

Board of Directors- Public

SUMMARY REPORT

Meeting Date:

27 November 2024

Agenda Item:

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Report Title:	Transformation Portfolio Report	
Author(s):	Zoe Sibeko, Head of Programme Management Office	
Accountable Director:	James Drury, Director of Strategy	
Other Meetings presented to or previously agreed at:	Committee/Group:	FPC
	Date:	14 November 2024
Key Points recommendations to or previously agreed at:	N/A	

Summary report

The report covers the key elements of the Transformation Portfolio in October 2024:

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

The Gleadless and Heeley neighbourhood mental health centre pilot was approved by the Transformation Board for inclusion in the portfolio.

2. Transformation Portfolio Board membership

In October the membership was changed to include the Project and Programme Managers who attend alongside the Senior Responsible owner to support dependency management between the programmes, encourage richer discussions and to ensure both the voice of the Programme Delivery Groups, as well as the Programme Board is represented.

3. Integrated Change Framework:

Data from the workshops with teams who support change and improvement has been used, alongside evidence backed literature to develop our Trust approach to support offer for change. This will be reviewed by the workshop attendees in November and shared for feedback with the collective leadership group in December.

4. Programme performance:

4.1 Overall

The programme boards reported the following against the Trust's agreed RAG ratings. Please see Appendix 1 for details.

▼ M7 October 2024

Item	Programme Overall	Progress	Scope	Budget	Resources	Risks	Issues	Stakeholder eng...	Co-production	Benefits
CMHT										
PCMHT	Amber	Amber	Green	Green	Green	Amber	Amber	Green	Green	Amber
Therapeutic Enviro...	Amber	Amber	Green	Red	Green	Amber	Amber	Green	Green	Green
EPR	Green	Green	Green	Green	Green	Green	Green	Amber		Green
Learning Disability	Amber	Green	Green	Green	Amber	Green	Amber	Amber	Green	Amber
Leaving Fulwood	Red	Red	Green	Amber	Green	Amber	Red	Green		Green

From an overall RAG rating perspective, the following changes have been made since September:

- Leaving Fulwood has reported a worsening position, moving from green to red, and is forecast to remain so during November as the Planning Application is due to be scheduled at the Planning Committee in December. If approved, the section 106 agreement which mitigates the impact of a development on the local community and infrastructure will be discussed at the committee in January 2025.
- PCMHT Programme Board reported a worsening position of green to amber due to concerns and delays pertaining to the implementation of Phase 2 of the staffing model.

The EPR Programme Board continue to report a green rating and the Therapeutic Environments and Learning Disabilities Programme boards, an amber rating

The CMHT Programme Board agreed not to meet during October, allowing time for preparation for closure activities to be completed. It will meet in November to take the decision of whether to move into the closure stage, effectively closing the programme in January 2025. It will then move into the post implementation review stage focusing on monitoring outcome measures, benefits realisation and determining an approach to continuous improvement to sustain and improve the new service.

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	<p>The planning process for the scheme is facing ongoing challenges. The process is currently planned to end in January 2025. To support this a design freeze has now been implemented, ending the various amendments requested by Sheffield City Council.</p> <p>The planning delays continue to impact on the 24/25 capital plan. Revenue costs continue to be incurred and ongoing intruder and vandalism issues at the site has resulted in the decision to reintroduce 24hr manned security. The costs were not included in the 23/24 budget resulting in an overspend which 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</p>	Progress
		Risk
		Issue
TEP	<p><u>Maple Ward</u></p> <p>Programme Leads have met with the preferred supplier for the Maple Ward Improvement works. It was explained that they remain the Trusts preference to complete the project, however due to funding, works would not commence on site until at least April 2025.</p>	Progress

	<p>The supplier can no longer hold the price quoted however will not reprice until closer to agreeing the contract. They estimated that unless there are dramatic changes in the market then the re pricing would not be a material change. A further conversation is planned in January 2025.</p> <p>Preparatory works continue on site.</p> <p>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.</p> <p><u>Forest Lodge</u></p> <p>Programme plan and fee proposal in place. Outline case has been endorsed by Business Planning Group and is awaiting a decision from EMT.</p> <p>The Programme Board requested that this work was undertaken one bedroom at a time with service users in situ. However, advice was taken from the professional design team is that the work is only feasible if it is completed two bedrooms at a time. The Head of Service looking at the options as to how to complete this, including informally considering decant options with commissioners and other providers.</p> <p>The programme is estimated to take 10 – 11 months to complete and at a cost greater than £500k which is above the amount allocated currently in the capital plan. If the outline costs are approved the project will move into the design phase and full costs will be established.</p> <p><u>G1 doors and Endcliffe seclusion door replacement</u></p> <p>Outline cases for the fees for both schemes have been endorsed by Business Planning Group, and discussed at EMT. However they were not approved as it would result in an overspend against the capital budget and there was no appetite to consider brokerage. The project costs have been included in the latest capital bid to NHSE; the programme is awaiting the outcome.</p> <p><u>Older Adults</u></p> <p>Stakeholder engagement has commenced for the Older Adult estate work.</p>	Risk
PCMHT	<p>Phase 1 of the medical model has been implemented; concerns had been raised regarding the approach to Phase 2. A revised plan was submitted to Programme Board on 31 October. As Phase 2 was the key element of the programme to be addressed prior to moving to closure, it remains on track to close in January 2025 and move to the post implementation review stage</p>	Issues
EPR	<p>The Rio relaunch on 8 November is on track with robust support plans in place. Communications and engagement activities are taking place wc 4th November. Activities are ongoing to provide assurance of readiness for launch including external assurance resource spending time with the digital team to understand their level of confidence. No concerns have been raised at this point which would put the relaunch in doubt.</p> <p>Tranche 2 activities continue as planned however challenges remain for</p>	Progress
		Risk
		Issue
		Progress
		Risk

	<p>services to attend the necessary workshops. In addition, work is ongoing to rationalise the number of forms which will be used, bringing standardisation where possible.</p> <p>Acknowledging and responding to digital literacy challenges within the organisation the training window has been extended from four weeks to five and further training resource is being considered however training needs are currently being established.</p> <p>Good progress is being made but it is accepted that a lot of effort will be required to meet the March launch date.</p>	Issues
Learning Disabilities Programme	<p>Staff consultation is completed and recruitment can commence to specified roles.</p> <p>The essential criterion for closure is being established, once this is complete the Programme Board will be able to confirm if the planned date of January 2025 to close the programme and move into post implementation review stage is achievable</p>	Progress Risk Issues

The Older Adults Transformation Programme and the Gleadless and Heeley Neighbourhood Mental Health Centre pilot will commence reporting to the Transformation Portfolio Board in November.

Budget management information can be found in Appendix 2, Finance Health card.

Appendices attached:

Appendix 1 RAG criteria

Appendix 2 Transformation Finance Health card

Recommendation for the Board/Committee to consider:

Consider for Action	X	Approval		Assurance		Information	X
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The Trust Board is asked to note the key elements of the Transformation Portfolio and to consider whether there is sufficient assurance that the programmes are structured appropriately, are managing risks and issues effectively and monitoring delivery.

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.
Environmental Sustainability	Yes	✓	No	Sustainability is considered within all programmes and projects

APPENDIX 1 – RAG CRITERIA

RAG Dimension	Red	Amber	Green
Progress	<p>Timelines are not clear Original programme completion date unachievable unless there is intervention (funding, resources, etc.) Workstreams not performing based on criteria below</p>	<p>Timelines are somewhat clear Tasks/deliverables slipping against planned date but not expected to impact the overall planned programme completion date. Plans in place to mitigate the above. Minority of workstreams performing based on criteria below</p>	<p>Timelines are clear On track to deliver to milestones Majority of workstreams performing based on criteria below</p>
Scope	<p>Requirements are unclear Significant uncertainty in scope and deliverables Programme not expected to deliver fundamental elements of the scope</p>	<p>Requirements are somewhat clear Only key deliverables are identified Scope is still moving / lacking clarity Significant change requests not yet approved Programme will not deliver all items in scope but items not being delivered are not fundamental Plans in place to address the above</p>	<p>Requirements are clear All deliverables are identified It is clear what is in and out of scope Formal change request process is in place Programme is expected to deliver all items in scope</p>
Budget	<p>Under or overspent for over 2 months with no recovery plan and impacts on delivery of capital plan, or significant affordability concerns for the 23/24 capital or revenue plan</p>	<p>Under or overspent for 1-2 months with no recovery plan, or recovery plan in place but cost pressures remain</p>	<p>On track</p>
Resources	<p>Programme team not in place Unclear roles and responsibilities Team underperforming in balancing competing demands Resources unavailable i.e. project /programme staff roles not backfilled, or no amendments made to their job plans causing pressure on BAU vs project/programme work</p>	<p>Team partially performing in managing competing demands and delivering programme priorities but at the risk of their own health and wellbeing. Some gaps in resourcing i.e., project /programme staff roles partially backfilled or partial amendments made to their job plans causing pressure on BAU vs project/programme work Plans in place to address these</p>	<p>Programme team in place Clear roles and responsibilities Team delivering programme priorities and managing competing demands No significant gaps in resourcing i.e., project /programme staff roles appropriately backfilled or relevant amendments made to their job plans so staff have adequate time to deliver the project/programme and BAU.</p>

APPENDIX 1 – RAG CRITERIA

RAG Dimension	Red	Amber	Green
Risks	<p>The programme has ageing risks with no evidence of action being taken. Next review dates are in the past.</p> <p>Risks do not have mitigation in place or mitigation is proving ineffective. The impact of the risks on Benefits realisation is not understood.</p> <p>Risk owners not identified</p>	<p>Risks are being managed but confidence is low that mitigation will have the required impact. Mitigations may need to change or risks may require escalation.</p> <p>The impact of the risk on Benefits realisation is not understood or is incomplete.</p> <p>Risk owners partially identified</p>	<p>The programmes risk register is up to date with no ageing risks.</p> <p>Risks have mitigation in place. Assurance is provided that the risk is being managed well</p> <p>Mitigations are proving effective.</p> <p>The impact of the risk on Benefits realisation is understood, articulated and mitigations are appropriate.</p> <p>Each risk has a risk owner identified</p>
Issues	<p>The programme has ageing issues with no evidence of action being taken</p> <p>Issues do not have owners and clear actions in place</p> <p>Actions are proving ineffective.</p>	<p>Issues are being managed but confidence is low that the actions taken will bring appropriate resolution</p> <p>Issues may require escalation.</p>	<p>Issues have owners and actions. Assurance is provided that the issues are being managed well.</p>
Stakeholder engagement	<p>Key stakeholders have not been identified as part of initiation</p> <p>Key stakeholders have no visibility over the status of the programme</p> <p>Key stakeholders are not engaged with the project/ programme</p>	<p>Key stakeholders have been identified but some are not engaged.</p> <p>Service users are partially involved</p>	<p>Key stakeholders have been identified and are being kept informed</p> <p>Key stakeholders are engaged with the programme</p> <p>Service users are appropriately involved</p>
Service User Engagement and coproduction	<p>Service users not identified</p> <p>Means of engaging service users to coproduce not understood or agreed</p> <p>Budget for payment (if required) not agreed</p> <p>Involvement process not understood or deployed</p> <p>Service user engagement more tokenistic</p>	<p>Some service users identified and means for engagement and coproduction partially understood</p> <p>Budget for payment (if required) partially agreed and process partially working</p>	<p>Service users identified and coproduction activity understood</p> <p>Budget for payment (if required) agreed and process fully understood and working</p> <p>Service users being engaged in less tokenistic manner</p>

APPENDIX 1 – RAG CRITERIA

RAG Dimension	Red	Amber	Green
Benefits	<p>There is no plan in place for benefits realisation.</p> <p>Benefits have not been identified and quantified</p> <p>Benefits measures have not been identified.</p> <p>There is no way to measure benefits.</p>	<p>The Benefits realisation plan is being developed.</p> <p>Benefits have been partially identified and quantified</p> <p>Benefits measures have been identified but baselines have not been taken.</p> <p>Benefits may fall short of estimates or be delivered later than expected.</p>	<p>There is a plan in place for benefits realisation</p> <p>Benefits are understood.</p> <p>A measurement plan has identified how to measure benefits and progress is being made against realisation</p> <p>Programme will deliver to expected benefits</p> <p>Benefits anticipated to be achieved when planned.</p>

Appendix 2

TRANSFORMATION BOARD FINANCIAL DASHBOARD SUMMARY:

M6 September

Programme	Sub-schemes	Capital		Revenue	
		YTD	Forecast	YTD	Forecast
Leaving Fulwood	Fulwood disposal	N/A	N/A		
Primary & Community Mental Health Programme		N/A	N/A		
Community Mental Health Transformation		N/A	N/A		
Therapeutic Environments Programme	Ligature anchor point removal project - Maple	N/A		N/A	N/A
	Ligature anchor point removal project - Forest Lodge			N/A	N/A
	G1 doors			N/A	N/A
		N/A	N/A		
EPR					
Learning Disability Programme		N/A	N/A		

RAG Rating definitions:

Green – On track

Amber – (i) Under or overspent for 1-2 months with no recovery plan, or (ii) recovery plan in place but cost pressures remain

Red – (i) Under or overspent for over 2 months with no recovery plan and impacts on delivery of capital plan, or (ii) significant affordability concerns for the 24/25 capital or revenue plan

CAPITAL (£'000)											
Programme	Sub-schemes	24/25 YTD Plan	24/25 YTD Actual	Underspend/ (overspend)	24/25 Plan	24/25 forecast	Forecast underspend/ (overspend)	Finance lead	OVERALL RAG rating	Previous month RAG	Comments
Therapeutic Environments Programme	Ligature anchor point removal project - Maple	-	-	-	3,100	3,100	-	Dave Spooner			The capital plan has been approved with £3.1m included for the Maple project. The RAG rating was increased to red in M4 to reflect the delay to the Fulwood sale receipt, which was expected in August/ September but is now anticipated in Q4. There is a risk that funding may not be available until after capital works should have commenced, which has a knock on impact on the length of time that out of area contracts beds will be required, both in terms of the quality of patient care and the resulting revenue cost. The receipt delay also has implications for the procurement as the preferred bidder terms holds the price until October 31st. Beyond this time, there is a risk that the contractor will increase prices.
	Ligature anchor point removal project - Forest Lodge	55	-	55	250	250	-	Dave Spooner		-	Scheme not yet commenced - business case in development.
	G1 doors	44	-	44	200	200	-	Dave Spooner		-	Scheme not yet commenced.
EPR		1,091	871	220	3,293	2,912	381	Dave Spooner			YTD spend is lower than planned as some costs have been covered by accruals raised in the last financial year. The year-end forecast is in line with the revised resource plan, which due to the delayed managed service procurement leads to an underspend of £381k in the current financial year compared to the original 24/25 financial plan. The forecast capital underspends are not because of a reduction in cost for the programme, instead spend has been delayed into Q1 of 2025/26. Overall, the projects are forecast on plan across the two financial years. The Trust 2025/26 financial plans will be updated to reflect the timing change. The forecast assumes that capital contingency costs are spent in full (no revenue contingency) and that no VAT is recoverable, which at this stage is a very prudent position. However, we are awaiting the conclusion of the Trust's VAT advisor's review of the VAT treatment of the managed service and other contracts and it is likely that we will be able to reclaim VAT on the managed service contracts that are now in place. If so, then the forecasts for capital and revenue over the full life of the resource plan will be small underspends even if all contingency is used. * The original plan had a YTD plan of £1,509k at M6, this schedule shows the latest resource plan, which has been rephased to reflect revised recruitment and the procurement of managed services.

RAG Rating definitions:

Green – On track

Amber – (i) Under or overspent for 1-2 months with no recovery plan, or (ii) recovery plan in place but cost pressures remain

Red – (i) Under or overspent for over 2 months with no recovery plan and impacts on delivery of capital plan, or (ii) significant affordability concerns for the 23/24 capital plan

TRANSFORMATION BOARD FINANCIAL DASHBOARD: M6 September

REVENUE (£'000)											
Programme	Sub-schemes	24/25 YTD Plan	24/25 YTD Actual	Underspend/ (overspend)	24/25 Plan	24/25 forecast	Underspend/ (overspend)	Finance lead	RAG rating	Previous month RAG	Comments
Leaving Fulwood	Fulwood site disposal	86	184	(97)	86	275	(189)	Kaitlin Plant			The delay to the sale of Fulwood has resulted in continued costs for security, rates legal fees and maintenance work. Forecast assumes costs will continue until the end of January as this is the estimated sale date. The plan was based on the sale going through by the end of Q1 and there is also a risk that the assumptions in the forecast could be incorrect so this scheme has a Red RAG rating. Since the time of reporting for m6 a decision has been made to step back up security at Fulwood and therefore the forecast overspend will worsen in m7. If the sale were to be delayed further, without any additional funding from the developer the cost pressure will increase further.
Primary & Community Mental Health Programme		1,842	1,552	289	3,710	3,290	420	Kaitlin Plant			The underspends are due to delays in recruitment. The current forecast assumes that any underspends are retained by SHSC. There is a risk that this could change if a Partnership Agreement is implemented with a risk share. The reported figures comprise the following cost centres: MH community transformation (8244), Primary Care Mental Health (8245) and Primary Care Medical Staffing (8247). Please note, the reported figures only include SHSC budget & costs. This may differ to the highlight report which includes budget for all partners of the programme.
Community MH transformation		3,660	3,470	190	7,345	6,995	351	Kaitlin Plant			Vacancies on both teams resulting in significant underspends. There is a pressure on Recovery North as a result of the STR rebanding process which resulted in more uplifts from band 3 to band 4 than what is budgeted for. The service has plans in place to manage this over time. There are some recruitment plans resulting in a slight reduction in the underspend forecast however still RAG rated as green due to the underspend position.
Therapeutic Environments Programme		118	115	3	235	230	5	Kaitlin Plant			Pay costs for the team were capitalised in 2023/24. A paper is going to Capital Planning Group to make a decision on whether the same will happen again in 2024/25 and in future years. Confirmation is needed that this is affordable within the Trust CDEL limit.
EPR		131	97	34	669	544	125	Nicola Hume			YTD shows an underspend of £34k. This is due to minimal costs being incurred against the £30k non-pay set up costs, which were anticipated in the budget for months 1 to 4. The forecast is in line with the revised resource plan and shows an underspend of £125k. This is expected to increase by up to £40k in month 7 once the VAT review confirms treatment. The forecast revenue underspends are not because of a reduction in cost for the programme, instead spend has been delayed into Q1 of 2025/26. Overall, the projects are forecast on plan across the two financial years. The Trust 2025/26 financial plans will be updated to reflect the timing change. The Board approved a budget of £0.7m within the revenue plan for 2024/25. In addition, further recurrent budget of £0.4m was allocated to EPR for business as usual licensing costs. The BAU costs are not reflected in this reporting.
Learning Disability Programme		2,655	1,776	879	5,281	3,890	1,392	Paul Isingoma			Recruitment delays have resulted underspends on the Programme. The forecast has been developed with the General Manager and reflects current recruitment plans for the remainder of the year including a locum Medic. If any of these recruitment plans were to be delayed then the underspend would increase.

RAG Rating definitions:

Green – On track

Amber – (i) Under or overspent for 1-2 months with no recovery plan, or (ii) recovery plan in place but cost pressures remain

Red – (i) Under or overspent for over 2 months with no recovery plan and impacts on delivery of capital plan, or (ii) significant affordability concerns for the 23/24 capital or revenue plan