field New Build State for the field New Build State for	* Single site means new b	uild is on same site as ex	kisting fac	lities	Choose more than 1 ca	egory if applicable		
3 or more NHS organisations x alegory reen field New build x 3% New Build 8% New Build 8% Less than 15% refurb 6% refurb 70ver 50% refurb					External Stakeholders	1 or 2 local NHS organisations		1.00%
Treen field New build x 3% Service changes - relates to service delivery e.g NSF's rown Field New Build Stable environment, i.e. no change to service and 15% refurb 6% Identified changes not quantified 16% - 50% refurb 16% Choose 1 category Low Stable environment, i.e. no change to service	Location					3 or more NHS organisations	×	4.00%
iregory New build x 3% Service changes - relates to service delivery e.g NSF's rown Field New Build 5% Choose 1 category Less than 15% refurb 6% refurb 10% Choose 1 category Over 50% refurb 16% Choose 1 category Choose 1 category Gateway Choose 1 category RPA Score Low x Medium High						Universities/Private/Voluntary		
Service changes - relates to service delivery e.g NSF's						sector/Local government		8.00%
New build X 3% Service changes - relates to service delivery e.g NSF's	Choose 1 Category							
rown Field New Build S% Choose 1 category New Build Stable environment, i.e. no change to service A lidentified changes not quantified 15% - 50% refurb 10% Longer time frame service changes Over 50% refurb 16% Choose 1 category Gateway Choose 1 category RPA Score Medium High	New site - Green field	New build	×	3%	Service changes - rela	tes to service delivery e.g NSF'	Siz	
New Build or Stable environment, i.e. no change to service	New site - Brown Field	New Build		%8				
Less than 15% refurb Less than 15% refurb Over 50% refurb Over 50% refurb Over 50% refurb Choose 1 category RPA Score Medium High	Existing site	New Build		2%	Choose 1 category			
Less than 15% refurb 15% - 50% refurb Over 50% refurb Over 50% refurb Choose 1 category RPA Score Medium High		or			Stable environment, i.e.	no change to service	×	2%
15% - 50% refurb Over 50% refurb Over 50% refurb Choose 1 category RPA Score Medium High	Existing site	Less than 15% refurb		%9	Identified changes not o	nantified		10%
Over 50% refurb Gateway Gateway Choose 1 category RPA Score Medium High	Existing site	15% - 50% refurb		10%	Longer time frame servi	se changes		20%
ategory Low Medium High	Existing site	Over 50% refurb		16%				
alegory Low Medium High					Gateway			
Low X Medium High					Choose 1 category			
					RPA Score	Low Medium	×	5%
						High		2%

MITIGATION NHS DUMFRIES & GALLOWAY North West Dumfries PCC

Option name: 4 - Relocate GPs, CN& HV, PC base & Adult & Child Drug service

			& Child Drug service
Contributory Factor to Upper Bound	% Factor Contributes	% Factor Contributes after mitigation	Explanation for rate of mitigation
Progress with Planning Approval	4	0	Planning to be reviewed in Nov 2010 by D&G Council Planning Committee, with acceptance expected
Other Regulatory	4	1	Part of wider development which has progress. Initial approach made
Depth of surveying of site/ground information	4	1	Most surveys completed
Detail of design	4	1	Detailed SoA developed. Detailed design signed off via Frameworks Scotland process.
Innovative project/design (i.e. has this type of project/design been undertaken before)	3	1	Standard design
Design complexity	4	1	Simple design
Likely variations from Standard Contract	3	1	Limited variations anticipated.
Design Team capabilities	3	1	Reputatable Design Team
Contractors' capabilities (excluding design team covered above)	4	1	PSCP Contractor appointed
Contractor Involvement	4	1	PSCP Contractor appointed, market testing of sub-contractors packages nearing completion
Client capability and capacity (NB do not double count with design team capabilities)	5	1	Experienced team in place
Robustness of Output Specification	20	3	Detailed SoA developed with stakeholder agreement
Involvement of Stakeholders, including Public and Patient Involvement	5	2	Stakeholder involvement from all parties
Agreement to output specification by stakeholders	5	1	Significant clinical other staff and stakehodler input
New service or traditional	3	1	Traditional service
Local community consent	3	1	General acceptance
Stable policy environment	20	2	Meets current framework for primary care services
Likely competition in the market for the project	2	1	Likely to be high level of competition
TOTAL	100	21	

Note: Across all contributory factors, mitigation would be expected to be greater the greater the extent of risk quantification and risk management.



Investment Programme

1		NHS Dumfries	s and Ganow	ау			
E000s Capital Expenditure E000s E000s		INFRASTRUCTURE INV	ESTMENT PI	ROGRAMI	ΛE		
1	10-11						2015-10
2 1,222 Rolling Programmes 700 7)00s	Capital Expenditure	£000s	£000s	£000s	£000s	£000s
2 1,222 Rolling Programmes 700 7		a) Property (list holesy)					
3 13,340 Acute Mental Health Development 10,751 2,400 3,007 1,000 1,00	252		700	700	700	700	700
4			10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	100	100	100	100
Section Capital Resource Limit (CRL) Section Sec			1,000,000,000	3,007			
Total Capital Resource Limit (CRL) Schools Saving(Excess) against CRL Saving(Excess) against CR	0	, , , , , , , , , , , , , , , , , , , ,	1,000	2,000	1,000	1,000	1,000
1			19002004				1
1			400				
1			175				
2			0.000				
b Equipment (list below)	0	Other					
1,096	,375	Total Property Expenditure	16,389	5,707	1,700	1,700	1,700
Other							
1,96	315		1,096	1,246	1,246	1,246	1,246
Committee Comm	115		1.000	1 246	1 246	1 240	1,246
2 173	110		1,080	1,240	1,240	1,240	1,240
182 Labs Systems Replacement	73		480	250	250	250	250
Other			100000000000000000000000000000000000000	230	250	230	250
Saving/(Excess) against CRL Savi							
Other	355	Total Property Expenditure	931	250	250	250	250
Other Capital Resource Limit (CRL) Solution Capital Grant Funding Capital Grant Funding Fund		d) Intangible Assets					
Total Intangible Asset Expenditure							
16,545 Total Capital Expenditure					•		
Capital Resource Limit (CRL) SGHD Formula Allocation 14,801 3,007 0,548 0 0 0 0 0 0 0 0 0	0	l otal Intangible Asset Expenditure	0	0	0	0	0
Sell	,545	Total Capital Expenditure	18,416	7,203	3,196	3,196	3,196
Sell		Canital Recourse Limit (CPL)					
10,548	697		2.196	2.196	2.196	2.196	2,196
O Other Centrally Provided Capital Funding 400 0 0 0 0 0 0 0 0					2,100	2,100	2,100
10	0	Other Centrally Provided Capital Funding	400				
19,195 Total Capital Resource Limit 18,416 7,203 3,196 3,196 3 3 3 3 3 3 3 3 3						7 7 7	0
2,650 Saving/(Excess) against CRL 0							1,000 3,196
Total Asset Additions Tota	130	Total Capital Resource Limit	10,410	1,200	3,130	3,130	3,130
Other	650	Saving/(Excess) against CRL	0	0	0	0	0
Other							
Other O	00	Donated Assets	100	100	100	100	100
Other Othe		Asset Additions					
Total Asset Additions 0 0 0 0 0		Other					
2010-11 2010-12 2011-12 2012-13 2013-14 2014-15 2018	0		0	0	0	0	0
2010-11 2010-12 2011-12 2012-13 2013-14 2014-15 2018	0	Canital Income					
2010-11 E000s Payments Existing PPP Unitary Charges Proposed PPP Unitary Charges Finance Leases Operating Leases Total Total Total Total Total Total Total Total Total Total Total	U	Gapital Income					
2010-11 E000s Payments Existing PPP Unitary Charges Proposed PPP Unitary Charges Finance Leases Operating Leases Total Total Total Total Total Total Total Total Total Total Total		External Fundi	ng Commitme	ents			
E000s E000	0.44	1			2042 44	2044.45	2045 40
1,825 Existing PPP Unitary Charges 1,720 1,690 1,696 1,773 1		Paymente			5.77	Control of the Contro	2015-16 £000s
Proposed PPP Unitary Charges Finance Leases Operating Leases 1,825 Total 1,720 1,690 1,696 1,773 1				11 400 11 7 10 1			1,807
Finance Leases		Proposed PPP Unitary Charges	40.45	.,,,,,,	1,353		.,00,
1,825 Total 1,720 1,690 1,696 1,773 1		Finance Leases					
Memorandum	005	•	4 = 2 2	1.000	4.600		
2010-11 2011-12 2012-13 2013-14 2014-15 20 2000s 2000s	825	I otal	1,720	1,690	1,696	1,773	1,807
£000s Capital Grants £000s		Memo	randum				
£000s Capital Grants £000s	0.44		2011-12	2012-13	2013-14	2014-15	2015-16
2 50 0 0 0		Capital Grants					£000s
							0



Project Costs

Summary

	Base Cost	PSCP OHP	Gross Cost	Costs To Revenue
	£	£	£	٤
PSCP Costs (Excluding VAT)				
Building Works	3,333,879	236,705	3,570,584	0
Preliminaries	466,141	33,096	499,237	0
Risk Allowance	70,000	4,970	74,970	0
PSCP Markup (7.1%)	274,771	-274,771	0	0
Works Total (Excl Vat)	4,144,791	0	4,144,791	0
Non Works Costs				
Surveys	40,056	2,844	42,900	0
PSCP Markup (7.1%)	2,844	-2,844	0	0
Non Works Total (Excl Vat)	42,900	0	42,900	0
Design Fees				
FBC Design etc	53,118	3,771	56,889	0
Architect: JM Architects	87,270	6,196	93,466	0
Civil & Structural Engineers: Arup	61,650	4,377	66,027	0
Building Services Engineers: Hulley & Kirkwood	76,857	5,457	82,314	0
Cost Consultants: Doig & Smith	18,495	1,313	19,808	0
Accoustic Engineers: Ove Arup	4,500	320	4,820	0
Total Fees	301,890	21,434	323,324	0
PSCP Markup (7.1%)	21,434		0	0
Fees Total	323,324	0	323,324	0
Maximun Target Price	4,511,015		4,511,015	0
VAT on Works (Excl PSCP OH & P)				
VAT Payable			828,958	0
Less PSCP OHP Recoverable			-54,954	0
Net VAT			774,004	0
NHS Board Costs				
Fees				
Supervisor (0.27% of Construction)			10,430	0
Board Cost Advisor (1.29% of Construction)			50,700	0
CDMC (0.21% of Construction)			8,325	0
PSC Consultant Fees Total			69,455	0
Other Fees etc				
D&G Council: Planning Applications: No VAT			9,370	0
D&G Council: Building Warrants: No VAT			12,630	0
NHS NSS: CLO: No VAT			9,000	0
BREEAM/Ecologist Fees & Costs			16,900	0
VAT Advice			1,750	0
Enabling Works Fees			8,455	6,455
Business Case Preparation Fees			19,000	0
Play Park to D&G Council			22,000	0
Surveys			0	0
Legal Fees			5,000	0
Property Advisor			9,000	0
Asite Fee			10,000	0
Valuation Office Agency (VOA)			1,500	0
OBC Design Team Fees			101,744	101,744
Other Fees Total			226,349	108,199
Fees Total			295,804	108,199

	Base Cost	PSCP OHP	Gross Cost		Costs To Revenue
	£	£	2		£
Land & Buildings					
Land Purchase			150,000		0
Total			150,000		0
Equipment: (Incl VAT)			,	VAT Included	
Group 2 to 4 (2% of Construction Cost)			100,300	16,717	0
Total Cost Incl VAT			5,831,123		108,199
Client Risk			190,000	3.21%	0
Optimism Bias (from SBC)			0	0.00%	0
Total Cost			6,021,123		108,199
Health Board Revenue Costs					
Transitional & Commissioning costs			5,200		5,200
Other Costs Total			5,200		5,200
Overall Project Cost			6,026,323		113,399
Total Project Cost Excl Revenue (prior year	ar)		5,912,924		



Non Financial Risks and Benefits

Appendix 4 - Non financial risks and benefits

Non financial risks

The following non financial risks have been extracted from the Joint Risk Register shown in Appendix ?? using the same reference numbers

1	Delay in acquiring site	2	4	8
2	Approval to retain existing electrical sub station not given	2	4	8
3	Cannot acquire site	1	5	5
9	The Board and PSCP commercial teams may fail to integrate	2	2	4
12 (C)	Archeaological remains are discovered on the site	2	3	6
14	Delay in obtaining planning permission - The nature of the design proposals result in delay in obtaining planning consent	1	3	3
16	Team May fail to engage with Infection Control during design	2	3	6
65	External political influences adversely impact project	1	3	3
92	Delay in Building Warrant approval	2	3	6
105	May not conduct equipment planning effectively	2	2	4
107	May fail to get access to site when planned	2	3	6
109	Board may delay approval of completed designs	3	3	9
111	Issues with site ownership / title / right of way	3	4	12

pacity	and Demand Risks			
13	Inability to deliver critical clinical / functional adjacencies. There is a risk that the proposed option will not deliver critical clinical / functional adjacencies	1	2	2
26	Failure to deliver required levels of performance - Required levels of clinical performance are not achieved resulting in an inability to match the capacity to the clinical service demands	2	4	8
27	Insufficient space and capacity - Service configuration fails to deliver facilities and care where and when it is required and/or facilities are not flexible enough to meet potential service demands	2	3	6
28	Facilities not flexible enough to respond to changes in service & demand. The service model is not adequately flexible to allow capacity to be expanded at the rate reqired to support the anticipated levels of patient referrals.	2	3	6
29	Unused facilities and capacity - The service model results in surplus capacity (perhaps offset by inadequate capacity elsewhere in thehealth economy) and/or anticipated demand does not materialise	2	2	4
30	Inadequate patient environment - The physical environment is not able to meet statutory/dignity/clinical requirements for the patient group	1	4	4
49	Inadequate management of the various stakeholders' requirements	2	3	6
64	Frozen GA and Outline Specifications are inadequate for required use	3	3	9

31 (a)	Difficulty in recruiting and retaining suitably skilled, high quality staff - The labour market is such that it does not provide adequate quantities of suitably skilled and experienced staff - during operational phase	2	3	6
32	Failure to improve communication and multi-disciplinary team working - Clinical services operate in physical isolation from other services reducing the opportunity for services to interact and co-operate more efficiently	2	2	4
80	May be unable to acquire people resources when requires (staff and operatives)	2	2	4

1 (1)	PSCP Unable to achieve No of points required for BREEAM Pre-	2	5	10
4 (A)	assessment Excellent rating	2	3	10
4 (B)	NHS D&G Unable to achieve No of points required for BREEAM Pre- assessment Excellent rating	2	5	10
4 (C)	PSCP Failure to obtain BREEAM Contruction Stage Excellent Rating	2	5	10
4 (D)	NHS D&G Failure to obtain BREEAM Contruction Stage Excellent Rating	2	5	10
33	The risk that stakeholders do not fully buy into the service delivery model for the new facility - Key service leads identify concerns over the co-location of certain services, resulting in either compromised solution or undue delays	2	2	4
34	The risk that patients feel stigmatised due to single identity of the service - Creates an adverse impact of service take up, with increased numbers of people not receiving appropriate treatment	2	2	4
35	Service location impacts adversely on users ability to access services - A significant number of the practice / client population live out with the area and find it more difficult to access services	2	2	4
36	Adverse publicity resulting from failure to justify levels of investment - The level of capital and revenue investment required to support the changes cannot be justified when compared to the overall benefits	1	2	2
83	Unable to move into new facility on planned date - completed health centre	2	3	6
96	Disintegration of relations between local community with NHS D&G	1	3	3
113	Failure to meet equality in design	2	3	6
114	May fail to identify appropriate stakeholders	2	2	4

Non financial benefits

	Criteria	
A1	Accessibility	
A2	Capacity & Flexibility	
A3	Operational & Environmental Suitability	
A4	Strategic Fit	
A5	Staff Recruitment, Training & Development	



Joint Risk Register

GUIDANCE NOTES

INTRODUCTION

vork Scotland Joint Project Risk Register is shown in the attached Excel Worksheets which are part of an Excel Workbook which incorporates this guidance

he NHS Client Project Director is the overall owner and champion of the Framework Scotland Joint Risk Register for a Framework Scotland Project.

ork Scotland Joint Project Risk Register for a Framework Scotland Project and they will collate and co-ordinate inputs from the NHS Client, Professional Advisors appointed by the NHS Client, and the Fram

The Framework Scotland Joint Project Risk Register should incorporate all risks associated with the various aspects of an NHS Framework Scotland Project i.e. Land Purchase/ Design/Construction/Business/ Clinical/Operational/ Staffing/Equipment Risks.

thilist Health and Safety may not be identified as a risk separately in it's own right on the Framework Scotland Joint Risk Register because it is covered by Statutory Legislation any Health and Safety items that may result in a cost or time risk may be added to the Register because it is

Whilst the NHS Client Project Director and the PSCP will act as joint owners of the Framework Scotland Joint Project Risk Register for a Framework Scotland Scheme responsibility for risks identified in it will be allocated and identified on the Register,

mework Scotland Joint Project Risk Register should be subject to continuous review and updating by the whole Project Team/Supply Chain as provided for in the Risk Management requirements/process identified within the Framework Scotland NEC3 Contract Template and

The Framework Scotland Joint Project Risk Register is a key project control document. It should be an agenda item at every Framework Scotland Project Team meeting. All high priority risks should be reviewed with a general overview provided on all other risks to ensure that either individually or cumulatively their impact on the project is not escalating in respect of their effects on the project to the extent they become a high priority.

4 Generic Schedule of Risks has been provided in Example Risks Worksheet with a list of risks that have been identified. NHS Client, Professional Advisors appointed by the NHS Client, and the Framework Scotland Principal Supply Chain Partner (PSCP) and their supply chain membe ould use this list as a checklist only and collaborate to develop a "joint" project specific register for the intended project, Guidance of the description of risk has been provided in the Risk Delinition/Description section of this guidance of the description of risk has been provided in the Risk Delinition/Description section of this guidance of the description of risk has been provided in the Risk Delinition/Description section of this guidance of the description of risk has been provided in the Risk Delinition/Description section of this guidance of the description of risk has been provided in the Risk Delinition/Description section of this guidance of the description of risk has been provided in the Risk Delinition/Description section of this guidance of the description of risk has been provided in the Risk Delinition/Description section of this guidance of the description of risk has been provided in the Risk Delinition/Description section of the section of the section of this guidance of the section of t

version of the Framework Scotland Joint Project Risk Register should be given a version number, identify when it was last reviewed and identify the author/collator of the document together with a record of those who participated in the revie

oles are included below to assist users in the completion and use of the Framework Scotland Joint Project Risk Register. The headings match the column headings of the standard format.

- IISK CATEGORIES

 Risks will be identified and managed throughout all phases of the project and may remain active for several phases, namely

IISK REFERENCE
Each risk florrilled should be given a unique reference, which must not be changed during the life of the project. Even if a risk is cleared the reference should be retained on the Register. This will allow the history of each risk to be traced by comparison of various versions of the ramework Sculand Joint Project Risk Register.

RISK DEFINITION / DESCRIPTION

to risks correctly as opposed to identifying the consequences of a risk occurring and mitigating actions, simple examples to illustrate this requirement are as follows:

k Example A:
Risk Description — May Fail to adhere to Specification and Drawings;
Risk Consequences/Causes/Mitgation — Incorrect NHS Client Brief, Failure by Designer to understand NHS Client Brief etc — you then identify what action you are going to take to avoid these issues and who is responsible for it.

Example 1: Risk Description — The design may fail to support the Brief;
Risk Description — The design may fail to support the Brief;
Risk Description — The design may fail to support the Brief;
Risk Consequences/CauseathRigation — Poor performance by Designers, Poor management of Designers etc — as above you then Identify what action you are going to take to avoid these issues and who is responsible for it.

2.ASSIFICATION
There are two variables of risk – probability (likelihood) and impact (consequence). The product of both identifies the seriousness of the risk exposure.

PROBABILITY / LIKELIHOOD OF OCCURRENCE There are 5 categories of probability/ likelihood of exposure:

i	Rare	Will occur only in exceptional circumstances
2	Remote	Unlikely to occur
3	Possible	Reasonable chance of occurring/ may occur occasionally
4	Likely	Likely to occur
5	Almost certain	More likely to occur than not

IMPACT / CONSEQUENCE OF OCCURRENCE There are 5 categories of impact/consequence of exposure:

1	Insignificant	No risk to the project No impact on services No impact on the environment
2	Minor	Minor risk to project Minor impact on services Minor impact on the
3	Moderate	Some impact on project Some service disruption Moderate impact on the environment
4	Major	Significant impact on the project Cost implications with a value of between 2%-4% of Target Price on a Framework Scotland scheme Major impact on the
5	Catastrophic	Stops or delays project Cost implications with a value in excess of 4% of Target Price on a Framework Scotland scheme

SK PRIORITISATION

The product of likelihood x impact identifies the seriousness of the risk exposure and therefore it's priority.

traffic flight system as noted above its used to illustrate the priority of risks. The above reflects the requirements for Framework Scotland Projects. NHS'Clients and PSCPs may agree to vary the above bands but only an increase in the range for the High Risk (Red) banding E.G. 12-25 is

live by five probability and impact matrix must be used in association with the Joint Risk Register on all Framework Scotland Projects as this is the basis of assessing seriousness of the risk exposure within the NHS and Public Sector as a whole.

ISK RATING MATRIX



RISK OWNER This was either on one twist Cleent or the Framework Scordand PSUP. There and no single issues with shared shared ownership is allocated to dom with Cleent and PSUP. In the event that a nisk is identified on the Framework Scordand Joint Risk Register. NHS Clients should consider the extent of their risk exposure and decide whether better value for money will be obtained if some risks are retained by them rather than baseling them own to the Framework Scordand PSCP.

ach risk should have an identified individual who will be responsible for the management of that risk

SISK EVALUATION A QUANTIFICATION - PRIOR TO MITIGATION AND POST MITIGATION

William From the second of sick management is to operate safely in accordance with legislation and achieve quality, Additionally risks can have an impact on the following:

Time; Cost.

e impact of risks on these must be evaluated at the time a risk is included on the risk register and monitored as the scheme progresses

he "Post Migation" column should be completed for all risks on all Framework Scotland Projects, the The NHS Client and the PSCP shall agree as to whether the "Prior to Migation" column is completed taking account of the following benefits that its or unconversed on unconversed on the interest of the prior to Migation control in the interest of the the inte

RISK ALLOWANCES FOR COST & TIME.

All risks are to be evaluated and quantified. Most good risk management systems have an agreed regime for calculating individual and total risk allowance and may involve estimates of minimum, most likely and maximum time and cost estimates. There are also methods involving the u of attaints and analysis tools such as eights of Monte Carlo Simulation. The methodology for specific Framework Scotland Projects is to be agreed between the NHS Client and the PSCP.

here a time risk affects the Critical path on the Programme this should be noted and this can be achieved by adding a note in the Comments Column on the Time Evaluation Worksheet.

FUNDING IMPLICATIONS

If this is required by the NHS Client identify in the comments column whether the funding to remedy the risk is either Capital or Revenue

ISK ACTION PLANS

(ACTION PLANS is Action Plan must be prepared for all High Priority Risks (Red) using the pro forma included in the Risk Action Plan Worksheet. This identifies: the risk owner and person responsible for the risk; mitigation measures that need to be put in place; and other actions that could be taken if the risk occur.

The NHS Client and PSCP shall agree on any requirement to complete a Risk Action Plan for Medium (Amber) or Low Priority (Green) Risks.

In the event of any risks originally identified as being Medium (Amber) or Low (Green) Priority changing their priority to High (Red) Priority as a Framework Scotland Project progresses then a Risk Action Plan must be completed. In addition, any new risks that are identified as a Fran

RISK STATUS
Risks are identified as "Open" or "Closed" using the buttons provided on the Worksheet. A risk is identified as being closed once the point where it can have have an effect on a Framework Scotland Project has passed and so is not required to be shown

OPERATION OF EXCEL WORKBOOK / SPREADSHEET

Control Buttons -	The flisk Register contains 'Control Buttons' which allows the User to easily look at the information held on the register. In order for these buttons to work, the fisk Register must be filled out convextly. In particular, it is important that the 'Closed Out' column contains a Yor N to indicate the status of the Risk. See the "Example Risks" on the Risk Register Tab to see how a Risk should be completed.
High Risks Button -	This shows the User all those non-Closed Out Risks which are classified as High Level - a RED Risk which is scored between 15 and 25 Post Milgation.
Medium Risks Button -	This shows the User all those non-Closed Out Risks which are classified as Medium Level - an Andrew Which is scored between 5 and 14 Post Miligation.
Low Risks Button -	This shows the User all those non-Closed Out Risks which are classified as Low Level - a Green Risk which is scored between 1 and 4 Post Misjarion.
	This shows the User all those Risks which are yet to be Closed Out and are therefore still to be Actively Managed (i.e. All those Risks which have a N in the Closed Out Column.)
Closed Risks Button -	Shows the User all those Risks which have been Closed Out and no longer require Active Management (i.e. All those Risks which have a Y In the Closed Out Column.)
Overdue Risks Button -	This shows all the Risks which have passed the Action Date and have not been Closed Out (N.B. the Action Date column must be completed in the DD/MM/YYYY format for this button to work).
Action Date Approaching Button -	Shows those Risks which are within 7 days of the Action Date (N.B. the Action Date column must be completed in the DDIAMAYYYY format (or this button to work)
Reset Bulton -	This allows the User to Reset the Risk Register to show All Risks. It is important that the User Resets the Risk Register before Saving in order to ensure that all Risks can be seen and managed accordingly.

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Framework Scotland Generic Risk Register

WORKSHOP NO:	1	DATE:	14/01/2010
ATTENDEES:			
1	Donald Millar	- NHS Dumf	ries & Galloway
2	Allan Cunning	ham - BAM	
3	David Muir - E	BAM	
4	Roy McNee -	BAM	
5	Peter McCom	nick - JM Are	chitects
6	Elaine Oliver	- JM Archite	ects
7	Alistair Wylie	- Arup	-95
8	Paul Winning	- Hulley & F	(irkwwod
9	David Miller -	McGowan A	Miller
10	Robert Rankir	1 - Davis Lar	ngdon
11	Gareth Clift - Davis Langdon		
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WORKSHOP NO:	2 DATE: 27/10/2010
ATTENDEES:	
1	Donald Millar - NHS Dumfries & Galloway
2	Allan Cunningham - BAM
3	Roy McNee - BAM
4	Robert Rankin - Davis Langdon
5	Michael Gallacher - Davis Langdon
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COMMON AISKS

			escription			
May	all to loca	tily approp	غائدا كادا	holders		
May I	all to engi	ge with Sta	aboten			
Statu	holder int	y have cont	radictory a	apiration	•	
Nay.	not involv	e appropri	rie Profes	stonal co	pertine	, (Design
Come	nerdal, C	irical)				
U _N Y I	عاده ما الد	عامك وأعاضا	mine the	overali p	rogran	rite
May VALC)		abiish Finas	icial Paten	seters, (C	apilal	Revenue
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Then	may be	fauolificien	funds to	deliver	the fi	Al Clinks
Carrie	rement					

	Outline Business Case
Description:	
Way fall to id	entify appropriate Stakeholders
	rgage with Stakeholders
	may have contradictory aspirations
May not invol	ive appropriate Professional expertise, (Design, Commercial, Clinical)
Way falt to a	Sequately determine the overall programme
	realise the expected contributions, (tand safe, other asset sales, AT Recovery)
Slav fail to ac	ositre Outline Planning Permission
The Require	ment Statement may fall to Ezep abreast with future Clinical
	nent Statement may be subject to uncontrolled Scope Creep
	changes to Etimical regulations or other related legislation
	may fail to identify and address Site constraints, (tisted Building numental concerns, ground conditions).
	Instation calculations may be inadequate (NPS)
Soirds any f	oil to identify future staff requirements
Boards may f	all to acquire appropriately stalled staff
rscrs may fa	il to acquire appropriately skilled staff
There may b	e a lack of resource (Funds, time or people) to complete the OSC fectively

	Euil@uriness.Case
Desc	fption:
U vy 6	ait to identify appropriate Stakeholders
, ,	mi in irrinal, abhirbitair zimerimodi
	all to common and state below.
	all to engage with Stakeholders
CL YZ	holder may have contradictory aspirations
	not frontre appropriate Professional expertise, (Desi-
Cocnin	sendal, Clinical)
VV I	ill to adequately defermine the overall programme
Uv f	all to establish Financial Parameters, (Capital, Revenue, WLC)
UAY F	ail to define appropriately the Clinical Need
	may be insufficient funds to deliver the full Clinical Requireme
mere	may be modificate ratios to occurs the rate cultivative quiteric
	ail to realise the expected contributions, (Land sale, other as
	Grants and VAT Recovery)
	ail to acquire Outline Planning Permission
he I	kequirement Statement may fail to keep abreast with fut-
Unde	al Practices
	lequirement Statement may be subject to uncontrolled Sco
Crees	
	may be changes to Obideal regulations or other relations
Legis.	miger
	options may fail to identify and address Site constraints, (List
UNIO	ng status, environmental concerns, ground conditions).
tma	naction inflation calculations may be (raidequate (AIPS)
SOM C	s may fail to identify future staff requirements
inar-	s may fail to acquire appropriately skilled staff
	may (all to acquire appropriately skilled staff
Ariu	t initation may exceed MIP5
	of discharging conditions of Planning Consent may be greater th
alfon'	ince provided for
Sport	rais may be delayed
Dare	s may not have the experience to manage the Project
SCP	may not have the experience to manage the Project
the P	SCP approach to Cost Planning may not be effective
	nard approach to Cost Planning may not be effective
Lw I	alt with changes to Legislation/Standards, (DDA, Building Re-
	Fire Regs, CDN BREEAN etc.)
	ot conduct Equipment Plaining effectively
the f	esign may fail to support the Brief
	alt to maintain a consistent interpretation of Standards
me Þ	rogramme Plans may be misaligned and inconsistent
The o	PSCP Programme may not comply with with the Contr
requi	rements
Work	information may not be adequate or accurate, (PS
	hupent Stage - review and ownership of existing Wo
	region)
	may fail to estimate an appropriate level of Design Continges
	il the Target Price
	objection may influence Planning Permissions
	esign may not comply with local Planning Regulations
	all to consult with the Planuing Authority
lay (nil to comply with Emirosmental Regulations
va i	ail to comply with Traffic Planning Regulations
	all to comply with Section 106 Approval
	all to comply with Hilliam Remarktions
	all to comply with Utilities Regulations
	may be a lack of resource (Funds, time or people) to comple
	IC Document effectively
	may be a lack of Clarity in the Brief
	ioni to Framework Scotland Contract may not be approved
Yarra	
faria: Igree	d
qree	d outd and PSCP Commercial Teams may full to integrate

	Construction
	Description:
Note:	Health and Safaty is treated independently but be aware that certain Hirs Ricks, say as a
HDI4:	part of the Berlgo, e.g. Legionnairer, will form a part of this register
	May fail to engage with infection Control during Construction
	May fall to maintain Patient Security during Construction, Decanting etc.
	Hay fall to adhere to Specifications and Drawings
	May use incorrect Procedures and Techniques during Construction
	Staff may not have the correct skills
	Hay felt to adhere to Quality Control Procedures
	May define the extent of Residual design when calculating Target Price
	Proposed materials may not be avaitable
	Proposed materials may not be available at original cost
	The Design may not be "buildable"
	Boards may fait to include allowances for Compensation Events, (Changes to Work
	Information, faiture to meet Approval Periods etc.)
	May forecast final costs inaccurately
	May fail to get access to sute when planted
	May encounter unformers events, (Site contamination, archeological, extreme weather
	environmental, Utility piper/cubles, other unexpected previous construction etc.)
	Lead-in periods may be inaccurate
	May be unable to acquire people resources when required
	Suppliers and sub-contractors may suffer insolvency for other contraints.
	The utilities may provide sub-standard service
	Directly employed sub-contractors may fail to adhere to the Programme.
	Both parties may fail to adopt or quantain a collaborative workin relationship.
	May fail to appreciate the working environment lumitations.

Appendix 5 Joint Rick Register 4 Common Risk

	Date Register First Created: Control Buttone:	ON PERSONAL PROPERTY AND PERSONAL PROPERTY P			Date Updated III							lar, 1845 Dumfrie			ent Stage	Saga 1+3		i			
	Contributions:	100	MAA		tudies Hida	Lie Bills		Arthu Mike		0	and Milita	- 000	rda MA	Little	A S of a App	- Long	Proof	I			
		Pro	т в Игор	Site Ship Sating (1-				Feet		FAR.	Time / Cost	5 160	Agust		Agred		lina in				
	Risk Description Delay in arguing a te	(1-5)	5)	t Rating (1 25)	ActhorPlan Complete-B	Tine / Cottingset	Althigation (4th to pursue legal	Probablity (1 5)	(1-3)	25)	Input	Agreed PSGP Frontales 63,60	Seard Fronties (10,000 to	Agreed PSCP Time	Time 0	PER Comer 1915 DBG	filik Hanager (V nat Filik Owner)	Action Date	Days to Action Data -45504	Old .	Comments
	Approval to retain existing electrical sub- station and given	-	1	1			representatives PSCP risk until Target Price agreed, 1845 DBG			•		10,10	LIGHTON NO	-		1913-04-04					
							Price agreed, 186 District, or other parties of the														1
	Carnot acquire site	1	4	1			Previous 1815 recently		\vdash			£2 00	12.00			HISTOLG			-6564	-	
9	PSCP Utable to selesce	- 1	1	1			into elternative plas. PSCP nek for PSCP target predits. Continuel		H			69.63	\$0.02		9	Mistag			-6564		
	Emviloritrating						receipting cradits required and advisored. Class Dalain with STEEAM amour, Priced														
	POTS DRG Unable to achieve He of	i		10			STEEAN amour, Priced sortingency NG DAG risk for MIC				_	18.00	66.00		è	na na			-6564		
-	prints required for ENEESIA Pre-estressment. Excellent rating						confingency NG DNG risk for NG DNG target credib Early communication with					1									
			١.	10			parsonelrasporeble for orest requires. Priced					62.00	E0.00			Notes			-6144		
0	PSCP Failer to obtain SPEEAN Contraction Plage Circulant Rating	-	+	"			Continguity FICE risk for FICE Largest oradis. Continuel		\Box	Ť		L. C.	LI.W		Ť	740144					
							credits. Continued munitaring credits required and achieved. Core Value with SEZZAM erraner, Priced														
(0)	NAS DAG Fallers to obtain BAEEAN	1	.1:	16			contingency 146 166 risk for HO		\vdash	0	_	(2.00	£5.00			150			-4554	-	
	Contraction Stage Excellent Fating						contingency NAS DAG mix for NAS DAG target creats, - furly communication with														
							personal responsible for credit responses. Priced contingency 1415 (24)Q for maintain					65.69	£8.00			Heres			-E104		
5	There may be charges to clinical regulations or other related legislation						14th DBG to maintain shanges and raise Early Warrangs should arry be														
		3	1.				charges and raise Early Warnings should entry be enterpained. Make entre provision within Client cold.					69.69	£40,000.00			MGING			-6104		
	Charge in requirements of stalleholders - Sound and / or stalleholders - may require		Ť				19th DEG to enture End their and Board Sign off at various design stages. Make provision with														
	sharges to dealge, landing to additional dealges and construction costs	1	3				Make providen with Clientrick					10.00	£15,000.00			Motec			-6364		
4)	Delays in obtaining statilistic as quotas/corpection					1	link amazoment based on April 2011 start on site PSCP continuel links and														
93	Danger of actual control arges for USA	. 1	1				multiple quetes.		\vdash	0		12,500.00	12.00		4	1507			-40304	-	
	Danger of actual cost/of argus for VIVITY connections/diversion not reflecting quites obtained/accepted.						firsh ameniment based on April 1911 start on site PSCP continual tising and multiple marks.			31		in the	325	13	1	- Second			200%		
	Suppliers and sub-contractors may suffer.	1	1	1			multiple quetes. PSCP fluvoid chacks on sub-contraction etc.					£9.60 £5,000.00	60.00			PSCP			-45554 -40564		
	tradisoncy or other constraints The Stand and PSO commenced teams may full to integrate Planning consent refused	1	i	4		- 3.	Constant Easen with			·		60.00	60.00			PSCP & HIS DAG			-6104		
•	Planning consent refused						Planning Department, Statutorty Corporated &					40.00			2	NGDAG			-6564		
	Petantial changes to legislation/standards (dds, bailding regs, fewregs, cdm, littre) Tisk of increased material removal from site due to confett intelligence (ESN), Fest digs	7		1			Councilory Fagiliar Bason with Building Control					60.00	£19,000.00	0		NGDEG		1	-6104		
							Sta kvetigata ed												9421		
iri	below (£7.9%). Level, depth and extent of Past is greater	1	3				Desk Top Survey. Site Breetspith and		\vdash	•		£29,600 00	£0.00	•	•	rscr			-41504		
(0)		1	,			-	Desk Top Survey. Site Investigation and		\vdash		_	10 00	£0.00			PAP			-40104		
n	Archaelogical ramains we discovered an	-1	1				Ded. Top Survey.		\vdash		-	(9 t9	£0.00			PSCP NO DEG			-6164 -6164		
p)	Obstructure annualised in ground during	1	1	1			Ded Top Sarvey Site Investigation and Ded Top Sarvey					10.10	10.00			PSCP			-6354		
	pring operations in ability to deliver critical clinical / Auctional edge-codes. There is a risk that the proposed option will not deliver critical clinical / Amatonal adjacencies						Site Investigation and Dedit Top Survey. NOS DEG to enture End Uner and Board Sign off at revious design Flages Walks provinces with These and														
	dirical / Nantonal attached	1		1			Make prevision with Claritims.					10.00	£0.00			N40 04 G			-6304		
_	Catay in obtaining planning parameters - The nature of the design proposals result in dela- in obtaining planning comment. PICP may fall be estimate an appropriate lavel of design development contingency could be be be to be proposed.						Delogue with Planners undertaken					10 00	£9.10		٠	Nedono			-10504		
5	Pavel of during development contingency against the target price Team May fail to angage with infection	i	1				PSCF close management of designers and process					£19,009.09	£9.09			ю			-40104		
	Team May fail to engage with infection Control during durings						PICE these management of designant and process (siz) SCREE meshap being command at the various project attack with Chart eign all processors being implemented.														
		1	2				procedure being implemented.					60,60	£0.00	0		140 046			-6104		
,	Proposed materials may not be evaluable or flux talating leaders personly oflay field to eithers to works information	1	1				Tarageted.					60 60	£8.60	0		NO.			-6104	_	
				,			High closed - constitutes breach of contract				_	944	65.00						-4554	i	
	Scarth may feel to include allowances for compensation events (charges to works information, failure to most approved carrieds about	1	١,				Clied cortogony almostra PSD Femore					(2.69	CO.00			1015 00 G			-4504		
5	periods, str.) PSCP may be unable to acquire people or resources when required	,					ranagament and					£2 £0	£0,40			PSCP			-40504		
1	Directly employed advicant section may fell to adhere to the programme in ability to coordinate and complete design		i				Positiving Post classed - see Fed Nor et, Q & Q PSCP de gr					65.66	63.60				T.E. T		-6104		
3	notice the agreed binescales. Additional capital requirements as a result of securing planning consent / building	1		1			development allowers a Nut. classed + vell. So			•	-	60.69	68.10			H/JP			-40504		
	-						included in Turget Cost just Raf He 42) REDISTATE purp RESA					12.44	£2.40						-0554	,	
1	Morte information may not be adequate in accurate ignor appointment stage - review and execution of exerting secto information						Nak elesad - PSCP new appointed PERSTATE														
-	May full to comply with planate in	-		1			shared risk Monter Planning Conditions					£8.59 £8.69	£2.55 £2.50			Nes Dag / PSOF			-0104		
,	rability to match the capacity to the direcal service domands	1					nams toda End thert Statuted der Esson					60 60	68.60			HISTORG			-0104		
	Falus to deliver required levels of performance. Propage of levels of chriseal performance are not under and conducing in an acadeling to results that on quality in an exactlely to results that on quality in a standing to result and exactly - Survices configuration fails to deliver function and are where you show not the results and facilities are not facility enough to meet materials are not facility enough to meet materials and comment.																				
	facilities are not facible enough to meet potential service domands Facilities not flexible enough to regard to diargo in service & decand. The service	1	i				14'S D&G End Uterts Statishedder Suson				_	60,60	50,00			N45.06.0			-6504	-	
	model is not adequately flexible to allow reparity to be expanded at the rate reginal																				
,	to support the articipated levels of patient, referrals. United families and capacity. The service	ī	1				iers DEG End Uturk Scalabelder Econ				-	10.00	68.00			NHSTAG			-40504	_	
	to support the amolypated levels of patient, referrible. The second reporting the service model amolths on any fact expecting both against the reducity includes an expecting therefore the second on the state of the second on the state of the backgrade aprileted servicement. The physical anniversance is not daily as the state of the second of the second of the second of the second of the second of the second of second of second second of second of second of second sec						State Haraperent medicing Subshifts									1			1000		
	demand does not materialize Bradequate patient environment - The	Ob.		-	\vdash		redes.		H			19.49	£0.00			1910 (26.0			-40504		
	physical environment is not able to meet statutory/dignity/clinical requirements for the partiest group. Difficulty in recruiting and retaining suitably	-					ien Deo End Liveris Scalabelder Exam					60.00	60.00			NESSEG			-45304		
200	Difficulty in recruiting and returning natiably shifted, high quality staff - The labour market is such that it does not provide																				
	dilled, high quality staff - The labour marked is such that it does not provide adequate question of eartishy shifted and experienced staff - during construction phases	,	1,				This flam is several under R No.2					69.69	65.00			Na			-6554		
4)	phose Deficially in a serial ting and retaining suitably shilled, high quality starf - The follows mortal in such that it does not provide adoquate quantities of satisfy shilled and experience of staff - during operational phose sperience of staff - during operational phose																				
							This item is severed under R Ho 3					63.66	£3.05			1045-066			-654		
	Failure to improve communication and made			Ė			Lorent					-		1							
	disciplinary team working - Clinical services operate in physical isolation from other tervices reducing the opportunity for services to interact and co-operate more						led DAG End thank			8.		Sec.	950	100	1	72.00					
	The risk that stakeful days do not fully boy	-			\vdash		Stahahel der Brazin			9		60.00	\$0.00	•		Manac			-4514		
	Into the service delivery model for the new facility - Key service leads identify consume over the to-location of certain services, resulting in either compromised solution to			*			ies pao sur il r					1				-55					
	The risk that entirely facilation attended the to	1	1		-		1845 D&O End Uherk. Stababelder bezon Stababelder interaction		\vdash		-	60.60	68.50	0		HISTAG			-0504		
	single identity of the service - Creates so salverse impact of service take up, with			+			at various design stages					100	27.0		- 52	82.00			-300		
	increased numbers of people to Creating appropriate bestment. Service live sign impacts adversily on users ability to use as order or "Adjustice", number of the practice of release people from the out-with the ways and find it may difficult to excess services.	-					signage to be considered					£0.00	10.00			N45 56 G			-45554		
	number of the practice / effect population the out with the area and find it mans			1			traffic managements plan in conjunction with End Uter and adventing location accordingly														
	Adverse publicity resulting from failure to	-	1				location accordingly			•		£0.00	£0.00			NHS DN G			-6504	-	
	justify levels of investment - The level of capital and revenue investment required to			1			Service provides entireding facility						200			charge.					
	when compared to the overall benefits.	1-	-			-	purpose Board involving buttness		\forall	0		£9.00	10.00			NODEC			-4554		
	Case distances effectively	1					rane contributors at all rilações					60.00	£3.09		4	Nestes			-40504		
	May fall to catableh financial parameters (capital, revenue, w/c)						Summers Care development anguing														
				1			Target Cost development origing to meet required dates \$160 order 2010					68.00	£0.00			Notes			-0104		
į	Construction inflation calculations may be madequate (might)						Target Cood development origing to ment-required dates 8 November 2010 finis closed - 6: Included in Target Cook (see Fini No 49) 1415 DBG End User 6			- 27		23.00	43.00			MO			-004		
	The risk that Health Sound is not making best		- 0	1			No 49) NHS DBG End User & Statutel dur basen	-				(0.00	62.00			MIS DEG			-6354	-	

_	PSOP Group I Equipment rub-contraction full				PiOP to man	e 545		1000				1-12	-	la diam	-	
4	to actions in the programme NO Group 2 Equipment suppliers fail to salties to the programme	,	,	,	sembasters accorded to the State of the Stat	New Proof	•	10.00	£0.00 £13,000.00		•	PXP HEDEG		-4104		
4	46 Group 3 Equipment subscentractors full to achieve to the programme	1	,	,	Management 1965 Procuration 1965 ORG Pro- Management	t Team Strament through	•			•	•					
41	East amounted with hosping sub-station in survest heretica amount budget	,	,	,	Monagement MG Procured Risk, covered Rams 1 6 7(4)	tTeam other R		£2.09	60.00 60.00			100 00 G		-41104 -41104	*	
	dentisinfutantamidateleik				Sub-coverafies	tor #112,		13.00	63.00			nca		-6564		
4	Visiting ground are different to be before. Tember to to believe that sufficiently resolved.			-	(ALD), 638 to PICP being manufacturer	with prior to				·		no.		-4504	Ť	
4	to complete design Design not developed to watable lavel for soften ently complete by a market facting	1	1	,	tink storaton	to be		10.00	10.00	0		PAP		-4164		
					financed finit afforcable from a finance of pre- be portled to	ability to						100				
4	Target Cost cannot be agreed within budget hadequate management of the various stabulateders' requirements		1	1	Agreed test that the State of the	User &		£2,500 00 £0.00	10.00			NG DEG		-6354 -6354		
	Fallace of the Board to complete FBC in				Constant Name	Later										
50	required binoctales Feliuse to agree final Terget Cost by FBC	- 1	3	-10	Frace Board DSC Managemen Comment bases ON and PSCP	t found between	0	£0.00	£0.00			NHIG		-6354		
50(4)	date 7th Hoventher 2010	-1-	1	1	Property many		•	60.00	60.00		0	PS/P		-6354	_	
11	BRIZZAM Excellent rating is unaffordable at Target Cost	1	· ic	,	being Included and project on being developed Usern with	ate		£9.00	12.50		0	N65066		-6164		
52	BRETANE Constitution to smaller dable at Target Cont Planning Popt fails to most registed approval bimourals for EEC nuteriors on Outspot Solding Seasons commisses leads to sees technical standards required after to	-1-		4	Depriment Operation	ruming		10 00	60.00		0	145.05.0		-6354	-	
n	No acceptons of refuse collection from	4	1	4				69.60	#3.00		۰	PSCP		-6104		
54	Summervilla Crept ent rendts in re-planning of our park. Cort compated with Planning Conditions	,	,	,	Continued dat collection ReA allocation	to be		10.10	£8.09		0	100.000		-6554	_	
11	edicersely impacts budget Reprodution of play park didays construction start data		9	1	directed Uses with Department	Planting		(2.00	£29,009.09		0	Hers De G		-41504 -41564		
					Department Planed up with Gate, 1909 in Turpet Coc completion in autism in	d for										
57	Unities / seven souble to most regard	,	1		completion of social risk infrastructure of	refer rei		£2.60 £2.60	£35,000 60		٠	1845 DB G		-8564 -8564		
57	Jamanda from existing expacity 1815 energy targets are unaffordable FSEP subcontractor selected plant/eq.dpromt course primary design re-	1	200		Design specied and	turbak .	1			•	0	146 646				
50	Lott di Water regularmenta frum	1	1		PSOP risk / He	- 10 14	0	£1,000.00	60.00		0	NO.		-10504	_	
63	Development Impact Ameriment are eneming and come metigation works in success of current allowances	i		· v	traced and other DES profesion and DES profesion with DES profesion with DES profesion with DES profesion and DES profes	Sutte		14.00	62.00	í		HISTOR		-4164	_	
61	Southish Government does not approve CBC Southish Government does not approve FBC	1	1	.10	General Villa Ge	5000		£8.60 £8.60	60.00			NATES NATES		-4164 -4564		
-61					CONTRACT	and adan and						1				
47	Pharmacy Inhestructure provision inchequate for required one Traiber GA on E Outline Specifications are	1	1		supplied for fat			£8.69	£5,000.00			MISSES MISSES		-6164 -6664	¥	
100	External poblical influences adversity				Class Vacco to Commonly and	Publical	- 11	1 7.5							Ė	
45	impact project. 1945 DAG Scand approval not given	-		-	Members Board Sapt infor contrast bass.	med us w	0	£0.00	£0.00			MR DEG MIN DEG		-8564 -8564		
67	Time/cost risk of charging plant room location			100	Opportunity. Cost/frquet Am	gurant		68.69	E0.00			N45 DE G		-4554		
П					10000000000	Table 1										
	Duckla Manning Conditions—playpark- relocation, changes to extende	Liv.	12	3,00	by PICP Note: may all covered by rick Additional mick	sady to 51 to 54 organizad		(8.48	14-14			104 Hills 55 / 56		-4114	*	
	Formal of grouts of Saldingrovia - eak yet completed				by PSCP Nota - this ma time rather th bound risk	te en m a fint		11				1,000				
44	amplated.	-	-		bead risk pers. Dec	feating		60.60	13.60			MEDEG		-0154	,	
n	Fourble charges to established Egypment		-		Nets bbG equipment req end prevision. Univer	draments With End		60.00	£15,000.00			10500.6		-6104		
71	Various programmas and plans may be various programmas and plans may be visiting and TSCP may fail to entimate an appropriate		1		PSCP Py management PSCP	eganna .		10.00	60.00			no		-6554		
	kand of durigs continguous mides Torque	1	,		Continguecy yagdruments			60.00	12.00			no		-6164		
n	Dates Way fell to adhere to dendrap and specifications Way we incorrect procedures and techniques	1	1	-	Construction Co	etrid.		£0.00	£0,00 £0,00	0		PKF		-6104		
14 25	May are incorrect procedures and tachniques during combine tion. Contraction staff may not keep the assessed data. May feel to adhere to Quality Control.		-	10	2907 rbA		0	10.00	13.60					-6164		
71	May fell to adhere to Quality Control proceduration site Proposed materials may not be evaliable	1		1	PSCP risk PSCP risk		0	60 00 60 00	£0.09 £0.00	0	9			-40504 -40504		
	procedust on site Proposed materials may not be ensiche Read may felt to be to be associated Read may felt to be to be associated Read may felt to be to be associated Read may felt to make to make atomic to be associated a															
70	Lead in periods may be invacurate				Poundrish PSCP risk PSCP risk			65-66 (9 69	63-64 63-64		0	rice		-6564 -6564	· ·	
n	May be unable to exquire people recovers when requires bitelf and operations) Supplies and outs contractors may suff as continuous	1	,		PSO mik			10.00	13.00	٠				-6104		
	incolonery The utubities complexed may provide tob standard service for the supply of water, get, electricity and telecome to the reve				Maragament	of sub-		69.89	62.50			PAP		-45564		
11	development. Unable to move into new facility on planned data - completed bealth certils Badinguary and net wough expanity is.	1	1	1	1915 DBG management ste			10.00	10.10			HISDAG		-6114		
и	econtrient.		1		rent pa G			49.60	62.59					-614	*	
15	PSCP Data ya wecountered during final commissioning	1	3		PSCF Comment commentations; commentations co	ets sorty buckepy in make		60 00	\$4.00			1529		-6504		
85 (a)	rect failure to make required removes, equipment, information evaluable for agreed communicating dates.		1			massing		10.00	10.00			HEDRO		-6554		
14	Universe grand end tora	-	1	9	Out -	Contract		£0 59	12.77		9			-6104 -6104		
17 12	bornested of the development bornessen VAI above 11% O ar gas in 186 ACCOUNTRIG	+	3	-1	conflicter will of Cert allowance Board risk	IVW.	0	£9 69 £0 60 £0 60	£9.09 £15.000.00 £2.00	1	0	16504G 16504G		-8504 -8504 -8504		
19	Failure to obtain funding approval from QG Failure to comply with SPF6 (15% REDUCTION IN CAYSON EMASSION)	1	1		Boardinsk			60.00	12.00			145156		-5104	*	
	REDUCTION IN CARSON EMM (SOM) Delay in Building Warrant approval.	1	,		PSOF resk Samma with Control	talang		10 00	£9.09		9	P/CP		-40504 -40504		
	Unforsen requirements from Environmental	,	,		Pice risk			60.60	60,60			Har		-40504		
	Project Assessments (narveys protection to trees that are to be mentalised			-	PSCP /six Original	da'arts	6	63,000.00	68,69			ra		-40104		
45	Fallura to achieva zaro defects on completion	1	1		construction proc	na daring		60,00	£8.00			ra		46504		
14	party to activity have earlied on completion. Ountegration of relations between local community with 1940 DMG. Outputs product between programmes. 123.4.20(2.69) and the control of	1	-1	- 1	Lazal Communi Onit - Risk sup-	y bean gaded	•	£0.00 £0.00	£8.60 £8.60	-	0	HSDAG FIZE		-40104 -40104	*	
24	attenuation Sub-contractors with design requirefully sub-contractors with design requirefully suct submitting sufficient quality information	Y	100	19.	PSO*riak	-		43.69	45.65			1509		-614	×	
.99	just substituting soft-count quality information to allow SCR eign off. Factors to achieve enfects of mannety where	-	1	-	PSCP risk Omit -	Contract		10.00	68,00			150		-6104		
100	during & shifty reals with the eath air backer. Condition of site at fundaver is different.		- 0		Condition will be Facoron plon	end a		10.89	42.00		۰			-6104	-	
161	from that ambrigated and requires father works to clear prior to works commencing	3	1	1	Engographical Carringscog all Goodbox Sury undertakan pri-	resizes.		10,10	£5,600.60			History		-4104	-	
122	Puture Sattlement of adding substation of not re-boated	ı	,	4	undertakan pri- verks. Design coordin- subcontration of the service of the servic	tion and		62.00	£5,000.00		8	145546		-6564	-	
1112	Cables require to be directed through piled took some PSCP construction inflation calculations may	1	1					65-00	69-66		٠	150		-664	×	
114	tie insdequate	1	-1	4	Market amount	inta		11,000 00 60-60	EA.00			HISTORY		-10104 -10004	*	
124	May nuteardact equipment planning offentively Proposed materials may not be as aliable at original cost justicating group 2, 2 & 4 equipments		1		Married supp materials obtain	ters /		£3,000.00	10.00			H/P		-0104		
		,			materials chain falate site and construction commencement	2000		60 60	60.00			Ness card		-6104		
1/4	May full to get access to sits when planned fluit of delay to project by 1866-dentify employed eath contractions failure to a there to programme							60.60	65.60			MISSES		-4004		
					Continual Vasor Uker and Staliah	with End		(0.10	18.00			HISTORIA		-6304		
114	del gra Based may introduce design changes during sensitivation ported		1					68.60	62-60			Mestes		-6164	¥	
					regimentals	f Arrig		20.00	60.00			145 060		-6134		
111	haves with all a consuming 7 tota 7 mgm or way Damage to adjoining property, neighbouring property and trees	1	1	4	dite erquisition. Candition sur- tions and allow	tip and		£1,000.00	10.00			PKF		-6554		
113	Fallure to must equility in decign	1	,		Constant a Significant Constant Constan	Paten		60.00	60.00			Ienceo		-4554		
114	May full to identify appropriate stallabelders May full to realize the supertied				estys.			60.00	60.00			NSDAG		-10504	-	
115	grants, VAT encovery) May not fully define the extent of residual	-1-	1	4	VAT advisor I appointed.		•	60.00	60.00		4	MSDEG		-4104		
116	delign when calculating the Torget price	-1	,	4	Design Co-cordin 195 - ESG management	Enve		EN,500.00	10.00	•	٠	1509		-6304		
-	FTRE-Risk that group 2 & 3 itums are	,			During Consulting Peter 2016 International Conference C	pápmant Jefarrali 10-		60 60	£9.00	,		1915 1916	4	-40504		
	amartable for final room layouts (hared upon codings supplied by NED)	_			Ourseatons Southead by PK	taing		60.00	69.00	٠		MEDEG		-0564		
117	amentable for final room laysoft (based upon codings supplied by PED) Right of converseptance of project schedule of deer gations	-1	1		Rarty talant v	UP 140	1 1									
117	ermatable for final result layouts (based upon codings supplied by 1805). First of conversations of project schedule of damp times. That that dury is subject to harmer revisions (imposed by 1815 fire offices just dury is just off.	,	1	,	Early talmin of the Conference	d staged		60.10	£5,000.00			NSSES		-40104		
119	amaistade for final room layout (blased spot coding supplied by 180). Whi is non-pumptares of project schedule of done pumptares of project schedule flat that don'n is nobject to farther projects improved by 1800 fire official post design as yell for the control of the control post don'n pumptares of pumptares in person improved by 1800 fire official post design as yell to schedule for pumptares improved by infection Control post design as yell office too Control post design as yell.	1	1 1	,	Early taleed infection conti staged sign off	ale and	,	60.00	£5,600.00		•	MISTRG MISTRG		-8104 -8104		
117 118 119 119 (c)	armatished for final room layout (blased spot conding supplied by 180). Sith of non-samptanes of project schedule of disce pulsos. This disc does go in religion to Farther revision impressed by 1405 fire offices post, design sign of the final post to harden and the schedule post.	1 1	1 1	,	Early taken	of and		11.000								

Discount Section Course Eth Builds

Jun 1	Risk of damages occuring during chard directly appointed sub-contraction works on tota (FFEE, Etc.)		1		Coverdesting move		12.00	£0.00		1815 0915	-6504	
. 8	Risk of charge or delay to scope of methodology imposed by local council in propert of piling works				Dislingue and Confirm		10.00	12.00		NGDEG	-10104	
124	Right on Cast country and Spec is sufficient.	-1	100	100 Tes	Confirm with Arup		.02.60	15.00	0	PSCP	-40504	
	Protection of existing LV /ITV cables onto tale during construction works.	-1			Adequately protect		61,000.00	10.00		PSCP	-8554	
	Ruk that existing services need to be lowered to flictpath at new road opening.	1	,	4	Monitor requestrant and include allowance		£1,000.00	£0.00		ESCP	-67104	
127	TOTAL		-			0		\$110,000.66	0		-41554	
_		1				1 0	10.00	60.00	0		-40564	

COST EVALUATION

2.63			t prior to Mitig	ation		st post Mitigat			Agreed Trust	
Ref No:	Risk & Opportunity Description Delay in acquiring site	Min	Most Likely	Max	Min	Most Likely	Max	Agreed PSCP Provision	Provision £10,000.00	Comments
2	Approval to retain existing electrical sub- station not given]				
3	Cannot acquire site PSCP Unable to achieve No of points									
4 (A)	required for BREEAM Pre-assessment Excellent rating									***
- (-)	There may be changes to clinical regulations								(40,000.00	
,	or other related legislation Change in requirements of stakeholders -								140,000,00	
	Board and / or stakeholders - may require changes to design, leading to additional									
6	design and construction costs Delays in obtaining stat/utilities								£15,000,00	
7 (A)	quotes/connection Suppliers and sub-contractors may suffer						ļ	£Z,500.00		
8	insolvency or other constraints							£5,000.60		
	The Board and PSCP commercial teams may fail to integrate									
10	Planning consent refused Potential changes to legislation/standards									
11	(dda, building regs, fire regs, cdm, htms) Risk of increased material removal from site								£10,000.00	
	due to cut-fill imbalance (ESK), Peat dig as A below (E7.5K) and Contamination as B									
	below (£7.5K). Inability to deliver critical clinical /							£20,000.00		
	functional adjacencies. There is a risk that									
13	the proposed option will not deliver critical clinical / functional adjacencies									
	Delay in obtaining planning permission - The nature of the design proposals result in delay									
14	in obtaining planning consent PSCP may fail to estimate an appropriate						<u> </u>			
	level of design development contingency against the target price							£10,000.00		
	Team May fail to engage with Infection							,		
	Control during design Proposed materials may not be available or						-		· · · · · · · · · · · · · · · · · · ·	
18	fluctulating lead-in periods May fall to adhere to works information									
	Boards may fail to include allowances for compensation events (changes to works									
	information, failure to meet approval periods, etc.)									
	PSCP may be unable to acquire people or									
	resources when required Directly employed sub-contractors may fail									
21	to adhere to the programme Inability to coordinate and complete design									
22	within the agreed timescales									
23	Additional capital requirements as a result of securing planning consent / building warrant									
	Works information may not be adequate or accurate [pscp appointment stage - review									
	and ownership of existing works information) May fail to comply with planning ie									
25	envirnonmental, traffic regulations, etc Failure to deliver required levels of									
	performance - Required levels of clinical performance are not achieved resulting in an									
	inability to match the capacity to the clinical service demands									
	Insufficient space and capacity - Service									
ļ .	configuration fails to deliver facilities and care where and when it is required and/or									
	facilities are not flexible enough to meet potential service demands									
	Facilities not flexible enough to respond to changes in service & demand - The service									
1 1	model is not adequately flexible to allow capacity to be expanded at the rate regired									
i l	to support the anticipated levels of patient	ļ								
	referrals Unused facilities and capacity - The service									
	model results in surplus capacity (perhaps offset by inadequate capacity elsewhere in									
	thehealth economy) and/or anticipated demand does not materialise									
1	nadequate patient environment - The physical environment is not able to meet						-			
	statutory/dignity/clinical requirements for									
	the patient group Difficulty in recruiting and retaining suitably									
	skilled, high quality staff - The labour market is such that it does not provide									
	adequate quantities of suitably skilled and experienced staff - during construction									
	phase									
	Failure to improve communication and multi-									
	disciplinary team working - Clinical services operate in physical isolation from other									
12 (services reducing the opportunity for services to interact and co-operate more efficiently									
	The risk that stakeholders do not fully buy into the service delivery model for the new									
	facility - Key service leads identify concerns over the co-location of certain services,									
h	resulting in either compromised solution or				Į					
	andue delays The risk that patients feel stigmatised due to	_								
	single identity of the service - Creates an adverse impact of service take up, with									
	increased numbers of people not receiving appropriate treatment									
	pervice location impacts adversely on users oblitity to access services - A significant									
·	number of the practice / client population		[
7 (A) c	ive out with the area and find it more difficult to access services									
j	Adverse publicity resulting from failure to sustify levels of investment - The level of	Ī	T	7						
	capital and revenue investment required to support the changes cannot be justifled when	[-	
	compared to the overall benefits									

Cost Evaluation

	There may be a lack of resource (funds time or people) to complete the Business	, \$							
37	Case document effectively		<u> </u>	<u> </u>					
38	May fail to establish financial parameters (capital, revenue, wic)	5							
	Construction inflation calculations may be	2	 	 					
39	inadequate (mips) The risk that Health Board is not making best		-			 -			
40	use of available resources.								
41	PSCP Group 1 Equipment sub-contractors fai to adhere to the programme	1							
1	NHS Group Z Equipment suppliers fail to			1		 			
42	adhere to the programme NHS Group 3 Equipment sub-contractors fai	,		<u> </u>		 		£10,000.00	
43	to adhere to the programme	1							
	Cost associated with keeping sub station is current location exceeds budget	n				1			
44	SI results indicate cost associated with	1		 		 			
45	treating ground conditions exceeds budget			ļ		 ļ			
46	Timber kit solution not sufficently resolved to complete design	1							
	Design not developed to suitable level for	r		i					
48	sufficiently comparative market testing Farget Cost cannot be agreed within budget						£2,500.00		
10	Inadequate management of the various	5	<u> </u>	<u> </u>			22,505.00		
49	stakeholders' requirements Failure of the Board to complete FBC in			 		-			
50	required timescales								
51	BREEAM Excellent rating is unaffordable at	i i							
31	Target Cost Planning Dept fails to meet required	 		 		 			
52	approval timescale for FBC submission					 			
	Delay in Building Warrant submission leads to new technical standards required after 1	ĺ	1					l	
53	October					ļ	ļ		
1	Non acceptance of refuse collection from Summerville Crescent results in re-planning		1						
54	of car park	1		L					
55	Cost associated with Planning Conditions adversely impacts budget		1					£20,000.00	
	Reprovision of play park delays construction	1		 	ì		1	,	
56	start date Utilities / sewers unable to meet required			-			-		
57	demands from existing capacity			L		L_		£35,000.00	
58	NHS energy targets are unaffordable						ļ		
	plant/equipment causes primary design re-		1	1					
\$9	work	l				ļ	L1,000.00		
	Scottish Water requirements from Development Impact Assessment are onerous								
	and cause mitigation works in excess of	ď							
60	current allowances Scottish Government does not approve OBC			 		-			
62	Scottish Government does not approve FBC					 		•	
63	Pharmacy infrastructure provision inadequate for required use	t l						£5,000.00	
	Frozen GA and Outline Specifications are					 <u> </u>			
64	inadequate for required use External political influences adversely	ļ				 	ļ		
65	impact project								
66	NHS DEG Board approval not given Time/cost risk of changing plant room								
67	location	1				 L			
68	Posible Planning Conditions - playpark relocation, changes to externals								
64	Formal sign-off of SoA/layouts - not yet		 			1			
69	completed		1	l .		ļ			
. —	n/LIL tt-LU-L-I (*/		ļ			1		ŧ	
70	Possible changes to established Equipment strategy it associated costs					ł		£15,000.00	
	strategy & associated costs Various programmes and plans may be							£15,000.00	
	strategy & associated costs Various programmes and plans may be misaligned							115,000.00	
71	strategy & associated costs Various programmes and plans may be misaligned PSCP may fail to estimate an appropriate level of design contingency within Target							£15,000.00	
71	strategy ft associated costs Various programmes and plans may be misaligned PSCP may fail to estimate an appropriate level of design contingency within Target Price							£15,000.00	
71 72 73	strategy ft associated coats Various programmes and plans may be misaligned PSCP may fall to estimate an appropriate level of design contingency within Target Price May fail to adhere to drawings and specifications							£15,000.00	
71 72 73	strategy fl associated couls Various programmes and plans may be misaligned PSCP may fail to estimate an appropriate level of design contingency within Target Price May fail to adhere to drawings and specifications							£15,000.00	
71 72 73	strategy fi associated couls Various programmes and plans may be misaligned PSCP may fail to estimate an appropriate level of design contingency within Target Price May fail to adhere to drawings and specifications May use incorrect procedures and techniques during construction Construction staff may not have the correct							215,000.00	
71 72 73 74	strategy & associated costs Various programmes and plans may be misaligned PSCP may fall to estimate an appropriate level of design contingency within Target Price May fail to adhere to drawings and specifications May use incorrect procedures and techniques during construction Construction staff may not have the correct skills							£15,000.00	
71 72 73 74 75	strategy & associated coals Various programmes and plans may be misaligned PSCP may fail to estimate an appropriate level of design contingency within Target Price May fail to adhere to drawings and specifications May use incorrect procedures and techniques during construction Construction staff may not have the correct skills May fail to adhere to Quality Control procedures on site					***************************************		£15,000.00	
71 72 73 74 75	strategy ft associated coals Yarfous programmes and plans may be misaligned PSCP may fall to estimate an appropriate level of design contingency within Target Price May fail to adhere to drawings and specifications May use incorrect procedures and techniques during construction Construction staff may not have the correct skills May fail to adhere to Quality Control procedures on site Proposed materials may not be available							£15,000.00	
71 72 73 74 75 76	strategy ft associated coals Various programmes and plans may be misaligned PSCP may fait to estimate an appropriate level of design contingency within Target Price May fait to adhere to drawings and specifications May use incorrect procedures and techniques during construction Construction staff may not have the correct skills May fait to adhere to Quality Control procedures on site Proposed materials may not be available Board may fail to include allowances for compensation events (changes to works)							£15,000.00	
71 72 73 74 75 76	strategy fl associated coals Various programmes and plans may be misaligned PSCP may fail to estimate an appropriate level of design contingency within Target Price May fail to adhere to drawings and specifications May use incorrect procedures and techniques during construction Construction staff may not have the correct skills May fail to adhere to Quality Control procedures on site Proposed materials may not be available Soard may fail to include allowances for compensation events (changes to works information, failure to meet approval							£15,000.00	
71 72 73 74 75 76 77	strategy & associated coals Various programmes and plans may be misaligned PSCP may fail to estimate an appropriate level of design contingency within Target Price May fail to adhere to drawings and specifications May use incorrect procedures and techniques during construction Construction staff may not have the correct skills May fail to adhere to Quality Control procedures on side Proposed materials may not be available Board may fail to include allowances for compensation events tchanges to works' information, failure to meet approval periods)							£15,000.00	
71 72 73 74 75 76 77	strategy & associated coals Various programmes and plans may be misaligned PSCP may fail to estimate an appropriate level of design contingency within Target Price May fail to adhere to drawings and specifications May incorrect procedures and techniques during construction Construction staff may not have the correct skills May fail to adhere to Quality Control procedures on site Proposed materials may not be available Board may fail to include allowances for compensation events (changes to works information, failure to meet approval periods) lead in periods may be innacurate May be unable to acquire people resources							£15,000.00	
71 72 73 74 75 76 77 78 79 80	strategy fl associated coals Various programmes and plans may be misaligned PSCP may fail to estimate an appropriate level of design contingency within Target Price May fail to adhere to drawings and specifications May use incorrect procedures and techniques during construction Continuction staff may not have the correct skills May fail to adhere to Quality Control procedures on site Proposed materials may not be available Soard may fail to include allowances for compensation events (changes to works information, failure to meet approval periods) read in periods may be innacurate							£15,000.00	
71 72 73 74 75 76 77 78 79 80 81	strategy of associated coals Various programmes and plans may be misaligned PSCP may fail to estimate an appropriate level of design contingency within Target Price May fail to adhere to drawings and specifications May use incorrect procedures and techniques during construction Construction staff may not have the correct skills May fail to adhere to Quality Control procedures on site Proposed materials may not be available Board may fail to include allowances for compensation events (changes to works information, failure to meet approval information, failure to meet approval lead in periods may be innacurate May be unable to acquire people resources when requires staff and operatives) Suppliers and sub contractors may suffer insolvency							£15,000.00	
71 72 73 74 75 76 77 78 79 80	strategy fl associated costs Various programmes and plans may be misaligned							E15,000.00	
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71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 90 91 92 93 94	strategy fl associated costs Various programmes and plans may be misaligned Programy fail to estimate an appropriate level of design contingency within Target Price May fail to adhere to drawings and specifications May fail to adhere to drawings and specifications May fail to adhere to drawings and specifications May fail to adhere to construction construction of the second of the seco						62,000.90		
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71 72 73 74 75 76 77 78 79 80 81 82 83 84 85 86 87 68 89 90 91 92 93 94 95	strategy fl associated costs Various programmes and plans may be misaligned Programy fail to estimate an appropriate level of design contingency within Target Price May fail to adhere to drawings and specifications May fail to adhere to drawings and specifications May fail to adhere to drawings and specifications May fail to adhere to construction construction of the second of the seco						£2,000.90		

	Sub-contractors with design responsibility not submitting sufficient quality information to			Î						
99	allow SCR sign off	<u></u>					ļ			
	Failure to achieve collateral warranty where				1					
100	design liability rests with the sub contractor		ļ							
	Condition of site at handover is different from that anticipated and requires further									Section 2
101	works to clear prior to works commencing Future Settlement of existing substation if				<u> </u>		<u> </u>		£5,000.00	
102	not re-located								£5,000.00	
103	Cables require to be diverted through piled zone	i i			i					
	PSCP construction inflation calculations may	ł		1	<u> </u>		†			
104	be inadequate May not conduct equipment planning			 			 	£5,000.00		
105	effectively Proposed materials may not be available at						ļ	ļ		
	original cost (excluding group 2, 3 ft 4	i]				
104	equipment) May fail to get access to site when planned			 			-	£5,000.00		
	Risk of delay to project by NHS directly employed sub-contractors failure to adhere	1								
108	to programme						<u> </u>			
109	Board may delay approval of completed designs									
	Board may introduce design changes during						1			
110	construction period Issues with site ownership / title / right of			 	·	l	 			
111	way Damage to adjoining property, neighbouring		ļ	ļ	ŧ		 			
112	property and trees							£1,000.00		
113	Failure to meet equality in design	 		-			<u> </u>			
114	May fail to identify appropriate stakeholders May fail to realise the expected contributions		<u> </u>	 	<u> </u>	ļ	ļ			
l	(Land sale, other asset sales, grants, VAT]						-		
115	recovery) May not fully define the extent of residual			-	 		 			
116	design when calculating the Target price FFBE - Risk that group 2 Bt 3 items are			ļ		ļ		£8,000.00		
	unsuitable for final room layouts (based upon		1							
117	codings supplied by NHS) Risk of non-acceptance of project schedule						-			
118	of derogations	ļ			ļ		ļ			
	Risk that design is subject to further revisions imposed by NHS Fire officer post									
119	design sign off			 	 -	ļ	 		£5,000.00	
1.	Topsiol - risk that there is insufficient space						1			
120	during works to store and re-use topsoil Risk that the quantities used to produce the			<u> </u>		<u> </u>	-	£3,000.00		
121	Target Cost are inaccurate Risk of damages occuring during client							£3,000.00		
	directly appointed sub-contractors works on			İ						
122	site (FFQE, Etc) Risk of change or delay to scope of						 			
	methodology imposed by local council in				ļ					
124	respect of piling works Risk re Gas membrane Spec is sufficient									
126	Protection of existing LV /HV cables onto site									
				1	1		1	c Crop on		
	during construction works. Risk that existing services need to be				<u> </u>		-	£1,000.00		
								£1,000.00 £1,000.00 £70,000.00	£190,000.00	
126	Risk that existing services need to be lowered in footpath at new road opening.							£1,000.00	£190,000.00	
126 127 0 0	Risk that existing services need to be lowered in footpath at new mad opening. TOTAL 0 0 0							£1,000.00	£190,000.00	
126 127 0 0 0	Risk that existing services need to be lowered in footpath at new road opening.							£1,000.00	£190,000.00	
126 127 0 0 0	Risk that existing services need to be lowered in footpath at new road opening. TOTAL 0 0 0 0 0							£1,000.00	E190,000.00	
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126 127 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Risk that existing services need to be lowered in footpath at new raad opening. TOTAL TOTAL O O O O O O O O O O							£1,000.00	6190,000.00	
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126 127 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Risk that existing services need to be lowered in footpath at new raad opening. TOTAL TOTAL O O O O O O O O O							£1,000.00	£190,000.00	
126 127 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Risk that existing services need to be lowered in footpath at new raad opening. TOTAL TOTAL O O O O O O O O O							£1,000.00	£190,000.00	
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Framework Scotland Generic Risk Register

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Total: [£140,000.00 [£380,000.00

Framework Scotland Generic Risk Register

	RISK ACTION PLAN
Ref No:	Risk Owner:
	Delivers
Ranking:	Risk Manager:
	Action Date:
Risk Description:	
-	
Impact of Risk	Score:
	Probability of Occurrence:
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Current Management of Risk	Leading Practices
Current Management of Kisk	Edding Fractices
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GAPS	Cost of Risk
	Minimum:
	Most Likely
	Maximum
	50% Percentile
	100000000000000000000000000000000000000
Action Plan & Timeline	



Letter of Commissioner/ Stakeholder Support (to be updated after NHS Board Meeting)

Appendix 6 - Letter of Commissioner / Stakeholder support

Dumfries and Galloway NHS Board

Chief Executive's Office

Mid North Crichton Hall Bankend Road Dumfries DG1 4TG

Tel: 01387 272743 Fax: 01387 252375

Email: emma.mcrobert@nhs.net

Ref: JGB/EMcR Date: 9 March 2010

Scottish Government Health Directorates Health Finance Directorate/ Capital Planning and Asset Management Basement Rear St Andrews House Edinburgh EH1 3DG



Dear Sirs

NORTH WEST DUMFRIES PRIMARY CARE CENTRE OUTLINE BUSINESS CASE SUBMISSION COMMISSIONER/STAKEHOLDER SUPPORT

This is to confirm that following extensive consultation with all stakeholders, including patient representatives, and a series of public consultation meetings, the Outline Business Case for this project was considered by Dumfries & Galloway Health Board on 1 March 2010 and approved to be submitted to the Scottish Government Capital Investment Group.

With regard to acquisition of the preferred site in Lochfield Road, Dumfries, I am assured by the Chief Executive of Dumfries and Galloway Housing Partnership, who own the site, that they are in the process of seeking approval from the Housing Investment Division, in relation to the grant it gave to the Housing Partnership to purchase the site, to allow the sale of the site to the Health Board on the terms agreed in principle.

Yours faithfully

John Burns Chief Executive



Aedet Review

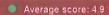
DH INFORMATION READER BOX

Policy
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Management
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Planning /
Finance
Clinical
Social Care / Partnership Working

Planning / Clinical	Finance Social Care / Partnership Working	
D		
Document Purpose	Best Practice Guidance	
ROCR Ref:	Gateway Ref:	9276
Title	Achieving Excellence Design Evaluation Toolkit docum	entation
Author	DH Estates and Facilities	
Publication Date	10 Jan 2008	
Target Audience	PCT CEs, NHS Trust CEs, SHA CEs, Care Trust CEs, Estates and Facilities Directors	Foundation Trust CEs
Circulation List		
Description	AEDET Evolution toolkit is part of a benchmarking toolk measuring and managing the design quality of their hea and existing).	althcare facilities (new
Cross Ref	AEDET Evolution documentation; AEDET/ ASPECT Ev	vidence Layer
Superseded Docs	AEDET Evolution toolkit (NHS Estates site)	
Action Required	N/A	
Timing	N/A	
Contact Details	Brian Coapes Design and Costing (GREFD) 3N10 Quarry House LEEDS LS2 7UE 0113 25 45696	
For Recipient's Use		

Project details:	Title				
	North West Dumfries Primary	nfries Primary Care Centre	tre		
Workshop details:	s: Location				Date (dd.mm.yy)
	Old Board Roor	Old Board Room, Crichton Hall, Dumfries	St		13.09.10
Completed by:	First name	Last name	Organisation	Job title	Email address
	1: Stephen	Howie	SHN	Estates - Project Manager	
	2: Colleen	Bowthorpe	NHS	Finance	
	3: Ronald	McEwan	Patient representative		
	4: Moira	Cossar	Cameron House / ADAS	Manager	
	5: Peter	McCormick	JM Architects	Architect	
	6: Elaine	Oliver	JM Architects	Architect	
	7: John	Mitchell	BAM	Health Projects Director	
	8: David	Potter	NHS	General Manager - Primary and Com	ımı
	9: Paul	Winning	Hulley & Kirkwood	Engineer	
	10: Donald	Millar	NHS	Estates - Project Manager	
	12:	following:			
	14. Aliotoita	- Grander	9		
	Alleran	Cormstone	OLY.	Estates - Maintenance Manager	
	D: Linda	Bunney	NHW	Primary Care Development	
	16: Helen	Brown	NHS	Finance	
	17: William	Lowry	Cairn Valley Medical Centre	GP	
	18: Gillian	Bonn	Cairn Valley Medical Centre	GP	
	19: Ron	McGrouther	Charlotte Street G P Practice	GP	
	20: John	Clyde	Charlotte Street G P Practice	GP	
	21: Robbie	Currie	Charlotte Street G P Practice	GP	
	22:				
	23:				
	24:				
	25:				
	26:				
	27:				
	28:				
	29:				
	30:				
	31:				

IMPACT: Character and innovation



The four IMPACT sections deal with the extent to which the building creates a sense of place and contributes positively to the lives of those who use it and are its neighbours.

Section A deals with the overall feeling of the building. It asks whether the building has clarity of design intention, and whether this is appropriate to its purpose. A building that scores well under this heading is likely to lift the spirits and to be seen as an exemplar of good architecture of its kind.

ID	Description	Weighting	Score	Notes
A.01	There are clear ideas behind the design of the building	High (2) ▼	Strong agreement (5) ▼	
A.02	The building is interesting to look at and move around in	Normal (1) ▼	Strong agreement (5) ▼	Concern at clarity of separate entrances - requiring clear signage
A.03	The building projects a caring and reassuring atmosphere	High (2) ▼	Strong agreement (5) ▼	
A.04	The building appropriately expresses the values of the NHS	Normal (1) ▼	Strong agreement (5) ▼	Concern at travel distance for disabled patients
A.05	The building is likely to influence future designs	Normal (1) ▼	Fair agreement (4) ▼	Bespoke design solution for particular site and client circumstances
◀ Pro	ject workshop setup	▶ ► Results sun	nmary	Form and materials >

IMPACT: Form and materials

Average score: 4.8

Section B deals with the nature of the building in terms of its overall form and materials. It is primarily concerned with how the building presents itself to the outside world in terms of its appearance and organisation. Although it deals with the materials from which the building is constructed it is not concerned with these in a technical sense but rather the way they will appear and feel throughout the life of the building.

ID	Description	Weighting	Score	Notes
B.01	The building has a human scale and feels welcoming	Normal (1) ▼	Strong agreement (5) ▼	
B.02	The design takes advantage of available sunlight and provides shelter from prevailing winds	Normal (1) ▼	Strong agreement (5) ▼	
B.03	Entrances are obvious and logically positioned in relation to likely points of arrival on site	Normal (1) ▼	Fair agreement (4) ▼	Signage and external landscaping should be used to maximise clarity of entrances
B.04	The external materials and detailing appear to be of high quality	Normal (1) ▼	Strong agreement (5) ▼	
B.05	The external colours and textures seem appropriate and attractive	Normal (1) ▼	Strong agreement (5) ▼	
d Ch	aracter and innovation	▶► Results sun	птагу	Staff and patient environment

	Section C deals with how well an environment complies with evidence.	best practice as in	dicated by the research	
D.	Description	Weighting	Scare	Notes
	The building respects the dignity of patients and allows for appropriate levels of privacy and dignity	Normal (1) ▼	Fair agreement (4) ▼	Care required with landscaping/ screening to ensure dignity of ADAS patients
C M2	There are good views inside and out of the building	Normal (1) ▼	Fair agreement (4) ▼	
C.03	Patients and staff have good access to outdoors	Normal (1) ▼	Fair agreement (4) ▼	
C.61	There are high levels of both comfort and control of comfort	Normal (1) ▼	Fair agreement (4) ▼	Radiant ceiling panels generally - clean and efficient. Underfloor in waiting and the like (not economic/flexible to use throughout)
Citis	The building is clearly understandable	Normal (1) ▼	Fair agreement (4) ▼	
C OS	The interior of the building is attractive in appearance	Normal (1) ▼	Fair agreement (4) ▼	
€.07	There are good bath/toilet and other facilities for patients	Normal (1) ▼	Fair agreement (4) ▼	Toilet arrangement at Cairn Valley entrance no ideal
C os	There are good facilities for staff, including convenient places to work and relax without being on demand	Normal (1) ▼	Strong agreement (5) ▼	

	Section D deals with the way the building relates to its surrou positive role in the neighbourhood whether that is urban, subi improve its neighbourhood rather than detract from it.			
D	Description	Weighting	Score	Notes
D.01	The height, volume and skyline of the building relate well to the surrounding environment	Normal (1) ▼	Strong agreement (5) ▼	
D.02	The building contributes positively to its locality	Normal (1) ▼	Strong agreement (5) ▼	
D.03	The hard and soft landscape around the building contribute positively to the locality	Normal (1) ▼	Fair agreement (4) ▼	
D.04	The building is sensitive to neighbours and passers- by	Normal (1) ▼	Strong agreement (5) ▼	

BUILD QUALITY: Performance

Average score: 4.0

The three BUILD QUALITY sections deal with the physical components of the building rather than the spaces. This is therefore what might be thought of as the more technical and engineering aspects of the building. It asks whether the building is soundly built, will be reliable and easy to operate, last well and is sustainable. It is also concerned with the actual process of construction and the extent to which any disruption caused is minimised.

Section E is concerned with the technical performance of the building during its lifetime. It asks whether the components of the building are of high quality and fit for their purpose. However we are not concerned here with how well the building functions in relation to the human use of it which belongs in another section.

ID	Description	Weighting	Score	Notes	
E.01	The building is easy to operate	Normal (1) ▼	Fair agreement (4) ▼	Subject to review on occupation	
E.02	The building is easy to clean	Normal (1) ▼	Fair agreement (4) ▼	Subject to review on occupation	
E.03	The building has appropriately durable finishes	Normal (1) ▼	Fair agreement (4) ▼	Subject to review on occupation	
E.04	The building will weather and age well	Normal (1) ▼	Fair agreement (4) ▼	Subject to review on occupation	
⋖ Ur	ban and social integration	▶ ► Results sun	nmary		Engineering ►

BUII	LD QUALITY: Engineering		Average score: 4.4	
	Section F is concerned with those parts of the building that architectural features. It asks whether the engineering syste be easy to operate and if they are efficient and sustainable.			
ID	Description	Weighting	Score	Notes
F.01	The engineering systems are well designed, flexible and efficient in use	Normal (1) ▼	Fair agreement (4) ▼	Plant room relocation to GF being considered. CHP to be reviewed by NHS D&G from a maintenance aspect.
F.02	The engineering systems exploit any benefits from standardisation and prefabrication where relevant	Normal (1) ▼	Fair agreement (4) ▼	
F.03	The engineering systems are energy efficient	Normal (1) ▼	Fair agreement (4) ▼	
F.04	There are emergency backup systems that are designed to minimise disruption	Normal (1) ▼	Fair agreement (4) ▼	
F.05	During construction disruption to essential services is minimised	Normal (1) ▼	Virtually total agreement (6) ▼	

■ Performance

Construction ►

	Section G is concerned with the technical issues of actually of the main components. A building that scores well is likely under the circumstances of the site and to offer a robust and	to be constructed a	as quickly and easily as possible	
D	Description	Weighting	Score	Notes
G.01	If phased planning and construction are necessary the various stages are well organised	Normal (1) ▼	Virtually total agreement (6) ▼	
G.02	Temporary construction work is minimised	Normal (1) ▼	Virtually total agreement (6) ▼	
G.03	The impact of the building process on continuing healthcare provision is minimised	Normal (1) ▼	Virtually total agreement (6) ▼	
G.04	The building can be readily maintained	Normal (1) ▼	Fair agreement (4) ▼	
G.05	The construction is robust	Normal (1) ▼	Fair agreement (4) ▼	
G.06	The construction allows easy access to engineering systems for maintenance, replacement and expansion	Normal (1) ▼	Fair agreement (4) ▼	
G.07	The construction exploits any benefits from standardisation and prefabrication where relevant	Normal (1) ▼	Strong agreement (5) ▼	

FUNCTIONALITY: Use

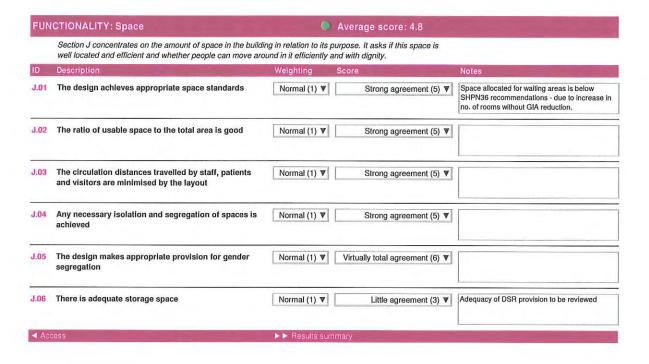
Average score: 4.9

The three FUNCTIONALITY sections deal with all those issues to do with the primary purpose or function of the building. It deals with how well the building serves these primary purposes and the extent to which it facilitates or inhibits the activities of the people who carry out the functions inside and around the building.

Section H is concerned with the way the building enables the users to perform their duties and operate the healthcare systems and facilities housed in the building. To get a good score the building will be highly functional and efficient, enabling people to have enough space for their activities and to move around economically and easily in a way that relates well to the policies and objective of the Trust. A high scoring building is also likely to have some flexibility in use.

IĐ	Description	Weighting	Score	Notes
H.01	The prime functional requirements of the brief are satisfied	Normal (1) ▼	Strong agreement (5) ▼	
H.02	The design facilitates the care model of the Trust	Normal (1) ▼	Strong agreement (5) ▼	
H.03	Overall the building is capable of handling the projected throughput	Normal (1) ▼	Fair agreement (4) ▼	
H.04	Work flows and logistics are arranged optimally	Normal (1) ▼	Strong agreement (5) ▼	
H.05	The building is sufficiently adaptable to respond to change and to enable expansion	Normal (1) ▼	Strong agreement (5) ▼	
H.06	Where possible spaces are standardised and flexible in use patterns	Normal (1) ▼	Strong agreement (5) ▼	
H.07	The layout facilitates both security and supervision	Normal (1) ▼	Strong agreement (5) ▼	
∢ Co	nstruction	▶▶ Results sur	nmary	Access ►

	Section I focuses on the way the users of the building can co efficiently get onto and off the site using a variety of means of and salely get into and out of the building.			
ID	Description	Weighting	Score	Notes
1.01	There is good access from available public transport including any on-site roads	Normal (1) ▼	Strong agreement (5) ▼	
1.02	There is adequate parking for visitors and staff cars with appropriate provision for disabled people	Normal (1) ▼	Strong agreement (5) ▼	
1.03	The approach and access for ambulances is appropriately provided	Normal (1) ▼	Strong agreement (5) ▼	
1.04	Goods and waste disposal vehicle circulation is good and segregated from public and staff access where appropriate	Normal (1) ▼	Fair agreement (4) ▼	Position of Refuse Store to be reviewed
1.05	Pedestrian access routes are obvious, pleasant and suitable for wheelchair users and people with other disabilities / impaired sight	Normal (1) ▼	Fair agreement (4) ▼	
.06	Outdoor spaces are provided with appropriate and safe lighting indicating paths, ramps and steps	Normal (1) ▼	Strong agreement (5) ▼	
.07	The fire planning strategy allows for ready access and egress	Normal (1) ▼	Strong agreement (5) ▼	
√ Us		▶▶ Results sun	2000	Sp



Achieving Exce	Achieving Excellence Design Evaluation Toolkit (AEDET Evolution)
Project details: Title	Title
	North West Dumfries Primary Care Centre
Workshop details: Location	Location
	Old Board Room, Crichton Hall, Dumfries
Results summary:	

Form and materials ● 4.8 Staff and patient environment ● 4.1 Urban and social integration ● 7.0 Performance 4.0 Engineering 4.4 Construction ● 0.5.0 Use 4.9 Access ● 4.9 Space ● 4.7 Space ● 4.7	A: ► Character and innovation	4.9	Cerons 7 of 5
tient environment — 4.1 ocial integration — 4.2 t — 4.4 n — 5.0 n — 4.9 n — 4.9 n — 4.7 n — 4.7 n — 4.7 n 0.4.7 n 0.4.7 n 0.4.7	100	0 4.8	parage of 5 seered
Urban and social integration ■ 4.8 Performance 4.0 Engineering ■ 4.4 Construction ■ 4.4 Use ■ 4.9 Access ■ 4.9 Space ■ 0.4.7 Space 0.4.7	► Staff and patient environment	6 4.1	8 of 8 scored
► Performance 4.0 ► Engineering 4.4 ► Construction - 5.0 ► Use 4.9 ► Access - 4.9 ► Space - 4.7 ► Space - 4.8		• 4.8	4 of 4 scored
► Engineering 4.4 ► Construction 5.0 ► Use 4.9 ► Access - 4.7 ► Space - 4.8	100	4.0	4 of 4 scored
Construction ■ • 5.0 Use ■ • 4.9 Access ■ • 4.7 Space ■ • 4.7	► Engineering	4.4	5 of 5 scored
▶ Use ■ 4.9 ▶ Access ■ 4.7 ▶ Space ■ ● 4.7		5.0	Porose 7 Jo 7
• 4.7		9.4.9	7 of 7 Scored
a 4.8		9.4.7	7 of 7 scored
	► Space	• 4.8	6 of 6 scored

NOTE: A filled traffic light dot [●] in the table above indicates a valid average score, a hollow dot [o] indicates that one or more statements have been marked as 'unable to score'.