# **Statement of Requirements**

## Mobile Imaging - Staffed - with the opportunity to extend



Authority Name:		Sherwood Forest Hospitals Nhs Foundation Trust
<b>Authority Contact</b>	Name:	
	Job Title:	Procurement Business Partner
	Email:	
	Tel Numb:	01623 622515
	Site Address:	Kings Mill Hospital, Mansfield Road, Sutton-in-Ashfield, NG17 4JL
	<b>Delivery Restictions:</b>	n/a

Type of Service Required:	Mobile/Modular MRI,
Expected Start Date:	TBC
Expected End Date:	TBC
Expected Service Days:	364
<b>Expected Service Working Hours:</b>	12 hours
Is service required on site on a bank holiday?	Yes
Has business case been signed off?	No
Expected patient throughput per working day:	24 (approx, depends on scan types)
Is booking service required?	No
Is reporting service required?	No

# **Current site IT**

PAS/EPR:	Medway PAS
PACS:	GE
RIS:	HSS

#### **Pad Information**

Is electrical power available?	Yes
Max power available:	250 amp 3 phase and neutral supply
Electrical connection type:	T.P & N (ASB 200 Type DS2 external Socket) / 3 Phase
Generator required:	No
Water:	depends on siting
Data:	Hard wired to outlet
Telephony:	Hard wired to outlet

# **Imaging Protocols**

Please list any specialist patient types the supplier will be required to provide on this service e.g Geriatrics, Paediatrics etc	All inpatients/outpatients
Please list the Anatomical regions that will need to be scanned e.g Head / Neck, Spine, Lower Limb, Upper Limb:	Head/Neck, Thorax, Spine, Lower Limb, Upper Limb, Breast and Prostate
Please list any specialist exams required as part of the service:	Liver, Gynea, pelvis and rectum
Please list any specialist post processing as part of the service:	n/a

Please list the following patient mobilty	
types as part of the service	Walking, Wheelchairs, Trolleys, Beds

NHS

## **Staffing**

Please detail type of staff required e.g 1 x radiographer, 1 Clinical Assistant etc	2 x Radiographers – Qualified and Registered
Supplier to confirm if staff provided are supplier's own or use 3rd Party Agency	Yes

#### **Supplier Information**

Supplier illiorillation	
Supplier to confirm CQC registered? (If yes, supplier to provide reg number)	Yes
Supplier to confirm if Data Security and Protection Toolkit registered?	Yes
Supplier to confirm if Quality Standard for Imaging (QSI) accrediated?	Yes
Supplier to confirm if Cyber Essentials Plus accrediated?	Yes
Would you like the supplier to provide the make, model and age of the scanner?	Yes

#### **Additional Comments**

Please list any other additional requirements or considerations you would wish the supplier to respond to e.g. additional accreditations, scanner details, staffing requirements:

Additional requirement for some kind of undercover link corridor from the main building of the Trust to the provided unit is also required within the price please. Business case being developed for approval of the funds, but anticipate a quick turnaround. We would also require specification on the footprint and a cost based on a minimum of 12 months and to include delivery and commissioning.

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