



MEETING TITLE Public Trust Board		MEETING DATE 23 July 2013	
TITLE of PAPER		Service Transformation Programme Update	PAPER REF 5.4
STRATEGIC OBJECTIVE		Continuously improving patient care High performing Always learning Value for money & provider of choice	
PURPOSE OF THE PAPER		This report provides an update on developments, issues and risks in relation to the Service Transformation Programme.	
For Approval		<input type="checkbox"/>	For Assurance <input checked="" type="checkbox"/>
For Decision		<input type="checkbox"/>	Discussion/Information <input type="checkbox"/>
AUTHOR / LEAD	Karen Warner Associate Director for Quality	ACCOUNTABLE DIRECTOR	Steve Page Executive Director for Standards and Compliance
DEBATED AT:		Committee/Group: Transformation Programme Management Group	Date: 19 June 2013
PREVIOUSLY AGREED AT:		Committee/Group: Quality Committee	Date: 9 July 2013
RECOMMENDATION		It is recommended that the Board notes the developments, issues and risks outlined in the paper and is assured with regard to the Transformation Programme management arrangements and action.	
RISK ASSESSMENT			Yes No
Corporate Risk Register and/or Board Assurance Framework amended			<input type="checkbox"/> <input checked="" type="checkbox"/>
Resource Implications (Financial, Workforce, other - specify)			<input type="checkbox"/> <input checked="" type="checkbox"/>
Legal implications/Regulatory requirements			<input type="checkbox"/> <input checked="" type="checkbox"/>
Quality and Diversity Implications			<input type="checkbox"/> <input checked="" type="checkbox"/>
ASSURANCE/COMPLIANCE			
Care Quality Commission Registration Outcome(s)		All	
NHSLA Risk Management Standards for Ambulance Trusts		All	

**Public Trust Board
Update Report**

Subject	Service Transformation Programme
Date	23 July 2013
Author	Karen Warner

1. Structure and governance

The nine project groups are now established under Executive Director sponsorship and robust project plans with clear milestones are emerging and are monitored through the Transformation Management Group (TPMG). The Project Groups are responsible for providing highlight reports and a project level risk register which informs the Programme level dashboard and risk register.

1.1 Policy deployment

The policy deployment approach has progressed with each of the nine project groups now having policy deployment matrix specific to their project work-streams (PDM level1). An agreement has been reached at the TPMG that it will be the decision of the Executive sponsor of each of the project to determine whether this progresses to level 2 PDM or if there is sufficient detail in the level to enable implementation and monitoring of the deliverables at level 1.

1.2 Communication and engagement

The programme was launched in May 2013 alongside the summary version of the 5 year Integrated Business Plan and the Bright Ideas scheme.

In addition, the Transformation Programme formed a key part of the agenda at the Management Conference in June 2013. This informed managers of the programme and emphasised their role and responsibility in supporting and enabling the delivery of the programme. A sustained programme of communication and engagement is planned as part of the Culture & Capability project group.

1.3 Progress against milestones

The Programme dashboard (appendix I) summarises the position to date.

Significant developments include:

- The progression of the Urgent Care agenda through the Right Care project group. The project group have considered the YAS Urgent Care offering and this will be discussed at the Trust Executive Group. There is also now YAS representation at a senior level on all the Urgent Care Boards within the region.
- An interim Programme Manager has now taken up post to support the Operational Efficiency Project Group. This is supporting the delivery of the

- programme through robust project management arrangements.
- The CQUINs have robust management arrangements in place as part of the project groups.
- There is greater clarity on the Communication and Engagement plan.
- A Service Improvement Skills Programme has been commissioned from Teesside University to build the capacity within the organisation on service improvement and change management methodologies

1.4 Programme management office

A programme management office is being established at YAS headquarters. This will provide the facility to create a visual management environment and also a location where project managers and others central to the delivery of the programme can be co-located. The Head of Service Transformation has been appointed and is due to commence in post 2 September 2013. A project manager has been recruited and is providing project support in PTS. A second project manager is due to commence in post in August and will work within the sustainability (systems) programme specifically supporting the estates and fleet transformational.

2. Review of key risks

There are a number of risks associated with the programme and these will be managed by both project and programme level risk registers.

The programme level risks are:

- Failure to deliver the milestones of the Transformation Programme due to a lack of capacity/capability of service improvement skills and transformational change skills within YAS
- Failure to deliver the Cost Improvement Programme (CIPs) and CQUIN schemes from the projects within the Transformation Programme
- Inability to deliver milestones due to inadequate engagement of staff and managers

Each of these risks have mitigation plans in place which are impacting positively on the overall risk and are monitored through the TPMG.

3. Newly emerging risks and issues

None

4. Significant external communications

None

5. Issues requiring Trust Board discussion

There are no specific issues for the Board to discuss.

6. Recommendations

The Board are asked to note and be assured on the progress of the Service Transformation Programme.

7. Appendices

Appendix 1 – Service Transformation Programme dashboard.