Board of Directors – Public

Date:	10th March 2021		Item Ref:	11

TITLE OF PAPER	**Transformation Portfolio Report**
TO BE PRESENTED BY	Pat Keeling, Director of Special Projects
ACTION REQUIRED	The committee is to review the Transformation Portfolio Report for January 2021, consider the levels of assurance and assess the risk in achieving the Trusts strategic objectives.

OUTCOME	Agreed level of assurance regarding the Transformation portfolio
TIMETABLE FOR DECISION	No decisions required
LINKS TO OTHER KEY REPORTS / DECISIONS	None
STRATEGIC AIM STRATEGIC OBJECTIVE BAF RISK NUMBER & DESCRIPTION	3 - Improve our use of resources Transformation: Changing things that will make a difference BAF.0007 Inability to deliver our transformation plans resulting in a failure to deliver our objectives (CQC, Transformation).
LINKS TO NHS CONSTITUTION /OTHER RELEVANT FRAMEWORKS, RISK, OUTCOMES ETC	Trust Strategy Long Term Plan
IMPLICATIONS FOR SERVICE DELIVERY & FINANCIAL IMPACT	None
CONSIDERATION OF LEGAL ISSUES	None

Author of Report	Zoe Sibeko
Designation	Head of Programme Management Office
Date of Report	12 February 2021

Summary Report

1. Purpose

For approval	For assurance	For collective decision	To seek input	To report progress	For information	Other (Please state)
	X				X	

2. Summary

The Transformation Portfolio Report covers the reporting period of January 2021.

In summary:

Progress against milestones:

Four programmes / projects remain on track, these are:
- People Plan
- Primary and Community Mental Health Programme
- EPR; however this is at risk as the programme board did not have sufficient information provided to make an assured decision regarding the procurement approach which may delay the start of the process.

One project requires the next stage to be planned:
- Community Mental Health Review; requires the implementation stage to be planned. This is taking place, 24 February 2021

One project has slipped:
- Leaving Fulwood; the Wardsend Office conversion and refurbishment has slipped by one month. The construction completion timescale is specified as mid March with occupation anticipated from late April 2021

Two programmes are being replanned:
- Acute Care Modernisation (ACM) Programme; the revised programme milestones are to be agreed in February 2021
- The Adult Forensic Secure New Care Models programme plan is being reviewed between January and March 2021

Issues:

One issue was closed during January pertaining to the lack of response from the Landlord at 722 Prince of Wales Rd. The Finance and Performance Committee approved the proposal to move away from the site as the location of the future HQ.

The are three open issues:

Lack of resources within the Adult Secure Forensic NCM Programme

> Mitigation

- An external resource, who has successfully delivered the Impact Provider Collaborative, has been brought in to integrate the following 3 provider collaboratives; secure care, Tier 4 CAMHs and Adult Eating Disorders.
- Michelle Fearon has been appointed as Programme Director. Her immediate focus is to work with finance to complete the due diligence around funding arrangements. This will then be shared with the Trust Board to ensure the scope of the programme if fully understood together with associated risks and issues.
- A Project Manager has been assigned on an interim basis.

Two relating to ACM; planning the programme and understanding the services within scope

Mitigation:

- It is being considered whether it is reasonable and proper to use funding agreed by the Business Planning Group to bring in a small group with experience of this type of programme to deliver the accommodation brief which is key to understanding requirements and services within scope.
- The NHSi Improvement Director offered support and to make connections with other Trusts who have experience of similar programmes.

Risks:

One risk was closed during January within the EPR Programme regarding the conclusion of the previous procurement process.

There are 14 risks within the Transformation Portfolio, 9 of which have been reported for the first time this month. The existing five continue to be managed by the Programme Teams and Boards.

The new risks relate to:
- ACM; ongoing safety risk at Longley Centre regarding the potential to fall from heights due to the topography of the site.

  Mitigation: This will be recorded on the Trust's risk register. Director of Estates to discuss and agree approach at the Estates Oversight Group meeting, for an iterim arrangement, prior to the planned reconfiguration of the site.

- People Plan; a delay in agreeing the centralisation of training budgets may result in the training identified during the learning needs analysis not being delivered or a loss of opportunity to provide it efficiently. If this is delayed, momentum will be lost in work already started that is required by the Trust.

  Mitigation: This has been raised at the Service Delivery Group who advised that it must be discussed further with service managers.

- People Plan; delivery of the People Plan is dependent on the HR service model. There are a number of temporary resources that require their contracts extending to enable effective planning, delivery and review.

  Mitigation: The annual business planning process is being followed to request funding for resources.

- EPR; as the Programme Board did not have enough information to make a decision regarding the procurement approach the timescales are at risk.

Mitigation: A procurement improvement plan has been devised based on the procurement review. The system specification is being reviewed currently, to be complete by the end of March 2021.

- Adult Forensic New Care Models; has raised five risks owned by the Shadow Board, these relate to budget and resources and relationships across the developing provider partnership

Programme highlight information

For the first time, the meeting was chaired by the Director of Special Projects / Strategy and the Programme Board received updates from the new Senior Responsible Officer's (SRO) of the seven programmes / projects. For details of the SRO's and their assigned programmes, please see Appendix A.

ACM

Progress has been made within in the programme and the intention is for the milestones to be re-defined during February. Completed activities are:
- Design workshops have taken place with a multi disciplinary team to look at possible redesigns for the communal space, Decisions Unit, the Crisis Hub and access and egress. Further work is needed to clarify the future of Crisis Services for the Strategic Outline Case (SOC)
- Procurement recommendations have been drawn up and are available for use when the programme reaches the stage where a design team is required.
- An initial feasibility study has been completed for Grenoside Grange to assess its appropriateness in housing an Older Adults ward and services. As a result the governance processes for the Grenoside projects are to be agreed

The draft key milestones focus around the creation of an accommodation brief for the new build to be compiled including; services, number of wards, beds and floor space. From this a feasibility study will be completed which will then inform the SOC.

The SRO, Executive Director, Nursing, Professions and Operations, reported that after working with colleagues there are concerns regarding capacity to complete the accommodation brief which may lead to a delay in developing the feasibility study and subsequent activities.

Mitigation:
- It is being considered whether it is reasonable and proper to use funding agreed by the Business Planning Group to bring in a small group with experience of this type of programme to deliver the work. The SRO will report progress on this to the Transformation Board in February.
- The NHSi Improvement Director offered support and to make connections with other Trusts who have / are undertaking similar programmes. The offer was also made to complete a Gateway Review to help with the development of the feasibility study, looking at a review of the capacity and demand for services.

The SRO suggested that the programme may change its name to reflect that the programme isn't solely focused on building and environments but also new ways of working.

Leaving Fulwood

Future HQ

Work is progressing on a revised Outline Business Case (OBC), in which the options still available to the Trust are being reconsidered and new options from the market place are being assessed as an alternative to the use of 722 Prince of Wales Rd. The revised OBC is being informed by the schedule of accommodation work which has been undertaken by the programme team and heads

of service across the Trust to look at space requirements based on new ways of working, brought about by Covid.

Sale of Fulwood House

The initial Heads of Terms have been agreed with the developer and respective solicitors have been instructed.
A short term lease has been agreed with the Developer for continued use of Fulwood House, however this is not anticipated to be greater than 12 months. Despite this pressure will continue to mount on ensuring that Future HQ options are progressed and the site decanted in a timely manner.

Wardsend Rd

Relocation to Wardsend Rd has been delayed by one month. Completion of construction work is expected by mid March 2021

The SRO, Executive Director of Finance, reported the following as the key activities the programme will be progressing:

- The timescale to be made clear regarding the disposal of Fulwood and the selection and move to a new HQ to ensure alignment. Selection of a new HQ has not yet been identified.
- The development and initial meeting of the HQ Staff Engagement Group to explore and understand the impact of the move and agile working on staff.

Community Mental Health Review

Based on feedback from the consultation, the new service models were approved by the Project Board in December 2020. The next step is for the models to be approved by the Service Delivery Group (SDG) and from this point to progress engagement and feedback from internal committee's and external partners.

The project will now focus on developing the models to assess productivity, capacity and demand. This is the focus of the project. This stage of the project is to be planned in early February.

Mitigation
- The NHSi Improvement Director confirmed that a national team has been created to define metrics around productivity, which could then be used within a Sheffield context.

Dependencies between this project and the Primary and Community Mental Health Transformation Programme are being identified and representation from the programme sit on the CMHT project board. This will continue as both develop and deliver.

It was noted that the CMHT project will be in part defined by the Clinical and Social Care Strategy currently being developed by the Trust.

Primary and Community Mental Health Transformation Programme

The programme is progressing well. Requests for funding were submitted to NHS-E in January. Notification of funding for the next phase of the project will be provided by the end of February.

The programme had been awaiting national guidance regarding roles and funding available, this was provided 2 months later than planned. It has now been received and the programme team are working with the Primary Care Networks, Clinical Directors and GP's to agree the most appropriate approach to resourcing and how to scale up rapidly. Representation from these areas have also joined the group leading the process to develop the Trust's Clinical and Social Care Strategy.

The SRO, Executive Director Medical identified that in time this programme will become part of the Trust's business as usual. This is being explored and progressed by the Programme Team.

EPR

Focus continues to be placed on the procurement process. A procurement improvement plan has been developed and agreed based on the review of the recent procurement process. Further information regarding the procurement approach is to be provided to the Programme Board to enable a decision regarding the most appropriate process to be followed.

The SRO, Executive Director Nursing, Professions and Operations, raised that the programme requires an improved resource approach to promote successful delivery.

Mitigation:
- Funding has been secured from NHSI/E to bring in additional support.

People Plan

The People Plan is progressing as planned, progress has been made across all four workstreams.

Health and Wellbeing
- Evaluation of the Wellbeing Festival held in November 2020. The findings will be triangulated with information such as staff pulse check and analysis of staff survey outcomes
- Good progress with the Flu Campaign 2020 with 82% uptake

Recruitment and Retention
- Gender pay gap action plan completed. Progress has been made in some areas but actions have been proposed in the report and will build on impact measures

Workforce Transformation

- Following a review of the exit interview process there is a focus on developing a new system for exit questionnaires
- An e-rostering implementation project has launched in all teams. This is supported by a monthly Support and Challenge meeting and an associated SOP.

Leadership and Culture
- The development and implementation of the programme of training to support addressing Unacceptable Behaviours has commenced.

As described earlier the programme is managing two new risks regarding the training budget and allocation of resources to support the HR service model and delivery of the programme.

The NHSI Improvement Director recommended that the Transformation Programmes are mapped to the People Plan to help to define the workforce model. It was also recommended that consideration be given to alignment with the work of the Organisational Development and Quality Improvement teams.

Adult and Forensic New Care Models

Progress has been made with the clinical model which has been developed for the five provider organisations. The socialisation of the clinical model is now taking place with clinicians across the organisations. A single point of access for referrals has been established and the five providers share a unitary waiting list.

However, it is possible that due to the previous delay, South Yorkshire and Bassetlaw (SYB) may be the ICS in England not to have established any Provider Collaboratives by April 2021.

This is mainly attributed to insufficient resourcing to deliver the programme.

Key next steps are:
- Programme review and re-set with incoming programme director focusing on the review of the finance requirements and development of a programme plan to ensure the Go Live date of October 2021 is achievable.
- Draft full business case to be submitted by the Lead Provider to the Shadow Board and SHSC FPC and Board of Directors.
- System engagement and development: CCG/ICS stakeholder meetings and planning for system workshops early 2021. Cross ICS new care model working and focus on governance arrangements, including development of a shared resource model, and commissioning support across SYB.

3 Next Steps

Programme and Project Management Reporting and Controls

Project roles and responsibilities have been reviewed and were agreed by the Transformation Board. These have been shared with the programme managers to ensure a consistent and best practise programme management approach supporting appropriate resourcing for the programmes and projects. This approach is intended to enable a shared understanding of what is expected from colleagues within the programmes and projects to then achieve successful delivery.

Currently there is some differentiation between the programme and projects highlight reports. These are being reviewed and standardised and a revised highlight report template will be rolled out during March for use in April's programme boards and Transformation Board. This will support consistent reporting from the programmes to enable more effective oversight and encourage cohesion across the transformation portfolio.

As part of the activities within the Trust's Well Led Programme, the Transformation Board's Terms of Reference are being reviewed to ensure clarity, focus and alignment with other groups and committee's.

4   Required Actions

The Trust Board is asked to:

1. Receive the Transformation Portfolio report
2. Note the Transformation risk on the BAF

5   Monitoring Arrangements

The Transformation Board oversee, provide strategic direction to and ensure cohesion of the Transformation Portfolio; providing information and assurance to the Finance and Performance Committee and Board of Directors.

6   Contact Details
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APPENDIX A

- Acute Care Modernisation (ACM); Beverley Murphy
- Leaving Fulwood; Phillip Easthope
- Community Mental Health Review; Phillip Easthope, changing to Beverley Murphy in February 2021
- Electronic Patient Record (EPR); Beverley Murphy
- People Plan; Caroline Parry
- Adult Secure Forensic New Care Models Programme, Mike Hunter
- Primary and Community Mental Health Programme; Mike Hunter