

1

Summary status



Comments

Discussions are on-going to review the future of the safety programme. A formal proposal to be brought to the next Safety Programme.

Sign up to Safety Improvement Plan continues to be developed. Timescales for final submission to be agreed following the release of further guidance for mental health trusts. Key priorities to be agreed which will form the basis of the improvement plan, a paper detailing the rationale for this process to be prepared for next Safety Programme Board. Once key priorities have been agreed, driver diagrams are to be completed.

Linked projects

Principal Community Pathways;
Augmenting Services

2

Key Milestone Status



Milestone	Status	Target	Forecast
Transitions inpatients/community audit	At Risk	Sep 15	Sep 15
Submit Sign up to Safety Improvement Plan	At Risk	TBC	TBC

3

Key Benefits & Measures



Benefit / Measure

Baseline

Target

Progress

Reporting process for quality and safety metrics along with other PCP benefit realisation measures has been developed and discussed at Planned Care Transformation Group. To be shared at next Safety Programme.

4

Key Risks and Issues



Risk/Issue	Mitigating Actions	Status
Transformation agenda not aligned with safety themes	Safety themes to be built in to Transforming Services programme plans	At Risk
Augmenting services assumptions not borne out by safety metrics	Develop early warning metrics and monitor regularly	At Risk

Community Transformation (PCP) - Programme Update

KEY Complete On target
At Risk Missed

1 Summary status

Comments
<p>Sunderland / South Tyneside</p> <ul style="list-style-type: none"> TIG Locality plan first iteration developed, and team plans for Sunderland produced Meeting planned with South Tyneside LA and NTW to finalise integration agreements LD CTT has been delayed until April 15 Teleport anticipated to be ready mid March 15 Galleries design been signed off – now working with contractors on delivery date Sunderland Recovery college 2nd prospectus currently being developed Training/induction programme currently being delivered IRS observation exercise undertaken and plan in place to address implementation issues <p>Northumberland</p> <ul style="list-style-type: none"> TIG Locality plan first iteration developed Accommodation requirements being scoped Consultation planned for July with Implementation starting in November Delivery of MPS service planned for phased implementation April 15 Work is on-going with partners, particularly social care to ensure that pathways and services are aligned. <p>Newcastle / Gateshead/ North Tyneside</p> <ul style="list-style-type: none"> Locality TIG plan in development Approval to proceed with service improvements received from Alliance MH programme board
CPP; Workforce; Leadership; CIS; Augmenting Services

3 Key Benefits & Measures

Benefit	Key Measures	Baseline/Target
Meeting held to agree benefits realisation process for community services. It was agreed that the following will be covered:		
<ul style="list-style-type: none"> Operational performance management capability at individual/team level Performance management and review of teams/services from both operational and programme perspective Evaluating the extend of implementation of the model Measurement/monitoring and management of longer term outcomes expected from the programme. 		

2 Key Milestone Status

Milestone	Status	Plan Target	Forecast
Tr 1 – Implementation complete (delays to South Tyneside accommodation) however some aspects of the model will be delivered ahead of accommodation.	At Risk	Nov 14	August 15 Accommodation complete
Tr 2 –Northumberland accommodation requirements scoped	On target	March 15	April 15
Tr 2- Northumberland consultation starts	On target	July 15	July 15
Tr 2- Northumberland phased implementation starts	On target	Nov 15	Nov 15
Central TIG in place covering Newcastle/Gateshead/North Tyneside. North Tyneside accommodation requirements scoped.	At Risk	Sep/Oct 14	Feb 15 (work has started)

4 Key Risks and Issues

Risk/Issue	Mitigating Actions	Status
PCP 05: Expected benefits of implementing new care pathways are not realised (particular need to address clinical capacity to deliver new treatment packages)	Evaluation plan and reporting mechanism to ensure regular review and action	At Risk
PCP15: Capacity of PCP and operational resource to initiate in new localities, whilst also embedding implementation within resources available.	PCP resource plan	At Risk
PCP18: Lack of engagement from key stakeholders	PCP Engagement Plan	At Risk
PCP19: Capacity to undertake simultaneous consultations across 4 localities, and also in conjunction with TCS consultation.	PCTG and Trust Programme Board	At Risk

Care Pathways and Packages – Programme update

KEY Complete On target
At Risk Missed

1

Summary status



Comments

- Treatment packages by cluster developed. E-pathway project group established and project mandate drafted. CSE timelines need to be confirmed. Timeline for completion of manual format needs to be revisited. Concerns regarding clinical capacity .
- Discussion at Sunderland MHPB re developing contracts 15/16 in shadow form and this is being taken forward as part of the contracting process via service development plan.
- Mainstream of mandated CPP work in place with performance team, and operational groups with view to handover April 15.

Linked projects

Principal Community Pathways; Workforce Augmenting Services

2

Key Milestone Status



Milestone	Status	Target	Forecast
Treatment packages by cluster developed. Delay on timescales for e-pathway implementation. Manual solution using PCP format developed. Internal project group established. Clinical capacity needs to be identified. Internal financial modelling to support reporting mechanisms by cluster from April 2015.		TBC	CSE timescale TBC.
Working with operational groups, and performance team on agreed plan to mainstream.		Feb 15	Feb 15
Engagement with internally and with Commissioners on development of measures to inform contracting 15/16		March 15	March 15

3

Key Benefits & Measures



Benefit / Measure	Base line	Target	Progress
Information to support financial modelling			
Cluster within review		84.8%	
Cluster at CPA review		71.9%	
Bed intensity (bed days as part of overall spell)		2.7%	

4

Key Risks and Issues



Risk/Issue	Mitigating Actions	Status
CPP01 – Lack of capacity for financial modelling impacts on delivery against national timeframe	Internal meetings organised to establish how SLR will work by cluster	
CPP15 – Poor data quality impacts on PCP demand planning and financial modelling. Clustering by lead professionals deteriorating.	Weekly monitoring of data quality. Additional CPP Trainer in recruitment, Medical Director considering inclusion of clustering in compact.	
CPP09 – Delay to e-pathways functionality – impact on PCP and evidence of care package delivery	Contract discussions continue with CSE to use contractual levers to get review of delivery in agreed timeframe	

Transforming Specialist Care – Programme Update

KEY Complete On target
At Risk Missed





1 Summary status

The Specialist Care Transformation Programme is progressing well. Key updates include:

- ADHD business case (incorporating ASD) has been approved by all CCGs. Expected to be operational by Q2.

Linked Principal Community Pathways, Augmenting Services, Workforce


2 Key Milestone Status

Milestone	Status	Target	Fore
Heppell House		31 10 14	???
Development of RADS		31 10 14	03 15
Autism Unit opening (building complete).		31 07 15	03 16
ABI Tender (Neuro)		04 2015	04 2015
Further projects for 2015/16 delivery to be outlined in the next dashboard.			

3 Key Benefits & Measures

Benefit / Measure	Target	Progress
2014/15		
FD 14/15	£2.9m Delivered By Jan 14 (based on original plan)	£1.8m Delivered by January 2014
FDP 14/15	£3m recurrent £2.3m in year	Recurrent plans £2m In Year savings £1.8m NR Shortfall £500k Recurrent Shortfall £900k

4 Key Risks and Issues

Risk/Issue	Mitigation	Status
Plans for full financial delivery for 2015/16 and beyond remain a challenge.	Ongoing plans developing	

Transforming Augmenting Services – Programme Update

KEY Complete On target
At Risk Missed

1

Summary status



Comments

The “Deciding Together” consultation process, led by the Gateshead and Newcastle CCG Alliance, saw an event held on 14th February for stakeholders to consider how best to spend the Gateshead and Newcastle mental health pound. The event was well attended and well received.

Significant progress has taken place in relation to the two discreet Older People’s service proposals. Consultation commenced NoT on 11th Feb with the changes expected to be delivered in late March.

Bed availability continues to be monitored with a focus on 2 discreet areas - one being male bed usage within the Alliance footprint, and the other being the utilisation of available NTW bed capacity for OATs.

Linked projects

CPP, PCP, Safety, Specialist

2

Key Milestone Status



Milestone	Status	Target	Forecast
Shortlisted bed model options shared with Board	Blue	24 th Oct 2013	24 th Oct 2013
Workshops with Newcastle Gateshead Alliance CCG take place	Blue	End June 2014	July 2014
Hopewood Park opens	Blue	August 2014	Early Sept 2014
Pre-consultation engagement events with Service Users, Carers & Voluntary sector	Blue	Sept 2014	Sept 2014
Informal conversation with OSC re Dementia Services (North of Tyne).	Blue	Jan 2015	Jan 2015
Alliance CCG consultation closes	Blue	Feb 2015	Feb 2015
NoT Dementia Ward closure	Green	Mar 2015	Mar 2015

3

Key Benefits & Measures



Benefit / Measure	Baseline	Target	Current
Reduced # Wards (Life of programme)	42	26	32
Reduced # Wards (2014 - 15)	39	30	32
Benefits plan (including baseline measures) developed in conjunction with PCP.			

4

Key Risks and Issues



Risk/Issue	Mitigating Actions	Status
TAS.01 Pace of change is too slow to deliver savings	Robust management plan in place post model agreement	Amber
TAS.02 The impact of ward closures on capacity.	Clinical groups & Safety team to develop & agree safety metrics	Green
TAS.03 Stakeholders may not support the model	Alignment with TS engagement plan. Ensure clinical input to bed model discussions.	Amber
TAS.10 Fail to co-produce model with the Alliance CCG.	Internal engagement plan. Ensure clinical input to bed model discussions.	Amber

Transforming Corporate Services – Programme update

KEY Complete On target
At Risk Missed

1 Summary status ● ● ●

Comments	<p>Executive Team continuing to respond to change suggestions and principles of future design model.</p> <p>3 design team workshops now held with senior staff from Corporate areas with further sessions booked in fortnightly to engage all areas and inform production of the proposed future design.</p> <p>Savings of £1.6m identified to date with further savings being investigated.</p> <p>Agreed to aim to be ready to go out to consultation in summer 2015.</p>
Linked projects	PCP; Specialist Care: Augmenting Services; Workforce Programme

2 Key Milestone Status ● ● ●

Milestone	Status	Target	Forecast
Exec decisions re future design options		Nov 14	Ongoing
Proposed design to TCS Board		End of Jan 15	Apr 15
TCS Board to approve design		End Jan 15	July 15
Consultation packs prepared		Feb 15	July 15
Implementation begins		July 15	Apr 16

3 Key Benefits & Measures ● ● ●

Benefit	Key Measures	Baseline/T arget
Improved patient experience	Corporate services functions are efficient/streamlined and support clinical areas effectively to minimise bureaucracy	TCS Board are reviewing benefits
Cost reductions	Staff levels/skill mix appropriate across all corporate service areas. Improved talent management/succession planning	
Build sustainability	By ensuring a high quality, lower cost, skilled workforce operating to standard systems and reducing waste/bureaucracy	

4 Key Risks and Issues ● ● ●

Risks/Issues raised since last dashboard report	Mitigating Actions	Status
Risk re possibility Informatics Dept may not be able to deliver "quick wins" identified during workshops due to lack of capacity.	May reduce early benefits/buy in. Accept risk but work with IT on a case by case basis.	
Consultations planned for summer 2015. This timescale clashes with PCP consultations which could result in 2500 staff in consultation at the same time.	Board to address timescales for consultation to ensure no clash with PCP. Also may take out large staff groups not required to be consulted with.	

Workforce – Programme update

KEY Complete On target
At Risk Missed

1 Summary status

Comments

Refresh of HR framework has been completed . To be circulated for comment and formally agreed at the Trade Union Management Forum in March. This will minimise the need for interview for the majority of staff in PCP and takes into account the lessons learned from phase 1.

Data cleansing continues to assist with workforce planning and high level information has been produced.

OD work continues in Sunderland/S Tyneside.

Linked projects

Principal Community Pathways; Leadership; CPP; Augmenting Services; Specialist services, Corporate

2 Key Milestone Status

Milestone	Status	Target	Forecast
Further work to be carried out re TED in line with TCS.	At Risk	Feb 15	May 2015
Integrated Workforce Plan for PCP to be developed to ensure final state staffing is achieved. Medical component currently being worked through.	On target	Mar 15	Mar 15
PCP HR Framework to be agreed at Trade Union Management Forum	On target	Mar 15	Mar 15
Corporate Services HR Framework to be developed	At Risk	Oct 14	May 15

3 Key Benefits & Measures

Benefit / Measure	Baseline	Target	Progress
Staff with right skills to deliver care patients require	0	Close skills gap by 50%	On target
Engaged workforce	0	Reduction in sickness absence to 5%	At Risk

4 Key Risks and Issues

Risk/Issue	Mitigating Actions	Status
WKF10: Staff not committed to new ways of working	Staff Side involvement. Greater involvement/ OD Team	At Risk
Medical Workforce engagement issues	Regular meetings Work being overseen by Exec Medical Director Ad-hoc meetings attended Plan in place	At Risk