Board of Directors – Public

SUMMARY REPORT	**Meeting Date:** 25 September 2024
	Agenda Item: 16

Report Title:	**Transformation Portfolio Report**
Author(s):	Zoe Sibeko, Head of Programme Management Office
Accountable Director:	James Drury, Director of Strategy
Other meetings this paper has been presented to or previously agreed at:	**Committee/Tier 2 Group/Tier 3 Group**: Finance and Performance Committee
	Date: 12/09/24
Key points/ recommendations from those meetings	Finance and Performance have asked that assurance be provided that post implementation reviews will routinely include a systematic approach to service user and stakeholder engagement; and that a summary be included in the transformation portfolio report of the key lessons learned taken from any lessons learned reports completed in the relevant period.

Summary of key points in report

This report covers the key elements of the Transformation Portfolio in August 2024:

New programmes:

It is proposed that two new programmes are included in the portfolio due to the level of complexity, risk and wide range of stakeholders involved. These are:

- Home First programme. This will focus on 3 projects: out of area bed eradication and stabilising the bed base, delivering an effective inpatient model and pathways, and the implementation of the culture of care quality improvement work.

- Neighbourhood Mental Health Centre Pilot. This is an ambitious project to help people aged 18 and over with mental health needs in the Heeley, Gleadless Valley and Meersbrook areas of Sheffield.

These will be considered by the Transformation Board on 19 September for inclusion within the portfolio. Both programmes align with our priority of Delivering Outstanding Care.

The Older Adults Community Mental Health Teams transformation has been included in the portfolio as the Transformation Board approved the outline project brief for inclusion. Our standard start up activities are being followed and the following progress has been made:

- Project Board, SRO, Project Manager, Clinical Lead and Ops lead roles and core project team roles have been filled.

- Progress has been made to ensure that service users, carers and families are involved in the project from the outset

- Learning activities internal and external to SHSC, review of evidence based approaches and

- connections with other Trusts have either been completed or are underway

- Engagement activities have taken place over the Summer which have been well attended and positively received by staff, partners and service users. The feedback and learning from these events will shape the project.

Current programmes

Therapeutic Environments Programme (TEP) and Leaving Fulwood programmes reported an overall amber RAG rating. A worsening position is expected to be reported next month due to delays in the planning application for the Fulwood site and the uncertainty this causes as to when the Fulwood receipt will be made and the impact this will have on the timeline for the Maple Ward improvement.

The remainder of the programmes are reporting a green overall status.

The Learning Disability Programme has provided a more detailed individual assurance report (Item 16b), instead of the usual highlight report, therefore the RAG ratings are not included in the report for August.

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Recommendation for the Board/Committee to consider:						
Consider for Action		**Approval**		**Assurance**	**X**	**Information**	**X**

Board of Directors is asked to note that the progress of the transformation portfolio has been monitored by the Finance and Performance Committee. Where significant matters arise from that oversight, such as the sale of Fulwood or progression of the Learning Disabilities programme, additional reports are provided.

Please identify which strategic priorities will be impacted by this report:				
Effective Use of Resources	*Yes*	✔	*No*	
Deliver Outstanding Care	*Yes*	✔	*No*	
Great Place to Work	*Yes*	✔	*No*	
Ensuring our services are inclusive	*Yes*	✔	*No*	

Is this report relevant to compliance with any key standards ?					State specific standard
Care Quality Commission Fundamental Standards	*Yes*	✔	*No*		Environmental standards – LAPs, privacy and dignity, least restrictive environments
Data Security and Protection Toolkit	*Yes*	✔	*No*		All standards within the Data Protection Security toolkit, which has replaced the IG Governance toolkit are relevant to the Electronic Patient Record system
Any other specific standard?				✔	

Have these areas been considered ? YES/NO					If Yes, what are the implications or the impact? If no, please explain why
Service User and Carer Safety, Engagement and Experience	*Yes*	✔	*No*		Service user and carer safety and experience is a key consideration within all programmes within the portfolio.
Financial (revenue &capital)	*Yes*	✔	*No*		Finance is a core component of all programmes within the portfolio.
Organisational Development /Workforce	*Yes*	✔	*No*		OD and workforce considerations are key to agreeing the scope, delivery and impact of all programmes within the portfolio.
Equality, Diversity & Inclusion	*Yes*	✔	*No*		QEIA is undertaken as part of each programme

					and informs the programme structure, stakeholder engagement and outcomes.
Legal	*Yes*	✔	*No*		Legal advice is sought as appropriate within programmes
Environmental sustainability	*Yes*	✔	*No*		Sustainability is considered within all programmes and projects

Transformation Portfolio Report

This report covers the key elements of the Transformation Portfolio in August 2024:

1. Programme alignment with strategic aims and priorities 2024/25:

The shape of the portfolio is due to change as projects and programmes move to different stages within their lifecycle.

1.1 Start Up

It is proposed that two new programmes are included in the portfolio due to the level of complexity, risk and wide range of stakeholders involved. These are:

- Home First programme. This will focus on 3 projects: out of area bed eradication and stabilising the bed base, delivering an effective inpatient model and pathways, and the implementation of the culture of care quality improvement work.

- Neighbourhood Mental Health Centre Pilot. This is an ambitious project to help people aged 18 and over with mental health needs in the Heeley, Gleadless Valley and Meersbrook areas of Sheffield.

These will be considered by the Transformation Board on 19 September for inclusion within the portfolio. Both programmes align with our priority of Delivering Outstanding Care.

The Older Adults Community Mental Health Teams transformation has been included in the portfolio as the Transformation Board approved the outline project brief for inclusion. Our standard start up activities are well underway:

- SRO, Project Manager, Clinical Lead and Ops lead roles have been filled. This is in line with the new Integrated Change approach which has the trio of roles (clinical, ops, and change) working in partnership to drive the change.

- The core Project Team who will complete the start-up activities are in place.

- Project Board has met twice, this includes representation from the ICB and numerous voluntary sector partners and charities.

- Progress has been made to ensure that service users, carers and families are involved in the project from the outset.

- The project brief has been developed further and approved by the Programme Board

- Learning activities, review of evidence based approaches and connections with other Trusts have either been completed or are underway

- Engagement activities have taken place over the Summer which have been well attended and positively received by staff, partners and service users. The feedback and learning from these events will shape the project.

- Planning for the design and definition stage of the project is to be completed and the project approach agreed. Learning will be taken from PCMHT, CMHT, LD and other Trusts to support this.

- Project control documents, issue, risk, action logs etc are in place and actively used

1.2 Closure and post implementation review stages.

None of the projects and programmes are currently in the above stages. There are six in implementation: Electronic Patient Record (EPR,) Therapeutic Environments Programme (TEP,) Learning Disabilities (LD,) Primary and Community Mental Health Transformation (PCMHT,) Community Mental Health Transformation (CMHT) and Leaving Fulwood.

However, the CMHT and PCMHT boards are preparing for closure, this includes:

- An assessment of whether the objectives have been met / transformation work completed / assurance that business as usual activity is robust enough to accept and embed the changes.

- Any outstanding activity has owners and can be delivered and governed within business as usual delivery and governance arrangements

The closure stage will include:

- An assessment of the project's performance against the business case and Project Initiation Documentation

- Capturing lessons learned from stakeholders and service user experience during the implementation / transition to BAU

- An assessment of any benefits which have already been realised and update of the benefits realisation approach and plan

- Initial evaluation of outcome measures to monitor impact

- Plan for the post implementation review stage, ensuring clear owners are identified to ensure that the transformed ways of working are adopted and embedded and benefits realised.

- Production of closure report

Post Implementation Review stage

- In the case of PCMHT and CMHT, involvement from the Clinical Effectiveness team to assess the transformed clinical and delivery model, whether national standards are being achieved and guidance followed. This will form a sound basis for ongoing quality assurance and continuous improvement activities.

- Continued capture of lessons learned, monitoring of outcome measures and benefits and an assessment of lessons acted on and benefits realised

- Continued assessment of the impact of the change on staff and service users

- Approach to undertaken continuous improvement to sustain and improve the new services agreed

- Production of Post Implementation Review report

- Programme Team and Board disbanded

Leaving Fulwood remains in the portfolio, as the sale of Fulwood House remains of critical importance to our ability to deliver our capital plan, and in particular to deliver the

Therapeutic Environments Programme. There are severe and ongoing delays in relation to Fulwood which are the subject of a separate report.

2. Senior Responsible Owner (SRO) role:

The role of SRO for Transformation Programmes are fulfilled by a member of the Executive Management Team. The potential introduction and closure of the projects and programmes, and changes within the Executive Management Team, will drive changes to who executes the role across the portfolio.

The responsibilities of the role were defined and have been in place for a number of years, and these are standard, in line with Prince 2 and Managing Successful Programmes (MSP) methodologies. However, it is acknowledged that due to the number of programmes further support for the role may be required. It is planned that this is bolstered by a trio approach across key roles with leadership being provided by a Change, Operational and Clinical Leads working in partnership to deliver the programme with delegated authority from the SRO.

This approach will be developed further in line with the definition and design of the Integrated Change Framework

3. Integrated Change Framework:

Good progress has been made in developing the Integrated Change Framework. Two workshops have been held with representatives from teams that support change. In these, it was defined how the types of change and improvement work would be differentiated, what teams could do to support the successful delivery of the change, and how the new approach would be operationalised. This is to be brought together and shared for review with the wider organisation during October.

4. Programme performance:

4.1 Overall

The programme boards reported the following against the Trust's agreed RAG ratings.

Name	Programme Overall	Progress	Scope	Budget	Resources	Risks	Issues	Stakeholder engagement	Co-production	Benefits
CMHT	Green	Green	Green	Amber	Green	Amber	Amber	Green	Green	Green
PCMHT	Green	Green	Green		Green	Green	Amber	Green	Green	Green
Therapeutic Environments	Amber	Green	Green	Red	Green	Amber	Amber	Green	Green	Green
EPR	Green	Green	Green	Green	Amber	Green	Green	Amber		Green
Leaving Fulwood	Amber	Amber	Green	Amber	Green	Amber	Amber	Green	Green	Amber

From an overall RAG rating perspective, there has been no change since June for EPR and Leaving Fulwood. However, a worsening position is expected to be reported next month due to delays in the Planning Application.

PCMHT have reported an improving position moving from amber to green as areas of scope which remained outstanding post the initial launch in April are now in place or are progressing well. Regular MDT huddles are occurring, and the medical model is being submitted to the Primary Care Clinical Governance Committee on 18 September.

Therapeutic Environment Programme have reported a worsening position moving from green to amber with a reported status of red for budget due to uncertainty as to when the Fulwood receipt will be made and the impact on the timeline for the Maple Ward Improvement works.

In June, the criterion with the worst position was resources. Improvements have been made across all projects and programmes in this area. EPR remained amber as the Engagement

Lead position was vacant at the time of writing the highlight report, however this has been filled and onboarding completed. In August, issues is the criterion with the poorest status.

The Learning Disability Programme has provided a more detailed individual assurance report, instead of the usual highlight report, therefore the RAG ratings are not included below for August.

4.2 Progress, Risks and Issues

All programmes have plans, risk and issue registers managed by the Programme Boards.

Programme	Highlights (progress against milestones, risks, issues and other updates by exception)	Status
Leaving Fulwood	The planning process for the scheme is facing ongoing challenges. The aim is to submit the application to the Planning Committee meeting in October. However, this is contingent on the submission being made in time and the completion of the public consultation on the additional technical reports and documents. The payment terms structure with the purchaser remain a phased payment approach. To mitigate the risk of default SHSC intends to hold a legal charge over the land as security until full payment has been received. Due to the delays and the budget setting exercise in 23/24 only accounting for a 3 month period, there is a current forecasted overspend of £125K revenue due to ongoing security, lawyer and planning consultant costs. This is being offset by underspends within the Estates and Facilities Directorate, but it is noted this results in scaling back other estates work which would have been undertaken this year. Subsequently this has been mitigated through budget adjustments.	Progress Risk Issue
TEP	Due to the increased uncertainty of when the Fulwood receipts will be received, it is highly unlikely that the Maple Ward improvements will start in November. The preferred contractor is holding the price, as agreed in the procurement exercise, until the end of October. Steps are being taken to secure the arrangement beyond that time in view of the likely situation with regards to the Fulwood sale. Delays to starting the works increase the risk of service users being sent out of area which is a poor model of care. The delays also have an impact on the success of the Value Improvement Programme. A stakeholder group will be convened to scope the Older Adults Environment Programme	Progress Risk Issues
PCMHT	Progress being made; huddles are now in place and the medical model will be issued for approval on 18 September with Phase 1 of the implementation taking place on the 30 September. Phase 2 of the medical model will be agreed with the Joint Executive Board and implemented via business as usual arrangements.	Progress Risks

	An issue has been raised as GP industrial action has been confirmed. As more information is known it will be clarified if this is a transformation or business as usual issue.	**Issues**
CMHT	CMHT Work continues to transition service users to the new model, allocate named workers and update risk assessments / care plans to support the transfer process which is being monitored in weekly care group meetings. New ways of working are being implemented. However, changes to Primary Care Network (PCN) structures have impacted on the alignment of CMHT care groups and are likely to impact on the transition to the new model which may cause disruption to staff and service users. An approach to address this was agreed by Programme Board and is a key consideration during closure as changes to PCN's may continue to happen and CMHT care groups need to be involved / respond accordingly. Urgent and Crisis The new service has been live for 2 months, however as Nottingham Community Housing Association still require CQC registration, this is preventing calls from SPA / Out of Hours numbers being diverted there. This is the final stage of the implementation plan however the timescale remains unknown as to when this will be resolved. This issue is exacerbated by one which has recently arisen regarding the level of abandoned calls into the 111 MH option, this too impacts on when SPA / Out of hours calls can be transferred.	**Progress** **Risk** **Issue**
EPR	The programme is making good progress. Phase 2 is on track for completion as planned. An issue raised regarding service engagement with current state and future state workshops. As of 30 August, there had been an uptake of services booking on the workshops and 2 services have had their current state workshop undertaken. This is a positive step however it continues to be carefully monitored.	**Progress** **Risk** **Issues**