



JCUH

## Minor New Works Request Form

### Contact details

First Name **	Susan
Surname**	Sheldon
Contact e-mail**	s.sheldon@nhs.net
Telephone**	01642 854134
Extension**	54134
Location/Ward	Disablement Services Centre. 1 <sup>st</sup> floor
Room/door number.	33B 056

### Request Details

Location/Ward**	Reception. Disablement Services Centre
Room/door number. **	A 003

Brief description of minor new work required work required\*\*

Please provide a quote for the fitting of a curtain pole with curtain in reception to create a separate area.

This is required in order to meet the Out Patient SOP when centre resumes out patient clinics. This area will be for patients who are attending appointments to be interviewed and their temperature prior to being seen.

This request is urgent as the department is aiming to recommence clinics in July. Thank you

### Trust Budget holder

To be completed by Trust budget holder Representative

Full Name **	Susan Sheldon
Contact e-mail**	s.sheldon@nhs.net
Telephone**	01642 854134
Extension **	54134
Location/Ward	DSC 1 <sup>st</sup> floor
Room/door number.	33B 056
Cost Code**	5100ND
Lump sum Cost	

**\*\*Failure to complete sections may result in the non process of request**

### Endeavour Instruction to Proceed

Name:..... Signature:..... Date:.....

Please email completed form to [HelpdeskSouthTees@serco.com](mailto:HelpdeskSouthTees@serco.com)

*For Serco use only*

### Date received

12/06/2020
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### Request ID

*Serco to issue on receipt of form*

NWR:2010
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### Job Type

- Mechanical
- Electrical
- Building
- Maintenance
- Health & Safety
- Patient care
- Departmental routine
- Environmental issue
- PAT test only
- Fire officer approval
- Change of use
- Structural alterations
- Is the work part of an existing capital works scheme?
- Is the work part of a life cycle scheme?

Additional comments