

Title of paper:	Chief Officer's report
Meeting	Governing Body 13 th June 2014
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Exec Lead:	Miles Freeman, Chief Officer

Purpose	To Agree	
	To Advise	
	To Note	

Since the last Governing Body in public on the 21st March 2014 the Executive Committee has met regularly. This report provides a summary of some of the transformational work that is currently being undertaken in line with our 6 Clinical Priorities and 4 Organisational Priorities for 2014/15.

To support our work we now have a programme office which supports the delivery of our priorities and enables us to monitor and track where we are against our objectives.

Out of Hospital: Primary Care Strategy

Development of Primary care provider networks (PCPN)

We continue to strengthen our commissioning and provider relationships with our 33 membership practices as we move towards delivering our emerging primary care strategy through the configuration of PCPN's aligned to our 3 local health economies (Epsom, East Elmbridge and Dorking). This strategy will form part of our umbrella Integrated Provider Strategy.

The primary care provider offer has been developed by the Executive from discussions with clinicians, the Local Medical Committee and clinical and non-clinical Governing Body members. The draft primary care offer was presented and positively received by our Membership Council in May in recognition of the current pressures on, and capacity of, primary care and the desire to see quality maintained and improved.

We are currently meeting with groups of practices to discuss the primary care offer, share ideas and support the development of PCPN's. We plan to be flexible in the overall model as to how improvements are delivered. Chronic disease management, community medial model and elective care are particular areas of focus and strong links to the SDCCG "Out of Hospital" strategy for improved care for vulnerable, frail

Agenda item	6
Attachment	03

and elderly patients.

PCPN's do raise a number of issues for the organisational development and governance of the CCG which will have to be addressed. We are looking to launch networks by October this year. Each network will operate through an agreed Network Accountability Agreement.

CCG's Expression of Interest for NHS England's proposals for co-commissioning of primary care

As you know, NHS England have invited CCGs to express an interest in Commissioning of primary care, which encompasses a wide spectrum of activity, including:

- working with patients and the public and with Health and Wellbeing Boards to assess needs and decide strategic priorities;
- designing and negotiating local contracts (e.g. General Medical Services/Personal Medical Services, APMS, any Directed Enhanced services commissioned by NHS England);
- approving 'discretionary' payments, e.g. for premises reimbursement;
- managing financial resources and ensuring that expenditure does not exceed the resources available;
- monitoring contractual performance;
- applying any contractual sanctions;
- deciding in what circumstances to bring in new providers and managing associated procurements and making decisions on practice mergers.

Managing the Performers List, revalidation and appraisal will fall outside the scope of any co-commissioning arrangements.

As a CCG we already have powers to commission services from general practice (or from other primary care providers) and it would enable us to improve alignment of our primary care strategy. Equally national policy seems to be aligning CCG's to take responsibility in this area. We are in discussion with the Area Team about an expression of interest for the deadline of 20th June and have written to our membership practices to inform them of our rationale for making this decision. I will update you when we have more information on this process.

Continuing Health Care

Retrospectives are making good progress – the two thousand applications at the time of the PCT's closure are now below one thousand. With respect to reviews and backlogs, all six CCGs have now agreed funding for clearing of backlogs. Fast track backlogs – it should be noted that 80 out of 146 have been completed. The team has also achieved half of its QIPP requirement. New assessments are being monitored weekly and 28 day breaches have reduced significantly since we began running a

Agenda item	6
Attachment	03

locality focused assessment process in shadow form. We are now finalising what this will look like going forward over the next month.

The latest performance report is attached. The new operating policy has been agreed by all six CCGs and there is a new disputes process agreed. An eligibility panel will be commencing in June which is compliant with the above.

Surrey Health and Wellbeing Board Update

The Health and Wellbeing Board has met three times since the end of March. Key areas of work include:

- Sign off the final Better Care Fund plan
- Sign off the joint Older Adults action plan
- Presentation on the Alcohol strategy
- Workshops on: Domestic Abuse; safeguarding adults and children
- Update on the Joint Strategic Needs Assessment and the Pharmaceutical Needs Assessment.
- Emotional Wellbeing & Mental Health Joint Commissioning (including & mental health crisis care concordat
- Strategy for Children & Young People
- The Joint Strategic Needs Assessment & Pharmaceutical Needs Assessment

Health Overview and Scrutiny Committee

On the 30th May I gave a presentation at the Surrey Health Overview Scrutiny Committee on SDCCG Out Of Hospital Strategy which was very well received. The committee also endorsed SDCCG intention to express an interest in co-commissioning of primary care

Annual Report and Accounts

As you will be aware, there has been a huge amount of work to produce the annual report and accounts. We had good representation at our Council of Members meeting on the 15th May which agreed the proposals for signing off the Annual Report and Accounts and the recommended changes to the constitution.

I am pleased to report that the Audit Committee signed this off on the 4th June and the accounts and annual report were submitted on time, with a clean bill of health from both our external and internal auditors.

Surrey Downs CCG Constitution

Following agreement to the changes to the constitution we received notice from NHS England that the deadlines had been removed and that we can submit changes at any time of the year. We are therefore taking a slight pause to ensure that the terms of reference of the Governing Body's principal committees fit well with the constitution before it is submitted later in June.

Agenda item	6
Attachment	03

Dorking Hospital X-Ray

I am very pleased to be able to report that the work on Dorking X-Ray service has been completed; the new service opened on Friday 6th June and is now taking referrals.

Development of SDCCG web site and intranet

We have now appointed a company to lead our web site and intranet development and have a planned workshop to explore this. I will update verbally on this at the Governing Body.

Partnerships and Networks

Primary Mental Health Networks

We continue to strengthen clinical leadership across networks. Dr Jill Evans is leading the development of primary mental health care networks which will enable us to have a better focus on the needs and services for our users.

Priorities Committee

SDCCG is hosting the priorities committee on behalf of Surrey CCGs. At this committee we will consider national clinical guidance and develop local policies and threshold for treatments.

South West London Review

As you are probably aware, the six CCGs in South West London have re-affirmed their commitment to working collaboratively post Better Service Better Value and have published a draft five year strategy. This re-affirms that all future hospital services should be commissioned against the London Quality Standards and that all hospitals must provide seven-day, consultant-led services. As there are not enough senior and experienced doctors, the hospitals will have to work together to achieve this.

As a CCG we are working closely with Epsom and St Helier University Hospitals NHS Trust to improve the already high standard of care at Epsom hospital and to help ensure a viable future for the hospitals. Due to our close working relationship with the Trust and our proximity to London, I envisage that we will be invited as a stakeholder to express views as part of South West London Collaborative Commissioning group's processes in case any future plans may impact on the Trust or any of our other providers.

Quarter 4 CCG Assurance Meeting

We are planning for our formal end of year review meeting with the NHS England Area team on 12th June 2014. This will involve us confirming our commissioning intentions and plans within the resources available.

Agenda item 6
Attachment 03

Organisational development

I presented an update on our organisational development programme and changes to our structure and commissioning arrangements with South Commissioning Support Unit. We plan to go out for consultation during June with a new agreement in place for October 2014. We are currently conducting a search for a new Director of Commissioning which we hope to have in post by August 2014.

Recommendation(s): This report is advisory and I am happy to take questions from Governing Body members on any aspect of it.

Attachments / references: None

Implications for wider governance

Quality and patient safety: The South West London review is driven largely by clinical standards.
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Patient and Public Engagement: No specific issues
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Equality Duty: The Executive agreed a range of actions in relation Equality and Diversity which will be reported in the Quality Committee minutes.

Finance and resources: As reported above the CCG annual report and accounts were approved noting a £72,000 surplus

Communications Plan: A copy of this paper is on the CCG web site.
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Legal or compliance issues: No significant issue

Risk and Assurance: A number of the above issues are reflected on the risk register or assurance framework, specifically Continuing Health Care
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Title of paper:	NHS Continuing Healthcare Programme Progress Report – June 2014
Author:	Richard Simon, Head of Programme Management, Surrey Downs CCG
Exec Lead:	Karen Parsons, Chief Operating Officer, Surrey Downs CCG
Date:	20/05/14 (updated 5 th June)
Meeting:	Continuing Healthcare (CHC) & Funded Nursing Care (FNC) Programme Delivery Group
Agenda item:	Item 8
For:	For noting
Brief summary:	
<p>This report provides a summary of the progress in the delivery of the recommendations identified in the review of NHS Continuing Healthcare (CHC) services in Surrey. An Executive summary is included in the report:</p> <p>The Group is asked to note the progress report.</p>	
Quality and patient safety issues: N/A	
Financial issues: N/A	
Workforce issues: N/A	
Statutory compliance: N/A	
Conflicts of interest: N/A	
Risk and assurance: N/A	
Accompanying papers (please list):	
<ul style="list-style-type: none"> • NHS CONTINUING HEALTHCARE PROGRAMME PROGRESS REPORT – JUNE 2014 	

NHS CONTINUING HEALTHCARE PROGRAMME PROGRESS REPORT – JUNE 2014

1. INTRODUCTION

This report provides a summary of the progress in the delivery of the recommendations identified in the review of NHS Continuing Healthcare (CHC) services in Surrey. Three programmes have been established to deliver these recommendations:

- Contracts and Procurement
- Organisational re-structure
- Compliance and Performance

A number of distinct projects are established under each Programme area. This report provides an update on the progress of each of these projects. In addition a projects milestones tracker and Programme risk register is also included.

Section 6 is new to this report and monitors the progress of projects against outcomes measures. Please note that this report is currently draft as a number of measures need to be defined and/or data flows established for some projects.

2. EXECUTIVE SUMMARY

A summary of current progress in delivery in each of the three programmes is provided below. This includes current RAG assessment, planned actions, an update on items to highlight and any key risks.

Organisational Change Programme

An executive summary for all projects is provided below.

Project	Completions date/ expected completion date	Current Assessment (RED, AMBER, GREEN)	<div style="background-color: red; color: white; padding: 2px;">RED: PROJECT OFF TRACK/MAJOR ISSUES</div> <div style="background-color: orange; color: black; padding: 2px;">AMBER: PROJECT ON TRACK BUT SOME DELAYS/MINOR ISSUES</div> <div style="background-color: green; color: white; padding: 2px;">GREEN: PROJECT ON TRACK/NO ISSUES</div>	
			Planned Action	Items to highlight
Operational Policy	30/04/2014	GREEN	Once agreed by CCG's to set launch event for key partners senior staff - Sent to other CCGs on 25/03/2014 requesting sign off by their Execs or Governing Body - Launch day being planned for 21st May 2014. - Formal handover at CHC Management meeting 11/06/2014 following which the project will be formally closed.	All CCGs have agreed the Policy.

Project	Completions date/ expected completion date	Current Assessment (RED, AMBER, GREEN)	<div style="background-color: red; color: white; padding: 2px;">RED: PROJECT OFF TRACK/MAJOR ISSUES</div> <div style="background-color: yellow; padding: 2px;">AMBER: PROJECT ON TRACK BUT SOME DELAYS/MINOR ISSUES</div> <div style="background-color: green; color: white; padding: 2px;">GREEN: PROJECT ON TRACK/NO ISSUES</div>	
			Planned Action	Items to highlight
Implementation of Framework compliant eligibility, appeals and dispute processes	30/04/2014	GREEN	Final amendments to the ToR for eligibility and appeals being undertaken - Pending word changes on document to be completed. - New panel to commence 08/06/2014	Meeting with SCC on 24/04/2014 to review Disputes Process with provisional agreement on document. Amendments and agreement with SCC (pending minor word changes and inclusion of financial reimbursement) on 06/05/2014.
Review staffing resource, working models and redesign service and resources around patch based working.	01/09/2014	AMBER	Draft locality structure developed and job roles, functions and job descriptions being drafted in conjunction with HR support. - Presentation re: business case and backlogs arranged for GB - Meetings being arranged with CCG's Leads (on programme board) to discuss structures	Outcome of CCGs decisions on Business Cases to address Backlog awaited
Clear existing backlog of assessments/reviews and implement work processes to maintain Framework compliant timeframes	09/05/2014	AMBER	Business Case to be considered by CCG - further work undertaken on activity, cost and team structure to be considered by CO's and COO's and CFO's for CCGs. - Presentation re: business case and backlogs arranged for GB - Meetings being arranged with CCG's Leads (on programme board) to discuss structures	Further work being undertaken on the Business Case around activity, cost and team structure. To be considered by CO's and COO's and CFO's for CCGs.
Quality Monitoring - Service User/carer engagement - Establish Quality Panel -Service user feedback	01/09/2014	AMBER	Meeting arranged for 09/04/2014 with carers representatives. - Lead identified who is working on Carers Action Plan in conjunction with carers representatives. - to agree comms plan - to review letters sent to clients / relatives and gain service user/carer engagement feedback in regards to letter templates	
Develop and implement an operational data quality plan and data cleansing processes.	01/09/2014	AMBER	Identify current number of databases used within the team and there function. Establish a Group to look at what data there is and how this can be converted into a single database for migration into new database once procured -List of databases and spreadsheets currently used by service identified the Placements database is the standard with teams keeping their staff spreadsheets to monitor hours/holiday/etc. - review of template letters sent to service users / carers	Development of the migration plan continues.
Address management of all retrospective reviews for unassessed periods of care, including consideration of outsourcing work.	09/05/2014	RED	Consider process of contracting if business case is approved. Currently on hold.	Awaiting outcome of CFOs decision on other Business Cases for Fast Track and delayed assessment, following which decision on further BC will be considered.

Key Risks

Risk Description	Initial Grading	Summary of controls/action plan	Revised grading
Failure to complete initial assessments for NHS CHC resulting in delays with impact on financial forecasting and budgets	16	Review of option for outsourcing the backlog in process. Business case developed for fast track and 3/12M reviews currently awaiting approval by CFOs. - provider identified for Backlog and the BC for Fast Track has been agreed and the work commenced. Papers to go to COG - presentations arranged to CCG's GB to discuss business case for backlogs	9
Delays in arising from varying levels of provider engagement in CHC assessment process. i.e not completing documentation in line with OP.	12	Implementation of OP and inclusion in all provider contracts. Support and training will be provided from the CHC team. Meeting with Community Providers on 12/3/2014 to bottom out issue. - CHC information included for inclusion in all purchasing intentions and contracts. Community providers looking at developing a proposal for them to provide community chc assessments - awaiting further information from community provider in regards to provision of CHC community assessments - Several providers attended the Operational Policy launch and further more localised sessions planned	6
Current data systems not fit for purpose and results in risk of poor management information and review processes. Delays in procuring new system continues to result in no robust management system in place for reporting.	16	Identify the current data systems in total and consider method of storing relevant data more accurately. Consider creating a temporary system which will enable the transfer of data from current case management to new database when purchased. - interim solution created for data storage - scoring for new databases completed - new database presentations set for w/b 09/06/2014	9

Further details on progress are provided in sections 3, 5 & 6 of this report.

Contracting & Procurement Programme

An executive summary for all projects is provided below.

Project	Completions date/expected completion date	Current Assessment (RED, AMBER, GREEN)	<div style="background-color: red; color: white; padding: 2px;">RED: PROJECT OFF TRACK/MAJOR ISSUES</div> <div style="background-color: orange; color: black; padding: 2px;">AMBER: PROJECT ON TRACK BUT SOME DELAYS/MINOR ISSUES</div> <div style="background-color: green; color: white; padding: 2px;">GREEN: PROJECT ON TRACK/NO ISSUES</div>	Planned Action	Items to highlight
Develop the CHC section for inclusion in CCG procurement strategies	11.2.14			PROJECT CLOSED	
Reprocurement of home base contracts	in line with project plan	GREEN		<ul style="list-style-type: none"> Providers for strategic contracts to be invited to interview agreed 12/6 with interviews w/c 23rd and 30th June Contract Award recommendation for strategic contracts to cabinet and Governing Bodies - late July AQP tender process - tbc but planned for July 	<ul style="list-style-type: none"> Heavy workload for evaluation team across May/ June coinciding with database evaluation. CCGs invited to be part of evaluation process for their area. Contract award to be on all CCG governing bodies in late July or chairman's action All CCGs will sign access agreements for each contract between provider & SCC so that placements procurement delegated to SDCCG

Project	Completions date/ expected completion date	Current Assessment (RED, AMBER, GREEN)	<div style="background-color: red; color: white; padding: 2px;">RED: PROJECT OFF TRACK/MAJOR ISSUES</div> <div style="background-color: yellow; color: black; padding: 2px;">AMBER: PROJECT ON TRACK BUT SOME DELAYS/MINOR ISSUES</div> <div style="background-color: green; color: white; padding: 2px;">GREEN: PROJECT ON TRACK/NO ISSUES</div>	Items to highlight
			Planned Action	
Reprocurement of residential nursing care contracts	tbc	GREEN	<ul style="list-style-type: none"> Approach to market to be agreed across June Second outcomes co-design on 4/7 as first was oversubscribed! First draft service specs for residential nursing and generic residential complete by mid July 	RAG assessment rating for this project has commenced. Progress is assessed as 'green'.
Implementation of remote working	in line with project plan	GREEN	Order will be placed for equipment to enable remote working and staff will be trained to use the equipment. Plan will involve: (i) to migrate from Blackberry mobiles to iPhones to reduce costs and increase functionality (including access to nhs.net); laptop 3G enabling, and purchase of scanners.	CSU South are finalising with Vodafone costs for migration from Blackberry to iPhone contracts and the purchase of iPhones and SIM cards/dongles. Short term arrangements for staff already in the field have been implemented
Procurement of a CHC database to support performance monitoring requirements (Review existing database requirements)	completion expected Oct 14	GREEN	Provider Presentations 13/6 Contract Award recommendation to Governing Bodies - late July	<ul style="list-style-type: none"> Heavy workload for evaluation team across May/ June coinciding with database evaluation. Note: the project name has been changed to more accurately reflect the work involved in the project plans and project objectives.
Integration of placement process	tbc	NOT ASSESSED	Scope project once joint residential working is bedded in.	
Pilot for joint CHC assessments with SCC	tbc	GREEN	Phase 0 (June) will <ul style="list-style-type: none"> review the baseline data and develop the performance framework for the project map the current assessments process and identify issues re-engineer the process train the locality teams go live with first phase of process (dedicated teams) by mid July 	RAG assessment rating for this project has commenced as Project Team is in plan and a project plan has been written. Progress is assessed as 'green'.

Key Risks

Risk Description	Initial Grading	Summary of controls/action plan	Revised grading
Current data systems not fit for purpose with limited ability to provide robust quality performance data and whole system monitoring	16	ITT published 26/3/14. Evaluation resources now scheduled and contract award agenda item scheduled on late July CCG governing bodies/ chairmans action. Go live now moved from August to October although this depends on the mobilisation and migration plan (bid award dependent)	16
Current contract cannot be extended beyond Nov '14 so risk of running with an assumed contract past this date	16	Approach to market meeting being set up with SCC during early May. Lack of contracting support has resulted in contract extension still not being sorted out - now with Peter Jones to progress.	20
Capacity of required personnel to during May/June to evaluate Database and HBC tenders and develop Nursing care tender documentation	16	Evaluation resources now scheduled to spread workload across CHC management team. Incremental workload from the evaluation continues to be significant. No further mitigation can be put in place.	12

Further details on progress are provided in sections 3, 5 & 6 of this report.

Performance & Compliance Programme

An executive summary for all projects is provided below. Please note that the report includes a new project: **CP6 - Establish & implement QA systems for new CHC processes and documentation**. The project is awaiting formal initiation.

Project	Completions date/ expected completion date	Current Assessment (RED, AMBER, GREEN)	RED: PROJECT OFF TRACK/MAJOR ISSUES	Items to highlight
			AMBER: PROJECT ON TRACK BUT SOME DELAYS/MINOR ISSUES	
			GREEN: PROJECT ON TRACK/NO ISSUES	
			Planned Action	
Implementation of new reporting and performance management systems	in line with project plan	GREEN	First 'live' performance report using the new template expected to be the June report using May data.	CHC Programme Board has approved the proposed Performance Management Systems and Reporting Framework and report mock up, subject to some minor amendments. The Balanced Scorecard metrics RAG thresholds will be submitted to the CCG Performance Management Report working group for approval.
Implementation of complaints reporting into performance reporting	in line with project plan	GREEN	Linked into PC1	
Review of risk register and implementation of risk reporting into overall performance reporting	in line with project plan	GREEN	No further action - project to be closed	
Review of quality & safeguarding reporting & development of new report template	in line with project plan	GREEN	Linked into PC1	
Improve information governance with review of arrangements for use of fax machine	31.12.13	PROJECT CLOSED		

Key Risks

Risk Description	Initial Grading	Summary of controls/action plan	Revised grading
Current data systems not fit for purpose with limited ability to provide robust quality performance data and whole system monitoring	16	ITT published 26/3/14. Evaluation resources now scheduled and contract award agenda item scheduled on late July CCG governing bodies/ chairmans action. Go live now moved from August to October although this depends on the mobilisation and migration plan (bid award dependent)	16

Further details on progress are provided in sections 3, 5 & 6 of this report.

3. DETAILED UPDATE IN THE PROGRESS OF EACH PROJECT

The Progress Report in the table below provides an update in the current status of projects currently underway. This includes the actions taken since the last report and planned actions.

CHC Programme Delivery Progress Report

Period: MAY (updated 30th May 2014)

Programme	Project Ref	Project	Linked Review Recommendation(s)	Current Progress	Completions date/ expected completion date	Current Assessment (RED, AMBER, GREEN)	Planned Action	Progress Tracker (RAG)			Date updated	Project Lead
								Last Month	2 months ago	3 months ago		
ORGANISATIONAL CHANGE	OC1	Operational Policy	22,69, 2,5,6,12,35,28,63,47,71,26,20, 21, 60,10	Operational Policy agreed by CHC Programme Board on 11/02/2014. Expected to go to SDCCG and other CCG's Governing Bodies for sign off during March with planned event to launch the policy to senior staff of partners and providers across Surrey in April being considered. - SDCCG Governing Body agreed the Operational Policy on 21/03/2014. - Guildford & Waverley CCG have agreed the OP at their Q&GC and requested further discussion on the 28 day timeline and the review date for the document. - Surrey Heath CCG and NE Hampshire CCG have both agreed the Policy, still awaiting East Surrey and NW Surrey CCGs. - All 6 CCGs have now agreed the Operational Policy. - Operational Policy launch event completed on 21/05/2014	30/04/2014	GREEN	Once agreed by CCG's to set launch event for key partners senior staff - Sent to other CCGs on 25/03/2014 requesting sign off by their Execs or Governing Body - Launch day being planned for 21st May 2014. - Formal handover at CHC Management meeting 11/06/2014 following which the project will be formally closed.	GREEN	AMBER	AMBER	29/05/2014	KH
	OC2	Implementation of Framework compliant eligibility, appeals and dispute processes	61,51,45,48,17,41,8 2,88,10,38,54,55,56, 64,65,66,67,68,69,7 4,22,36,60, 84,6,19,46,61,27	Establish NHS Continuing Healthcare panel/decision making process with clear roles and responsibilities. - Draft terms of reference for eligibility, appeals and disputes issued for comments with final comments to be returned by 14/03/2014. No comments have been received from SCC on any of the versions which have been sent out. - eligibility Process/panel and Local Resolution Process/panel agreed at CHC Programme Board on 15/04/2014. Concerns over SCC not participating in the Local Resolution Panel. - Meeting with SCC on 24/04/2014 to review Disputes Process with provisional agreement on document. Amended draft sent out to SCC representatives for comments and amendments by 02/05/2014. - Review and Amendments and agreement with SCC (pending minor word changes and inclusion	30/04/2014	GREEN	Final amendments to the ToR for eligibility and appeals being undertaken. Disputes process requires SCC agreement. Will escalate through CO weekly report. -Agreed date for change over for panels for eligibility and appeals -Paper to Programme Board on 15/04/2014 -Meeting with SCC scheduled for 09/04/2014 -Awaiting final comments from SCC on Draft following discussion on 24/04/2014. - Pending word changes on document to be completed. - New panel to commence 08/06/2014	GREEN	AMBER	AMBER	29/05/2014	KH
	OC3	Review staffing resource, working models and redesign service and resources around patch based working.	80,49,62,69,81,89,9 0,43,29,30,31,75,93, 77,91,40,58,69,78,9 2,94,83,6,84,83,85,4 5,48,42,41	Shadow 'patch based' working put in place from Monday 3/3/14 as progression towards formal patch based resource allocation. - Localities agreed by the CCGs on 11/03/2014 - Locality structure developed and HR plan being prepared. All job descriptions updated. -Job descriptions going through evaluation process. New structure being developed in line with comments from Programme Board to identify each CCGs contribution to the service, activity and backlog of assessments. - Business case in regards to backlog completed	01/09/2014	AMBER	Draft locality structure developed and job roles, functions and job descriptions being drafted in conjunction with HR support. - Update paper to Programme Board on 15/04/2014 seeking approval for structure and HR process. - Updated papers to CO meetings and Programme Board - Outcome of CCGs decisions on Business Cases to address Backlog awaited - Presentation re: business case and backlogs arranged for GB	AMBER	AMBER		29/05/2014	NH
	OC4	Clear existing backlog of assessments/reviews and implement work processes to maintain Framework compliant timeframes	22,736,69,60	Meetings with external providers to undertake work on Backlog underway to establish how viable this is. Identify number of assessments which can be completed using current resources targeted to current backlog. Prioritise new referrals to reduce Backlog increase pending discussions with agencies - Business cases developed to request funding to support the outsourcing model for Fast Track delayed assessments and for backlog of reviews, initial, 3 month and 12 month. -CHC Team targetting new referrals into to service to prevent further build up of backlog assessments. -Business cases to be discussed on 10/04/2014 with CCGs CFOs following meeting with prvisional provider.	09/05/2014	AMBER	Business Case to be considered by CCG for commence date of 01/04/2014 -awaiting decision from CFOs following teleconference on Thursday 10/04/2014 - further work undertaken on activity, cost and team structure to be considered by CO's and COO's and CFO's for CCGs. - Presentation re: business case and backlogs arranged for GB - Meetings being arranged with CCG's Leads (on programme board) to discuss structures	AMBER	RED	RED	29/05/2014	NH
	OC5	Quality Monitoring - Service User/carer engagement - Establish Quality Panel -Service user feedback	45,48	Incorporated into the workplans across all areas within Organisational Change (OC). Discussion with Patient and Carers representative undertaken to identify key contacts. _ 'Virtual' group including carers and patient experience representatives established -Meeting with carer representatives planned for 09/04/2014 - Work ongoing in improving communication processes and increased involvement in training the team in carers issues. - meeting convened with Comms to develop a comms plan in relation to backlog in assessments and action plan	01/09/2014	AMBER	Meeting arranged for 09/04/2014 with carers representatives. - Lead identified who is working on Carers Action Plan in conjunction with carers representatives. - to agree comms plan - to review letters sent to clients / relatives and gain service user/carer engagement feedback in regards to letter templates	AMBER	AMBER	AMBER	29/05/2014	NH
	OC6	Develop and implement an operational data quality plan and data cleansing processes.	3, 70,	Manual cleans completed resulting in the following numbers: - Fast Track reviews at 12 weeks= 146 - Initial delayed assessments = 508 - Reviews at 3 months = 716 - reviews at 12 months = 1824 Review of current databases underway to ensure information is in a format to transfer to the new database. - ongoing data cleansing	01/09/2014	AMBER	Identify current number of databases used within the team and there function. Establish a Group to look at what data there is and how this can be converted into a single database for migration into new database once procured - Meeting held with admin staff within CHC who will work up a migration plan -List of databases and spreadsheets currently used by service identified the Placements database is the standard with teams keeping their staff spreadsheets to monitor hours/holiday/etc.etc. - review of template letters sent to service users / carers	AMBER	AMBER		29/05/2014	KH
	OC7	Address management of all retrospective reviews for unassessed periods of care, including consideration of outsourcing work.	7	Business case for retrospectives being worked pending outcome of BC for delayed assessments and reviews. -Business case on hold pending outcome of Backlog Business case	09/05/2014	RED	Consider process of contracting if business case is approved. - CFOs teleconference on 10/04/2014 to consider Business Cases for FT and Delayed Reviews. Following this based on outcome decision required on how we move on retrospective outsourcing. - On hold	RED	AMBER		29/05/2014	NH

Programme	Project Ref	Project	Linked Review Recommendation(s)	Current Progress	Completions date/ expected completion date	Current Assessment (RED, AMBER, GREEN) RED: PROJECT OFF TRACK/MAJOR ISSUES AMBER: PROJECT ON TRACK BUT SOME DELAYS/MINOR ISSUES GREEN: PROJECT ON TRACK/NO ISSUES	Planned Action	Progress Tracker (RAG)			Date updated	Project Lead
								Last Month	2 months ago	3 months ago		
CONTRACTING & IMPLEMENT	CP1	Develop the CHC section for inclusion in CCG procurement strategies [Develop CCG-wide Procurement Strategy]	32,37	CCGs have agreed to include the proposed words in their procurement strategies	11.2.14		PROJECT CLOSED	GREEN	GREEN	GREEN	27.3.14	SI
	CP2a	Reprocurement of home base contracts	11,34,37,39	Evaluation sessions by area complete w/e 6th June CCGs have been engaged in the evaluation process for their relevant area	01-Oct	GREEN	Providers for strategic contracts to be invited to interview agreed 12/6 with interviews w/c 23rd and 30th June Contract Award recommendation for strategic contracts to cabinet and Governing Bodies - late July AQP tender process - tbc but planned for July	GREEN	GREEN	GREEN	28.5.14	SI
	CP2b	Reprocurement of residential nursing care contracts	11,34,37,39	Letter to providers to extend contract issued Initial co-design for individual outcomes on 2/5 Sub groups developed to work on outcomes, service spec scope and approach to market Approach to market options appraisal written PID written	1/4/15 depending on outcome of approach to market decision	GREEN	Approach to maket to be agreed across June Second outcomes co-design on 4/7 as first was oversubscribed! First draft service specs for residential nursing and generic residential complete by mid July	NOT ASSESSED	NOT ASSESSED	RED	28.5.14	SI
	CP3	Implementation of remote working	10,64	Paper submitted to exec Mobile scanners costed Exec agreed proposal for field based clinicians completing assessments.	in line with project plan	GREEN	Plan to migrate from Blackberry mobiles to iPhones to reduce costs and increase functionality (including access to nhs.net). SDCCG has asked CSU South to confirm with Vodafone the Blackberry mobile phone contract expiry dates to allow order to be finalised. Project will support laptop 3G enabling, mobile phone migration and purchase of scanners. Order will be placed for equipment to enable remote working and staff will be trained to use the equipment	GREEN	GREEN	GREEN	28.5.14	JP
	CP4	Procurement of a CHC database to support performance monitoring requirements (Review existing database requirements)	3,10,62,70,73	Evaluation complete and all 3 bids have been invited to presentation	completion expected Oct 14	GREEN	Provider Presentations 13/6 Contract Award recommendation to Governing Bodies - late July	AMBER	AMBER	RED	28.5.14	SI
	CP5	Integration of CHC placement process with SCC proceses and systems	14,59	Joint Residential Delivery Group agreed that this project is dependent on CP2a and b (integrated contract re-procurements)	tbc	NOT ASSESSED	Scope project once joint residential working is bedded in.	NOT ASSESSED	NOT ASSESSED	AMBER	28.5.14	SI
	CP6	Pilot for joint CHC assessments with SCC		Project team established Pilot area agreed by SCC amd SDCCG as Mid Surrey (Surrey Downs) SCC have agreed a dedicated team to woek alongside the new CHC shadow Mid Surrey locality ToR and PID written	Q4 2014/15	GREEN	Phase 0 (June) will - review the baseline data and develop the performance framework for the project - map the current assessments process and identify issues - re-engineer the process - train the locality teams - go live with first phase of process (dedicated teams) by mid July	NOT ASSESSED	NOT ASSESSED	NOT ASSESSED	28.5.14	SI
PERFORMANCE & COMPLIANCE	PC1	Implementation of new reporting and performance management systems	1,2,3,5,10,15,72	Workshops held to plan development of Performance Management Systems & Reporting Framework and report mock up. CCGs invited to participate in workshop to review plans for framework development, but low take up, so proposed Performance Management System & Reporting Framework and report mock up were circulated to CCGs for comment.	in line with project plan	GREEN	CHC Programme Board has approved the proposed Performance Management Systems and Reporting Framework and report mock up, subject to some minor amendments. The Balanced Scorecard thresholds will be submitted to the CCG Performance Management Report working group for approval. First 'live' performance report using the new template expected to be the June report using May data.	GREEN	GREEN	GREEN	30.5.14	JP
	PC2	Implementation of complaints reporting into performance reporting	18, 19, 26	Linked into PC1	in line with project plan	GREEN	Linked into PC1	GREEN	GREEN	GREEN	28.5.14	JP
	PC3	Review of risk register and implementation of risk reporting into overall performance reporting	15,26,28	The Risk Register has been reviewed, and it has been decided, in consultation with the Governing Body Secretary, that the Risk Register will not be incorporated into the overall performance reporting	in line with project plan	GREEN	No further action - project to be closed	GREEN	GREEN	GREEN	28.5.14	JP
	PC4	Review of quality & safeguarding reporting & development of new report template	26	Linked into PC1	in line with project plan	GREEN	Linked into PC1	GREEN	GREEN	GREEN	28.5.14	JP
	PC5	Improve information governance with review of arrangements for use of fax machine	64	New fax arrangements in place for faxing. PROJECT CLOSED	31.12.13		PROJECT CLOSED	GREEN	GREEN	GREEN	28.5.14	JP
	PC6	Establish & implement QA systems for new CHC processes and documentation	Local	NEW Project. Project Plan being worked up. Objectives are; to esure that all CHC processes are mapped and are in line with the new Operational Policy, all documents/templates are QA'd and conform to agreed corporate standard.	Expected 01/12/2014	NOT ASSESSED	Project Plan to be worked up. First priority processes to be QA'd by end July.	NOT ASSESSED	NOT ASSESSED	NOT ASSESSED	30.5.14	JP

4. PROJECT MILESTONES TRACKER

The milestone tracker below provides an update in the progress in the delivery of projects. Project milestones are set and monitored on a quarterly basis. Each milestone is RAG assessed and expected dates for completion are included. The tracker also identifies and assesses the key risk to the project, details on the mitigating actions to reduce the level of risk are included. Measurable project outcomes will be included in future reports, these will be used to assess and determine when a project is completed.

SUPPORTING PROGRAMME	Linked review recommendation	REF NO.	PROJECT NAME	CURRENT TASKS	PROJECT MILESTONES (Q3 2013/14 - Q4 2014/15)														Project Lead	Date Updated				
					Q3 Milestones	Assessment	Completion Date	Q4 Milestones	Current Assessment	Completion Date	Recovery Plan in place?	Q1 Milestones	Current Assessment	Completion Date	Recovery Plan in place?	Q2 Milestones	Current Assessment	Completion Date			Recovery Plan in place?			
ORGANISATIONAL CHANGE	22,736,69,60	OC4	Backlogs	Develop & Implement "discharge to assess" process	Discussion at Operational Network & Discharge Discovery Event Workshops. Mapping of currently discharge process, perceptions, strengths and weaknesses. Agreement of OP will enable discharges to occur quicker as there will be no need for a HNA at the Checklist stage.	RED	13/02/2014	Implement OP and training programme into Epsom General in the first instance and monitor process. -Awaiting decision on OBC to address backlog - Discharge to Assess for discussion at PDQ on 6/5/2014	AMBER	31/06/2014		Identify pathways for discharge to assess. Identify suitable placements that are CQC. Identify pathways for post assessment. Involvement of Service Resdesign Team. Agreement of agreed pathways & authorisation from Collaborative & Exec Meeting being set up to discuss with NWSCG their proposal for discharge to assess, provisional	AMBER	31/06/2014		milestone to be defined		Jul-14		milestone to be defined		Ongoing	KH	30/05/2014
	17,41,82	OC5	Quality Monitoring	Establish new Quality Panel	Agree OP and identify planned workstreams including SU and Carer input	AMBER	20/02/2014	Establish project team Reviewing best practice and agreed membership & terms of reference -Quality Panel ToR being drafted	AMBER	(1) 01/03/2014 (2) 1/9/2014		Identify and engaging service users and carers to be involved. A 'virtual' panel has been established to ensure user and carer involvement in the transformation process. Carers and Service user reps to identify what input they can provide and preferred method of engagement	AMBER	30/09/2014		milestone to be defined				milestone to be defined			KH	30/05/2014
	84,6,19,46,56,84,45,51,61,27			Improve information and communication to users/patients	Review of current correspondence to SU taking advice from the Surrey Disabled Peoples Partnership,	AMBER	20/02/2014	Mapping exercise to establish current communications to service users and providers Identify leads and Establish Project team -Documentation being drafted in conjunction with the Patient Experience Team	AMBER	31/03/2014 (2) 1/9/2014		Lead to review correspondence identified to work in conjunction with the complaints co-ordinator - All correspondence under review with drafts being prepared.	AMBER	31/03/2014		All correspondence sent to service users / relatives / others to be reviewed by CHC process group to ensure letter templates prepared to be uploaded to new database	AMBER	Sep-14		On-going evaluation and review			KH	30/05/2014
	1,2,3,5,10,13,15,18,26,27,47,62,63,70,71,79	OC6	Data cleanse for migration to new database	Prepare a plan to ensure data is ready for migration onto the new database by September 2014	N/A	N/A	NOT ASSESSED		Data cleanse undertaken identifying patient populations. - New database procurement moving as planned with team working on all data systems to ensure migration to new system	AMBER	21/03/2014 (2) 1/10/2014		Identify data fields to be migrated to the new database having reviewed current data systems and data fields. -Migration plan being prepared	AMBER	01/09/2014					milestone to be defined			KH	30/05/2014
	local priority	OC7	Management of retrospectives for unassessed periods of care	Develop & implement a plan to address delayed assessments	no milestone identified		NOT ASSESSED		Project plan completed which identifies resources and weekly targets for assessments. Monitor outturn and adjust plan as necessary. 849 delayed assessments at 31/1/2013 identified. Target for 180 clearance in Feb, March target to be reviewed 3rd week Feb. 0g	RED	1/3/2014 (phase 1) (2) 31/5/2014		Identify numbers of outstanding assessments from identified cohort and assess against plan. Data cleanse underway to identify patients and baseline service. Meeting took place with provider who may provide staff to undertake assessments, retrospectives and reviews. Awaiting information back from providewr. -Plan superseded by development of Business Cases to outsource delayed assessments and Fast Track assessments -Fast Track BC agreed with work commenced. -Awaiting CCGs decision on funding identified provider with COs and CFOs having copies of the Business Case for the Backlog Further meetings and	RED	01/04/2014 (2) 31/5/2014					milestone to be defined			KH	30/05/2014

SUPPORTING PROGRAMME	Linked review recommendations	REF NO.	PROJECT NAME	CURRENT TASKS	PROJECT MILESTONES (Q3 2013/14 - Q4 2014/15)														Project Lead	Date Updated				
					Q3 Milestones			Q4 Milestones			Q1 Milestones			Q2 Milestones			Q3 Milestones							
					Assessment	Completion Date	Recovery Plan in place?	Assessment	Completion Date	Recovery Plan in place?	Assessment	Completion Date	Recovery Plan in place?	Assessment	Completion Date	Recovery Plan in place?	Assessment	Completion Date			Recovery Plan in place?			
CONTRACTING & PROCUREMENT	32,37	CP1	Develop the CHC section for inclusion in CCG procurement strategies [Develop CCG-wide Procurement Strategy]	n/a	n/a	NOT ASSESSED		Surrey CCGs to be contacted with recommended core procurement clauses to be incorporated into respective procurement strategies.	GREEN	14.2.14		Project Close	GREEN								SI	27/03/2014		
	11,34,37,39	CP2a	Reprocurement of home base contracts	n/a	Project Team established	GREEN	Nov-13	Service specification complete	GREEN	end Mar 14		ITT period complete Evaluation complete	AMBER	16 May 14 end June 14		Contract Award	AMBER	Jul-14		Go live	AMBER	01/10/2014	SI	29/04/2014
	11,34,37,39	CP2b	Reprocurement of residential nursing care contracts	n/a	Project Team established	GREEN	Nov-13	Agreement to jointly re-procure with SCC	GREEN	Mar-14		TOR agreed Initial Co-Consulting Specification developed	AMBER	Apr 14 2 May 14 tbc		milestone to be defined	NOT ASSESSED			milestone to be defined	NOT ASSESSED		SI	29/04/2014
	10,64	CP3	Implementation of remote working	n/a	n/a	NOT ASSESSED	n/a	Options to Exec	GREEN	end Feb		Place orders for equipment to support laptop 3G enabling, migration to new mobile phones and purchase of scanners Equipment received	AMBER	01/04/2014 end Q3		All staff have had their laptops 3G enabled, received new mobiles and scanners All staff have been trained in usage of new/upgraded equipment	AMBER			All staff trained and are accessing CHC database using laptops 3G enabled	AMBER		JP	29.4.14
	7	CP4	Deliver PUPoC review within DoH Guidance (Market testing for outsourcing "retrospectives")	n/a	n/a	NOT ASSESSED	n/a	Options Appraisal complete	GREEN	Mar-14		Business Case complete Specification complete	NOT ASSESSED	project plan tbc		milestone to be defined	NOT ASSESSED			milestone to be defined	NOT ASSESSED		SI	29/04/2014
	3,10,62,70,73	CP5	Procurement of a CHC database to support performance monitoring requirements (Review existing database requirements)	n/a	PQQ Complete	GREEN	Nov-13	Service specification complete	GREEN	Jan 14		ITT period complete Evaluation complete	AMBER	6 May 14 end June 14		Contract Award Mobilisation & Migration	AMBER	Jun-14		Go Live	AMBER	tbc	SI	29/04/2014
	14,59	CP6	Integration of CHC placement process with SCC processes and systems	n/a	CHC comms plan agreed	GREEN	31.12.13	Agreement to jointly re-procure with SCC	GREEN	Mar-14		Project Scoped	AMBER	end June 14		milestone to be defined	NOT ASSESSED			milestone to be defined	NOT ASSESSED		SI	29/04/2014
		CP7	Pilot for joint CHC assessments with SCC	n/a			Agreement to jointly re-procure with SCC	GREEN	Mar-14		Project Scoped	AMBER	end June 14		milestone to be defined	NOT ASSESSED			milestone to be defined	NOT ASSESSED		SI	29/04/2014	
PERFORMANCE & COMPLIANCE	1,2,3,5,10,15,72	PC1	Implementation of new reporting and performance management systems		Project started	GREEN	31.12.13	KPIs to be developed and approved in principle as core of new Performance Management Systems & Reporting Performance Management Report template to be developed and circulated to CCGs for comment and subsequent update	GREEN	31.3.14		Performance Management Report Systems & Reporting framework and mock up to be submitted to CHC Programme Board and then CCGs for approval (prior to implementation of new database) First performance management report to be issued in June containing some May data	GREEN	30.6.14		Performance Management Report Systems & Reporting reports submitted reporting on all data	GREEN	30.9.14		Performance Management Report Systems & Reporting to be linked into new CHC database (post implementation of new database)	GREEN	31.12.14	JP	29.4.14
	18, 19, 26	PC2	Implementation of complaints reporting into performance reporting		n/a	NOT ASSESSED	n/a	Project started - link into PC1.	GREEN	31.3.14		Linked into PC1	GREEN	30.6.14		Linked into PC1	GREEN	30.9.14		Linked into PC1	GREEN	31.12.14	JP	29.4.14
	15,26,28	PC3	Review of risk register and implementation of risk reporting into overall performance reporting		n/a	NOT ASSESSED	n/a	Project started - link into PC1. Propose enhanced risk register and align risk register into overall reporting - link into PC1	GREEN	31.3.14		Decide if/how risk register is to be incorporated into overall performance management report	GREEN	30.6.14		Decision reached that risk register will not be incorporated into performance management reporting. No further action required	NOT ASSESSED			No further action required	NOT ASSESSED		JP	29.4.14
	26	PC4	Review of quality & safeguarding reporting & development of new report template		n/a	NOT ASSESSED	n/a	Project started - link into PC1. Develop template specification	GREEN	31.3.14		Link into PC1 to align Quality and Safeguarding reporting with overall reporting	GREEN	30.6.14		Linked into PC1	GREEN			Linked into PC1	GREEN	31.12.14	JP	29.4.14
	64	PC5	Improve information governance with review of arrangements for use of fax machine		New fax arrangements in place for faxing	GREEN	31.12.13	PROJECT CLOSE	GREEN														JP	29.4.14
			PC6	Establish & implement QA systems for new CHC processes and documentation																				JP

5. PROGRAMME RISK REGISTER

The Programme Risk Register provided in the table below provides an assessment of the key project risks identified in each programme. Risks are assessed and managed in accordance with the Surrey Downs CCG Risk Management Policy. The register includes details of the actions being taken to mitigate and reduce the level of risk to the achievement of the overall Programme objectives.

NHS Surrey Downs- CHC Programme Risk Register (updated 30.5.14)

NHS Continuing Healthcare Project: May 2014

Risk: O = Operational, F= Financial, OG= Organisational Governance, R= Reputation

Source (eg review, service, external)	Risk Type	Linked Programme					Risk Description	Initial Grading					Revised grading				Review Date	Date Updated		
		Programme Lead	Programme Name	Date Added	Linked Project Ref	Linked Project		Impact	Likelihood	Risk score and rating	Summary of controls/action plan	Completion expected	Cost & funding source	Review Authority	Impact	Likelihood			Risk score and rating	Acceptable ? Y/N
Review	O/R	KH	Organisation Re-structure	27.2.14	OC1	Develop & implement new Operating Policy	Risk of non-compliance with National Framework for NHS CHC & FNC(2012). No agreed Operational Policy across all CCGs	3	3	9	Draft Policy out for comment to CCG Chief Officers. Wider distribution for comment following CO responses on 21/1/2014. V3 out for final comments until 5/2/14. Agree in principle (1) OP following 5/2/14 and commence training plan while awaiting formal sign off through CCG structures (2). OP agreed at CHC Programme Board on 11/02/2014. To go to CCG's for final sign off on 21st March 2014 -Only East Surrey CCG to agree Policy	(1) 5.2.14 (2) 6/5/14	N/A	CHC Programme Board and CCGs	2	2	4	yes	1.4.15	29/05/2014
Review	O/F/R	AS	Organisation Re-structure	27.2.14	OC7 [OC12]	Develop & implement a plan to address delayed assessments	Failure to complete initial assessments for NHS CHC resulting in delays with impact on financial forecasting and budgets	4	4	16	Review of option for outsourcing the backlog in process. Business case developed for fast track and 3/12M reviews currently awaiting approval by CFOs. - provider identified for Backlog and the BC for Fast Track has been agreed and the work commenced. Papers to go to COG - presentations arranged to CCG's GB to discuss	28.2.14 (2) 9/5/2014	N/A	CHC Programme Board and CCGs	3	3	9	yes	7.4.14	29/05/2014
Review	F/O/OG/R	KH	Organisation Re-structure	27.2.14	OC1	Develop & implement new Operating Policy	Delays in arising from varying levels of provider engagement in CHC assessment process. i.e not completing documentation in line with OP.	3	4	12	Implementation of OP and inclusion in all provider contracts. Support and training will be provided from the CHC team. Meeting with Community Providers on 12/3/2014 to bottom out issue. - CHC information included for inclusion in all purchasing intentions and contracts. Community providers looking at developing a proposal for them to provide community chc assessments - awaiting further information from community	1.4.14	N/A	CCG's and CHC Programme Board	3	2	6		1.9.14	29/05/2014
		KH		10.3.14	OC5 [OC6]	Data cleanse for migration to new database	Current data systems not fit for purpose and results in risk of poor management information and review processes. Delays in procuring new system continues to result in no robust management system in place for reporting.	4	4	16	Identify the current data systems in total and consider method of storing relevant data more accurately. Consider creating a temporary system which will enable the transfer of data from current case management to new database when purchased. - interim solution created for data storage	1.10.14	N/A	CHC Programme Board and CCGs	3	3	9		2.6.14	29/05/2014
Review	O/OG/F	JP	Performance & Compliance	27.2.14	PC1 /CP5	Implementation of new reporting and performance management systems/ Review existing database requirements	Current data systems not fit for purpose with limited ability to provide robust quality performance data and whole system monitoring	4	4	16	ITT published 26/3/14. Evaluation resources now scheduled and contract award agenda item scheduled on late July CCG governing bodies/ chairmans action. Go live now moved from August to October although this depends on the mobilisation and migration plan (bid award dependent) -Team working on data plan for data migration, procurement of new system on track	Oct-14	N/A	CHC Programme Board and CCGs	3	3	9	yes	1.6.14	01/05/2014
Review	O/OG/F	SI	Contracting & Procurement	12.3.14	CP2b	Re-procurement of residential contracts	Current Home Based Care contract cannot be extended beyond Nov '14 so risk of running with an assumed contract past this date	4	4	16	Approach to market meeting being set up with SCC during early May. Lack of contracting support has resulted in contract extension still not being sorted out - now with Contract Lead to progress.	Apr-15	N/A	CHC Programme Board and CCGs	4	5	20	no	1.6.14	29/04/2014
Review	O/OG/F	SI	Contracting & Procurement	27/03/2014	CP2a,2b,5	Procurements of Database, HBC and Nursing care contracts	Capacity of required personnel to during May/June to evaluate Database and HBC tenders and develop Nursing care tender documentation	4	4	16	Evaluation resources now scheduled to spread workload across CHC management team. Incremental workload from the evaluation continues to be significant. No further mitigation can be put in place.	Aug-14	N/A	CHC Programme Board and CCGs	3	4	12		1.6.14	29/04/2014

6. PROJECT OUTCOMES SCORECARD

The Project Outcomes Scorecard provided in the table below provides an assessment of the key outcomes measures identified in each project.

The scorecard is currently in draft form and further work is progressing to define and agree methodologies for measurement where there are gaps indicated.

Risks are assessed and managed in accordance with the Surrey Downs CCG Risk Management Policy. The register includes details of the actions being taken to mitigate and reduce the level of risk to the achievement of the overall Programme objectives.

CHC Projects Outcomes Tracker DRAFT

Version 1: Updated 23.4.14

SUPPORTING PROGRAMME	Linked recommendation numbers	REF NO.	PROJECT NAME	KEY WORK TASK	PROJECT OUTCOMES						PROGRESS AGAINST PROJECT OUTCOMES				Project Lead	Date Updated
					OUTCOME NAME	NUMERATOR DEFINITION	DENOMINATOR DEFINITION	METRIC CONSTRUCTION	DATA SOURCE	DATA PERIOD	CURRENT PERFORMANCE	TARGET	CURRENT RAG ASSESSMENT	RAG THRESHOLDS		
ORGANISATIONAL CHANGE	22,69,25,6,12,35,28,63,47,71,26,20,21,60,10	OC1	Operational policy	Operating Policy	Full sign off of Operational Policy by all 6 CCGs	Number of CCGs signed up to policy 6	No. of CCGs 6	measure expressed as a percentage 100%	Business manager/Minutes from Programme Board	01/02/2014 to May 2014	100% CCGs signed up	100%	GREEN	GREEN = 100% RED <100%	KH	29/05/2014
	Develop & implement QA & monitoring systems			PROJECT COMPLETED												
	Referral pathway review & implementation (& establish named clinician)			PROJECT COMPLETED												
	Support users to engage with panel process and advocacy support			Attendance by patient/representative at Local Resolution Panel for appeals	Number of appeals	Number of patients/representatives attending panel	measure expressed as a percentage	Local resolution panel minutes	02/06/2014 to 01/12/2014	Not yet commenced	100%	N/A	N/A	KH	29/05/2014	
	Develop & implement assessor accreditation			Accredited staff	Number trained	Number accredited		Training sessions attendance lists	01/06/2014 to 31/03/2014	N/A	10% of all trained	N/A	N/A	KH	29/05/2014	
	61,51,45,48,17,41,82,88,10,38,54,55,56,64,65,66,67,68,69,74,22,36,60,84,6,19,46,61,27	OC2	Decision Making	Review Panel Process	Reduction in appeals not upheld	Number of appeals not upheld	Number of non-eligibility decisions	measure expressed as a percentage	Panel minutes and records	01/06/2014 to 31/03/2015	Numbers of appeals and disputes to be verified by 09/05/2012	reduction	N/A	tbd	KH	29/05/2014
	80,49,62,69,81,89,90,43,29,30,31,75,93,77,91,40,58,69,78,92,94,83,6,84,83,85,45,48,42,41	OC3	Staffing Review	Develop plan and agree patch-based working (inc. review of Senior Management Structure and HR workforce demand/capacity planning)	Locality model in place with total identified resource allocated	total CHC team	% of team allocated to locality		CHC redesign documents and financial reports	2014/15 budgets	Shadow model in place for nursing and HUB	All resources allocated by level of investment across CCGs	N/A	GREEN = 100% AMBER > = 90% RED < 90%	KH	29/05/2014
	Improve alignment of safeguarding between SCC and CHC			PROJECT COMPLETED												
	22,?36,69,60	OC4	Backlogs	Develop & Implement "discharge to assess" process	Discharge to assess	Number discharges for assessment	No. of Admissions	measure expressed as a	??	??	Not yet commenced	??	??	??	KH	29/05/2014
	45,48	OC5	Quality Monitoring	Establish new Quality Panel	Quality panel ToRs agreed	n/a	n/a	n/a	Panel Terms of Reference	N/A	N/A	Terms of reference agreed -membership agreed Timetable for meetings agreed by September 2014	GREEN	GREEN= achieved RED=not achieved	KH	29/05/2014
Improve information and communication to users/patients	Number of correspondence templates checked by users/carers			Number of templates checked by users/carers	Number of templates	measure expressed as a percentage	internal monitoring	First wave 01/07/14 to 01/08/14 Second wave 01/09/14 to 01/10/14	Current correspondence requires updating	100%	N/A	GREEN = 100% AMBER > = 90% RED < 90%	KH	29/05/2014		
3, 70,	OC6	Data cleanse for migration to new database	Prepare a plan to ensure data is ready for migration onto the new database by September 2014	Data cleansing and preparation complete	tbd	tbd	tbd	tbd	01/08/14 to 01/09/14	current interim system in place with data cleansing ongoing. Review of all comms for	100%	tbd	tbd	KH	29/05/2014	
7	OC7	Management of retrospectives for unassessed periods of care	Develop & implement a plan to address delayed assessments	PROJECT PLAN TO BE DEVELOPED												

SUPPORTING PROGRAMME	Linked review recommendations	REF NO.	PROJECT NAME	KEY WORK TASK	PROJECT OUTCOMES						PROGRESS AGAINST PROJECT OUTCOMES				Project Lead	Date Updated	
					OUTCOME NAME	NUMERATOR DEFINITION	DENOMINATOR DEFINITION	METRIC CONSTRUCTION	DATA SOURCE	DATA PERIOD	CURRENT PERFORMANCE	TARGET	CURRENT RAG ASSESSMENT	RAG THRESHOLDS			
CONTRACTING & PROCUREMENT	32,37	CP1	Develop the CHC section for inclusion in CCG procurement strategies [Develop CCG-wide Procurement Strategy]		PROJECT COMPLETED												
	11,34,37,39	CP2a	Reprocurement of home base contracts		Revised contract developed addressing all identified issues	n/a	n/a	Yes/ No	Contract documents	At Contract Commencement	On track - Contract published at ITT addresses issues	Yes	AMBER	Green - Yes Amber - On Track Red - No	SI	08/05/2014	
					Joint commissioning and procurement with SCC, leveraging purchase power and quality monitoring	n/a	n/a	Yes/ No	Terms of Reference; project plan; contract; quality monitoring	At Contract Commencement	On Track - joint ITT published	Yes	AMBER	Green - Yes Amber - On Track Red - No	SI	08/05/2014	
	11,34,37,39	CP2b	Reprocurement of residential nursing care contracts		Revised contract developed addressing all identified issues	n/a	n/a	Yes/ No	Contract documents	At Contract Commencement	Not Assessed	Yes	NOT ASSESSED	Green - Yes Amber - On Track Red - No	SI	08/05/2014	
					Joint commissioning and procurement with SCC, leveraging purchase power and quality monitoring	n/a	n/a	Yes/ No	Terms of Reference; project plan; contract; quality monitoring	At Contract Commencement	On Track - joint service specification in progress	Yes	AMBER	Green - Yes Amber - On Track Red - No	SI	08/05/2014	
	10,64	CP3	Implementation of remote working		Number of staff enabled for remote working	Number of staff who have received equipment to enable remote working	Number of staff who require remote working equipment	Measure expressed as a percentage	Internal monitoring	Jun-14	n/a	100%	N/A	GREEN=100% AMBER >=80% RED < 80%	JP	08/05/2014	
					Number of staff who have received training for remote working	Number of staff who have been trained and are using remote working equipment and processes	Number of staff who required to be trained in using remote working equipment and processes	measure expressed as a percentage	Internal monitoring	Jul-14	n/a	100%	N/A	GREEN=100% AMBER >=80% RED < 80%	JP	08/05/2014	
	3,10,62,70,73	CP4	Procurement of a CHC database to support performance monitoring requirements (Review existing database requirements)		Service specification includes all review recommendations	n/a	n/a	Yes/ No	Service Specification	At ITT publication	Yes	Yes	GREEN	Green - Yes Amber - On Track Red - No	SI	08/05/2014	
					Database is fit for performance monitoring: Number of KPIs reported on in the Performance report	Number of KPIs reported on	Number of KPIs	Measure expressed as a percentage	Monthly performance report	At Go Live	n/a	100%	N/A	GREEN=100% AMBER >=80% RED < 80%	SI	08/05/2014	
	14,59	CP5	Integration of CHC placement process with SCC processes and systems		tbd								NOT ASSESSED		SI	08/05/2014	
		CP6	Pilot for joint CHC assessments with SCC		tbd								NOT ASSESSED		SI	08/05/2014	
	PERFORMANCE & COMPLIANCE	1,2,3,5,10,15,72	PC1	Implementation of new reporting and performance management systems		CHC Performance Management Systems & Report template agreed by CHC Programme Board	n/a	n/a	Yes/ No	CHC Programme Board minutes	Jun-14	On track	Yes	AMBER	Green - Yes Amber - On Track Red - No	JP	08/05/2014
					CHC Performance Management Systems & Report implemented: Number of KPIs reported on in the Performance report	Number of KPIs reported on	Number of KPIs	Measure expressed as a percentage	Monthly performance report	Jun-14	n/a	100%	AMBER	GREEN=100% AMBER >=80% RED < 80%	JP	08/05/2014	
18, 19, 26		PC2	Implementation of complaints reporting into performance reporting		Quality element including Complaints incorporated into CHC Performance Report	n/a	n/a	Yes/ No	Monthly performance report	Jun-14	On track	Yes	AMBER	Green - Yes Amber - On Track Red - No	JP	08/05/2014	
15,26,28		PC3	Review of risk register and implementation of risk reporting into overall performance reporting		CHC Service Risk Register complies with the SDCCG Risk Management Strategy	n/a	n/a	Yes/ No	Internal Audit	2014/15	On track	Yes	AMBER	Green - Yes Amber - On Track Red - No	JP	08/05/2014	
					Risk Register presented routinely to the CHC Management Team	Number of CHC Management Team meetings where risk register is presented	Number of CHC Management Team meetings	Measure expressed as a percentage	CHC Management Team Agenda	2014/15	n/a	100%	N/A	GREEN=100% AMBER >=95% RED < 95%	JP	08/05/2014	
26		PC4	Review of quality & safeguarding reporting & development of new		Quality reporting complies with the SDCCG Quality Strategy	n/a	n/a	Yes/ No	Internal Audit	2014/15	On track	Yes	AMBER	Green - Yes Amber - On Track Red - No	JP	08/05/2014	
64		PC5	Improve information governance with review of arrangements for use of fax machine		PROJECT COMPLETED												
Local	PC6	Establish & implement QA systems for new CHC processes and documentation		NEW PROJECT - to be added	NEW PROJECT - to be added	NEW PROJECT - to be added	NEW PROJECT - to be added	NEW PROJECT - to be added	NEW PROJECT - to be added	NEW PROJECT - to be added	NEW PROJECT - to be added	NEW PROJECT - to be added	NEW PROJECT - to be added	NEW PROJECT - to be added	NEW PROJECT - to be added	JP	28.5.14