

Community Transformation Programme – July 2015

KEY Complete On target
At Risk Missed

1 Key Benefits & Measures

Benefit / Measure	Baseline	Target	Status
Benefits realisation plan developed 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 Milestones

Milestone	Status	Target	Forecast
Tr 1 – South Tyneside implementation delayed due to estate provision – Palmers, Jarrow. Elements of the model will be put in place ahead of move into new accommodation.	Red	Nov14	Nov 15 Accommodation complete
Tr 2 –Northumberland & North Tyneside workforce future skill mix and staff matrices to be completed for presentation to Exec Directors 6/7/15	Green	July 15	July 15
Tr 3 –Newcastle and Gateshead future skill mix review, and accommodation requirements to be scoped.	Green	July 15	July 15
Design and implementation of e-pathways to deliver electronic care packages. Delayed due to Supplier issues. Interim solution to be agreed.	Amber	April 15	TBC

3 Cost

	Capital	Revenue
Budget		
Forecast		
Budget spend to date		
Actual spend to date		
Status		

4 Key Risks & 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	
PCP15: Capacity of transformation and operational resource to initiate in new localities, whilst also embedding implementation within resources available.	High Level central plan	
PCP18: Lack of engagement from key stakeholders	High Level and TIG Locality plans	
PCP19: Capacity to undertake simultaneous consultations across 4 localities, and also in conjunction with TCS consultation.	CSTG and Trust Programme Board	

Community Transformation Programme – July 2015

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Summary Status

Key information / comments

Sunderland / South Tyneside

- TIG Locality plan developed.
- Team plans for Sunderland produced. Monthly Sunderland Business Development meeting to focussed on transformation implementation via the team plans.
- Galleries accommodation requirements being mapped against accommodation template.
- Sunderland North Team review of current accommodation with the team. Additional interim accommodation has been identified for the team to use.
- Palmers agreed with South Tyneside and detailed accommodation plan being developed.
- IRS detailed action plan in place being monitored by TIG. Weekly Operational group overseeing implementation of action plan, including data analysis of activity including re-referrals.
- Caseload migration process in place with anticipated completion November 15.
- Medicine Management/Physical Health pathway being tested in Sunderland North. Evaluation being developed.
- Evaluation of medical capacity methodology has been agreed and shadowing work has commenced with consultant staff. Information being collated for presentation and discussion with Group Medical Director and consultant staff.
- Evaluation of digital dictation to inform future model roll-out.

Northumberland

- TIG Locality plan developed.
- Accommodation requirements being scoped.
- Future skill mix including costings to be discussed with Executive Directors 6 July 15.
- IRT – Crisis and Rapid Response operation May 15. Routine element part of locality plan implementation.
- Digital dictation supplied to MAMS and IRT ahead of wider roll out.

Newcastle / Gateshead/North Tyneside

- Locality TIG plans developed.
- Future skill mix including costings to be discussed with Executive Directors 6 July 15.
- Accommodation requirements being scoped.
- Access model to be designed and discussed with Partners.

Specialist Care Programme – July 2015

KEY Complete On target
At Risk Missed

1 Key Benefits & Measures

Benefit / Measure	Target	Progress	Status
FDP 15/16	£3.4m	£1.0m identified	Green
		£1.0m identified	Green
		£1.4m in discussion	Amber
Secure services Reference Costs	Revised reference costs are being derived from actual and anticipated savings. Breakdown overleaf.	Progress has been made against the 13/14 reference cost.	Amber
CYPS Quality Outcomes	Strengths & Difficulties questionnaire compliance – 80%		Amber

3 Cost

	Capital	Revenue
Budget	Not applicable	Not applicable
Forecast	Not applicable	Not applicable
Budget spend to date	Not applicable	Not applicable
Actual spend to date	Not applicable	Not applicable
Status	Not applicable	Not applicable

2 Key Milestones

Milestone	Status	Target	Forecast
Specialist Care group Transformation Framework 15/16 developed	Blue		
Autism Unit opening (building complete).	Green	Revised 07 2016	07 2016
Further projects for 2015/16 delivery outlined.	See attached		

4 Key Risks & Issues

Risk/Issue	Mitigating Actions	Status
Plans for full financial delivery for 2015/16 and beyond remain a challenge.	Ongoing plans developing for July as per Trust plan	Amber

Specialist Care Programme – July 2015

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Summary Status

Key information / comments

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

- ADHD funding stream (incorporating ASD) has been approved by all CCGs. This service will begin to operationalise in Q2. Currently 1:1 discussions are being held with individual CCGs and progressing well.
- Progress on the Forensic Mental Health reference costs can be summarised in the table below. However, it should be noted that this work is ongoing, and is a first attempt at anticipating the impact of cost improvement work.

Ward	Average national cost 2013/14	NTW cost 2013/14	Qtr 1 progress	End of year position target
Aidan (medium secure)	£493	£736	£675 8.3% decrease	£653 11.3% decrease
Cuthbert (medium secure)	£493	£464	£436 6% decrease	£421 9.3% decrease
Oswin (PD medium secure)	£522	£490	£539 10% uplift	£535 9.2% uplift

- The process of refreshing TIGs and workstreams to reflect 15/16 priorities is now complete. Project plans and milestones are currently being developed in more detail.
- The Specialist Care group Transformation Framework, reflecting the transformation priorities and governance arrangements of the Group for 15/16, is complete and has been circulated to Trust Programme Board meeting (July 2015) for information.

Specialist Care Group Transformation - High level summary June 2015

	Project	Project Manager	Benefit Type	Description	Current state	Delivery (£)	Planned delivery date	RAG rating	% complete
Forensic Services	Internal MH retendering exercise and CQUIN target	Kerry McQuade	Cost reduction	NTW's reference costs are high in relation to other providers, so this project is effectively an internal tendering exercise that will see reference costs realigned, thus making savings and safeguarding future provision, supported by CQUIN.	Reference costs are high relative to peers, some savings identified. £250K identified with some savings made in Q1. More detailed milestones required to support delivery	£500,000	Oct-15	Green	<div style="width: 50%;"></div> 50%
	Bede and KDU marketing	TBC	Income generation	Marketing to ensure sale of additional beds not purchased by NHS England	Early discussions have taken place and plans are in place for July/August visits. More detailed milestones required to support delivery.	£200,000			<div style="width: 15%;"></div> 15%
	HMP Frankland	TBC							<div style="width: 0%;"></div> 0%
	Liason and Diversion	TBC							<div style="width: 0%;"></div> 0%
	Personality Disorder inpatient and community realignment	Kerry McQuade	Maintain current business	Re-alignment of Personality Disorder services (new service specification)	On track. Clinical models for inpatient and community services is complete.	None-maintain current position	01/04/2015-31/10/15	Green	<div style="width: 75%;"></div> 75%
LD Pathway review, including Day Services Part 2	Kerry McQuade	Service improvement/development Cost reduction	This project will review the LD pathway and in particular the role played by the current Northgate Villa 14. It will also see the redesign of day services (phase 2)	Early stages of project commenced. The Project group has been established and Terms of Reference developed. High level milestones agreed.	TBC Q2	TBC Q2	Green	<div style="width: 10%;"></div> 10%	
Neurological Services	Hepple House	Jessica Mallach	Cost reduction / Service quality	Hepplell house is home to a number of long stay patients. This project is to see those patients rehoused to a more appropriate setting to meet their needs, and the future use of Hepple House.	Work is underway to relocate the residents to more appropriate settings to meet their needs. When this is complete, the workstream will be better able to consider options around the future of Hepple house.		2015/16	Amber	<div style="width: 20%;"></div> 20%
	Waiting times and productivity	Jessica Mallach	Cost reduction	This project aims to see the reduction of outpatient appointment DNAs, cancellations and waiting times across outpatient clinics. Key developments will include the review of pathways of care alongside stand alone initiatives such as telephone consultations and text message reminders, involving service users and carers to improve the quality of service.	DNAs appear to be reducing, although the long term trend remains steady. Waiting times for Neuropsychology have decreased from a baseline of 71 weeks to a current position of 39 weeks, and work is on-going to reduce this further.	5% DNA rate		Amber	<div style="width: 40%;"></div> 40%
	Transforming the workforce	Jessica Mallach	Sustainability	This project is about ensuring the appropriate levels of staffing across admin, nursing and medical posts - getting the right staff are in the right place to offer a suitably flexible and responsive service. Key to this is ensuring vacancies are filled in a timely manner, with the best people, to maintain a robust workforce.	Locum recruited for medical cover. Majority of nusing posts were filled in last wave of central recruitment but have also seen some staff leave. An arrangement has been put in place with Nurse Bank at the RVI for general nurses - minor issues with this are being addressed. Admin - proposals in place to move to standardised job descriptions and reporting structures. A key focus is for the Workforce plan to be agreed in July 2015.		N/A	Amber	<div style="width: 20%;"></div> 20%
	Botulinum / Dystonia	Jessica Mallach	Cost reduction	To ensure the development of a robust and defined pathway for dystonia, supported by appropriate clinicals supervision, governance and staff to deliver the pathway in a safe and efficient manner. In addition, the intended change of toxin used in clinics can produce a cost saving.	Xeomin contract agreed. Letters have been sent out and it's expected that all appropriate patients will have changed to new toxin by end of July - assurance being sought in this regard. Dystonia succession planning being progressed £189K delivery is in relation to both the toxin and workforce for clinic to function	£189,000	Apr-15	Amber	<div style="width: 85%;"></div> 85%
Specialist Adult	Autism Unit	Kerry McQuade	Income generation	This project will see the development of a new 15 bed autism inpatient unit at Northgate, due to open in Spring 2016	On track. Guaranteed Maximum Price agreed and construction on going. Clinical model and operational developments in hand	Contribution to pay back costs of build	Apr-16	Green	<div style="width: 35%;"></div> 35%
	Newcastle Addictions	Sandra Marsden	Cost reduction	Commissioners have cut the budget to this service by ~£700K, with money coming out as of 1st October 2015. The service must be reconfigured and provided within cost by that fixed date	Early stages - TIG initialised and new model proposed. Work on-going to identify patients suitable to transfer to hub. Awaiting outcome of tender to identify future working arrangements.	£230,000 non-recurrent	01-Oct	Green	<div style="width: 30%;"></div> 30%
CYPs	Adult ADHD and ASD diagnostic service	Kerry McQuade	Income generation	Development of a new Trust-wide adult ADHD and ASD diagnostic service - income generation	Business case agreed by all CCGs. Project plan developed. Provisional workforce structure agreed and recruitment underway - end of June	TBC	TBC	Green	<div style="width: 30%;"></div> 30%
	CQUIN Community 2015 / 16	Suzanne Barton	CQUIN	Ensure the CQUIN targets are met in terms of waiting lists	There is no certain end date to this. The project continues to roll as each year the CQUIN is amended and intensified - project is effectively renewed every year. On track: Q1 plan to produce trajectories for Q2 / Q3 is complete Service is working with teams to develop local plans to achieve new CQUIN based on 9 week referral to treatment - on track.		N/A	Green	<div style="width: 25%;"></div> 25%
	Reprovision of Alnwood	Suzanne Barton	Financial	Following agreement from GBM the service is to undertake a feasibility study on the reprovision of Alnwood which will incorporate a review of the current market and future opportunities	Service is working with business development department to undertake feasibility study on re-provision incorporating a review of the current market and future new markets. Commissioner meeting planned for July 2015			Green	<div style="width: 15%;"></div> 15%

Augmenting Services Programme – July 2015

KEY Complete On target
At Risk Missed

1 Key Benefits & Measures

Benefit / Measure	Baseline	Target	Status
Reduced # Wards (Life of programme)	42	26	31
Reduced # Wards (2014 - 15)	39	30	31
Reduced # Wards (2015 - 16)	31	TBC	31
Benefits plan (including baseline measures) developed in conjunction with PCP.			

2 Key Milestones

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
Alliance CCG consultation closes	Blue	Feb 2015	Feb 2015
NoT Dementia Ward closure	Blue	Mar 2015	Mar 2015

3 Cost

	Capital	Revenue
Budget	None	None
Forecast	N/A	N/A
Budget spend to date	N/A	N/A
Actual spend to date	N/A	N/A
Status	N/A	N/A

4 Key Risks & 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

Augmenting Services Programme – July 2015

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Summary Status

Key
information
/ comments

Inpatient Care Group

Alliance Model Development

Communication from the Alliance Executives at the latter part of June 2015 confirmed that the engagement and consultation process timescales would be concluded during March 2016. This timescale causes significant risks to the Trust from both a clinical and financial perspective.

Further work will be undertaken over the coming months to obtain clarity on collective timescales that incorporate :- model development, option appraisal, business case development and environmental enhancements/construction issues.

HDU's

Following the approval of the Rehabilitation pipeline a business case for the 4th Trust wide High Dependency Unit has been developed. This will be considered at CDT on Monday 13th July 2015.

Corporate Services Programme – June 2015

KEY Complete On target
At Risk Missed

1 Key Benefits & Measures

Benefit / Measure	Baseline	Target	Status
Improved patient experience - Corporate services functions are efficient/streamlined and support clinical areas effectively to minimise bureaucracy	Benefits work to be undertaken once future model known		
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			

2 Key Milestones

Milestone	Status	Target	Forecast
Exec decisions re future design options	Green	April – July	On track
Proposed design to TCS Board	Red	April 15	Complete
TCS Board to approve design	Green	July 15	On track
HR Framework to be developed and agreed with staff side	Green	July 15	On Track
Consultation packs prepared – phase 1 Consultation packs prepared – phase 2	Green	July 15 Jan 16	On track On track
Implementation begins	Green	April 16	On track

3 Cost

	Capital	Revenue
Budget		
Forecast		
Budget spend to date		
Actual spend to date		
Status		

4 Key Risks & Issues

Risk/Issue	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.	Amber
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.	Amber

Corporate Services Programme – June 2015

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Summary Status


Key information / comments

Future design model (phase 1 – bands 8a and above) has been presented by Executive team and Programme team members to staff from both Corporate and Operational areas for discussion. Initial group presentation undertaken followed by Executives meeting with their departments as smaller groups. Discussions taking place prior to consultation to allow time for clarification / feedback and conversation to take place.

Consultation is planned for August 2015 for phase 1.

Phase two will see more detailed development of the model, across all posts involved, once Phase one is complete. Consultation for phase 2 is planned for January 2015.

1 Benefits & Measures

Benefit / Measure	Baseline	Target	Status
Improved outcomes and experience for patients through development of the community team offer	Benefits work to be undertaken once future model is agreed National service model for LD in development		✓
Development of alternatives to admission			✓
 Bed numbers & LOS	Links to Fast Track proposals		✓
Build a sustainable Skilled and competent workforce building on PBS			✓

2 Key Milestones

Milestone	Status	Target	Forecast
Service user and carer engagement work	✓		
Workstreams established	✓		
Describe LD service model		✓	
Database and metrics re bed usage	✓		
Engagement in all localities	✓		
Workforce – skills assessment	✓		

3 Cost

	Capital	Revenue
Budget		£54m
Forecast	Need to develop a spending plan in line with new service model	
Budget spend to date		
Actual spend to date		
Status		

4 Key Risks & Issues

Risk/Issue	Mitigating Actions	Status
Partner buy-in	Identify locality leads for LD	
National directives and implications/ timescales	Link in with national/ regional work so informed and try and influence-linked to service model work	
Staff anxiety	Regular honest communication	
Project could become a “catch-all” – scope needs to be managed carefully	Regular honest communication	
Current state understanding is not shared across the project group members	Regular honest communication	

Learning Disability Programme – June 2015

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Summary Status

Key information / comments

Project Work streams/ working Groups established with project brief
Identifying partnership engagement in all localities and ensuring NTW representation
Awaiting guidance following Fast track briefing event 8th July
Bed usage continues to be monitored monthly
Manual trawl of clinical notes to identify original abode
Service user engagement plan in development with launch event planned for September