This form is required for all purchases of non-stock items of equipment that cost less than £5K inc VAT.

This form may also be used for approval of equipment of value over £5K, only when it is being financed from revenue. Charitable funds applications below £5K may be presented to the Minor Equipment Group using a Charitable Funds form, available on the Intranet.

The form comprises two sections:

Page 1: The form to be completed and submitted. Page 2: Notes to provide advice on how to complete the form and the process of approval, which you may delete after completion.

|  |  |  |  |
| --- | --- | --- | --- |
| **A. Details of the requester and the equipment.** As a purchaser, you must assure yourself that the equipment is suitable and safe for use and that you have risk assessed its use, as is your legal responsibility under H and S and PUWER regulations **See notes** | | | |
| Requestors Name |  | Dept/Ward Name |  |
| Description of Equipment Requested |  | Manufacturer and Model |  |
| Reason for purchase (new /replacement) |  | Date |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **B. Financial details** | | | |
| Total Purchase price (inc VAT) |  | Consumable and maintenance cost per year |  |

|  |  |  |
| --- | --- | --- |
| **C. Generic Approval REQUIRED FOR ALL SUBMISSIONS See notes** | | |
|  | You must seek technical approval for the device you wish to purchase to make sure it is suitable, it can be maintained and, where necessary, it is a Trust standard product. Technical approval is given by; | **Insert name of approver and date of approval** (one of these boxes must be completed) |
| Medical equipment | Your medical device maintainer: e.g. Biomed Electronics, |  |
| Non medical device | Your equipment maintainer or repairer; Trust Equipment |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **D. Specific Approval ONLY REQUIRED FOR SPECIALIST ITEMS See notes** | | | | | |
| If your purchase is of a specialist nature, you will be required to provide proof that you have gained the approval of the appropriate department: See Page 2 for further advice. **Indicate approval obtained from department, name of approver, date obtained** | | | | | |
| Approval obtained from (Department) |  | Name of approver |  | Date |  |

**What happens next?**

Check that you have completed all relevantsections of this form. Email this form to: [Stewart.thompson@gwh.nhs.uk](mailto:Stewart.thompson@gwh.nhs.uk) or post it to Trust Equipment Dept., Brunel Treatment Centre GWH. The form will be reviewed at the Minor Equipment Group meeting (held every Thursday). On approval you will be issued with **a unique number that must be entered into the requisition in the ‘justification’ note field and the ‘notes to buyer’ field on the SBS requisition that you raise**.

You do not need to enter anything below this line

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|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Received On | Minor Equipment Group Date | Equipment Manager Approval |  | **Unique SBS Procurement Reference** (MUST be quoted on all requisitions) |
|  |  |  |  |  |

**YOU MAY DELETE THIS PAGE BEFORE PRINTING OR SUBMISSION: IT ONLY CONTAINS ADVICE ON COMPLETING THE FORM**

This form is required for all reusable medical devices, all electrical items, domestic and office, all medical gas items and all office and ward furniture.

**Section A: Why do I need to complete this form?**

1. There is a legal obligation on you, the purchaser, to make sure that all equipment purchased has been evaluated for safety and suitability for use (PUWER and H & S regulations). This form prompts managers to consider the implications of that purchase on the safety of staff and patients. This is enshrined in Trust Policy.
2. The Trust has a standard set of equipment so that training, maintenance, spare parts, consumables and incident investigation can be easily and more cost effectively managed. If we all use the same devices, equipment management is more efficient, equipment is compatible across the Trust when staff or equipment are relocated. This form also obliges managers to consider the total cost of a product, its consumables and maintenance.

**Section A: Do I need to do a separate risk Assessment?**

The process of completion of the Minor Equipment form is an assessment in itself, so a separate assessment is not normally required. More information is available from the Health and Safety department or at the [HSE website](http://www.hse.gov.uk/work-equipment-machinery/puwer.htm)

**Section A: Does the manager need to complete the form?**

No, but the manager is responsible for the contents of the form, making sure that the statements are correct and truthful, irrespective of who completes the form.

**Section C: Why do I need to seek the approval of one of these departments?**

These departments manage and maintain the device you are buying. They provide advice on compatibility with Trust standard products, the equipments suitability for use, route and cost for maintenance. A list of standard products is available on the Trust Equipment intranet site with recommended models and costs to assist with this process.

**Section D: What is a specialist item and who do I contact for approval?**

Specialist items also require written evidence of approval from specific departments as follows:

|  |  |  |
| --- | --- | --- |
| Device type | Department | Approval evidence to accompany Minor Equipment form |
| Specialist office chairs and work aids, footstools etc | MSD Team in Health and Safety | MSD will carry out a formal Risk Assessment, provide an assessment document which must accompany the Minor Equip Form |
| Reusable surgical instruments or devices requiring automated disinfection and sterilisation between each patient use. | HSDU    Quality Manager or Decontamination lead | Supporting Email from Quality Representative or Decontamination lead required after you have obtained decontamination instruction from the supplier/manufacturer. |
| Items that connect to the IT network or has any data back-up or storage | IM&T | Supporting Email required from IM&T |
| Items that require cleaning or disinfection not covered by current practise | Infection Control | Supporting Email required from the Infection Prevention and Control Team |
| Equipment that is used for POCT (Point of Care Testing) | Pathology POCT team | Supporting Email required as all POCT devices require CPA accreditation |
| Items that need installation/assembly or changes the room use | Trust Estates/EFM/Trust Equipment | Evidence of contact for Estates works request, Carillion Trust Variation or Small Works request |
| Items that emits ionising or non ionising radiation, laser, UV, IR, or subject to Optical Radiation Directive | Medical Physics provider - contact via Radiology | Supporting Email required with evidence of radiation protection advice or conformance to Optical Radiation Directive |
| Any scales or devices that measure mass | Trust Equipment | Evidence of compliance to appropriate LACORS standard |

**How do I submit the form and what happens next**

Check that you have completed all relevantsections of this form. Email this form to: [Stewart.thompson@gwh.nhs.uk](mailto:Stewart.thompson@gwh.nhs.uk) or post it to Trust Equipment Dept., Brunel Treatment Centre GWH. The form will be reviewed at the Minor Equipment Group meeting (held every Thursday). On approval you will be issued with **a unique number that must be entered into the requisition in the ‘justification’ note field and the ‘notes to buyer’ field on the SBS requisition that you raise**.

**Requisitions that are submitted on the system without an SBS Procurement reference number will be returned by Purchasing and no order will be placed**