

**NHS 24
BOARD**

**12 DECEMBER 2019
ITEM NO 9.3
FOR ASSURANCE**

CHANGE PORTFOLIO PROGRESS REPORT

Executive Sponsor:	Chief Executive Officer/Senior Responsible Officer
Lead Officer/Author:	Director of Service Development
Action Required	<p>Note improvement to the management and reporting of NHS 24's Change Portfolio.</p> <p>Note the current status of Programmes within the scope of NHS 24's Change Portfolio.</p>
Key Points	<ul style="list-style-type: none"> • Support for scrutiny enabled by the new Dashboard report format. • Progress towards key objectives for the 2019-20 phase of Portfolio delivery. • <i>Service Enabling Digital and Technical Estate (SEDATE)</i> is a combined Technical and Digital Programme Board now being managed as a single programme within the Change Portfolio.
Date presented to EMT and relevant Committee	<p>The Dashboard report was presented to the Change Portfolio Board (CPB) on 19th November.</p> <p>Performance and Planning (P&P) Committee on 22nd November 2019</p>
Summary of key discussion points/actions arising from respective Committees	<p>Overall Dashboard reporting agreed with some minor changes at CPB.</p> <p>P&P acknowledged positive progress and sought that an update be brought to NHS 24 Board.</p>
Strategic alignment and link to overarching NHS Scotland priorities and strategies	<p>This paper outlines the scope and management of strategic change that will enable NHS 24 to achieve its contribution to the 2020 Vision and National Health and Social Care Delivery Plan. Individual workstreams have responsibility for alignment to relevant national strategies and policies.</p>
Key Risks	<ul style="list-style-type: none"> • Efficient management of the multiple internal and external budgets funding change • Recruitment and retention of frontline staff to implement new service models • Alignment and pace of technology development relative to emerging new service models • Strategic level partner engagement to secure growth targets for new service models

Financial Implications	£4.5m of additional SG allocation expected for these projects (£2.2m is still to be allocated). Projecting an underspend on the projects.
Equality and Diversity	The Scottish approach to Service Design (SatSD) is applied to all developments, improvements and programmes of redesign. By default this means that services are developed for all service users and potential service users. An EDIA is developed at an individual project level.

1.0 RECOMMENDATION

1.1 The NHS 24 Board is requested to:

- Note improvement to the management and reporting of NHS 24's Change Portfolio.
- Note the current status of Programmes within the scope of NHS 24's Change Portfolio.

2.0 BACKGROUND

- 2.1 The major change programmes undertaken by NHS 24 in support of its strategic priorities are, progressively, being organised and managed as a coherent, inter-related Change Portfolio. Arrangements for the governance of the Change Portfolio were reported to the Planning and Performance Committee in August. Since that report, the Executive Management Team have approved the formation of a Service Enabling Digital and Technology Estate Board which will now form an integral component of the Change Portfolio.
- 2.2 The adoption of a Portfolio approach is allowing the organisation to develop the links between corporate process for Strategic Planning and Resource Allocation (SPRA) and the planning, delivery and evaluation of strategic change. The latter is supported by corporate frameworks for Programme and Project Management, Evaluation, Clinical Governance and Quality Assurance.
- 2.3 Responsibility for Programme and Project Management sits with the Service Development Directorate. The Directorate has invested in recent months in a strengthening of the guidance, tools and support for staff resources that are critical to delivery of a Portfolio of considerable scope and complexity. This will be subject to a detailed report to the Planning and Performance Committee on the Directorate's response to an Internal Audit report on Programme Management earlier in 2019.
- 2.4 In the meantime, tangible outputs of that work can be highlighted as the development of new standard monthly progress reports on Programmes and Projects, which supports scrutiny by the Programme Boards under the Portfolio Governance arrangements. This in turn enables the compilation and regular re-refresh of a **Portfolio level Dashboard report** that summarises key information across all programmes in a consistent manner. The current Dashboard report is provided as an appendix to this paper.

3.0 RISK MANAGEMENT

- 3.1 Risks are defined and managed across the full scope of the programmes and projects in the Portfolio. The risk register presented to the Change Portfolio Board reports on risks that are considered to apply across the Portfolio and others which are reported against specific programmes. Portfolio level risks are currently defined in relation to monitoring expenditure on change and ensuring technology delivery to support Change Portfolio programmes while also delivering the strategic digital and technology programme.
- 3.2 The finance risk, will be addressed through better definition of funding at the programme definition stages and adherence to the requirement in the new Programme Management Framework for financials to be included in standard monthly reports. The technology risk, will be addressed through more detailed specification of requirements for technology enablement within change programmes and an improved interface between the Programme Management Office and the IT service.
- 3.3 Programme specific risks that are highlighted to the Board are:
- Recruitment and retention of staff for new services, recognising loss of trained resources in the Primary Care Triage and Advanced Nurse Practitioner areas. Planning for staffing resources in the Primary Care Triage model is a particular challenge in the context of a dependency on partner readiness to fulfil joint plans and the organisation's priority to recruit for the 111 service.
 - The challenge of achieving the right level of strategic stakeholder engagement across the Health and Care landscape has been evident in the Primary Care Triage and Waiting Times Improvement programmes, both of which are now behind targets for growth set in the Strategic Business Case 2017-22.

4.0 FINANCIAL IMPLICATIONS

Area	Funding Received	Funding Pending	YTD Budget	YTD Spend	YTD Variance	Full Year Budget	FY Forecast Variance	Comment
Mental Health Hub (Including SAS/Police Scotland)	470,000	1,500,000	936,894	900,639	34,305	1,970,000	94,131	£1.5m plus additional £470k being used to accelerate expansion of the hub. Slight underspend as additional allocation given later in year. Recruitment of 27 additional PWP's is underway. The £1.5m allocation for the hub is still pending.
Primary Care Triage	1,249,470	443,926	507,448	507,448	0	1,693,396	393,396	Expect to return around £400k to the transformation fund. Expected population coverage has not been achieved and recent recruitment has focussed on the 111 service. Circa £250k of IT costs anticipated in final quarter to enable further scale up of practices in 2020/21. For all transformation funded projects SG have withheld 30% of the funding until December. So, might not take full allocation.
Waiting times (modernising outpatients)	0	0	0	0	0	0	0	Have indicated to SG that we will not take the allocation. So, do not expect any activity or costs this financial year.
Advanced clinical support	441,000	189,000	236,389	235,535	0	630,000	100,000	Recruitment and retention has driven the underspend. Also, are sharing costs with NHS Highland for some of the posts.
Primary Care Digital Services	185,000	79,000	100,000	94,775	5,225	264,000	60,000	SG have withheld part of the allocation. If forecasting underspend then might not receive full allocation.
SEDATE	0	0	0	0	0	1,000,100	0	£1m has been budgeted for in year for phase 1 to extend support for hardware and software.
Estates Business Case	0	0	0	8,000	-8,000	40,000	0	Minimal costs associated with advisors expected this financial year. Costs for next financial year are being worked up as part of the Business Case.

5.0 APPENDIX

5.1 Dashboard report - Provided as a separate document to allow printing at A3