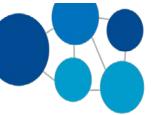
The Shrewsbury and Telford Hospital

NHS	Trust	

Recommendation	
□ DECISION ✓ NOTE	The Board is asked to note the contents of the progress update for the Future Fit Programme and the revised timeline
Reporting to:	Trust Board
Date	27/07/17
Paper Title	Future Fit Update
Brief Description	The purpose of this report is to provide Board members with an update of progress on Programme delivery since the last meeting. The attached RAG rated delivery dashboard provides a summary overview of the status of delivery of the core components of the programme.
	Key issues or points to note:
	Work has progressed on the independent review and the final report will be available by 24 th July for circulation to Programme Board members for the meeting on 31 st July 2017. As will the supplementary IIA Report on Women and Children's services. As part of the IIA work clinical workshops, focus group work with users of the service and an on line survey have also been completed.
	The Joint Committee arrangements are now finalised for 10 th August 2017. Independent members of the Joint Committee have been appointed with the support of NHSE.
	The Programme timeline has been reviewed based around the availability of the independent review report, timing of the decision making meetings and the knowledge of the NHSE Assurance process requirements. Appendix 1 identifies some key provisional dates along the critical path.
	Key heightened risks identified in the RAG report are notably around resolving the source of capital, the more granular detail on the out of hospital solutions emerging from the neighbourhood work and the outcome of other reviews that are outside of Future Fit but may have interdependencies and links to the overall activity assumptions and affordability of the acute model and the wider STP. Discussions are ongoing between CCGs and the Acute Trust in order to resolve any outstanding issues prior to the NHSE Assurance process.
Sponsoring Director	Simon Wright, Chief Executive
Author(s)	Debbie Vogler, Future Fit Programme Director
Recommended / escalated by	
Previously considered by	Shropshire and Telford & Wrekin CCG Governing Bodies
Link to strategic objectives	

The Shrewsbury and Telford Hospital NHS Trust

		NH5 Irust
Link to Board Assurance Framework		
	Stage 1 only (no negative impacts identified)	
Equality Impact	Stage 2 recommended (negative impacts identified)	
Assessment	negative impacts have been mitigated	
	negative impacts balanced against overall positive impacts	
Free dama of	This document is for full publication	
Freedom of Information Act	This document includes FOIA exempt information	
(2000) status	This whole document is exempt under the FOIA	





Paper 12

Programme Director's Report

July 2017

1. Programme Plan – Progress Update/RAG Rated Delivery Dashboard

The purpose of this report is to provide board members with an update of progress on programme delivery since the last meeting

Work progresses on the independent review and is near completion. The supplementary IIA clinical workshops, on line survey for users and focus group work is complete. Both reports will be presented to the Programme Board which is to take place on 31st July 2017. The Joint Committee arrangements are now finalised for 10th August 2017. Independent members of the Joint Committee have been appointed with the support of NHSE. These were received for endorsement by CCG Boards in their June Governing Body meetings.

The programme timeline has been reviewed based around the availability of the independent review report, timing of the decision making meetings and the knowledge of the NHSE Assurance process requirements. Appendix 1 identifies some key provisional dates along the critical path.

The table below is a summary RAG rated dashboard of the status of delivery of the key components of the Future fit Programme Plan. It includes a summary narrative of key risks and/or issues.

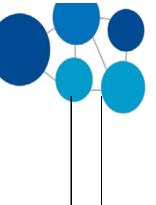
		Last updated Overall RAG rating	20th July 2017 Key Issues/risks
1	Programme Governance		There remain significant capacity risks within the programme team currently with a number of recent and expected changes of personnel in Programme Management. The availability of Interim support is currently being looked at from within the CCGs. Capacity for Communications and Engagement and the consultation process itself has been agreed and is currently being put in place. The SRO and the strategic lead for STP Communications and Engagement have both been appointed with the support of resources from NHSE. These individuals will also provide some strategic Communications and Engagement support and leadership to Future Fit. Discussions are ongoing with the Future Fit SROs around Programme support post October after the retirement of the Programme Director, with an expectation that Future Fit will align more fully within STP governance structures and the appointed PMO. The Risk Register for the Programme has had a thorough review in June through the work stream leads and will be presented at the next Programme Board.



NHS Approvals/ Assurance Gateways	
2.1 West Midlands Senate Review	The action plan implementation update report was received by the Programme Board in June. Progress has been made against most of the 18 actions including: working with the ambulance service in refining the modelling; clarifying the UCC clinical model; considering the necessary IT support; community services alignment; STP governance alignment; public engagement; developing workforce solutions and supplementing the IIA and benefits realisation work. The most pressing work is around out of hospital activity and the ability to describe this in sufficient detail to support the OBC and the Pre Consultation Business Case (PCBC). The work on more fully understanding the impact on ambulance services from a commissioning perspective is also ongoing.
2.2 NHS Gateway Review	RED/AMBER rating achieved in November 2016. The action plan implementation update report was received by the Programme Board on the 6 recommendations in June. Progress has been made on all key areas of focus: the independent review of the appraisal process which is near completion; communications messages around UCCs, with a local clinicians view in both primary and secondary care to retain UCC as the name; preparation for the consultation process; stakeholder relationship development through the STP Partnership; active risk management with a full review of programme risks completed; and transition where possible and appropriate of FF governance arrangements into the STP process.
2.3 NHSE Formal Stage 2 Assurance	There will be a local NHSE team and regional NHSE assurance process to complete and first stage likely be scheduled in August 2017. The Pre consultation Business case will be a key submission into this process and is in draft, as will progress reports against any
	caveats in the CCGs letter of support for the SOC in 2016, the gateway actions, the senate actions and the consultation documentation and plan.
2.4 Pre- Consultation Business Case	This document forms a key element of the NHSE Assurance process. Whilst the document is in draft there remains a number of unresolved elements particularly the source of capital, the more granular detail on the out of hospital solutions emerging from the neighbourhoods work and the outcome of other reviews that are outside of future Fit but may have some interdependencies and links to the overall affordability of the acute model and the wider STP. The CCG Boards will need to sign this off prior to submitting to NHSE. Dates for Governing Body meetings in August are being agreed to ensure they are after the Joint Committee on 10 th August.
Options Appraisal/ Preferred Option	Independent Review: The work commenced on 12 th June and a draft was available as planned w/c 17 th July. The final report will be circulated to Programme Board members on 24 th July as part



	Formal Querry Hasting	of papers for that meeting. The delay in initiating this work has been the cause of the primary delay in the programme timeline and critical path and therefore the impact on the consultation timeline.IIA W&C: Work has continued on the IIA with the clinical workshop completed where any potential health impacts of any changes were debated. The public focus groups and on line survey have also been completed. The report will be available for programme Board as planned.Joint Committee: Arrangements including the appointed voting independent chair and independent clinicians are now agreed. The date has been agreed for the Programme Board on 31 st July and the Joint Committee will receive the recommendations from the Programme Board on 10 th August.
4	Formal Consultation	 Preparations for consultation continue with the development of the consultation materials including the consultation document, survey questionnaire and a refresh of the programme website. Given the above delay to timelines related to the independent review, following Programme Board and a Joint Committee decision in August, the consultation will also be delayed. It is the view of the SROs and Programme Director that a revised timeline will include starting consultation later in September subject to the timings of the NHSE assurance process. Currently the focus is to recruit the support required for the consultation process.
5	Developing the supporting community model to support required left shift	Currently the CCGs are triangulating the out of hospital care activity work needed for the OBC and PCBC to support the assumptions within the acute model. Alignment is needed from the outputs of the Shropshire CCG community review, the neighbourhood work within the STP process both within Shropshire and T&W and the activity modelling assumptions from Future Fit that is currently reflected in the OBC and PCBC. It is expected this will be available during late July.
6	Programme Funding and Budget Management	Subject to necessary approvals to proceed, the costs of formal consultation will be a cost pressure in 2017/18. Provisional budgets have been agreed and where possible consideration is being given to integrating some Future Fit functions within the STP programme management office (PMO) including communications and programme management. Proposed budget went to the Programme Board in June and will be monitored at each subsequent meeting.
7	SATH OBC/FBC	Draft OBC was approved by SaTH Board in December 2016. This will need to be considered for formal approval post consultation by the CCGs post consultation. However at this





point the assumptions within it in terms of activity and financial affordability will need to be tested and supported in principle by the CCGs prior to the NHSE assurance process. Currently the CCGs are triangulating the out of hospital care activity work needed for the OBC and PCBC to support the assumptions within the acute model.

Action Status RAG Rating definition

Complete

Delayed - recovery actions planned or in place. Low risk of materially affecting programme delivery and/or timeline

Delayed - recovery actions planned or in place. Medium to high risk of materially affecting programme delivery and/or timeline

Deadline not yet reached, delivery on target

