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Paper D

Purpose of report:

| This paper is for: | Description | Select (X) |
|--------------------|--|------------|
| Decision | To formally receive a report and approve its recommendations OR a particular course of action | |
| Discussion | To discuss, in depth, a report noting its implications without formally approving a recommendation or action | X |
| Assurance | To assure the Board that systems and processes are in place, or to advise a gap along with treatment plan | |
| Noting | For noting without the need for discussion | |

Previous consideration:

| Meeting | Date | Please clarify the purpose of the paper to that meeting using the categories above |
|---|------------|--|
| Reconfiguration Programme Cmte | 19/03/2021 | Discussion |
| Executive Board – Executive I M and T Board | 30/03/2021 | Discussion |
| Trust Board Committee | | |
| Trust Board | | |

Context

This report provides a summary and overview of the current programme status, and is a reflection of recent discussions at the Reconfiguration Programme Committee on the 19th March 2021 and the IM&T Executive Board on the 30th March 2021.

- Decision Making Business Case (DMBC)
- Health Planning Update
- Progress with Approvals of the Submitted Business Cases
- Governance and Reporting

Questions

1. What are the key issues that the Reconfiguration Programme is facing this month?

Conclusion

Decision Making Business Case (DMBC)

1. The Commissioning Support Unit are progressing well with the report of findings. They have processed all the survey data and are now compiling the rest of the information from the events and social media activity in order to produce the next version of the draft report.

Revised Programme Parameters

2. Following approval through the governance process, we have confirmed that our current planning assumptions are based on a 3 month delay – i.e. an OBC start of June 2021. The result of the delay by 3 months provides the opportunity to review:
 - Programme governance – the project stock take is being undertaken by PwC and will conclude in the next few weeks. The outcome will be a set of recommendations to strengthen specific areas.
 - Programme resources – confirmation that we have the capacity and capability to manage the commercial contracts with the private sector.
 - Programme management – allows the new digital programme management office time to embed.
 - Design readiness – BDP will be developing a site masterplan to inform the designs on the two sites, and reviewing the site infrastructure.
 - Complete the comprehensive review of the scope of the programme with full clinical engagement and sign off of any changes.

Health Planning Update

3. As shared in previous meetings, the healthcare planning process is being concluded which will determine the exact scope and content of the scheme.
4. Final discussions are underway with clinical users to sign off the functional content.
5. Full details of the extent of the scheme will be signed off by the April Operational Management Group, for approval via the Reconfiguration Committee, Executive Strategy Board and Trust Board in May. This will ensure readiness for OBC commencement in June 2021.

Progress with Approvals of the Submitted Business Cases

Programme Management Offices case

6. We have just been advised that our case will now be re-presented to the National Joint Sub Investment Committee with the added detail we have provided following the clarification process. We are waiting to hear the date of the committee.

Decontamination Case

7. The Planning Committee approved the Endoscopy Decontamination planning application on the 10th March 2021. We are now waiting to hear when the case can be presented to the Joint Sub Investment Committee once approval is received. The case cannot be placed on the agenda until we are in receipt of the planning approval.

Governance and Reporting

8. The individual project highlight reports are available upon request. Any issues highlighted for escalation to Trust Board are either highlighted in this paper or as a separate paper and agenda item.

Input Sought

The Trust Board is requested to:

1. **Note that** the PMO office business case and decontamination case are now ready to be presented to the next Joint Sub Investment Committee (date awaited).

For Reference:

This report relates to the following UHL quality and supporting priorities:

Equality Impact As**1. *Quality priorities***

| | |
|------------------------------|-------|
| Safe, surgery and procedures | [Yes] |
| Improved Cancer pathways | [Yes] |
| Streamlined emergency care | [Yes] |
| Better care pathways | [Yes] |
| Ward accreditation | [Yes] |

2. *Supporting priorities:*

| | |
|--|-------|
| People strategy implementation | [Yes] |
| Investment in sustainable Estate and reconfiguration | [Yes] |
| e-Hospital | [Yes] |
| Embedded research, training and education | [Yes] |
| Embed innovation in recovery and renewal | [Yes] |
| Sustainable finances | [Yes] |

3. *Assessment and Patient and Public Involvement considerations:*

- What was the outcome of your Equality Impact Assessment (EIA)? N/A
- Briefly describe the Patient and Public Involvement (PPI) activities undertaken in relation to this report, or confirm that none were required. Part of individual projects.

- How did the outcome of the EIA influence your Patient and Public Involvement? Part of individual projects.
- If an EIA was not carried out, what was the rationale for this decision? N/A at this stage

4. Risk and Assurance

Risk Reference:

| Does this paper reference a risk event? | Select (X) | Risk Description: |
|---|------------|----------------------------------|
| Strategic: Does this link to a Principal Risk on the BAF? | X | PR 7 – Reconfiguration of estate |
| Organisational: Does this link to an Operational/Corporate Risk on Datix Register | | |
| New Risk identified in paper: What type and description ? | | |
| None | | |

5. Scheduled date for the **next paper** on this topic:

[May 2021]

6. Executive Summaries should not exceed **5 sides**

[My paper does comply]