

# Board of Directors - Public

## SUMMARY REPORT

Meeting Date: 23 November 2022

Agenda Item: 10

|   |  |                                   |
|---|--|-----------------------------------|
| <b>Report Title:</b>  | <b>Transformation Portfolio Report</b>   |                                   |
| <b>Author(s):</b>   | Zoe Sibeko, Head of Programme Management Office  |                                   |
| <b>Accountable Director:</b>                                  | Pat Keeling, Director of Strategy  |                                   |
| <b>Other Meetings presented to or previously agreed at:</b>   | <b>Committee/Group:</b>  | Finance and Performance Committee |
|   | <b>Date:</b>   | 10 November 2022                  |
| <b>Key Points recommendations to or previously agreed at:</b> | <ul style="list-style-type: none"> <li>Noted the completion of all programme milestones</li> <li>Noted the process underway to review the RAG methodology</li> </ul> |                                   |

### Summary report

The Strategic Transformation Programmes and projects reported the following key areas of progress and risk to the Transformation Board on 27<sup>th</sup> October 2022:

- 1. Therapeutic Environment Programme Board** - reported a red rating against budget, resources and issues. It is forecasting that budget and resources will remain red during November.
  - The Programme Board have commissioned a Strategic Outline Business Case, through external support, outputs expected mid-December.
  - The Programme Board reported an ageing financial risk due to lack of progress on the funding stream for the New Builds project.
  - There was a delay to the handover of Burbage ward, which has impacted progress on the Phase 3 ligature anchor point removal project causing a 3 week delay to starting this work. The contractors have been asked to absorb this within the programme timeline.
  - The programme consists of six projects. Stakeholder engagement proves to be problematic due to volume of engagement required. Engagement is scheduled with PLACE regarding plans which impact on wider stakeholders during October. A Peer Support Worker engagement session took place 19<sup>th</sup> October.
- 2. Leaving Fulwood Project Board** - reported an overall amber rating.
  - The sale of Fulwood House will be delayed until April 2023 due to a delay in submission of the reserve matters planning application by the purchaser. The due date is December. This may delay the initial capital receipt until 2023/24 (rather than 2022/23). The impact on our CDEL is being assessed.

- The relocation of the Assertive Outreach Team and the Community Forensic Team continues to be worked through. A Quality and Equality Impact Assessment is to be completed regarding the teams temporarily located in the Tudor Building. If these teams continue to be located at Fulwood this will delay the completion of asbestos surveys and the start of demolition of adjacent buildings during 2023.
- All other teams which were based in Fulwood House have moved out and generally their feedback is positive regarding both the new accommodation and location. Staff feedback has identified some minor issues which are being worked through accordingly. Staff debrief sessions are planned as part of post project evaluation.

**3. Health Roster Project** - reported a red rating against risks but is due to complete on 23 December.

- The project was planned to end in December, and is on track to do so by the 23 December, however the contingency time allowed for in the plan is being used.
- 89% of staff have been trained. 88 remaining colleagues require training; 67% of them are based within the Rehabilitation and Specialist teams. A request was made to the Transformation Board to support the final element of the roll out by minimising requests for reports as the same team which would facilitate this is also undertaking the system configuration and training for new users and to support teams as much as possible to enable them to attend the training.
- The biggest risk remains the resilience of the delivery team due to its size and remit. Sickness absence, vacancies and annual leave cannot easily be absorbed and will adversely impact the completion date, hence the red rating.

**4. Community Mental Health Transformation Programme Board** - reported an overall amber project rating:

- The Case for Change was approved by the Programme Board and is to be submitted to the Joint Consultative Forum, 3 November 2022.
- Co-production and service user engagement is progressing well, and two of the three sessions exploring service user journeys in relation to the new clinical model have taken place. These were hosted by Flourish with the support of Healthwatch. In addition, service users are involved in defining and agreeing the outcome measures in relation to the new model.

**5. Electronic Patient Record Programme Board** – reported an overall amber project rating

- The project remains on track to deliver by May 2023, with the first service in Older Adults going live in March 2023.
- The current finance report is showing an underspend in both revenue (£60k) and capital (£465k) This has been explained as the capital budget allocated is greater than the amount requested within the business case, due to additional external funding. The Transformation Board was assured that there was little slippage regarding project progress and planned budget expenditure however, Transformation Board requested that in future progress reporting confirms the actual budget required for the project and expenditure against that figure.
- Staff engagement continues to progress well with 60-75 EPR Change Champions being involved in the project.

**6. Primary and Community Mental Health Transformation Programme Board** – reported an overall green project rating

- The programme intends to fully launch in October 2023 following a phased implementation; however, a defined programme plan will be developed with the workstream leads.
- Two well attended service user engagement events have taken place in September and October which introduced attendees to the programme and a co-design approach. Experts by Experience

are currently being matched to the workstreams.

- A draft clinical model will be presented to the Programme Board in December. This will be informed by a stakeholder engagement event scheduled for 16 November. Further service user events are scheduled between December 2022 and February 2023 to finalise the model.

**7. Learning Disabilities Programme Board** – reported an overall amber project rating

- Service user engagement in the development of the clinical model continues with co-production meetings with representation from Sheffield Voices, Sheffield and District African Caribbean Community Association (SADACCA) and Mencap, amongst other organisations.

**8. Community Facilities Programme Board** – reported an overall red project rating against progress

- The programme is reporting an overall status of red due to ongoing issues relating to the relocation of services within the St George’s building and the Assertive Outreach Team and Community Forensic Team based at Fulwood House. Both projects are at the options appraisal stage.
- The longer-term planning of the entire portfolio of community facilities is proceeding well and is being aligned with the development of the Five-Year Service Plan, which will be brought to the Finance and Performance Committee in December.

**9. Clinical and Social Care Strategy** – reported an overall amber project rating

- The Project Initiation Documents are complete, except for the person centred workstream and delivery is progressing as planned.
- The Service User Engagement group is active as part of the Co-production workstream. Experts by Experience are part of the workstreams and the National Survivor User Network 4 PI assessment has been undertaken which has helped to shape activity within the workstreams.

**The overall Transformation Programme risk rating may be viewed as overly prudent and we are therefore in the process of reviewing the methodology.**

**APPENDICES:**

Appendix 1 Overall portfolio health card

Appendix 2 Progress against milestones

**Recommendation for the Board/Committee to consider:**

|                            |  |                 |  |                  |          |                    |  |
|----------------------------|--|-----------------|--|------------------|----------|--------------------|--|
| <b>Consider for Action</b> |  | <b>Approval</b> |  | <b>Assurance</b> | <b>X</b> | <b>Information</b> |  |
|----------------------------|--|-----------------|--|------------------|----------|--------------------|--|

Recommendation: The Board is asked to consider if there is sufficient assurance that the programmes are structured appropriately, managing risks and issues effectively and monitoring delivery.

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| Please identify which strategic priorities will be impacted by this report: |     |   |    |   |
|---|-----|---|----|---|
| Covid-19 Recovering effectively   | Yes |   | No | ✓ |
| CQC Getting Back to Good – Continuing to improve                            | Yes | ✓ | No |   |
| Transformation – Changing things that will make a difference                | Yes | ✓ | No |   |
| Partnerships – working together to make a bigger impact                     | 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?                                  |     |   | ✓  |  |

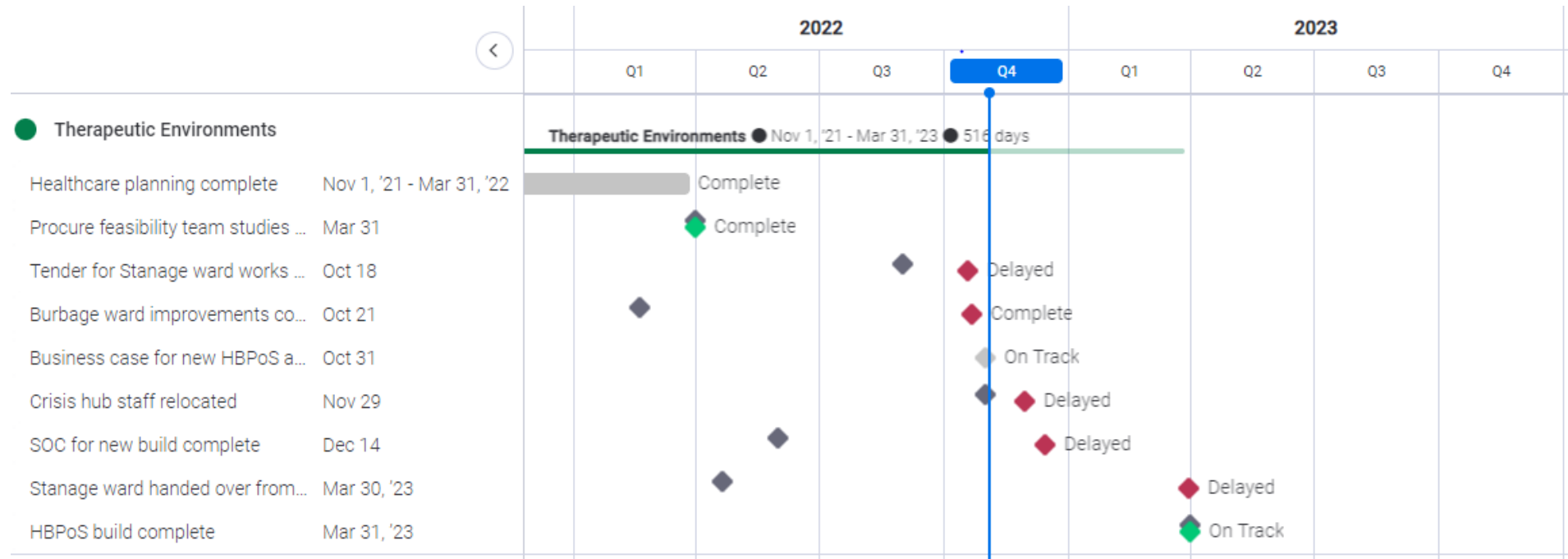
| Have these areas been considered? YES/NO     |     |   |    | If yes, what are the implications or the impact?<br>If no, please explain why  |
|--|-----|---|----|--|
| Service User and Carer Safety and Experience | Yes | ✓ | No | Service user and carer safety and experience is a key consideration within 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.     |
| Sustainability                               | Yes | ✓ | No | Sustainability is considered within all programmes and projects  |

# Strategic Transformation Healthcard M6 October 2022

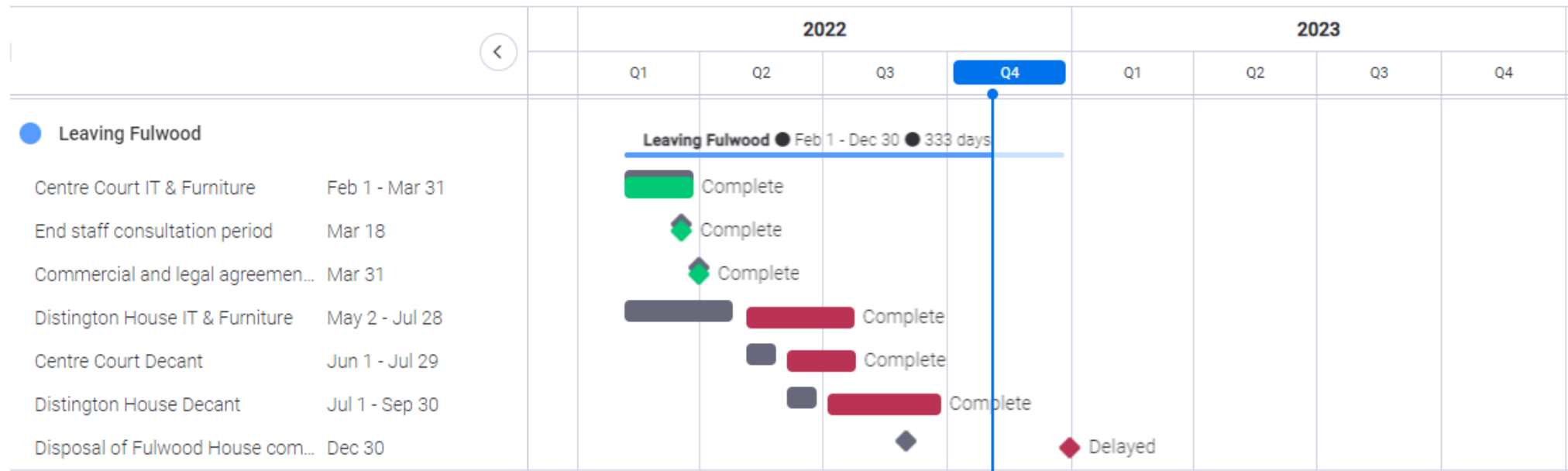
|                                 | Progress | Scope  | Budget | Resources | Risks  | Issues | Stakeholder engagement | Benefits   | Overall |
|---------------------------------|----------|--------|--------|-----------|--------|--------|------------------------|------------|---------|
| Leaving Fulwood                 | Green    | Green  | Yellow | Green     | Yellow | Yellow | Green                  | Yellow     | Yellow  |
| CMHT Programme                  | Yellow   | Yellow | Yellow | Yellow    | Yellow | Green  | Yellow                 | Yellow     | Yellow  |
| PCMHT Programme                 | Green    | Green  | Green  | Green     | Green  | Green  | Green                  | Green      | Green   |
| Therapeutic Environments        | Yellow   | Yellow | Red    | Red       | Yellow | Red    | Yellow                 | Yellow     | Red     |
| EPR                             | Yellow   | Yellow | Green  | Yellow    | Yellow | Yellow | Green                  | Light Blue | Yellow  |
| Learning Disability Programme   | Green    | Green  | Green  | Green     | Green  | Green  | Green                  | Yellow     | Yellow  |
| HealthRoster                    | Yellow   | Green  | Yellow | Yellow    | Red    | Yellow | Green                  | Yellow     | Red     |
| Clinical & Social Care Strategy | Yellow   | Yellow | Yellow | Yellow    | Yellow | Green  | Green                  | Yellow     | Yellow  |
| Community Facilities Programme  | Red      | Green  | Yellow | Green     | Yellow | Yellow | Green                  | Green      | Red     |

## Appendix 3 – Progress against milestones

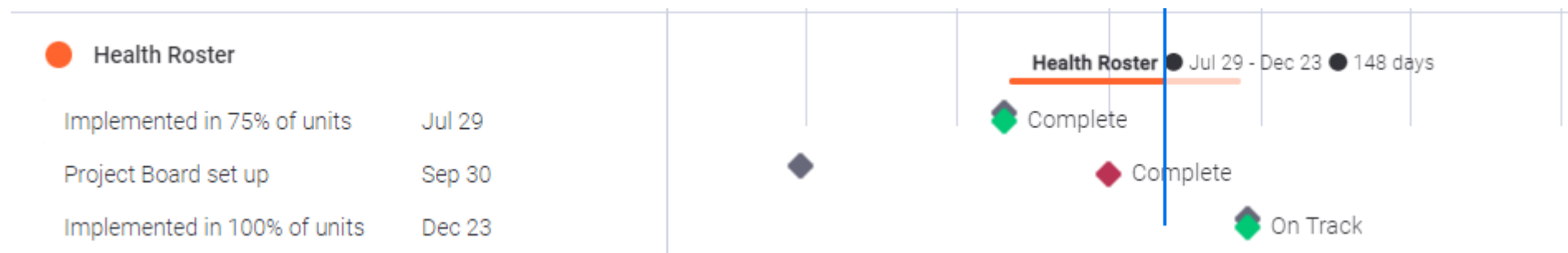
### Therapeutic Environments



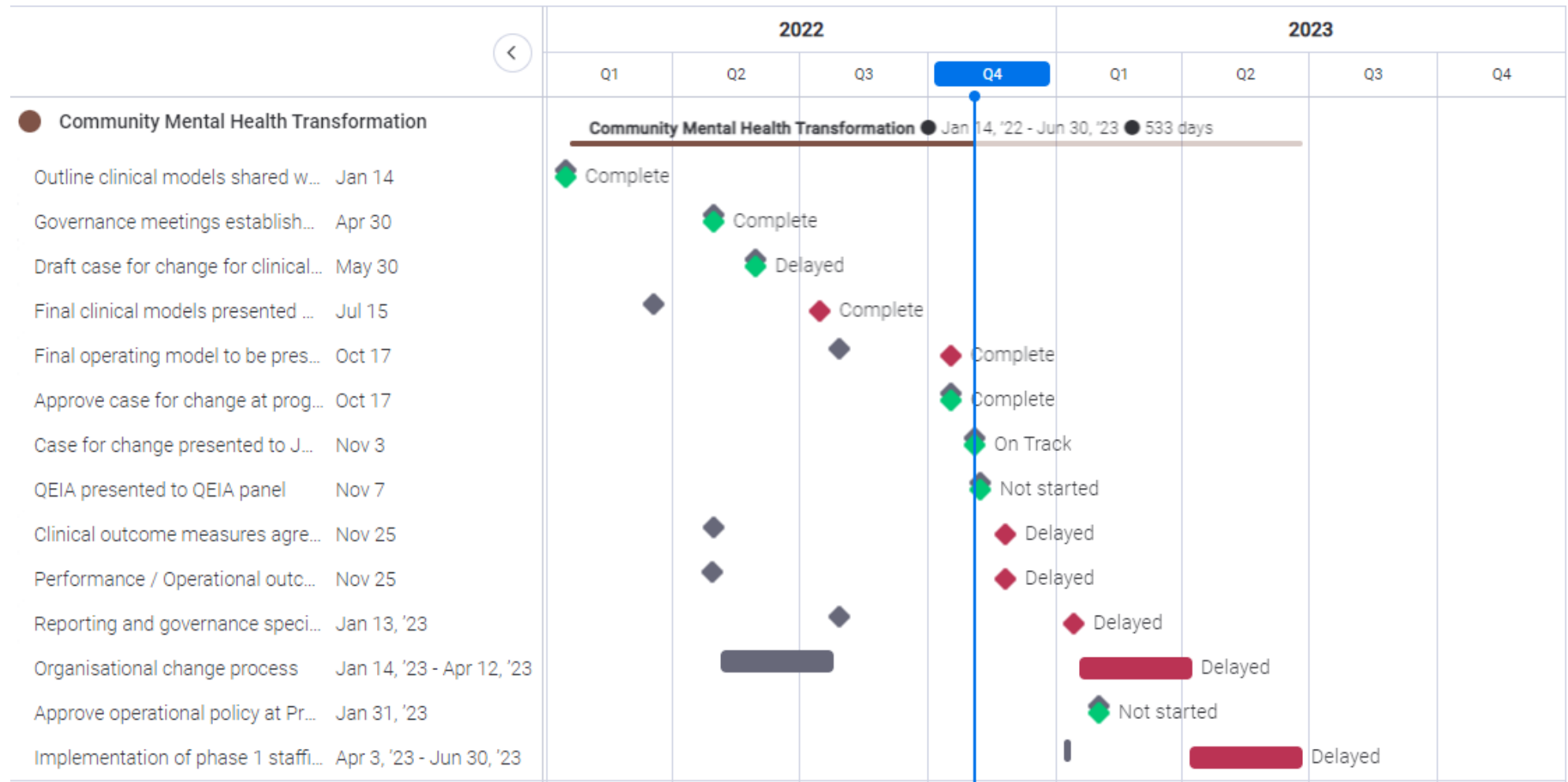
## Leaving Fulwood



## Health Roster

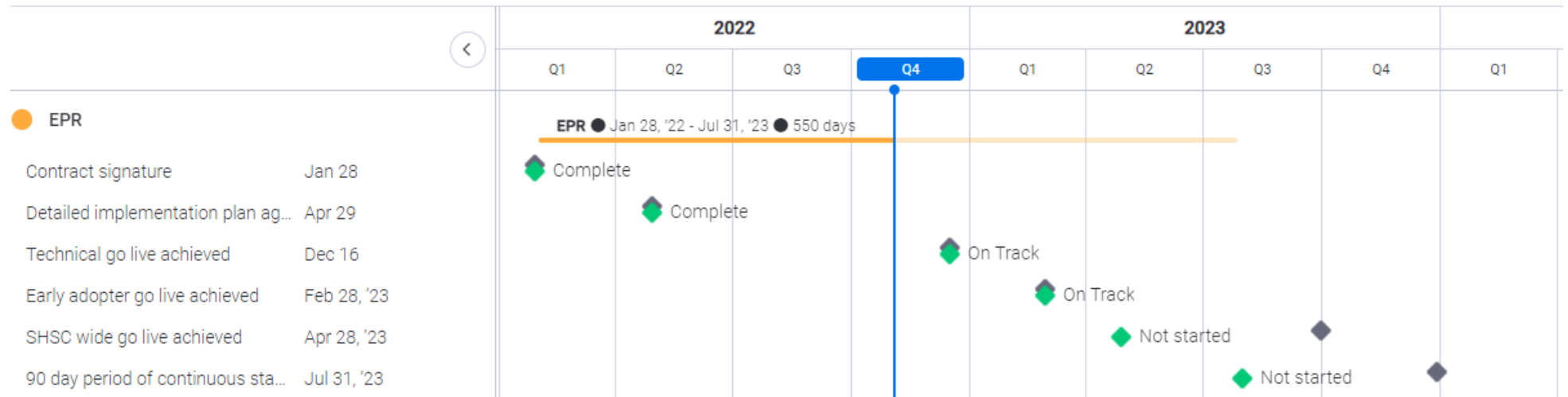


# Community Mental Health Project

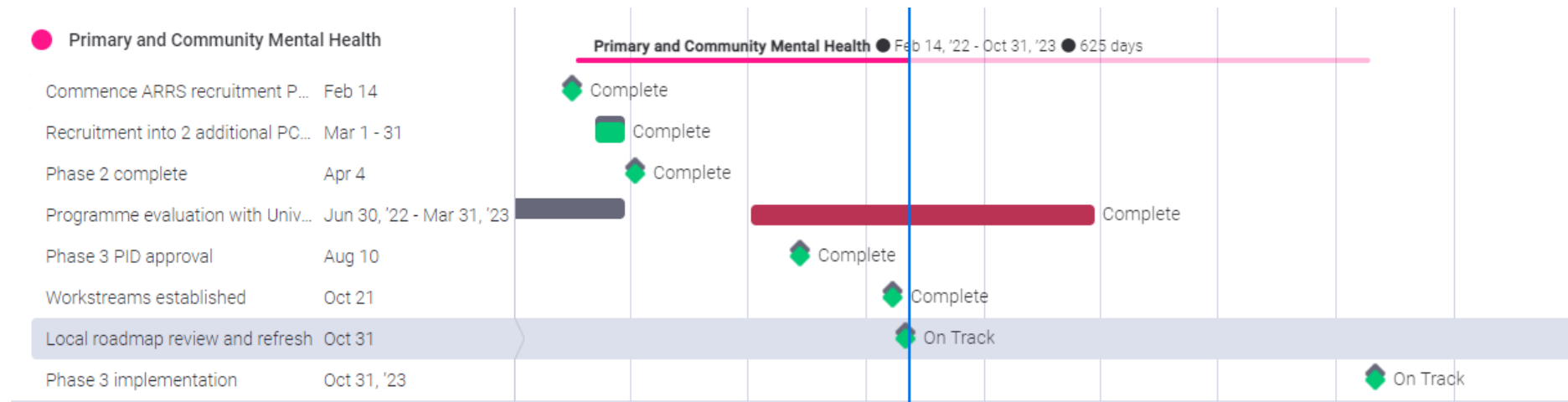




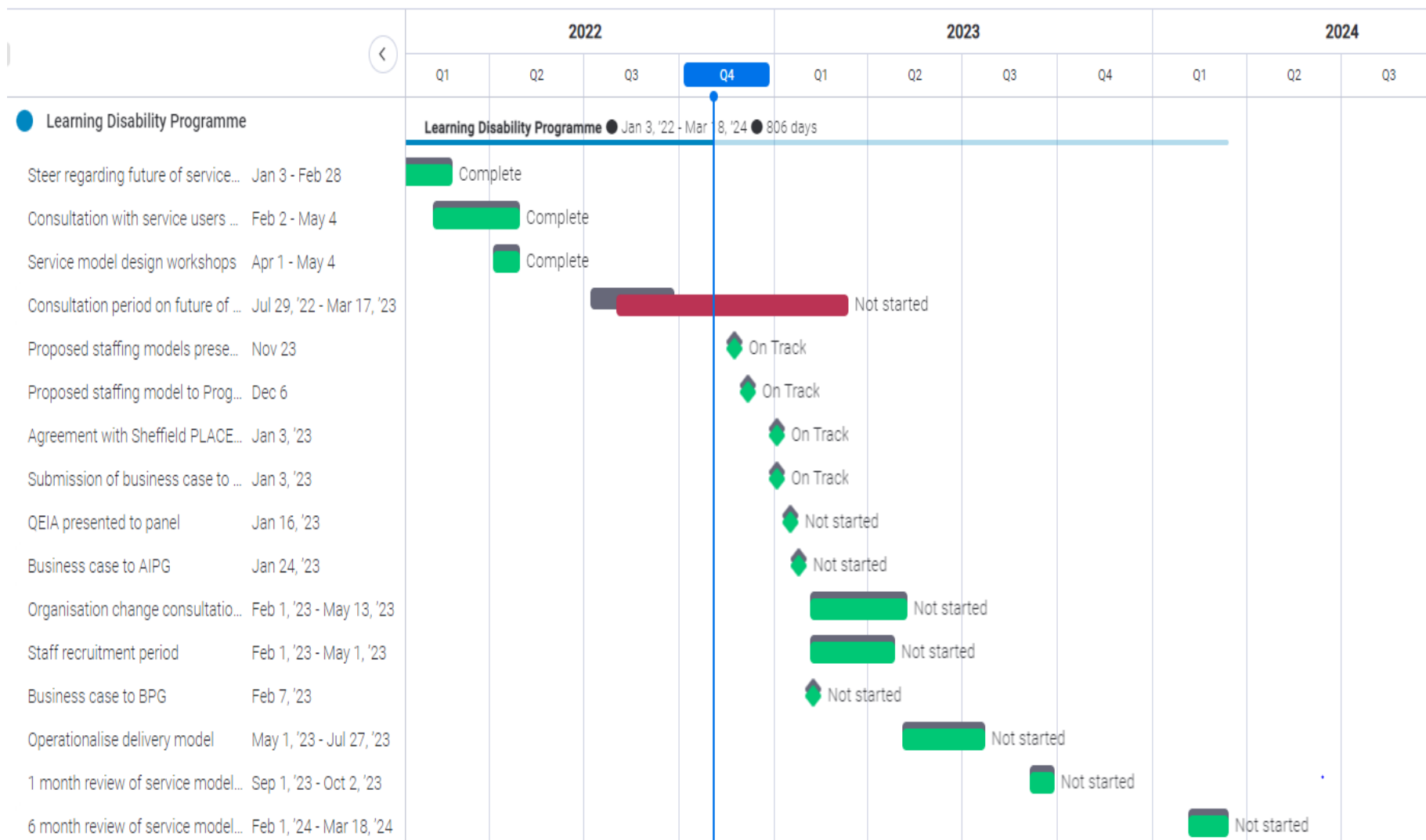
# Electronic Patient Record



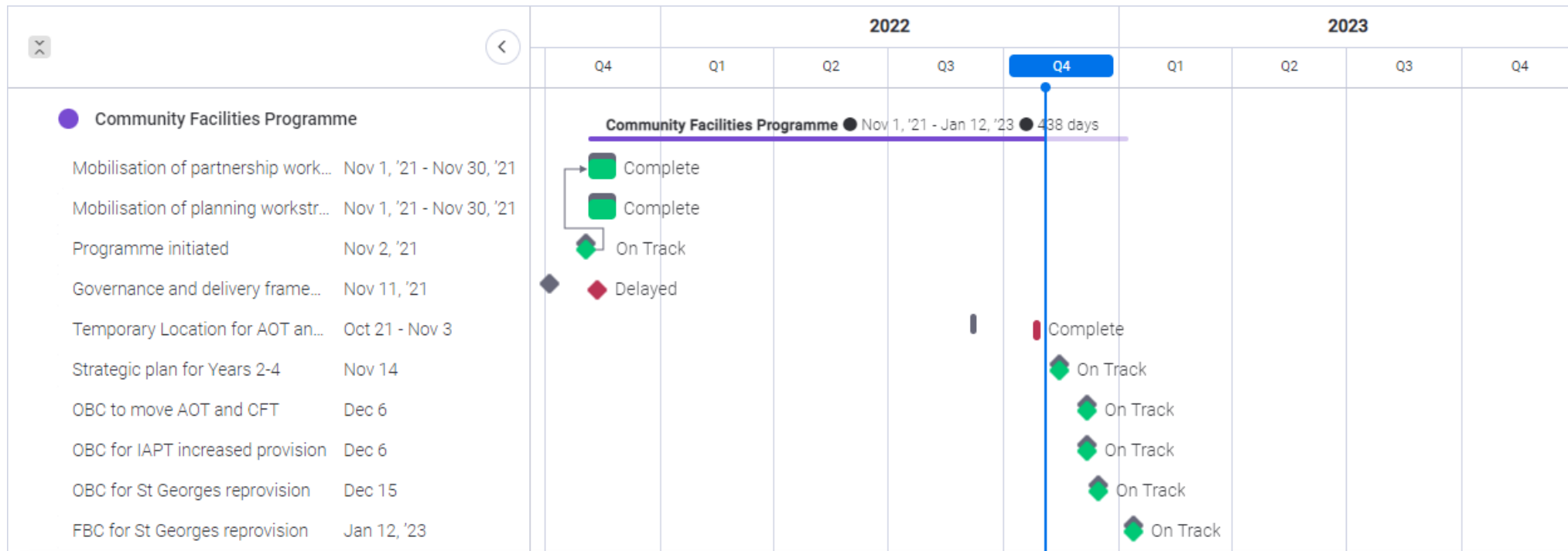
## Primary and Community Mental Health Transformation



## Learning Disabilities Programme



# Community Facilities Programme



# Clinical and Social Care Strategy

