NHS 24 BOARD MEETING	21 OCTOBER 2021 ITEM NO 9.2 ANNEX 2 FOR ASSURANCE
	CONNECT UPDATE
Executive Sponsor:	Director of Finance/John Gebbie
Lead Officer/Author:	Director of Finance/John Gebbie
Action Required	The report is presented to the NHS 24 Board for assurance.
Key Points for this Committee to consider	This paper informs the Board of the current position on the Connect Programme. Main points to note: • There have been successful completion of firewall, load balancer, LAN/WAN and SAP Hana Upgrades to date; • 1a and 1b are due to deliver by end of November/early December. • The 1C plan is deemed deliverable within the time constraints of this financial year. • However, experience to date has highlighted delays at a number of delivery points, with little flexibility in the programme going forward, particularly with Forensic Medical Services commencing in April 2022. • Programme Leadership and Support are our biggest risk at present due to difficulty in retaining staff, putting additional pressure on existing staff. • Plans have been put in place to mitigate these risks by undertaking a Health Check of the programme. The outcome of this will be known shortly and enacted upon to keep the programme on track. While this is being completed additional programme and project support has been brought in via an additional permanent member of staff and external support. • The Connect Delivery Board meets on 13th October and will discuss the above points. • An Action Plan meeting is scheduled for 20th October to review the Health Check recommendations.
Governance process	This was presented to EMT on 12 October 2021 then Board for update. Will be shared with PPC to discuss in more detail and covered within risks at ARC.
Strategic alignment and link to overarching NHS Scotland priorities and strategies	This paper demonstrates progress against the NHS 24 organisational priority of replacing the IT infrastructure as approved by Board.

Key Risks	The key operational risk at present is delivering within the agreed timelines and stabilising the programme support to do this.
Financial Implications	The programme is currently within budget
Equality and Diversity	No impact on equality and diversity

1   Introduction

This is an update on the current Connect programme for Board members. There are a number of risks involved in a programme of work this size. This paper shall highlight the work undertaken to date, what has still to take place, the challenges currently being faced and the mitigations that have been put in place/require to be put in place to ensure successful delivery.

2   Background

The Connect programme is in three parts:
- Phase 1a involves the development of a new Windows 10 desktop build and rollout of Microsoft 365 (M365);
- Phase 1b involves the rollout of the new build to NHS 24 employees and an upgrade to infrastructure components such as WAN (Wide Area Network) and LAN (Local Area Network);
- Phase 1c involves a migration to a new data centre and upgrade to the SAP CRM platform and a number of related applications.

Phase 1a and 1b are planned for completion by end of November 2021. This is a few weeks later than planned.

Phase 1c data centre build was originally planned for completion by August 2021 by BT; SAP Hana upgrade by July 2021; Cap Gemini SAP upgrade by November 2021, with reporting stack being completed in late November/early December 2021, and clinical stack by February 2022.

3   Update on progress

3.1   Phase 1a

Desktop builds and procurement went to plan, however rollout has been a challenge, impacted by national constraints around M365 rollout and the loss of a key staff member who was leading on this. Recent plans to rollout Windows 10 for the opening of Aurora House had to be shelved due to restrictions in regard to staff licences not being compatible across sites. As we currently have the staff working across sites the site has had to open using Windows 7. Plans are currently being revised to ensure implementation of West sites timelines are closer aligned to minimise risk for Service Delivery.

The CIO has agreed to lead this work to get it back on track. A deep dive has resulted in plans being reviewed and realigned with an expected three week delay in implementation to late November/early December.

3.2   Phase 1b

LAN has been successfully rolled out in Cardonald, Aberdeen and Kilmarnock with Norseman to be implemented shortly.

WAN has successfully been implemented at Aurora and 3 local centres, with other sites coming online in the next few weeks. Cardonald is installed, ready for migration.

Load Balancer replacement is complete

Firewall replacement is complete

3.3   Phase 1c

Phase 1c has successfully implemented SAP Hana upgrade in August 2021.

Due to delays with the hardware, the BT works scheduled to complete in August have only recently been completed. This has had a knock on to the Cap Gemini works. As a result, a full review of the Phase 1c project plan timelines was undertaken by NHS 24, BT and Cap Gemini at the weekly/fortnightly tri-partite meetings. This involved challenging each part of the plan to ensure it was still deliverable, aiming to bring timelines back into line where they had slipped.

This work resulted in the three organisations signing up to a new baseline plan that would implement the reporting stack in December, subject to Service Delivery and Performance Team approval, with a proposed double running of reporting over this period; and the clinical stack during February 2022. This would keep us on track to complete Phase 1c with a few weeks to spare before Easter.

Financially this is still all deliverable within the financial envelope approved by the Board.

4   Recent Concerns

4.1   Meeting timelines

While the plans are still on target to achieve within our requirements this is all on paper. The plans that have been successfully achieved in recent months have all had an element of delay and we are now at a stage where we do not have the gift of time - extended support runs out in the coming months and either exposes additional risk if things cease working or additional cost where contracts require to be extended for an additional 12 months to avoid clinical/safety risks but need less than that. Another consideration is the new Forensic Medical Service that has to be launched in April 2022.

Mitigation – Resulting IT have been contracted to review plans and challenge all three organisations on delivery. Resulting IT have specialist knowledge of our systems as one of their staff was involved in implementing SAP in NHS 24.

5   Cancellation of Meetings/Late papers

In the last few months there have been requests to cancel the Tri-partite meetings and the Delivery Board meeting to enable staff to concentrate on the programme.   Paperwork has also been submitted on the day for a number of meetings.

Mitigation – This has been accepted on occasion to free up time to concentrate on the task of the day, however, these are early warning signs of pressure in the system to deliver all the required tasks. An Action Plan meeting has been arranged for 20th October to review next steps in resolving this.

6   Programme Support Gaps

The Connect Programme has been plagued with project management gaps. There has been a revolving door of project management support. Short term posts have been advertised and either not filled or the person has left shortly thereafter for a higher salary elsewhere. Since the programme was approved there have been at least 9 people started who subsequently moved on. In addition there were internal movements and retirals impacting on the programme.

Mitigation – some posts have now been advertised on a permanent basis and recruited to as a way to support the programme manager. Resulting IT were approached to provide support to the Programme Manager in getting some leave and to utilise their project management team to provide additional stability in the programme.

Mitigation – Resulting IT have been asked to undertake a health check of the three workstreams to review achievability and any potential gaps that can be addressed to ensure success. This has involved a questionnaire to NHS 24, BT and Cap Gemini staff and interviews with individuals to provide an overall picture of the likelihood of delivery. This report is due w/c 11th October but is expected to highlight that the current gaps in programme management support are the biggest risk to delivery. An Action Plan meeting has been scheduled for 20th October to agree next steps.

7   Recommendation

The Connect programme has a number of high level risks that could impact on delivery of the programme. This paper has been prepared to highlight that management recognise the risks involved with a programme this complex and to highlight the mitigations in place to reduce this risk as much as possible.

Once the outcome of the Health Check has been received a decision will be taken on next steps via the Action Plan meeting scheduled for the 20th October. Without pre-empting the outcome, work is already under way to potentially tender for external Programme Director and Programme Management support to work alongside the current team in delivering everything that is asked of them.

Ideally we would have taken a number of staff out of their day jobs to implement this work, however, that has not been possible due to the competing priorities across the organisation at present, such as Estates Strategy and Covid.

To ensure this programme of work delivers it is likely that we will need to approve additional external resource. However, this should still be achievable within the overall financial envelope approved by the Board for the Connect programme.

This paper shall be discussed at Planning & Performance Committee under the Change Portfolio Board update and the identified risks shall be discussed at Audit & Risk Committee.