



MEETING TITLE Trust Board Meeting held in Public		MEETING DATE 28/04/2022	
TITLE of PAPER	Service Transformation Programme Update	PAPER REF	TB22.008
KEY PRIORITIES	All		
PURPOSE OF THE PAPER	The purpose of the paper is to update the Trust Board on the current position and next steps in relation to the Trust's transformation work.		
For Approval	<input type="checkbox"/>	For Assurance	<input checked="" type="checkbox"/>
For Decision	<input type="checkbox"/>	Discussion/Information	<input checked="" type="checkbox"/>
AUTHOR / LEAD	Lynsey Bowker, Head of PMO & Performance Improvement, David O'Brien, Associate Director: Performance Assurance and Risk	ACCOUNTABLE DIRECTOR	Clare Ashby, Interim Executive Director of Quality, Governance and Performance Assurance
DISCUSSED AT / INFORMED BY: – TEG+ (17 March 2022)			
PREVIOUSLY AGREED AT:	Committee/Group: Quality Committee	Date: 24/03/2022	
RECOMMENDATION(S)	It is recommended that the Trust Board: <ul style="list-style-type: none"> Note the governance, reporting and assurance arrangements relating to transformation work Note the status of individual projects and workstreams as set out at Appendix 1 Note the strategic risk relating to capacity and capability to plan and deliver transformational change 		
RISK ASSESSMENT		Yes	No
Corporate Risk Register and/or Board Assurance Framework amended <i>If 'Yes' – expand in Section 4. / attached paper</i>		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Equality Impact Assessment <i>If 'Yes' – expand in Section 2. / attached paper</i>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Resource Implications (Financial, Workforce, other - specify) <i>If 'Yes' – expand in Section 2. / attached paper</i>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
Legal implications/Regulatory requirements <i>If 'Yes' – expand in Section 2. / attached paper</i>		<input type="checkbox"/>	<input checked="" type="checkbox"/>
ASSURANCE/COMPLIANCE			
Care Quality Commission Choose a DOMAIN(s)		All	
NHSI Single Oversight Framework Choose a THEME(s)		2. Quality of Care (safe, effective, caring, responsive) 6. Leadership & Improvement Capability (Well-Led)	

1. PURPOSE / AIM

- 1.1 The purpose of the paper is to update Trust Board on the current position and next steps in relation to the Trust's transformation work, which during the second half of 2021/22 has been taken forward as part of the 'H2' plan.

2. BACKGROUND / CONTEXT

Transformation Programme Review

- 2.1 A TEG-led review of structure and content of the Trust's transformation programme took place during 2021/22. Discussions emphasised the need to:
- Identify and manage synergies and dependencies across multiple transformation workstreams
 - Sharpen the focus on benefits realisation to deliver impactful results
 - Fulfil an emerging preference for a blended portfolio containing transformational change projects alongside other business priorities
 - Establish a portfolio of work that is sustainable and deliverable in the current operating context
 - Design and implement fit-for-purpose governance and assurance arrangements that are robust yet proportionate

H2 Planning, Governance and Assurance

- 2.2 As a result of this review the following arrangements were put in place, albeit these continue to evolve:
- A set of planned priorities (the 'H2 Plan') to be delivered during the second half of 2021/22. These are a mix of transformational change projects and other business priorities. The H2 Plan succeeds the previous business plan and transformation programme.
 - An assurance model supported by the Trust's PMO and featuring an overarching transformation board (known as the TEG+ Programme Board), SROs for key programmes and workstreams, and a reporting mechanism for individual projects via highlight reports and a consolidated H2 Plan dashboard.
 - A process for developing a successor to the H2 Plan that sets out the Trust's priorities for 2022/23.
- 2.3 The H2 Plan was organised into the following themes:
- Agile Operations, with a focus on our places
 - Patient-Centred, with a focus on our patients
 - Workforce, with a focus on our people
 - Digital Enablers

2.4 Appendix 1 sets out the H2 Plan dashboard as reported to the March TEG+ Programme Board and subsequently reported to the Quality Committee on 24 March. The dashboard summarises the current status of the H2 priorities. Note that many of the items in this dashboard will continue into 2022/23.

2.5 The dashboard identifies two projects for escalation, as follows:

- 1) **Agile Operations: Logistics Hub** remains RAG rated RED. Delivery delays caused by; timescales for legal work and requirement to confirm electrical supply capacity.
- 2) **Digital Enablers: Personal Issue Smartphones** RAG rated RED. Operational pressures have impacted roll out of phones which is currently behind original plan.

3. PROPOSALS / NEXT STEPS

3.1 Delivery of the H2 Plan priorities will continue and transition into 2022/23 priorities as appropriate.

3.2 Oversight and assurance of H2 Plan priorities will be captured using approved PMO project documentation reported to TEG+ Programme Board meetings via and the H2 dashboard.

4. RISK ASSESSMENT

4.1 Many of the projects, programmes and workstreams in the H2 Plan are mitigation actions for strategic risks facing the Trust, as set out in the Board Assurance Framework (BAF). This ensures that as far as possible BAF mitigation actions are not separate activities, and instead are embedded in the priority plans for the Trust during the H2 period (and beyond this, into 2022/23). This also helps the Trust to demonstrate a clear link from strategic objectives and strategic risks through to organisational planning, operational delivery, and transformation priorities.

4.2 Delivery of the projects, programmes and workstreams set out in the H2 Plan during a period of operational pressures is challenging and presents risks. Aside from individual H2 priority items, there is a more general risk regarding capacity and capability within the organisation to manage and deliver the H2 plan. This is captured in the BAF as Strategic Risk 3a: "*capacity and capability to plan and deliver Trust strategy, transformation, and change.*" For example, there are resource constraints relating to programmes / project management capacity and the availability of more specialist PMO assurance roles, although recent recruitment activity has provided some new capacity in this area.

4.3 As part of the structured project management methodology developed and maintained by the PMO, key risks to individual programmes and projects are captured in highlights reports and summarised in the transformation dashboard reported to the TEG+ Programme Board. Ongoing risks to implementation of key transformation programmes and associated mitigation plans are identified and escalated to the TEG+ Programme Board and escalated to other bodies as appropriate.

5. RECOMMENDATIONS

5.1 It is recommended that the Trust Board:

- Notes the governance, reporting and assurance arrangements relating to transformation work
- Notes the status of individual projects and workstreams as set out at Appendix 1
- Notes the strategic risk relating to capacity and capability to plan and deliver transformational change

6. APPENDICES/BACKGROUND INFORMATION

6.1 Appendix 1: H2 Dashboard, March 2022

H2 model 21/22 – assurance updates @ TEG+

AGILE OPERATIONS – *our places*

TEG+ assurance update: **Carol Weir**

1. Trust Demand Workforce & Accommodation Plan
2. Logistics Hub
3. Asset Management System
4. Pre-packed POM Pouches
5. Hub & Spoke and AVP
6. Scarborough Cluster AVP Station
7. Hull Hub & Spoke
8. Sustainable Fleet
9. PTS Linen
10. Hybrid / Agile working

PATIENT-CENTRED – *our patients*

TEG+ assurance update: **Stephen Segasby**

1. Supporting Ambulance Performance
2. EOC Performance Improvement Programme
3. Team Based Working (999)
4. Rotational Paramedics & SP/AP
5. Yorkshire Air Ambulance review

TEG+ assurance update: **Dave Beet**

1. EOC Business Continuity improvements
2. EOC Clinical – Patient Process
3. Mental Health Plan
4. RCA People Plan

TEG+ assurance update: **Chris Dexter**

1. PTS H2 Plan & Risks
2. NEPT review (PTS)

TEG+ assurance update: **Sarah Phipps**

1. Supporting UEC performance
2. IUC Sustainability & Improvements

TEG+ Charities/Volunteers update: **Jackie Cole**

1. Utilisation of PTS Volunteers
2. Supporting Fallers Outside by CFRs
3. NHS Charities Together - Volunteer Schemes (YAS Charity)

TEG+ assurance update: **Dr Steven Dykes**

1. Priority Patient Pathways & Safer Right Care

WORKFORCE – *our people*

TEG+ assurance update: **Claus Madsen**

1. Education & Training – *Clear Induction Programme & appraisal Process*
2. Recruitment & Retention – *Development of a clear workforce model for clinical and non-clinical roles*
3. YAS Culture Work including Health & Wellbeing – *As part of the 111/EOC and wider YAS*
 - Reducing Sickness
 - HC&V / NHS E
4. International recruitment
5. Partnership with Trade Unions
6. Equality, Diversity & Inclusion
7. E-expenses software

TEG+ assurance update: **Steve Page**

1. Operating Model Design

TEG+ assurance update: **Arifa Chakera**

1. Integrated Commissioning Framework

TEG+ assurance update: **David O'Brien**

1. Body worn video

DIGITAL ENABLERS

TEG+ assurance update: **Simon Marsh**

1. Unified Comms
2. N365
3. ePR phase 4
4. Personal issue smartphones
5. Emergency Services Mobile Communications Programme - ESMCP

NAA

TEG+ assurance update: **Carol Weir**

1. Integrated CAD
2. Robotic Process Automation

TEG+ Programme Board Dashboard

OUR PLACES - AGILE OPERATIONS

PROJECT	Start	End	PM	Acct Off	SRO	Exec Spons	Gate	Status	HR	Progress Against Key Milestones	RAG Status				OVERALL				
											Budget/Costs	Dec-21	Jan-22	Feb-22	TREND	Dec-21	Jan-22	Feb-22	TREND
Trust Demand Workforce & Accommodation Plan			RESOURCE GAP	Carol Weir	Carol Weir	TEG			Yes	Delivery of an initial demand and capacity review undertaken by Operational Research in Health Limited (ORH), and then YAS and ORH co-production of a 5-year workforce planning modelling to support understanding of all YAS service lines. This will be achieved through a longer-term relationship between YAS and ORH developed through a phased approach. The project will deliver: <ul style="list-style-type: none"> - A culture of pro-active evidence & data informed improvement & intelligence-led decision-making - An evidence & data informed 5yr Trust wide workforce (finance & activity) plan aligned to Priorities (impacts/benefits & interdependencies: training, estate, ICT, Fleet, support services, infrastructure) - Enhanced longer-term trust level workforce planning capability & capacity. 	Budget/Costs	GREEN	GREEN	GREEN	↔	GREEN	GREEN	GREEN	↔
											Resources	GREEN	GREEN	GREEN	↔				
											Delivery	AMBER	GREEN	GREEN	↔				
											KPIs	GREEN	GREEN	GREEN	↔				
											Risks & Issues	AMBER	GREEN	GREEN	↔				
											Comms	GREEN	GREEN	GREEN	↔				
Logistics Hub	Mar 20	Jun Sep 22	Sally Benner/Carol Weir	Carol Weir	Carol Weir	Rod Barnes	3	Delivery	Yes	Solicitors negotiating on preferred site unconditional lease and schedule of alterations. Design Team working on full design package for fit-out works Design solution based on worst case scenario - Warehouse concrete floor slab loading capacity not available so Design Team have to work on worst case scenario (invasive works required to determine capacity). Estimated £50K capital spend for worst case. TEG + approved this potential overspend if required in Feb 2022. Building electrical supply capacity not available – Commercial Agent negotiating with Landlord’s Agent for guaranteed electrical supply.) Fit-out Works will not be complete for March 2022. Landlord works will take 2 months so it is likely our works will only commence in late May. Due to this Finance informed that capital fit-out works will extend into 22/23 <p>Milestones</p> Sign lease & Commence Fit-out Works May 2022 Complete Fit-out Works Aug 2022	Budget/Costs	RED	RED	RED	↔	RED	RED	RED	↔
											Resources	GREEN	GREEN	GREEN	↔				
											Delivery	RED	RED	RED	↔				
											KPIs	GREEN	GREEN	GREEN	↔				
											Risks & Issues	RED	RED	AMBER	↓				
											Comms	GREEN	GREEN	GREEN	↔				
Asset Management System	Dec 20	Sep 22	Sally Benner	Carol Weir	Carol Weir	Rod Barnes	2	Develop	Yes	Project team established and second monthly meeting undertaken. PID and TOR produced awaiting approval at next HSPB <p>£67K included in capital budget for 21/22 and £89K for 22/23. Cloud based stock control system – Trust preference – will be revenue (£25K per annum). Capitalised Systems Development resource arranged for 21/22 and 22/23. Require TEG funding prioritization for Prepacked POM Pouches (TMG approved) for full benefits realization of medicine management capability.</p> <p>Key milestones</p> Undertake procurement of approved selected system- commenced process, aligned to Logistics Hub Apr 22 Undertake installation of the stock control system (software) & hardware within the Trust Jun 22 User testing of the medicine management system – phase 1 (software) within the Trust planned for Mar 22 Trial medicine management system for prepacked POM pouches & stock control system within Whitby Meeting Room Apr 22	Budget/Costs	GREEN	GREEN	GREEN	↔	GREEN	GREEN	GREEN	↔
											Resources	GREEN	GREEN	GREEN	↔				
											Delivery	GREEN	GREEN	GREEN	↔				
											KPIs	GREEN	GREEN	GREEN	↔				
											Risks & Issues	AMBER	AMBER	AMBER	↔				
											Comms	GREEN	GREEN	GREEN	↔				
Prepacked POM Pouches	Nov 20	Jun 22	Sally Benner	Carol Weir	Carol Weir	Rod Barnes	2	Develop	Yes	Prepacked POM pouch pilot, operational since November 2020, is to continue with light duty staff in the short-term whilst funding prioritization approved. Awaiting TEG funding prioritization for revenue (recurrent and non-recurrent). Operations funding light duty staff for the pilot, managed by Hub & Spoke team (for 15 months). As light duty staff unavailable as of Feb 22 TEG + approved temporary funding until June. <p>Key milestones</p> Recruit and train 2 FTE packer/drivers on temporary 6-month contracts within Procurement Mar 22 Switch pilot to BAU for the 8 stations involved date TBC <p>Issues</p> Insufficient space to repack the expected number of pouches weekly within the current (temporary solution of Whitby Meeting Room) packing room Mitigation Gate 1 approved for a Logistics Hub which would accommodate a larger POM pouch packing room Commercial agent appointed to determine suitable sites for the Logistics Hub. Currently negotiating a lease for a suitable site – expected occupancy in Q2 2022/23.	Budget/Costs	AMBER	AMBER	AMBER	↔	AMBER	AMBER	AMBER	↔
											Resources	GREEN	GREEN	GREEN	↔				
											Delivery	GREEN	GREEN	GREEN	↔				
											KPIs	GREEN	GREEN	GREEN	↔				
											Risks & Issues	GREEN	GREEN	GREEN	↔				
											Comms	GREEN	GREEN	GREEN	↔				
Hub & Spoke and AVP	N/A	N/A	Sally Benner	Carol Weir	Carol Weir	Rod Barnes	3	Delivery	Yes	-Opportunity to dispose of old Bentley AS – on the market, sale agreed. Finance & Estates aware. <ul style="list-style-type: none"> -Doncaster Benefits work ongoing – standing agenda item at Hub & Spoke Programme Boards (H&SPB). -AVP – Improvement meetings to support benefits realization suspended. Plan in development re future AVP roll out as discussed at TEG. Gate 2 approved by June H&SPB and TMG approved in October, waiting TEG prioritisation. -AVP App in live pilot at all sites. -Review and refresh of Hub & Spoke and AVP opportunities – paper approved at H&SPB to undertake site searches for future hubs, commercial agent appointed. -PTS Linen Gate 2 paper submitted to gate process AVP & spoke usage effectively tracked with BI. AVP improvement meetings to support continuous improvement suspended due to REAP level. Need to ensure ongoing attendance at these. Discussed at DMB monthly. Doncaster benefits work presented to March & June H&SPB's, now standing agenda item. <p>Milestones</p> AVP App fully live at all AVP sites with exception of Doncaster - expected Q4 Interim AVP Gate 2 paper approved by TEG awaiting funding prioritization Feb 2022. Commence site searches for next hub sites - RFQ with Procurement for issue in Jan 2022. Update Gate 2 paper for PTS Linen with comments from Chris Dexter <p>Issues</p> Meal break and run back policies not addressed to enable full benefit realisation from Hub & Spoke model. HR & TEG	Budget/Costs	GREEN	GREEN	GREEN	↔	GREEN	GREEN	GREEN	↔
											Resources	GREEN	GREEN	GREEN	↔				
											Delivery	GREEN	GREEN	GREEN	↔				
											KPIs	GREEN	GREEN	GREEN	↔				
											Risks & Issues	GREEN	GREEN	GREEN	↔				

TEG+ Programme Board Dashboard

OUR PLACES - AGILE OPERATIONS																			
PROJECT	Start	End	PM	Acct Off	SRO	Exec Spons	Gate	Status	HR	Progress Against Key Milestones	RAG Status				OVERALL				
											Dec-21	Jan-22	Feb-22	TREND	Dec-21	Jan-22	Feb-22	TREND	
										aware. Lack of attendance from key groups at AVP improvement meetings preventing full benefit realisation from AVP. Waiting revised EOC SOP & new Unavailability codes for benefit realisation analysis	Comms	GREEN	GREEN	GREEN	↔				
Scarborough Cluster AVP Station	Dec 2021	Sep 2023	Sally Benner / Paul Rook / Carol Weir	Carol Weir	Carol Weir	Rod Barnes	3	Delivery	Yes	Board approved in January for full station implementation. Design Team and Solicitors progressing to plan. Estimated capital cost to purchase site is £395K for land and £200K for Design Team/Solicitors. Total estimated costs for station are £9.764M – approved by board. Milestones Undertake all surveys/searches required for planning completed Feb 22 Design Package complete for Planning & Submit Planning Approval request with SBC Mar 22 Obtain planning approval/Purchase the preferred site (land only)/undertake design works Jun 22 Risks IF construction costs exceed expectations due to inflationary pressures THEN it may be necessary to amend project plans RESULTING IN potentially reduced benefits realisation. Mitigations - Unable to predict changes to inflation. Specification aligned to project budget. All purchases to be competitively tendered. Contractors to provide fixed costs not estimates for agreed work. Issues Published NHS planning guidance 20-21 stated: "All NHS organisations must ensure all new builds and refurbishment projects are delivered to net zero carbon standards. Architects will outline a range of options on how YAS might respond to this whilst also seeking national guidance"	Budget/Costs	GREEN	GREEN	GREEN	↔	GREEN	GREEN	GREEN	↔
										Resources	GREEN	GREEN	GREEN	↔					
										Delivery	GREEN	GREEN	GREEN	↔					
										KPIs	GREEN	GREEN	GREEN	↔					
										Risks & Issues	GREEN	GREEN	GREEN	↔					
										Comms	GREEN	GREEN	GREEN	↔					
Hull Hub & Spoke	Feb 2022	Mar 2024	Paul Rook / Carol Weir	Carol Weir	Carol Weir	Rod Barnes	3	Delivery	Yes	Board approved in January. Design Team established. Solicitors appointed, awaiting report on procurement implications for Trust guidance. Total estimated costs for Hub & Spoke are £14.2m – approved by Board. Milestones Solicitors appointed, meeting on procurement implications undertaken & awaiting report for Trust guidance Feb Undertake ground investigation surveys Mar 22 Risks If the ground conditions are very poor THEN the costs and resources requested may be inaccurate - investigation surveys to be undertaken ASAP. Issues Published NHS planning guidance 20-21 stated: "All NHS organisations must ensure all new builds and refurbishment projects are delivered to net zero carbon standards. Architects will outline a range of options on how YAS might respond to this whilst also seeking national guidance."	Budget/Costs	NA	GREEN	GREEN	↔	NA	GREEN	GREEN	↔
										Resources	NA	GREEN	GREEN	↔					
										Delivery	NA	GREEN	GREEN	↔					
										KPIs	NA	GREEN	GREEN	↔					
										Risks & Issues	NA	GREEN	GREEN	↔					
										Comms	NA	GREEN	GREEN	↔					
Sustainable Fleet	Not started	TBC	RESOURCE GAP	RESOURCE GAP	Carol Weir	TEG	0	Develop	No	National "project" on testing electrical vehicles and infrastructure to pilot Development of the YAS Sustainable Fleet requirements for delivery if funding is secured Key deliverables: -Development of full implementation plan in line with Trust Green plan and ambition for zero net zero carbon 2030, encompassing vehicle, estate, workforce, external stakeholder dimensions. (incl. NAA network learning/sharing) -Full alignment of plan with Hub and Spoke plans and wider organisational developments -Delivery of Tranman benefits (aligned to NAA) Implementation of agreed plan via Trust governance processes. Gate 0 to be produced.	Budget/Costs								
										Resources									
										Delivery									
										KPIs									
										Risks & Issues									
										Comms									
PTS Linen	Not started	TBC	RESOURCE GAP	RESOURCE GAP	Carol Weir	TEG	1	Develop	No	The Trust undertakes an in-house provision for PTS Linen where we collect and deliver the items from all 55 stations to one central location for subsequent collection/delivery from a supplier for cleaning. The proposal will allow the Trust to allocate the correct amount of linen to each station, easily flexing to match changing demands, thus giving full control of the service to support PTS operations and ultimately patients. Circa an estimated net annual saving of £64,676 for the Trust. The PTS Linen paper to Sub-Gate Group on the 7 December 2021 and will be included as part of the prioritisation discussed at TEG+ . Not yet approved, once approved will produce highlight report	Budget/Costs								
										Resources									
										Delivery									
										KPIs									
										Risks & Issues									
										Comms									
Hybrid / Agile working	Oct 21	TBC	Arfan Ahmed	Carol Weir	Carol Weir	TEG	2	Develop	Yes	4x task and mission groups established and work underway and on track. 1.HR&OD 2.Estates&Facilities 3.Health&Safety 4.Finance. Key Milestones External space planner & commercial agent appointed. Office premises viewed, shortlist to TEG for consideration. Mar 22 One off payment approved by TEG. List of eligible employees is being collated. Mar 22 Space Booking application being investigated Apr 22 Hybrid Guidance Framework -Guidance document draft completed. Awaiting approvals Apr 22	Budget/Costs	AMBER	AMBER	AMBER	↔	GREEN	GREEN	GREEN	↔
										Resources	GREEN	GREEN	GREEN	↔					
										Delivery	AMBER	AMBER	AMBER	↔					
										KPIs	NA	NA	NA	↔					
										Risks & Issues	GREEN	GREEN	GREEN	↔					
										Comms	GREEN	GREEN	GREEN	↔					

TEG+ Programme Board Dashboard

OUR PATIENTS											Progress Against Key Milestones								RAG Status				OVERALL			
PROJECT	Start	End	PM	Acct Off	SRO	Exec Sponsor	Gate	Status	HR		Budget/Costs	Dec-21	Jan-22	Feb-22	TREND	Dec-21	Jan-22	Feb-22	TREND							
999 Sustainability & Culture - Supporting Ambulance Performance	July 2021	31 Mar 2022	Lyseye Bowler	Stephen Segasby	Stephen Segasby	Nick Smith	3	Delivery	Yes	<p>Good progress recruiting to: EMD, ECA & Paramedic posts.</p> <p>Plans in place for additional EMD courses above original plan: January, February & March. January to March courses have increased capacity, 20 places per course. January and February courses underway. March course 12/20 places booked.</p> <p>EMD Mentor recruitment complete, 44 trained.</p> <p>Paramedic and ECA recruitment progressing well in line with agreed plan.</p> <p>Clinical Navigator recruitment, nine staff secured a role. Pilot sites agreed in, Wakefield, Kirklees & York. Performance metrics and baseline measures confirmed. Fortnightly monitoring commenced mid Jan.</p> <p>Winter Coordination Centre's (WCC) LIVE in all four localities. WCC evaluation underway, led by QI Team.</p> <p>First new DCA vehicle delivered (n=41) w/c 20.12.21. Last vehicle now expected end March 2022.</p> <p>Spend tracker in place and routinely reviewed.</p> <p>A six-month progress review undertaken and shared with programme SRO.</p>	Budget/Costs	GREEN	GREEN	GREEN	↔	GREEN	GREEN	GREEN	↔							
											Resources	GREEN	GREEN	GREEN	↔											
											Delivery	GREEN	GREEN	GREEN	↔											
											KPIs	GREEN	GREEN	GREEN	↔											
											Risks & Issues	NA	NA	NA	↔											
											Comms	NA	NA	NA	↔											
999 Sustainability & Culture - EOC Performance Improvement Programme	Sept 2021	Mar 2023	Phil Hardwick	Claire Lindsay	Stephen Segasby	Nick Smith	NA	Delivery	Yes	<p>All workstream meetings are back in regularly and good progress being made against planned activities.</p> <p>Further engagement week booked in EOC every 2 weeks now where SMT will be around to answer questions and update staff on the EOC Improvement Project to date; advising of milestones and achievements so far and the next steps. Also, reiterating how they can get involved.</p> <p>A shared improvement model is going to be incorporated into the Improvement Programme to ensure a 'bottom up' approach is utilised, so staff are trained in QI methodology to enable them to be empowered to make change in their area of work. Initially this will start 'small scale' but plan is afoot for a potential project to be piloted.</p> <p>Team Based Working programme board now established and has had first meeting. Letter being put together to distribute to all EOC staff with link to short questionnaire regarding their preferences for working patterns / hours.</p> <p>Fifth edition of the EOC newsletter has been published with very positive responses. This will continue to ensure good news and positive stories are shared across our EOC's.</p> <p>Following feedback from EMD community they expressed a desire to be all back together so following additional seating being identified upstairs in Springhill 2 it was thought that this may be an opportunity to put all EMD's back together and become more cohesive. After socializing this idea with EMD Team Leaders they agreed that this was a good idea and would give them opportunity to build more of a 'community' feel for EMD's in the coming months.</p> <p>Progressing and achieving set milestones in project and setting realistic timescales to actions.</p> <p>On track with engagement and assurance is being given to YAS through Steering group & bi-weekly Oversight group.</p> <p>Milestones due Mar 22</p> <p>Development plan for DM/CDM/TL to be written once focus groups have taken place</p> <p>To arrange development days for DM/CDM/TL's following the focus groups</p> <p>Induction process - from first day to going Live</p> <p>To ensure all EOC staff receive regular investment training</p> <p>To use the audit process to identify improvement opportunities for staff to develop and learn</p> <p>To develop and publish a career and development path for EOC staff</p> <p>Benchmark the EOC OOD (On Day Downtime) against IUC</p> <p>Review the key words for auto dispatch on Cat 1's and Cat 2's and evaluate opportunities for improvement</p> <p>Develop the shared improvement group to initiate a 'pilot' project to be undertaken by staff within EOC</p> <p>Further individual leadership development planned for SMT to be facilitated by KH (individual meetings) and 360 review</p>	Budget/Costs	GREEN	GREEN	GREEN	↔	GREEN	GREEN	GREEN	↔							
											Resources	GREEN	GREEN	GREEN	↔											
											Delivery	GREEN	GREEN	GREEN	↔											
											KPIs	AMBER	AMBER	AMBER	↔											
											Risks & Issues	GREEN	GREEN	GREEN	↔											
											Comms	GREEN	GREEN	GREEN	↔											
Team Based Working (999)	Commenced	2021/22	Alison Bradley Amanda Douglas	Stephen Segasby	Stephen Segasby	Nick Smith	NA	Delivery	Yes	<p>Overall RAG status remains at GREEN as implementation completed</p> <p>Milestones</p> <p>Project closure report reviewed by project team Jan 22</p> <p>Final Project Closure report to be presented at TMG SG Gate Review meeting 8 Mar 22</p>	Budget/Costs	GREEN	GREEN	GREEN	↔	GREEN	GREEN	GREEN	↔							
											Resources	GREEN	GREEN	GREEN	↔											
											Delivery	GREEN	GREEN	GREEN	↔											
											KPIs	GREEN	GREEN	GREEN	↔											
											Risks & Issues	GREEN	GREEN	GREEN	↔											
											Comms	GREEN	GREEN	GREEN	↔											
Rotational Paramedics	Oct 2019	TBC	Gavin Austin	Gavin Austin	Stephen Segasby	Nick Smith	Delivery	Yes	<p>The second cohort returns to YAS after the 4th of March with the first cohort returning to PCN's for their 6 week rotation from the 7th of March. Plans to take on further PCNs are progressing with an expected start date of May for a third cohort.</p> <p>Additional PCN's in 22/23 will increase the cost to YAS. Details on numbers will be shared early in Q1 to allow planning for 22/23 financial year. Numbers will still be significantly below the business case plan presented to TEG and the ICF.</p> <p>The HCV area is unlikely to have the capacity to support any additional PCN's in 22/23 with limited qualified SP capacity. Requests in the area will be considered but not agreed until local capacity is reviewed. Work will focus on requests in SYB and WY with SP capacity to support additional PCN's reviewed in each area with Ops and the scheduling team</p> <p>The first full group have fully completed induction with normal rotations beginning from the 7th of March. Programme will now look to expand in 22/23</p> <p>All PCN's that applied and chose to progress in September have now received paramedics for group 1 and group 2.</p> <p>Milestones</p> <p>Survey group 1 to gather feedback on induction process Mar 22 (Opted to delay until 2nd group completed as only 12 paramedics in cohort 1)</p> <p>Identify PCNs for 2022/23 Mar 22</p> <p>Agree PCNs to be taken on for cohort 3 (Feedback on interested PCN's not yet received from Training Hubs) Mar 22</p> <p>Review SP's available for each confirmed PCN Mar 22</p> <p>Costings to be shared with TEG once PCN's are confirmed & SP availability agreed with local Ops mgmt teams and capacity planning team.</p> <p><i>Mechanisms in place to ensure clear and consistent lines of communication internally and with external partners, including:-</i></p> <p><i>-Weekly delivery meetings with representation from SP/AP & Rotational Paramedics projects in place – updating on progress, ensuring project alignment and enabling clear and consistent communication, internal and external.</i></p> <p><i>-Common SRO (Stephen Segasby) for both projects – SP/AP & Rotational Paramedics.</i></p>	Budget/Costs	GREEN	GREEN	GREEN	↔	GREEN	GREEN	GREEN	↔								
										Resources	AMBER	AMBER	AMBER	↔												
										Delivery	GREEN	GREEN	GREEN	↔												
										KPIs	AMBER	AMBER	AMBER	↔												
										Risks & Issues	GREEN	GREEN	GREEN	↔												
										Comms	GREEN	GREEN	GREEN	↔												

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OUR PATIENTS

PROJECT	Start	End	PM	Acct Off	SRO	Exec Sponsor	Gate	Status	HR	Progress Against Key Milestones	RAG Status				OVERALL				
											Dec-21	Jan-22	Feb-22	TREND	Dec-21	Jan-22	Feb-22	TREND	
Phase 2 – Post Registration Paramedic Career Pathway (SP/AP)	commenced	2021/22	Amanda Douglas	Stephen Segasby	Stephen Segasby	Nick Smith	NA	Delivery	Yes	Academy has agreed to fund career pathway phase 2 academic courses until other funding can be sourced. SP/SN Urgent Care realignment – staff consultation extended to 16th Feb 2022 at the request of staff side. A formal issue resolution has been submitted as part of the realignment to SPUC / SNUC roles consultation. This may impact on the 16th of Feb consultation deadline if the issue isn't resolved by then; if the consultation is extended further it will impact on the April application process for the Sept Advanced Practitioner Apprenticeship start. Remains AMBER as decision made to extend the SP/SN Realignment consultation to 18 March 2022. There is also a delay in procuring the SPUC education requirements due to the issue with the Salisbury Procurement Group. Milestones -Formal response received from HEIs, and decision made to procure. A decision has been made not to pursue the SPUC education requirement via Salisbury procurement group. Instead YAS Academy are progressing with a Request for Quote (RFQ). This option allows the Academy to use the original specification to invite HEIs to submit a bid direct. Mar 22 (from Feb) -Contract agreed with HEI to deliver SP education requirements. Mar 22 (from Feb) -Realignment to SPUC / SNUC roles - one to one consultation meetings completed. A small group of affected staff have either declined individual consultation meetings or have not returned their individual consultation paperwork on the basis of the outstanding Issue Resolution. The issues raised in the Issue Resolution should be fed into the consultation process rather than be considered under the Issue Resolution Policy, at this stage. Therefore, to allow staff further opportunity of an individual consultation meeting or to return individual consultation paperwork it has been decided that the consultation period will be retrospectively extended and will conclude on 18 March 2022. Mar 22 (from Feb) Realignment to SPUC / SNUC roles – Consultation Outcome Report drafted. Mar 22 Mechanisms in place to ensure clear and consistent lines of communication internally and with external partners, including:- -Weekly delivery meetings with representation from SP/AP & Rotational Paramedics projects in place – updating on progress, ensuring project alignment and enabling clear and consistent communication, internal and external. -Common SRO (Stephen Segasby) for both projects – SP/AP & Rotational Paramedics. -Rotational Paramedic induction aligned to the SP/AP pathway	Budget/Costs	GREEN	GREEN	GREEN	↔	GREEN	AMBER	AMBER	↔
											Resources	GREEN	GREEN	GREEN	↔				
											Delivery	GREEN	AMBER	AMBER	↑				
											KPIs	GREEN	GREEN	GREEN	↔				
											Risks & Issues	AMBER	AMBER	AMBER	↔				
											Comms	GREEN	GREEN	GREEN	↔				
Yorkshire Air Ambulance review & critical care review			to be Alison Bradley	John Holden	Nick Smith	Nick Smith			No	Work at Exec / Partnership level continues. Task and finish groups set up and delivering priority actions. Not yet transferred to YAS project management responsibility. The YAA review is ongoing however the pace with this project is slower due to the complexity of the governance processes at play. So the work should continue, it is at a slower pace already and is not contributing directly to service delivery.									
999 Sustainability & Culture - EOC Business Continuity Improvements.	Apr 2021	Sep 2022	Amanda Douglas	Pauline Archibald	David Beet	Nick Smith	2	Develop	Yes	Approvals received from TEG, TMG and Trust Board to proceed. Project now in implementation phase. Project group set up to deliver project implementation. IT equipment confirmed & costed to be ordered for delivery in 2021/22. Detailed project plan finalised and approved by project group end Jan 22 Risks: 1.) In regard to Coordination of • Dispatch Areas Review • Recruitment • Leadership Model • Rota Review Mitigation is early liaison between SROs & AOs to map interdependencies with EOC Improvement programme - meeting scheduled for Jan 2022 to scope delivery responsibilities and agree how oversight, coordination and assurance will be achieved. 2.) Building materials & contractors availability. 3.) Non-EOC staff/Teams will be displaced from the upper floor at Fairfields Milestones First floor layout /plan confirmed for York Estates are in the process of seeking approval to appoint and work with Rotherham Metropolitan Borough Council (RMBC) under an SLA agreement to support with design plans. RMBC previously supported the Wakefield EOC refurb work. They have provided draft first and ground floor plans which are to be shared with PDG for feedback. Mar 22 (from Jan) Desk order placed. Mock desks to be set up with IT equipment and trialed with staff. Awaiting delivery of monitor arms. Mar 22 (from Feb) Tender specification for building work drafted. Outcome on ground / foundation investigations show no issues. Awaiting ground floor and first floor plans to be finalised. Mar 22 (from Jan) RMBC appointed to support with design plans and project management. Mar 22 External civil engineering consultants appointed to support with car park improvements. Mar 22	Budget/Costs	GREEN	GREEN	GREEN	↔	GREEN	GREEN	GREEN	↔
											Resources	GREEN	GREEN	GREEN	↔				
											Delivery	AMBER	AMBER	AMBER	↔				
											KPIs	GREEN	GREEN	GREEN	↔				
											Risks & Issues	AMBER	AMBER	AMBER	↔				
											Comms	GREEN	GREEN	GREEN	↔				
999 Sustainability & Culture EOC Clinical (Patient Process)	Sep 2020	Mar-2022 Jun 2022	Ruth Kirby	Pauline Archibald	David Beet	Nick Smith	NA	Delivery	Yes	System implementation review meeting took place 03.12.21 and key dates for final phase of implementation agreed, project end date amended to March 22 to reflect this. CAD went into system lockdown 8th December 2021 and was released 6th January 2022. CPIS and SCR are now live for clinicians. Following failed end to end testing of ITK - fix implemented, yet to be re-tested. Demo and testing dates for GP Connect and Care Connect TBC, project completion date amended to June 2022. IT to initiate meeting with YAS, NHS digital and MIS to finalise testing schedule for all systems to meet project completion date. Project schedule has slipped and is now unlikely to deliver to the timescales set out at project initiation. Project completion date has been reviewed and amended to June 2022. GP connect, HTML patient record and Care Connect have not yet commenced testing. IT to initiate meeting with YAS, NHS digital and MIS to finalise testing schedule for all systems to meet project completion date.. Risks Access for clinicians for relevant systems (CPIS/SCR) now resolved. Continued failed testing of ITK onward referral has resulted in significant project slippage, Meeting to take place with YAS/NHSD/MIS to agree key test dates and requirements for systems implementation as soon as possible. CCG sign-off for the information sharing agreement may hinder implementation and benefits realisation of systems implementation – agreed that current ISA in place sufficient - covers use of systems within EOC Milestones Sign-off by all CCGs for information sharing agreement Feb 22 delivered Full evaluation paper for project and all systems will be completed Mar 2022 – this will include findings/benefits for PACCS NOW Jun 22 (from Mar) ITK Live end to end retesting - Fix implemented date for testing with MIS TBC, expected late Jan/early Feb NOW Mar 22 ITK go-live set - Once successful live test completed go-live date can be set for ITK onward referral. Appointment release protocol will need to be finalised NOW Mar 22 (from Feb) GP Connect HTML will allow clinicians to view patients GP records and will support clinical triage. ICT will need to obtain security certificates for this to be configured. NOW Mar 22 (from Feb) GP Connect Appointments testing - MIS offered 4 dates in Jan to test GP connect appointments, confirmed testing date now Mar 22 (from Feb)	Budget/Costs	GREEN	GREEN	GREEN	↔	AMBER	AMBER	RED	↑
											Resources	GREEN	GREEN	GREEN	↔				
											Delivery	AMBER	AMBER	RED	↑				
											KPIs	AMBER	AMBER	AMBER	↔				
											Risks & Issues	AMBER	AMBER	RED	↑				
											Comms	GREEN	AMBER	AMBER	↔				

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OUR PATIENTS											RAG Status				OVERALL				
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Mental Health Project	25/04/21	12/12/21 (phase 1)	Lesley Anne Freeman	Lesley Butterworth	Dave Beet	Karen Owens	3	Delivery	Yes	<p>Phase 1: Final run of the Phase 1 HER MHRV pilot started on Feb 21st and will run for 6 weeks through to Sunday 3rd April 2022</p> <p>Phase 2: Further MHRVS</p> <p>South Yorks Pilot MH project group now established with representatives from all place CCGs and providers. Vehicle catchment area will be Doncaster with some Rotherham post codes and a Maltby Station base. Vehicle will start on 28th March for an initial 8 weeks run and staffing plans currently being finalized with SY Ops lead</p> <p>West Yorks Pilot WY Ops leadership agreed vehicle will start on 18th April – Partners group will reconvene w/c 7th March to plan mobilisation for mid-April.</p> <p>Rotational MH Professionals Second recruitment campaign has been brought forward as EOC are still carrying vacancies against their substantive establishment</p> <p>Humber Coast and Vale Further meetings have been held this month with the HCV lead for MH (GWS) and agreement reached that we would continue to work collaboratively to agree how best to recruit and source MH professionals for the MHRV with a view to them starting by the end of quarter 2 22/23 We are also working together to explore how Hull CCG wish for a street triage car may met by the MHRV rather than having 2 cars</p> <p>Phase 2: MH Training and Education: Following a decision at the non clinical PGB about the wider YAS training and education plan for 22/23, it was determined that the commencement of Tier 2 MH training for all 4 modules would be deferred again until Sept 22. In the interim the proposed content will be piloted and the 9 learning mentors/ champions recruited in readiness</p> <p>New Risks: •Commissioning for 22/23 has not yet been confirmed. However, this is partially mitigated by an agreement in principle with the ICS MH Leads that the work we have commenced is expected to continue in the coming year. •Capacity to support the continuance of the 3 prime work strands and the dementia friendly roadmap needs to be identified and agreed. It is expected that this will occur as the ongoing MH Plan is formed and agreed2</p> <p>Milestones -At a meeting of the MH ICS Leads on 1 March 2022, it was agreed in principle that the following 2 elements will comprise the ongoing MH Plan for 2022/23 and beyond: 1.Continuation of the work which commenced in 2021/22 as listed above 2.The development of a collaborative and sustainable MH Service Delivery modelApr 2223 - Continue working closely with West Yorks partners to agree rotational arrangements and what the role(s) in the MH providers might best look like.No longer applicable for first cohort but likely needed for future appointees -Project Group now established & meetings held fortnightly to ensure project milestones and MH clinical pathways plans are delivered. Ongoing SYB ICS to confirm which MH providers will be included in the second tranche rotational MH professional collaborative recruitment campaign which will take place during quarter 4 21/22. No longer applicable as next advert will be pan Y and H not just SYB at this stage -Humber FT partner confirmed they will not be able to source MH Nurses for final 6 weeks of HER pilot but discussions on future model underway B1/03/22 Ongoing -Recommend dialogue with senior West Yorks Operations leadership to secure seconded crews for Phase 2 MHRV pilot, ideally from those people who previously expressed an interest and have been kept on holdB9/02/22Restart discussion Not yet restarted -SY Ops engaged with plans for MHRV pilot and agree secondment of crews to resource start of car on 28th March for an initial 8 weeks run. Completed -Finalise revised training plan for Tier 2 MH Training for YAS staff. Ongoing again -Complete recruitment of training and education learning champions/ facilitators Deferred to quarter 1 22/23 (from Jan)</p>	Budget/Costs	AMBER	AMBER	AMBER	↔	AMBER	AMBER	AMBER	↔
											Resources	AMBER	AMBER	AMBER	↔				
											Delivery	GREEN	GREEN	AMBER	↑				
											KPIs	GREEN	GREEN	GREEN	↔				
											Risks & Issues	AMBER	AMBER	AMBER	↔				
											Comms	GREEN	GREEN	AMBER	↑				
											Remote Clinical Assessment (RCA) People Plan	Feb 21	Jun 23	Mike Smith	Gavin Austin				
Resources	AMBER	AMBER	AMBER	↔															
Delivery	GREEN	GREEN	AMBER	↑															
KPIs	GREEN	GREEN	GREEN	↔															
Risks & Issues	GREEN	GREEN	GREEN	↔															
Comms	GREEN	GREEN	GREEN	↔															
H2 PTS Plan & Risks	N/A	N/A	Gap (BAU)	Chris Dexter	Chris Dexter	Karen Owens	NA	BAU	No	<p>The PTS Board paper approved in October to reflect to continued demand for PTS and the additional funds were approved by Board. Cohorting of patients has been implemented across the region subject to IPC guidance which will continue on large vehicles only. Previous forecast of 1.15 will not realistically be achieved. Savings is not expected as envisaged. The current patient cohorting is 1.02 (target 1.4 BAU target) New guidance released will make cohorting even more difficult and this will impact sustainability of the service in H2 and 22/23. This needs to be included 22/23 planning. Working with the system to develop intelligence on elective and outpatient recovery to enable better planning. The unplanned demand remains high. Due to significant operational pressures, PTS is focusing only on essential transport and supporting 999/EOC</p>	AMBER	AMBER	AMBER	↔	AMBER	AMBER	AMBER	↔	

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NEPT review (PTS) - National Pathfinder programme	01/04/21		Saleha Shah (interim)	Chris Dexter	Chris Dexter	Karen Owens			Yes	<p>P15 Review & system working (national P15 review held in 2020/21). The report sets out a new national framework for non-emergency patient transport services to support them in becoming consistently more responsive, fair and sustainable.</p> <p>5 key objectives agreed: -</p> <ol style="list-style-type: none"> 1. Explore ways to better signpost people to alternative transport options if a patient is not eligible for NHS funded transport options 2. Strengthen the role of community/voluntary/SE transport through integrating community/Voluntary/SE transport better into local coordination platforms 3. Undertake a pilot and analysis of the impact on uptake of the new eligibility criteria developed by the review 4. Assess the impact of the new proposed procurement, commissioning and contract management principles (collaboration, demand assessment, eligibility criteria, standard Minimum Data Set, budgets with block and non-block, specifications (to be delivered by Kirklees CCG) 5. Improve the accessibility and timeliness of the Healthcare Travel Costs Scheme (HTCS); overhauling HTCS to make it easier for people on a low income to claim back journey costs (to be delivered by Kirklees CCG) <p>KPI's and monitoring are now finalised with the agreement of Kirklees CCG and CHFT. Have been shared with NHSE/1</p> <p>Milestones for delivery Mar 22</p> <ul style="list-style-type: none"> Establish regular engagement forums with community transport providers Acute Provider to work with PTS contracted providers to establish signposting routes and processes Identify key stakeholders for Community and Voluntary transport Establish testing schedule for signposting. <p>Risks</p> <ul style="list-style-type: none"> Project spending forecasts assume that local PMO costs will be supported by WY ICS Commissioners (via the Integrated Commissioning Forum) in 22/23 and funded outside of the Pathfinder allocation received from NHS England. The proposal is for a joint project manager to be put in place that will support the Pathfinder and the ongoing WY PTS Review. Should this resource not be made available then WY Pathfinder spending plans will need to be reviewed; this may impact on the deliverability of some programme workstreams. Lack of governance checks on other providers – YAS has a detailed framework in place for providers before we would signpost a patient to them – this may 	Budget/Costs	AMBER	AMBER	AMBER	↔	AMBER	AMBER	AMBER	↔
											Resources	AMBER	AMBER	AMBER	↔				
											Delivery	NA	AMBER	AMBER	↔				
											KPIs	NA	AMBER	AMBER	↔				
											Risks & Issues	NA	AMBER	AMBER	↔				
											Comms	NA	AMBER	AMBER	↔				
Supporting UEC Performance	01/10/21	01/03/22		Mark Leese	Karen Owens	Karen Owens			No	<p>The pressure within the IUC through February has remained higher contracted. The volume of calls is presently 10% higher than contracted. The recruitment / retention trajectory is being monitored on a regular basis and at present the projected March HA / SHA is expected to be 391 with a total budget 462 FTE. The aim is to continue the recruitment into Q1 22/23 to meet the target of 462. The Trust is not presently meeting key KPIs and discussions are ongoing with NHSE/1, ICF and as part of 22/23 planning submission to develop an organisation structure to meet increased demand.</p> <p>The single virtual contact centre (SVCC) has been escalated and discussions are on going with NHSE/1, ICS partners and with NEAS on the proposal. Technical work has been initiated on this project.</p>					AMBER	AMBER	AMBER	↔	
IUC Sustainability & Improvements	Oct 2021	Spring Summer 2022	Ruth Kirby	Mark Leese	Karen Owens	Karen Owens		Delivery	Yes	<p>All workstreams have now been re-instated and are being progressed. Risk of overall delay to project exacerbated due to Omicron pause. Changes to programme governance implemented to support delivery. Request for Quote document completed and out to procurement for external provider to conduct rota review. Review will include full assessment of current feasibility and capacity gap for team-based working and paid breaks in the context of the new demand profile and will provide rota options and capacity requirements to meet need. Quotes expected to be returned and evaluated by panel during March 2022. Key milestones and timeline have been identified</p> <p>Milestones</p> <ul style="list-style-type: none"> •Improvement programme comms launch event. Engagement events due to take place across Wakefield and Call flex sites March 2022 (from Jan) •Commence HA home-working pilot. ICT have confirmed the laptops have arrived and they are currently in the process of being built. Upgrade work required to the BT/Avaya core phone infrastructure, planned at March, will remove a current bug that prevents recordings being instantly accessed by home workers. EOI for eligible staff members in draft ready to release Apr 22 (from Jan) •Improvement Programme Engagement and Delivery -IUC change champions roles to be finalised and role description agreed. Extraction of FTSU Service Rep to support with FTSU development and overall programme Mar 22 •Rota Review. Provider's submissions to be reviewed, evaluated, and contracted Mar 22 •Supervision and support. Review of IUC NCTL (first line supervision) role to establish non-staff facing elements and split between operational management and staff management. Review group established Mar 22 •Health and wellbeing initiatives – support guide for staff / Therapy Dogs / Reiki (to be reviewed with YAS H&WB) Mar 22 •Finalise Role description for IUC change champions and prepare to release EOIMar 22 •Rota Review. Gate Review paper to be completed and approved once RFQ received Mar 22 <p>Risks</p> <ul style="list-style-type: none"> Level of integration of the improvement programme with BAU service activity. New Ways of Working – extended lead time for ICT equipment to support HA homeworking. 30 laptops now identified; ICT have confirmed the laptops have arrived and they are currently in the process of being built. Upgrade work is required to the BT/Avaya core telephone infrastructure, and this is planned to occur in late March, this will remove a current bug that prevents recordings being instantly accessed by home workers Expressions of interest for eligible staff members in draft and ready to release 	Budget/Costs	GREEN	GREEN	GREEN	↔	AMBER	AMBER	AMBER	↔
											Resources	GREEN	GREEN	AMBER	↑				
											Delivery	GREEN	GREEN	AMBER	↑				
											KPIs	AMBER	AMBER	AMBER	↔				
											Risks & Issues	AMBER	AMBER	AMBER	↔				
											Comms	GREEN	GREEN	GREEN	↔				
NHS Charities/Volunteer Programme - Utilisation of PTS Volunteers	Dec 21	Mar 22	Amy Ingham		Chris Dexter	Karen Owens	3	Delivery	Yes	<ul style="list-style-type: none"> •To explore the benefits of a dedicated VCS planning desk/scheduler and whether this approach will maximise/increase the utilisation of PTS volunteers on-day and prioritise, where appropriate, standard car (SC) usage above taxi usage. •To explore the benefits of a dedicated PTS engagement officer working closely with the dedicated VCS planning desk and current PTS volunteer team and whether this approach will lead to improved engagement and support for volunteers on-day, increase volunteer resource and retain current PTS volunteers. •Pilot project funded by NHSE/1 - £25,000 for the cost of above two staff for the duration of project. <p>The project has commenced and is on course to deliver within timescale.</p> <p>Milestones</p> <ul style="list-style-type: none"> Analyse KPI performance data and qualitative feedback to allow communication with project team and agree next steps. Mar 22 Communication with volunteers to highlight time-periods of high demand i.e. 14:00 – 19:00. Mar 22 Explore allocating regular journeys to regular volunteers i.e. renal patients Mar 22 Hold listening event with PTS volunteers Mar 22 Start evaluation of project. Apr 22 	Budget/Costs		GREEN	GREEN	↔	GREEN	GREEN	GREEN	↔
											Resources		GREEN	GREEN	↔				
											Delivery		GREEN	GREEN	↔				
											KPIs		AMBER	GREEN	↓				
											Risks & Issues		RED	AMBER	↓				
											Comms		GREEN	GREEN	↔				

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NHS Charities/Volunteer Programme - Supporting Fallers Outside by CFR colleagues	Dec 21	Mar 22	Sunil Pujara	Tashim Ali	Jackie Cole	A-Whitecock N Smith			Yes	<p>Workstream 1 - buying of equipment & training of volunteers</p> <p>Workstream 2 is recruiting specific dispatchers to support our volunteer falls programme. It consists of looking at options of increasing staffing to identify dedicated dispatch support for this function and the cost is directly related to staffing.</p> <ul style="list-style-type: none"> Having been approved to go ahead by TMG on 19th January, the project has been delayed, initially because of pressures within EOC in early December/January and also because the project lead has had to take time off and not expected to recommence until 28/02/22 to complete the project. Whilst finance and BI support is now in place, the dispatcher role needs to be addressed once the project lead is back Equipment purchase for WS 1 has commenced and is expected to be delivered by end February Training delayed & will be delivered when the equipment arrives <p>Milestones next period - date TBC</p> <p>Distribution of WS 1 equipment</p> <p>Develop training package for train the trainers (include ring back to clinician) & deliver the training</p> <p>Discussion with EOC re scope of project re additional dispatch support function</p> <p>Trial additional support dispatch role</p> <p>Define scope of the role and develop SOP</p> <p>Develop training by EOC</p> <p>Deliver training to Community Defib Trainers</p> <p>Operationalise additional dispatch support role</p> <p>KPI dashboard in place</p> <p>Risks</p> <p>EOC unable to accommodate the dispatch support role</p> <p>Risk of governance approval of SOP as meetings held quarterly</p>	Budget/Costs	GREEN	GREEN	↔	AMBER	AMBER	↔		
	Resources	AMBER	AMBER	↔															
	Delivery	GREEN	AMBER	↑															
	KPIs	AMBER	AMBER	↔															
	Risks & Issues	AMBER	AMBER	↔															
	Comms	AMBER	AMBER	↔															
NHS Charities/Volunteer Programme - NHS Charities Together - Volunteer Schemes (YAS Charity)	Oct 2021	Nov 2023	Lewis Etoria	Tashim Ali	Jackie Cole	A-Whitecock Nick Smith	2	Develop	Yes	<p>This is a 2 year pilot project funded by YAS Charity and will assist in maximising use of volunteers, which will help support system wide pressures. 4934x Charities Together Project consisting of 3 workstreams:</p> <p>WS 1 - Expansion of CFR driver response vehicles to cover the whole region 24 hours a day 7 days a week</p> <p>WS 2 - Maximising the use of the CFR driver response vehicles in our communities</p> <p>WS 3 - Embedding the wider volunteer developments (recruitment of VDM & CFR scheduler)</p> <p>The PID has been further developed through February and is due to be presented to the Gate 3 TEG sub group on 8 March. Project management resource has been secured and workstream leads from finance and BI are supporting PID development. The focus in this period has been on clarifying the capital spend; performance dashboard; KPI dashboard and on confirming the deliverables that the project will take forward. The final PID will have some variance to deliverables and KPIs from the original bid, reflecting changes since the time of that bid. The variance does not affect the project's intended benefits or change the core work within each workstream. The variance will need to be subsequently agreed with YAS Charity and with NHS Charities together..</p> <p>Milestones</p> <p>Gate 3 – PID incl QIA/EIA/DPIA & Comms Plan to TMG SG 8 Mar 22</p> <p>BI producing KPI dashboard for project Mar 22</p> <p>WS 1 - Finalise cost options & utilisation of specialist vehicles/equipment (e.g., Raizer Chairs) for the project. Finance to reprofile budget based on these costs Mar 22</p> <p>WS 1 – Options implementation commences: Deployment of CFR vehicles / Purchase of Raizer chairs / Purchase of CFR standard kits Mar 22</p> <p>WS 2 - CFR consultation - Due to operational pressures, it has not been possible to consult CFRs. This does not impact the overall timescales. Survey to consult CFRs developed, for launch when current operational pressures allow. Mar 22</p> <p>WS 3 – VDM interviews complete and employment checks progressing Mar 22</p> <p>Risks</p> <p>Vehicle costs may exceed the planned budget. This can be mitigated by amending the timescales for sharing new vehicles in</p> <p>Many key milestones achieved and/or on track to progress project delivery. However, several key milestones have been delayed (e.g. clinical refresher (resus, decision-making), clinical induction for Team Leaders, wider roll-out of individual clinical dashboard) which may impact on the timescales for achievement of overall project aims.</p> <p>Milestones</p> <p>Review, recommend and implement revised clinical outcome decisions on ePR. Revised to Q1 22/23 due to capacity in ePR developments plan</p> <p>Ongoing support for delivery of cardiac arrest management, maternity, major trauma and paediatric training. Clinical refresher and investment days delayed.</p> <p>Now Q1 22/23</p> <p>Defined scope of practice and governance for Critical Care Specialist Paramedic. Scope of practice and training approved. Governance arrangements to be approved in Q1 22/23</p> <p>Implementation of pathways training model now Q2 22/23</p> <p>Develop a system to provide feedback to clinicians, on referrals made to pathways service providers. Lack of capacity in IT to support Q3 22/23</p> <p>Urgent Community Response Project. Initial target for YASwide coverage is unachievable due to lack of services available. Q4 22/23</p> <p>Determine and develop clinical content and inter-professional working for investment days and support implementation. Area Clinical Leads engaging with Team Leaders to support investment day planning and content</p> <p>Further roll out of individual clinical dashboards. Delays due to lack of capacity in A&E Ops to support/embed. Plan to re-pilot in Doncaster prior to Trust-wide roll-out Q1 22/23</p> <p>Assessment and Documentation. Revise policies, audits etc to reflect changes to clinical assessment and documentation. Approval of policy moved to Q1 due to delays from policy approval group alignment of meeting dates to meet the approval process.</p> <p>Produce content for elearning on documentation completion. Clarification required through Non-clinical PGB regarding documentation completion elearning</p> <p>Distribute reference books to all paramedics. Reference books were planned to be distributed to the Team Leaders as part of the clinical induction. This has been postponed so alternative plans are being made Q1 22/23</p> <p>Decision-making - Review, recommend and implement revised clinical outcome decisions on ePR. Revised to Q1 2022/23 due to capacity in ePR developments plan</p> <p>aABCD and Resuscitation - Annual Review of failure to recognise VF/VT and recommendation for AED v manual defibrillation Q1 22/23</p> <p>Critical and Emergency Care -Produce and approve ACS improvement plan Q1 22/23</p> <p>Urgent Care Pathways- Implementation of pathways training model. Q1 22/23</p> <p>Clinical Leadership and Supervision. Review of clinical leadership framework. Area Clinical Lead role due for review in May 2022.</p> <p>Technology. Prioritised milestones from this workstream have been aligned with other workstreams to ensure progress whilst no lead in place</p> <p>Training and Education. Review elearning for 10/10 topics. New software available to produce internally. Completion expected in Q1 22/23</p>	Budget/Costs	GREEN	AMBER	↑	AMBER	AMBER	↔		
	Resources	AMBER	GREEN	↓															
	Delivery	GREEN	GREEN	↔															
	KPIs	AMBER	GREEN	↓															
	Risks & Issues	GREEN	AMBER	↑															
	Comms	AMBER	AMBER	↔															
Priority Patient Pathways & Safer Right Care programme	Q1 2021/22	Q4 2022/23	Lynsey Ryder	Dr Steven Dykes	Dr Steven Dykes	Dr Julian Mark		Delivery	Yes	<p>Many key milestones achieved and/or on track to progress project delivery. However, several key milestones have been delayed (e.g. clinical refresher (resus, decision-making), clinical induction for Team Leaders, wider roll-out of individual clinical dashboard) which may impact on the timescales for achievement of overall project aims.</p> <p>Milestones</p> <p>Review, recommend and implement revised clinical outcome decisions on ePR. Revised to Q1 22/23 due to capacity in ePR developments plan</p> <p>Ongoing support for delivery of cardiac arrest management, maternity, major trauma and paediatric training. Clinical refresher and investment days delayed.</p> <p>Now Q1 22/23</p> <p>Defined scope of practice and governance for Critical Care Specialist Paramedic. Scope of practice and training approved. Governance arrangements to be approved in Q1 22/23</p> <p>Implementation of pathways training model now Q2 22/23</p> <p>Develop a system to provide feedback to clinicians, on referrals made to pathways service providers. Lack of capacity in IT to support Q3 22/23</p> <p>Urgent Community Response Project. Initial target for YASwide coverage is unachievable due to lack of services available. Q4 22/23</p> <p>Determine and develop clinical content and inter-professional working for investment days and support implementation. Area Clinical Leads engaging with Team Leaders to support investment day planning and content</p> <p>Further roll out of individual clinical dashboards. Delays due to lack of capacity in A&E Ops to support/embed. Plan to re-pilot in Doncaster prior to Trust-wide roll-out Q1 22/23</p> <p>Assessment and Documentation. Revise policies, audits etc to reflect changes to clinical assessment and documentation. Approval of policy moved to Q1 due to delays from policy approval group alignment of meeting dates to meet the approval process.</p> <p>Produce content for elearning on documentation completion. Clarification required through Non-clinical PGB regarding documentation completion elearning</p> <p>Distribute reference books to all paramedics. Reference books were planned to be distributed to the Team Leaders as part of the clinical induction. This has been postponed so alternative plans are being made Q1 22/23</p> <p>Decision-making - Review, recommend and implement revised clinical outcome decisions on ePR. Revised to Q1 2022/23 due to capacity in ePR developments plan</p> <p>aABCD and Resuscitation - Annual Review of failure to recognise VF/VT and recommendation for AED v manual defibrillation Q1 22/23</p> <p>Critical and Emergency Care -Produce and approve ACS improvement plan Q1 22/23</p> <p>Urgent Care Pathways- Implementation of pathways training model. Q1 22/23</p> <p>Clinical Leadership and Supervision. Review of clinical leadership framework. Area Clinical Lead role due for review in May 2022.</p> <p>Technology. Prioritised milestones from this workstream have been aligned with other workstreams to ensure progress whilst no lead in place</p> <p>Training and Education. Review elearning for 10/10 topics. New software available to produce internally. Completion expected in Q1 22/23</p>	Budget/Costs	GREEN	GREEN	GREEN	↔	GREEN	AMBER	AMBER	↔
	Resources	NA	NA	NA	↔														
	Delivery	GREEN	AMBER	AMBER	↔														
	KPIs	NA	NA	NA	↔														
	Risks & Issues	GREEN	AMBER	AMBER	↔														
	Comms	GREEN	GREEN	AMBER	↑														

TEG+ Programme Board Dashboard

OUR PEOPLE																			
PROJECT	Start	End	PM	Acct Off	SRO	Exec Sponsor	Gate	Status	HR	Progress Against Key Milestones	RAG Status				OVERALL				
											Dec-21	Jan-22	Feb-22	TREND	Dec-21	Jan-22	Feb-22	TREND	
1) Education and Training Clear Induction Programme & Appraisal Process			Dawn Adams - Induction Paul Whitehouse - Appraisal	Dawn Adams	Claus Madsen	Mandy Wilcock		Delivery	No	<p><u>Induction</u> Induction policy presented to JSG and due to TMG 9/3/22 - submission milestone slipped due to operational pressures. The new induction process continues to be rolled out and delivered. A 3rd phase is being explored which would allow a more cross functional induction process with new entrants from across the organisation having a collective induction experience.</p> <p><u>Appraisal</u> Appraisal training is being delivered but some compliance issues due to recent operational pressures. The new appraisal form is receiving positive feedback. There may be some slippage in the introduction of the electronic form which was scheduled to complete in May 22 due to the BI lead deployed to supporting frontline services.</p>	PROGRESS UPDATES - WORKSTREAM NOT HIGHLIGHT REPORTING					GREEN	GREEN	GREEN	↔
2) Recruitment and Retention Development of a clear workforce model for clinical and non – clinical roles			Gavin Austin		Claus Madsen	Mandy Wilcock		Delivery	No	<p>Developing career pathways - A new Trailblazer pathways apprenticeship for contact handling careers in PTS, IUC and EOC is being considered. ECA to Para – development of the pathways and full implemented. SP /AP - Consultation concluded and outcome to be communicated in March. Trainee Nurse Associates pilot is ongoing and potentially may be extended. Model being developed as part of the ORH - Strategic meeting planned for January to develop workstreams was postponed due to current operational pressures.</p>	PROGRESS UPDATES - WORKSTREAM NOT HIGHLIGHT REPORTING					AMBER	AMBER	AMBER	↔
3) YAS Culture Work including Health & Wellbeing – Highlight reports submitted as part of the 111/EOC and wider YAS • Reducing Sickness • HC&V / NHS E			Gursharan Panesar-Bell (HCV PM) Mussarat Suleman from Apr 2022		Claus Madsen	Mandy Wilcock		Delivery	No	<p>Culture work in call centres is continuing but some workstreams may be paused due to current operational pressures. Redeploying internal resources to assist with recruitment and well being. Additional psychiatric support is being rolled out as part of bid funding. The health and wellbeing plan will be aligned with the H&W NHS guidance, AACE guidance and our internal work and this will be worked through with the HWB Group in March. Current KPI on Health and Wellbeing continues to be RED due to high sickness.</p> <p>HCV UPDATE •Given the timescales, we will not be in a position to recruit and have a MH specialist in place before March. Therefore, the recruitment of the two specialists will not happen. YAS has agreed to fund one post in 2022/23, if additional funds become available through NHSE/ in 22/23 we would look to increase the complement to two specialists. •Between now and March we would like to bring in specialist organisations in the field of MH to help deliver bitesize sessions to our staff focused on MH and suicide awareness. This will be approx of 40 sessions. The total we will require for the delivery of these two initiatives will be £20,000 which factors in development of packages and contingency if travel is required- looking to proceed with virtual delivery in the first instance. •Communication and Welfare Vehicle Stocks - £15,000. This will support with the stocking up of the vehicles, which are on the road now on a regular basis presently. Promotional material will also be produced cascading our H&W offer, support etc. Initial thoughts are around stress balls, posters, stickers in vehicles. •Total funding was £113,000. We will use: £35,000. To return: £78,000 In addition to the recruitment of the 1 MH specialist through YAS secured funds in 22/23 we want to use our current MHFAs to engage in the bitesize workshops. Through their enhanced knowledge and skill they will be able to support us in train the trainee approach to reach out further to staff who have not had the basic training enabling sustainability beyond Mar 22</p>	PROGRESS UPDATES - WORKSTREAM NOT HIGHLIGHT REPORTING					AMBER	AMBER	AMBER	↔
4) International Recruitment	14/10/21	TBC	Mike Smith Phil Hardwick Gavin Austin	Gavin Austin	Claus Madsen	Mandy Wilcock	3	DELIVER	YES	<p>Interviews have progressed from the 13th of Feb to the 25th of Feb. Interview numbers are very close to the total posts available of 126. This is due to further withdrawals between application and interview. However, interview success rate has been high with only 2 applicants not successful in the first full week of interviews. Trusts will know number of successful applicants by the 1st of March. Work is ongoing to move as many costs as possible into this financial year to reduce the projects in year surplus and next years deficit. All areas are currently in line with agreed budget.</p> <p>Additional work to understand the process of international nurses and additional information will be shared in May 2022.</p>	Budget/Costs	AMBER	AMBER	AMBER	↔	AMBER	AMBER	AMBER	↔
										Resources	GREEN	GREEN	GREEN	↔					
										Delivery	AMBER	AMBER	GREEN	↓					
										KPIs	AMBER	AMBER	AMBER	↔					
										Risks & Issues	AMBER	AMBER	AMBER	↔					
										Comms	GREEN	GREEN	GREEN	↔					
5) Partnership with Trade Unions			Tracey Myhills		Claus Madsen	Mandy Wilcock		PLAN	No	Workshops scheduled. Formal partnership agreement to be developed.	PROGRESS UPDATES - WORKSTREAM NOT HIGHLIGHT REPORTING					AMBER	AMBER	AMBER	↔

TEG+ Programme Board Dashboard

OUR PEOPLE											RAG Status				OVERALL					
PROJECT	Start	End	PM	Acct Off	SRO	Exec Sponsor	Gate	Status	HR	Progress Against Key Milestones	Dec-21	Jan-22	Feb-22	TREND	Dec-21	Jan-22	Feb-22	TREND		
6) Equality, Diversity & Inclusion			Suzanne Hartshorne		Claus Madsen	Mandy Wilcock		DELIVER	No	Action Plan agreed and progressing well. Reverse BAME mentoring project has been successful and is being evaluated. The initiative will be broadened to align with other protected characteristics and in association with the LGBT and Disability Support Networks. The Workforce team is reviewing the existing recruitment process to make it more inclusive. Timeline to be developed and this will include more targeted recruitment, staff and community engagement. A Dashboard is being developed to monitor the applications through to recruitment / appointments as part of the Diversity & Inclusion programme. Diversity & Inclusion and Gender Pay Gap actions and milestones remain on track. Head of Diversity and Inclusion role remains vacant and currently under review.	PROGRESS UPDATES - WORKSTREAM NOT HIGHLIGHT REPORTING					AMBER	AMBER	AMBER	↔	
7) e-Expenses software	Mar 21	May 2022	Mike Smith Ruth Kirby		Suzanne Hartshorne	Claus Madsen	Mandy Wilcock	3	DELIVER	YES	E-Expenses Project - The EASY Expenses system allows mileage and expenses claims to be submitted online rather than in the current paper format. This is in response to a risk identified during audit to ensure only those with appropriate delegated authority can approve claims. Phase 1 is now live as of 10 January 2022 for all staff who do not currently use GRS to submit claims. Those staff who do currently use GRS will transfer to this system on 1st May 2022. Technical configuration work is completed, and organisational readiness activity is underway. Focus Groups to be held with a small number of GRS users currently claiming through easy expenses to understand challenges. Relevant changes made to GRS functionality to support easy expenses transition. Questioning underway as to whether the policy is changed to calculate mileages from shortest route to quickest route in line with other Trusts. Policy change agreed. Risks GRS – ticket raised to remove mileage claim option completely, fix not available until May/June 22. Compromise plans for go-live 01.05.22 – Mitigations in place, to be monitored. Stress testing system capacity – largest easy expenses roll-out phase. Concerns about system capacity for on-boarding - Mitigations in place, to be monitored. Short notice shifts change sign-off process, audit of claims to ensure that claims align to GRS/scheduling. Process not currently in place - Mitigations in place, to be monitored. Milestones GRS users focus groups – understand any potential barriers/difficulties prior to launch Mar 22 Ops launch comms – clear comms outlining where to access and register for EE FAQs, through operational updates and staff update. Registration emails sent to approvers. Mar 22 User guides updated Pulse – ensure user guides are updated on pulse with latest information Mar 22 GRS messages updated – GRS messages to redirect users to easy expenses where appropriate. Mar 22	Budget/Costs	GREEN	GREEN	GREEN	↔	GREEN	GREEN	GREEN	↔
Resources	GREEN	GREEN	GREEN	↔																
Delivery	GREEN	GREEN	GREEN	↔																
KPIs	GREEN	GREEN	GREEN	↔																
Risks & Issues	GREEN	GREEN	AMBER	↑																
Comms	GREEN	GREEN	GREEN	↔																
8) Operating Model	Sep 2021	01/12/23	Steve Page	Jayne Brown Steve Page	Jayne Brown Steve Page	TEG		DELIVER	No	Development continuing with revised timescales, including broader OD considerations and management of potential interim pressures and development priorities	Budget/Costs	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	↔		
Resources	NA	NA	NA																	
Delivery	AMBER	AMBER	AMBER																	
KPIs	NA	NA	NA																	
Risks & Issues	NA	NA	NA																	
Comms	NA	NA	NA																	
9) Integrated Commissioning Framework	Sep 2021	01/12/23	Pat Keane Arifa Chakera	Pat Keane Arifa Chakera	Pat Keane Arifa Chakera	TEG		DELIVER	No	Phase 2 of the Integrated Commissioning Framework has been initiated to strengthen collaborative working between YAS and ICS, system partners. Key strategic meetings have been arranged from Feb through to May 2022 with TEG / ICS Leads. This will focus on the collaborative working with the ICBs as they develop and link with the Operating Model. The new Director of the System Integration has been appointed and will start in April. Additional work as part of the 22/23 Business Planning to ensure this is supported through the ICF	Budget/Costs	AMBER	AMBER	AMBER	AMBER	AMBER	AMBER	↔		
Resources	AMBER	AMBER	AMBER																	
Delivery	AMBER	AMBER	AMBER																	
KPIs	AMBER	AMBER	AMBER																	
Risks & Issues	AMBER	AMBER	AMBER																	
Comms	AMBER	AMBER	AMBER																	
10) Body Worn Video	01/04/21	31/03/23	Kate Lawrence Jo Fowler	Kate Lawrence	David O'Brien	Clare Ashby	3	DELIVER	YES	The Trust has received funding from NHS England to participate in a national pilot regarding the use of bodycams by frontline ambulance crews. The pilot will run for 12 months within YAS. The purpose of the pilot is to evaluate two key issues: 1. The potential impact of the presence of bodycams in deterring acts of violence and aggression towards staff. 2. The potential effectiveness of bodycams in providing conclusive visual evidence to support the prosecution of perpetrators of violence and aggression towards staff. Phase 1 & 2 implementation is complete. Phase 3 implementation from March/April 2022. The project has sufficient budget (£765k from NHSE/I; £38k Trust funding in 2021/22), although the income and expenditure profiling creates issues for project resourcing in 2022/23. Low levels of camera usage present significant risks to benefits realisation. Milestones achieved February Phase 3 Readiness Assessments Complete Milestones due Phase 3 Enabling Works Complete Mar 22 Phase 3 Staff Training Complete Apr 22 Phase 3 Go-Live complete Apr 22	Budget/Costs	GREEN	GREEN	GREEN	↔	GREEN	GREEN	GREEN	↔	
Resources	GREEN	GREEN	GREEN	↔																
Delivery	GREEN	GREEN	GREEN	↔																
KPIs	NA	NA	NA	↔																
Risks & Issues	AMBER	AMBER	AMBER	↔																
Comms	GREEN	GREEN	GREEN	↔																

TEG+ Programme Board Dashboard

DIGITAL ENABLERS																			
PROJECT	Start	End	PM	Acct Off	SRO	Exec Spons	Gate	Status	HR	Progress Against Key Milestones	RAG Status				OVERALL				
											Budget/Costs	Dec-21	Jan-22	Feb-22	TREND	Dec-21	Jan-22	Feb-22	TREND
Unified Communications	02/01/19	Mar 2022 Nov-21/Aug-21-May-21-Apr-21	Tracy Maud	Simon Marsh	Simon Marsh	Simon Marsh	3	Delivery	Yes N/S	<p>Phase 3 (final phase) of the Unified Comms roll out went live on 7th September, with the move of the telephone circuits completed on 8th September. Daily meetings with EOC are in place to identify and update on any post go live issues. Both Avaya (UC platform) and SVL (voice recorder) have now moved into BAU. Call recorder and legacy Pilot systems have been decommissioned.</p> <p>Post Go-Live issue monitoring and resolution.</p> <p>-Capita have rebuilt the SH2 Centricity server allowing both Pilot and Wallboards to work as expected – testing on the SH2 server with a limited number of users continues into Jan 2022.</p> <p>Some minor issues with agent status still to be resolved in Pilot.</p> <p>-Majority of Avaya CS1K has been removed except for elements to run announcement messages required for legacy ISDN lines in York – these are scheduled to be removed by Jan 2022</p> <p>-Upgrade to Avaya v8.1.3.3 Draft plan produced by BT. Detailed plan and approval due Jan 2022. Upgrade scheduled for Feb/Mar 2022</p>	Budget/Costs	GREEN	GREEN	GREEN	↔	GREEN	GREEN	GREEN	↔
											Resources	GREEN	GREEN	GREEN	↔				
											Delivery	GREEN	GREEN	GREEN	↔				
											KPIs	NA	NA	NA	NA				
											Risks & Issues	GREEN	GREEN	GREEN	↔				
											Comms	GREEN	GREEN	GREEN	↔				
											N365 Implementation	09/07/20	Mar 2022 31/3/22 31/4/22 31/5/22 31/6/22 31/7/22 31/8/22 31/9/22 31/10/22 31/11/22 31/12/22	Lee Read					
Resources	GREEN	GREEN	GREEN	↔															
Delivery	GREEN	GREEN	GREEN	↔															
KPIs	GREEN	GREEN	GREEN	↔															
Risks & Issues	GREEN	GREEN	GREEN	↔															
Comms	GREEN	GREEN	GREEN	↔															
ePR Phase 4	01/04/20	31/03/22	Sian Registe		Dr Julian Mark	Dr Julian Mark	3	Delivery	Yes	<ul style="list-style-type: none"> Progress made with the YAS shared care record work, with FHIR resources for all ePR incidents now made available. Hospital Dashboard ready for general trial and transition by acute trusts. Ongoing stakeholder input and development of new verification of death screens and collection of ADS phase 4 data items. The project status is Amber due to: <ul style="list-style-type: none"> oBP post-event messaging re-launch still pending. oBlocker on Corpuls diagnostic ECG use-case has delayed development. Development for patient observations use-case requires further requirements gathering. oOngoing resource gaps for the Clinical Product Owner and Clinical Safety Officer roles. Business Analyst started in post 01/03/22. No progress yet on recruitment of two Advanced Paramedics to resource the ePR Clinical Product Owner and Clinical Safety Officer roles. Deputy Medical Director providing clinical steer 	Budget/Costs	GREEN	GREEN	GREEN	↔	GREEN	AMBER	AMBER	↔
											Resources	AMBER	AMBER	AMBER	↔				
											Delivery	GREEN	AMBER	AMBER	↑				
											KPIs	AMBER	AMBER	AMBER	↔				
											Risks & Issues	AMBER	AMBER	AMBER	↔				
											Comms	GREEN	GREEN	GREEN	↔				

TEG+ Programme Board Dashboard

DIGITAL ENABLERS																			
PROJECT	Start	End	PM	Acct Off	SRO	Exec Spons	Gate	Status	HR	Progress Against Key Milestones	RAG Status				OVERALL				
											Dec-21	Jan-22	Feb-22	TREND	Dec-21	Jan-22	Feb-22	TREND	
A&E Smartphone (Personal Issue)	Feb 2021	Feb 2022	Dean-Fletcher- Steph Appleyard	Check	Simon Marsh	Nick Smith	3	Delivery	Yes	<p>Roll out of phones is 78.8% complete (a total of 2226 phones rolled out). There are 599 remaining to be distributed. The distribution rate in areas over the previous weeks, shows that if the rollout continues at the current pace, that we will not achieve a full rollout by the end of March 2022 in South, West, and East. North has reached 100% completion.</p> <p>Team Leader devices are complete, with the only devices outstanding being people on long term sick or where there are vacancies. The roll out of these devices will be covered by BAU when they are required. CBU's</p> <p>South Deployed – 592 Remaining – 150 West Deployed – 835 Remaining – 338 East Deployed – 277 Remaining – 111 North Deployed – 522 Remaining – 0 98% (2,769) complete by 3rd March 2022</p> <p>Risks:</p> <ul style="list-style-type: none"> •Failure to collect device data and capture within the app during deployment will result in the devices not able to function and ICT will have no record of the asset. •Minimal uptake from ops staff to opt in using Trust issued devices for personal use. •Failure to receive responses from 98% of operational staff that have received personal issued devices that are on duty <p>Issues:</p> <ul style="list-style-type: none"> •Operational pressures on A&E having impacts on handover of devices and meeting attendances. •Rollout application needs Bank staff names/numbers adding by CBU for a true KPI update. •MDM software issue identified that will impact only the 18 operational trial devices <p>Comms including a video message from Nick Smith – Director of Operations, will be sent out in March via Corporate Communications in the Staff Update.</p>	Budget/Costs	GREEN	GREEN	GREEN	↔	AMBER	RED	RED	↔
											Resources	AMBER	AMBER	AMBER	↔				
											Delivery	AMBER	AMBER	AMBER	↔				
											KPIs	AMBER	RED	RED	↔				
											Risks & Issues	AMBER	RED	RED	↔				
											Comms	AMBER	AMBER	AMBER	↔				
											Emergency Services Mobile Communications Programme - ESMCP	Nov 2021	Nov 2022	Dean Fletcher	Check				
Resources			GREEN	↔															
Delivery			GREEN	↔															
KPIs			RED	↔															
Risks & Issues			RED	↔															
Comms			GREEN	↔															

TEG+ Programme Board Dashboard

February 2022

NORTHERN AMBULANCE ALLIANCE																			
PROJECT	Start	End	PM	Acct Off	SRO	Exec Spons	Gate	Status	HR	Progress Against Key Milestones	RAG Status				OVERALL				
											Budget/Costs	Dec-21	Jan-22	Feb-22	TREND	Dec-21	Jan-22	Feb-22	TREND
Integrated (Common) CAD	Nov 19	TBC	Kirstie Mellish	Graham Norton	Richard Henderson	NAA Board		Develop	Yes	<p>The aim of the project is to jointly procure a single CAD system (including 999, 111 and PTS) for the NAA (YAS/EMAS/NWAS) which needs to be scalable to allow other Trusts to adopt in the future. The vision is "enabling better patient care through the seamless control of 999, 111 and PTS across the NAA".</p> <p>A feasibility study, Strategic Outline Case and Outline Business Case (OBC) have been completed and approved through the NAA and individual Trust governance processes as appropriate. The OBC was approved in July 2021 and the project has now progressed to the tender phase (for a single supplier framework with call off modules). The Invitation to Tender and Full Business Case are currently being developed.</p> <p>The project has been rated Amber as there remains a risk that SME resource will not be sufficient to meet the target dates. The level of SME input has resulted in requirements, finance and procurement activities slipping, and use of more project / consultant resource to compensate, raising concerns about inefficient use of the limited consultant resource. As a result there is a risk to timelines and quality (if insufficient SME input, or if consultant resource runs out before tasks completed). There is a high risk that the ITT may be delayed, however the rating for delivery has been maintained as Amber until this is confirmed.</p> <p>Milestones Issue ITT End Mar 2022 FBC approval Sep 2022 Contract award Dec 2022 Contract in place Oct / Nov 2022 First call off Dec 2022</p>	Budget/Costs	NA	NA	NA	↔	AMBER	AMBER	AMBER	↔
											Resources	AMBER	AMBER	RED	↑				
											Delivery	AMBER	AMBER	AMBER	↔				
											KPIs	NA	NA	NA	↔				
											Risks & Issues	AMBER	AMBER	AMBER	↔				
											Comms	NA	NA	NA	↔				
Robotic Process Automation	June 2021	TBC	James Davies	G Norton	C Weir	NAA Board		Develop	Yes	<p>The Aim of the NAA RPA Project is to identify and implement robotics to replace manual time-consuming data entry activities across the NAA, releasing highly trained staff to more appropriate work which will result in cost savings and/or cost avoidance benefits while achieving efficiencies and removal of unwarranted variations across the NAA.</p> <p>A Strategic Outline Case (SOC) for the development of a Robotic Process Automation (RPA) capability across the NAA was endorsed by the NAA Board in May 2021.</p> <p>Subsequently a Full Business Case (FBC) was endorsed by the NAA Board and its participant Trusts that endorsed the procurement of a 3-year Automation license with Blue Prism with Phase 1a automation development/support with the Royal Free Automation team at cost of £701,366 across 4 financial years at an average cost of £44,251 per Trust per year. The absence of the PM has stalled progress in January and February 2022, as such until his return the overall status has been reduced to amber (anticipated Mar 22)</p> <p>Milestones Technical Testing Jun - Mar 22 YAS Driving License Check Process Go live Apr 22 NEAS Driving License Check Process Go live May 22 NWAS Invoice Checking Process Go Live Jun 22 EMAS Driving License Check Process Go live Jul 22 EMAS HR Process 1 Go live Jul 22 YAS Invoice Checking Process Go Live Sep 22 NEAS Invoice Checking Process Go Live Oct 22 NWAS Driving License Check Process Go live Nov 22</p>	Budget/Costs	NA	GREEN	GREEN	↔	NA	GREEN	AMBER	↑
											Resources	NA	AMBER	AMBER	↔				
											Delivery	NA	GREEN	GREEN	↔				
											KPIs	NA	GREEN	GREEN	↔				
											Risks & Issues	NA	AMBER	AMBER	↔				
											Comms	NA	NA	NA	↔				