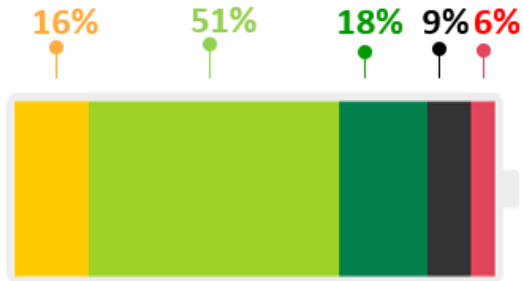
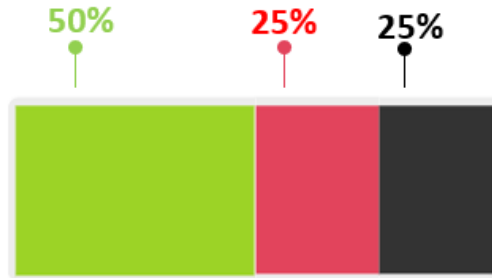


Appendix 1: Progress Status by Programme

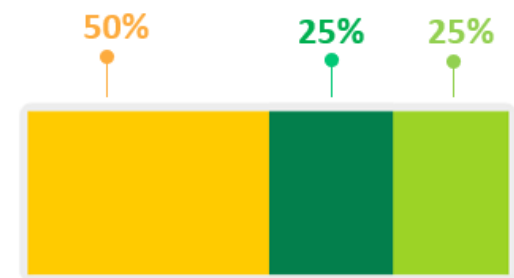
Overall Progress Status



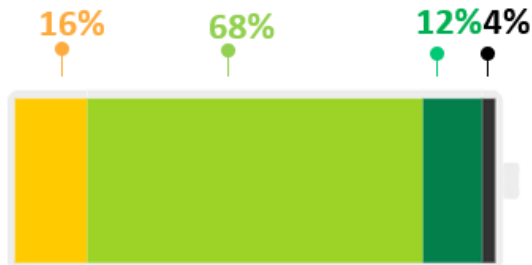
Corporate Governance



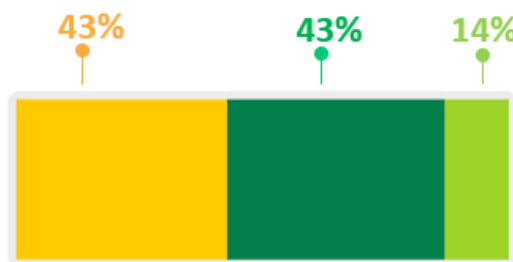
Digital Transformation



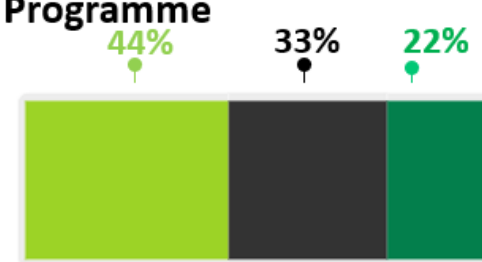
Quality & Safety



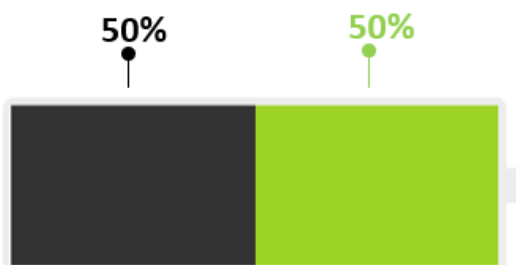
Maternity Transformation



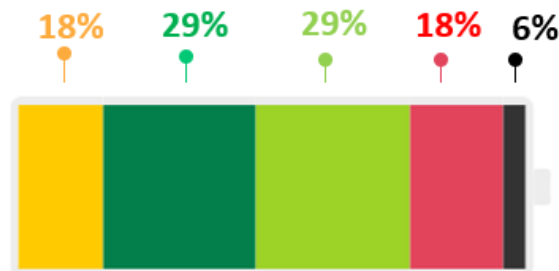
Urgent Care Improvement Programme



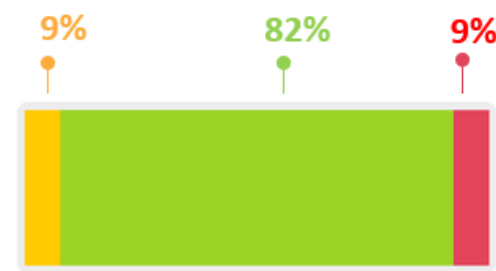
Elective Recovery



Workforce Transformation



Finance & Resources



● At Risk ● On Track ● Complete ● Descoped ● Off Track

Appendix 2: Getting to Good Project Status Overview

Progress Status

Complete

Off Track

At Risk

On Track

Programme	Project	Monthly Update	Previous Month	Current Month
Corporate Governance	Communications & Engagement	Work is ongoing to finalise the draft Communications Strategy, following initial feedback. It is now planned to take the draft strategy to Trust Board during late spring/early summer 2024 for review, to allow for the findings of the CQC inspection report to be taken into consideration.		
Corporate Governance	Risk Management	<p>All four modules of the Risk Management E-Learning programme have been piloted and are now available for any staff member to complete via the Learning Made Simple (LMS) platform. Trend analysis on uptake and completion will be undertaken in June 2024.</p> <p>Over 20 onsite Risk Management training sessions have been rolled out through the LMS platform since December 2023, with positive responses evidenced through feedback forms. More sessions will be delivered throughout 2024 And virtual evening sessions will be explored for SaTH staff working late shifts. In addition, the Risk Management team have attained a BTEC in Training and Education to make the Risk Management training syllabus and delivery more robust.</p> <p>The monthly risk management report and proposed KPIs continue to be reviewed and will formulate an annual report in July 2024.</p>		
Digital Transformation	Digital Infrastructure	<p>The onboarding of Change Agents has commenced, however, the uptake for this was low in December 2023 owing to annual leave and sickness. Further onboarding is planned for early January 2024.</p> <p>Preparation for Phase 3 of User Acceptance Testing in January 2024 is underway. Some gaps do remain in technical readiness and work continues to establish a way forward to achieve full end-to-end testing.</p>		

Appendix 2: Getting to Good Project Status Overview

		<p>EPR staff training numbers were low for December 2023, and a concerted effort to increase these numbers will be a priority over the next three months to mitigate this key risk.</p> <p>The DSS (Digital System Support) go-live readiness assessment is due to take place in February 2024. The purpose of this focused independent and impartial peer-to-peer assessment is to provide the Trust with pre go-live assurance.</p> <p>Support for the Hospital Transformation Programme (HTP) is ongoing, and the Digital team is supporting the development of a data strategy for the Integrated Care System (ICS).</p>		
Elective Recovery	Cancer Performance	<p>Cancer Performance focus remains on reducing the backlog of patients waiting over 62 days for treatment and on Faster Diagnosis Standards (FDS).</p> <p>The 62+ day backlog as at the end of December 2023 was 343 against the recovery trajectory of 268. The unvalidated FDS position for December 2023 is currently at 75.1% which is above the trajectory of 72.5%. Urology, Colorectal and Genecology remain challenged tumor pathways, each have a detailed action plan in place for improvement.</p> <p>The weekly NHS Tier 1 meetings remain in place where long waiters, recruitment and funding is tracked in detail, along with the actions from previous deep dive pathways events.</p>		
Elective Recovery	Diagnostics Recovery	<p>The unvalidated position for the DM01 performance is 84.04%, although the falls below the national target of 99%, each month the performance is showing improvement.</p> <p>Clinical prioritisation is in place for all Radiology appointments and reports with priority given to urgent, Cancer, and longest waiting patients on the Referral to Treatment (RTT) pathways.</p> <p>After the successful opening of Phase 1 of the Community Diagnostic Centre (CDC) in Telford, Phase 2 is also set to be completed in early January 2024, with an introduction of an MRI service. Work now continues to phase out the additional capacity that was provided through the Elective Recovery Fund (ERF).</p>		

Appendix 2: Getting to Good Project Status Overview

		Capacity issues within Endoscopy remain a concern and additional insourcing from '18 Weeks' to support Endoscopy DM01 levels at weekends has been supported ERF.		
Elective Recovery	Outpatient Transformation	<p>The performance for PIFU in December 2023 was 4.1% which was an increase on the previous month's performance of 3.6%. Virtual contacts for December 2023 accounted for 18.3% of outpatient contacts, a slight decline from the previous month.</p> <p>Weekly Outpatient Transformation Working Group meetings are in place with Centres to progress and monitor the PIFU and Virtual plans by specialty. The Patient Access Team are also working in collaboration with the Digital Team on the implementation of Careflow and ways to mitigate impact of the changeover. The work to validate patients waiting (new and follow-ups) continues.</p>		
Elective Recovery	Theatre Productivity	<p>Theatre utilisation for December 2023 was 78% (capped) and 83% (uncapped) at the Royal Shrewsbury Hospital (RSH) and 77% (capped) and 80% (uncapped) at the Princess Royal Hospital (PRH). Although this does not meet the National Standard this is an overall improvement for SaTH despite industrial action and the Christmas period. For reference Capped utilisation measures the clinical time utilised within the planned theatre session duration. Uncapped utilisation measures total clinical time during a theatre session including any early starts, overruns / unplanned session extensions in relation to the planned duration of the theatre list.</p> <p>The Theatre Lookback meeting continues and are scheduled weekly, a process is being developed for each centre to present their findings to the group, along with a monitored action log.</p> <p>Pre-operative assessment capacity is set to increase in the coming months, as work is in progress to provide training to staff to deliver the appointments off site.</p> <p>The Regional Theatre Productivity Lead continues to provide support to the Trust providing areas of improvement by conducting a Theatre Review at PRH, the findings of which are currently being reviewed.</p>		


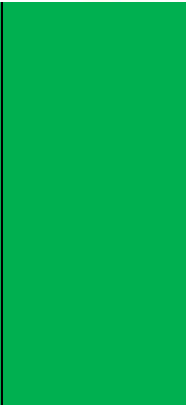

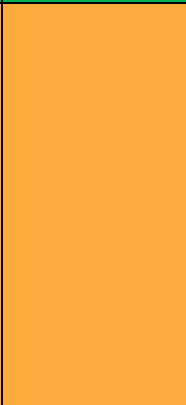

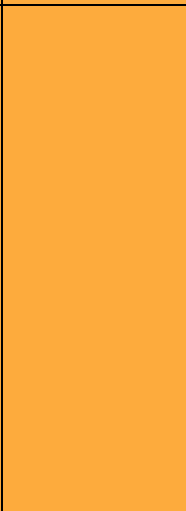
Appendix 2: Getting to Good Project Status Overview

<p>Maternity Transformation</p>	<p>Maternity Transformation</p>	<p>The Ockenden related milestones remain 'at risk', however, in the current reporting period of January 2024, the Maternity Transformation Programme is demonstrating positive progress and delivering above the projected completion targets.</p> <p>Currently 83% of the Ockenden actions are 'evidenced and assured' (175/210 total actions); with 17% outstanding (35/210 actions). Whilst the teams are delivering these at pace, 11 actions are unlikely to be delivered by the March 2024 completion deadline as they are linked to funding requirements. These actions have been outlined in the Ockenden business case which include one action linked to operational challenges in releasing Advanced Neonatal Nurse Practitioners (ANNPs) to another NICU for training enhancement; and another two actions that are 'at risk' due to the reassignment of the independent senior advocate role (system partner actions). These have been approved through the Innovation & Investment Committee (I&IC).</p> <p>The Maternity Improvement Plan (MIP) milestones addressing the 30 'historical' reviews remain 'on track'. To Date 12/30 (40%) action plans have been fully closed and 'evidenced and assured' with closure papers ratified via Divisional Committee; 17/30 (57%) 'delivered not yet evidenced', with action plans closed and closure papers in production; 1 action plan (3%) 'not yet delivered', though well underway. Lastly, 1 action plan was descoped (3%) as owned by our system partners, Local Maternity and Neonatal System (LMNS).</p> <p>Governance processes have been devised around use of the Maternity Transformation Assurance Tool (MTAT) and finalisation of the MTAT tool will be presented to the Maternity Transformation Assurance Committee (MTAC) in February 2024 for sign off.</p>		
<p>Quality & Safety</p>	<p>Levelling-up Clinical Standards</p>	<p>The Audit questions measuring the clinical standards for Frailty, Cardiology and Ear, Nose and Throat (ENT), have been agreed and the audits will be built in the Gather system in January 2024. As a result, four specialty areas will be undergoing clinical standard audits, with performance dashboards reviewed and discussed at specialty governance meetings.</p> <p>Further work to define the audits for the remaining specialties continues to progress.</p>		

Appendix 2: Getting to Good Project Status Overview

Quality & Safety	Fundamentals in Care	<p>All the current milestones within the Fundamentals in Care project have been delivered and a project review, with the new Senior Responsible Officer has taken place to identify the next steps required for this project, which will be concluded in January 2024.</p> <p>This review will coincide with any findings from the CQC Inspection Report, due to be received that month.</p>		
Quality & Safety	Learning from Deaths	<p>The Learning from Deaths Project has now successfully delivered all its milestones and continues to exceed the national target of 15% of deaths receiving a Structured Judgement Review (SJR). A significant improvement in the number of the SJRs completed within the 8-week period following the death has also been achieved.</p> <p>Delivery evidence of the remaining project milestone, related to links with the Patient Safety Incident Response Framework (PSIRF), is scheduled to be reviewed at the G2G Operational Delivery Group in January 2024. If the evidence is approved the Learning from Deaths project will then commence a monitoring phase, in preparation for the project to transition into business-as-usual activity and project closure.</p>		
Quality & Safety	Quality & Regulatory Compliance	<p>Actions and updates continue to be monitored in relation to the Trust's Section 31 conditions until the receipt of the CQC's latest inspection report, anticipated to be early 2024. It is unclear whether the CQC will automatically review the Trust's conditions as part of their report and rating process or whether an application to remove certain conditions will be required. An update to the evidence and an application to remove the condition relating to the completion of documentation and risk assessments will be completed as a minimum.</p> <p>Preparation in anticipation of the draft inspection report from the inspection in October 2023 continues. A programme of mock inspections and a self-assessment tool based on the CQC's new single assessment framework is being established. An evidence portfolio based on the new framework alongside the elements required to complete provider information requests will be maintained as well as supporting agreed actions to address any "must do" and "should do's" received in the report.</p>		

Appendix 2: Getting to Good Project Status Overview

<p>Quality & Safety</p>	<p>Quality Governance</p>	<p>The successful launch of the Patient Safety Incident Response Framework (PSIRF) took place in December 2023 and has been well received. Work continues to establish and embed the new processes associated with this new way of working and this will continue to evolve over the coming weeks.</p> <p>Recruitment has taken place for two Patient Safety Specialist Investigators and they are due to commence in post in February and March 2024.</p> <p>The Plan on a Page for this project has been refreshed and the key milestones over the next six months will focus on recruitment and developing governance process to support PSIRF.</p>		
<p>Quality & Safety</p>	<p>Delivery of the Quality Strategy</p>	<p>All current milestones in the Quality Strategy project have been delivered, with the exception of phase 2 of the Quality Dashboard, which has been delayed until April 2024 due to capacity within the Performance and BI Team. A draft of this dashboard is now available in PowerBI and will be shared as an appendix for the Quality Operational Committee (QOC) in January 2024. Despite this delay, the project continues to progress, with improvements made across all nine of the quality priorities.</p> <p>A project review, with the new Senior Responsible Officer has taken place and the next steps required for this project are being identified, ahead of the refresh of the Quality Strategy, due to take place in 2024.</p>		
<p>Quality & Safety</p>	<p>Expansion of Medical Examiners Office</p>	<p>Following the communication letter sent to all GP practices in the Shropshire, Telford and Wrekin Integrated Care System (ICS) last month who are not currently using the Medical Examiner (ME) service, 24 practices have so far responded.</p> <p>Engagement and meetings with the following GP practices took place in December 2023; Severn Fields Medical Practice, Plas Ffynnon Medical Centre – Oswestry, Radbrook Green Medical Practice, The Meadows Medical Practice – Clun, Prescott Surgery, TELDOC and Shifnal & Priorslee Medical Practice.</p> <p>Engagement meetings with the following practices are scheduled for January 2024; Charlton Medical Centre, Station Drive Surgery - Ludlow and Broseley Medical Practice. A follow up site visit is also set to take place at Severn Fields Medical Practice to discuss processes and procedures and to agree a go live</p>		

date.

Engagement with Shropshire Community Health NHS Trust (ShropComm) was renewed during December 2023 with further discussion planned in January 2024 to finalise and agree a start date for receiving referrals from their community hospitals. This has also been extended to any potential deaths that may occur on the new sub-acute wards at SaTH, which are under the ownership and leadership of ShropComm.

Collaboration with the Severn Hospice has commenced with deaths being referred from both hospice sites from the 4th December. So far 25 deaths have been received and reviewed throughout December.

A meeting with the Neonatology consultants was held in December 2023 to share the revised Sudden Unexpected Death in Childhood (SUDIC) procedure which incorporates the inclusion of proportionate medical examiner review of these cases. A meeting is scheduled in January 2024 with the Obstetrics team and Bereavement Midwives.

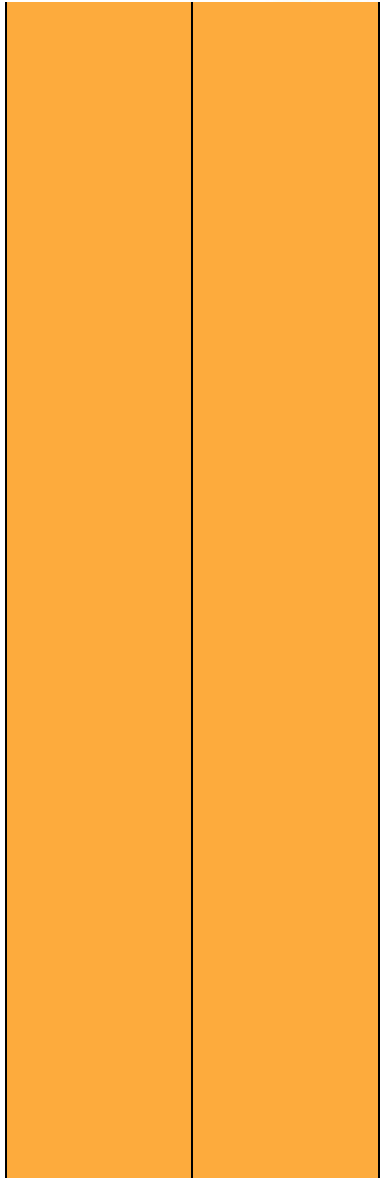
The ME service Standard Operating Procedure (SOP) remains in development and is currently being reviewed before final agreement and presentation to Learning from Deaths (LFD) group.

The additional office at Royal Shrewsbury Hospital (RSH) will be available mid-January 2024. Commencement of estates works for the Princess Royal Hospital (PRH) office is anticipated in January 2024, awaiting confirmation from the Estates team.

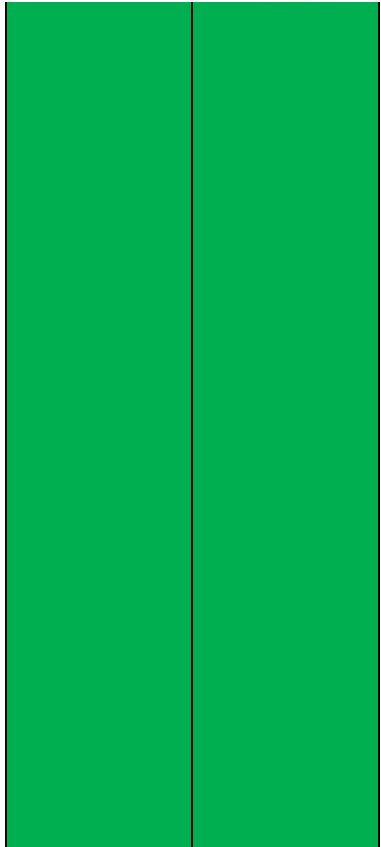
The full time MEO vacancy is currently still being advertised with the closing date of the 18th January 2024.

Draft regulations on the ME service becoming statutory have been released, giving renewed optimism that the service will indeed be on statutory footing from April 2024. This has been shared with key stakeholders both internally and across the ICS.


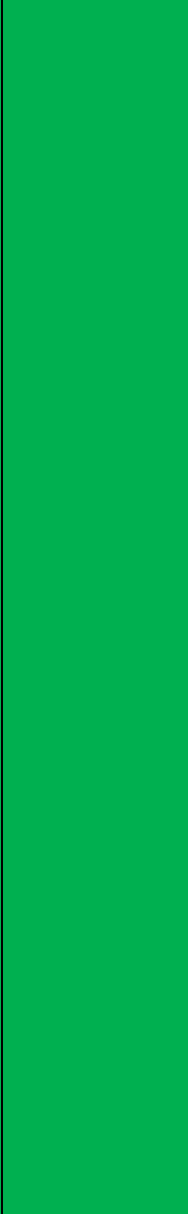


Appendix 2: Getting to Good Project Status Overview

<p>Urgent Care Improvement Programme</p>	<p>Flow Improvement Programme</p>	<p>A Multi-agency Discharge event was held from 12th December through to 23rd December which supported discharge activity. with both simple and complex discharge rate per day being the highest of the whole year the week before Christmas. This enabled both hospitals to go into the holiday period with capacity.</p> <p>Further work is being undertaken to smooth the process for patients who have no criteria to reside. The Transfer of Care Forms project was established in December 2023, with the aim of reviewing total length of stay for patients on discharge pathways 1-3. A schedule is currently being developed to roll out with the wards, including clear timescales and actions.</p> <p>The ward improvement work continues on Medicine wards, which has led to Ward 11 and 26 reaching the 33% improvement target of pre 12pm discharge and transfers to the Discharge Lounge. Ongoing work on Surgical wards continues with Ward 8, 25G and 37 also reaching the 33% improvement target to pre 12pm discharge and transfers to the Discharge Lounge, All other Medicine and Surgical wards are working towards reaching the 33% improvement target.</p> <p>The Outpatient Parental Antibiotic Therapy (OPAT) service is operating alongside the VW team, at Shropshire Community Health NHS Trust. The team is currently reviewing the total number of referrals received, including those that have been declined and the rationale. Further work is underway to collate patient experience feedback, to review areas for improvement.</p> <p>The choice policy is currently being written to support patient placement and discharge plans. Alongside this, data has been collated to assist as a baseline for the policy's impact, which will be used to monitor the policy after launch.</p> <p>The sub-acute wards, managed by Shropshire Community Health NHS Trust, are on track to open in January 2023 following successful ward moves and estates work across both hospital sites. They will provide ongoing rehabilitation and recovery for frailty, orthopaedic and stroke patients.</p>	
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Appendix 2: Getting to Good Project Status Overview

<p>Urgent Care Improvement Programme</p>	<p>Emergency Care Transformation</p>	<p>The improvements in initial assessment were sustained during December 2023 with an average compliance of 58.5% across both hospital sites against the 15-minute standard, compared to a regional average of 51.7% as per the National A&E Dashboard. This demonstrates a strong improvement in comparison to December 2022 when an average compliance of 25.6% was recorded. Work continues to sustain this level of performance and deliver further improvements to the process.</p> <p>The recommendations from the Neutral Evaluation report were shared with Emergency Department (ED) colleagues in December 2023 via a series of initial briefing sessions. The findings of the neutral evaluation were across a number of themes including communication, engagement and culture. The report recommendations have been divided between the appropriate ECTP workstreams and the Division to enact and a workshop is planned for early 2024 to engage staff further in improving the working environment.</p> <p>The Emergency Care Transformation Assurance Committee (ECTAC) was stood down in December 2023 due to industrial action planning and will reconvene in January 2024. It is anticipated that by this point the refreshed ECTP plan will have been finalised, which is expected to contain an increased number of actions, partly due to the Neutral Evaluation report, but also owing to the increased focus on areas such as the 4 Hour Performance target and the Urgent Treatment Centre.</p>	
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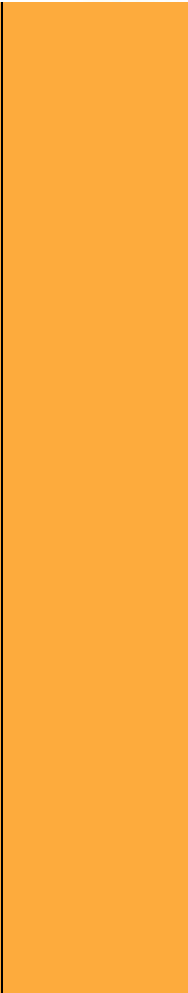
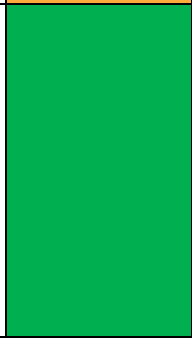

Appendix 2: Getting to Good Project Status Overview

<p>Workforce Transformation</p>	<p>Leadership Development Framework</p>	<p>The delivery of the STEP management skills programme and SaTH 1 – 4 Leadership programmes has continued, all of which are gathering more momentum and interest with the next cohort of the STEP programme already confirmed. The launch of the updated Foundations of Supervision and Team Leadership (FOSATL) is due to take place in January 2024 and which is already fully booked. There is a risk however regarding clinical staff attendance and further support is needed to allow them the time to attend the leadership programmes available.</p> <p>Work continues with Telford College to identify collaborative approaches to developing accredited leadership and management programmes.</p> <p>Over 1300 members of staff have now accessed the Talent Portal and work has continued with the Procurement team to identify a provider for the next 12 months with an option to extend. Teams are now starting to come forward with requests to access the Affina Team Coaching Journey and additional Affina coaches are being trained in addition to the Institute of Leadership and Management (ILM) coaches</p> <p>Initial conversations have taken place with the ST&W Integrated Care Board (ICB) about how leadership development can be offered across the healthcare system. These conversations will continue as a leadership collaborative from January 2024, to build on what has been achieved so far with collaboration on the ICS High Potential Scheme.</p> <p>The Preceptorship Programme for newly registered nursing associates, nurses and midwives has now been developed and offered as an ICS programme with further development on career pathways to be completed.</p> <p>A full programme of monthly Schwartz Rounds for 2024 has been established with morning, early evening and virtual sessions offered in addition to the existing lunchtime sessions. These are now CPD accredited, with certificates awarded to attendees.</p>		
<p>Workforce Transformation</p>	<p>Recruitment & Retention</p>	<p>Based on lessons learnt an arrival date for a cohort of overseas nurses was not arranged for December 2023. Instead, the next cohort of thirteen overseas nurses are set to join the Trust in early January 2024.</p>		

Appendix 2: Getting to Good Project Status Overview

		<p>This next cohort will bring the total number of internationally educated nurses recruited since April 2023 to 192 (93% of business case delivered to date). Due to candidate withdrawals and some candidates unlikely to be ready to commence in post by February 2024, further interviews have taken place. The remaining successfully recruited candidates will be joining the Trust during February 2024, which will conclude the business case.</p> <p>The Trust continues to see a reduction in Healthcare Assistant (HCA) vacancies with 27 Band 2 HCA vacancies in December 2024. During this month, 16.82 WTE HCAs commenced in permanent posts and 6 HCAs commenced via the Temporary Staffing Bank. A further 7.3 WTE are progressing through recruitment checks and 8.62 WTE are due to commence in post during January 2024.</p> <p>The recruitment branding concepts devised by the Communications team have been approved and will start to be used to promote vacancies in the new year.</p> <p>Retention continues to decrease, there has been a further reduction in month, currently at 11.4%. This exceeds the target of 13% by December 2023. There are reviews taking place, with an emphasis on 2024/25 Improvement and Retention projects, focusing on set targets and performance metrics to report on.</p>		
<p>Workforce Transformation</p>	<p>Culture and Behaviours</p>	<p>December 2023 saw a particular focus on the project milestone relating to integrating the Civility & Respect (C&R) programme into all SaTH Leadership Programmes, which is critical in supporting cultural transformation.</p> <p>By having the golden thread of C&R running in these programmes, cultural transformation will be supported. Review meetings took place for the content and delivery of SaTH 1-3 Leadership programmes, whilst C&R is already present in the STEP and SaTH 4 Leadership Programmes. From 2024 C&R will be included in the programme for new cohorts of SaTH 1-3 and galvanise with signposting to attend the full C&R session.</p> <p>Other areas of work included supporting the Research and Innovation and Finance Teams, with a Culture and Behavioural Session building on the C&R Sessions, in their away days. Planning is still ongoing for the Consultants Session due to site pressures this has been rescheduled for March 2024.</p>		

Appendix 2: Getting to Good Project Status Overview

<p>Finance & Resource</p>	<p>Performance & BI</p>	<p>The Performance and BI Team have continued to dedicate a large amount of resource to the report building element of the EPR programme. Internal report rebuilding is taking place for all reports or submissions that will cease to work once SemaHelix is replaced in April 2024, a significant piece of work to ensure that the Trust continues to meet all of its statutory submissions. Challenges exist where required data is not available in Careflow but the Performance & BI team are working with data warehouse colleagues to address any issues as they arise.</p> <p>As a result of this, a number of other planned BI activities have been delayed to ensure all reports are built ready for Careflow go-live.</p> <p>The Quality dashboard is now built within PowerBI and once sign off is received from the working group, will be live for users across the Trust. The next phase of the dashboard development will be confirmed once guidance is released to identify the key areas for inclusion.</p> <p>Operational planning is a priority piece of work and the Performance and BI Team are working with Divisions to ensure the activity plans are reflective of capacity and , triangulates with both finance and workforce plans.</p> <p>The Accident & Emergency PowerBI dashboard has been built and is now live across the Trust.</p> <p>The evidence for a number of successfully delivered milestones will be presented to the Getting to Good Assurance Group in January 2024 for approval, together with an exception report to delay the two milestones relating to benchmarking, from December 2023 to March 2024.</p>		
<p>Workforce Transformation</p>	<p>Future Workforce Design</p>	<p>A three-year workforce plan has been developed and articulates the new roles, international recruitment and development programmes required. In conjunction with this workforce plan a draft Recruitment Strategy and a newly revised People strategy for the Trust has been produced. The People Strategy will be taken to the next People Committee for approval in February 2024.</p> <p>The draft narrative for the 2024/25 Operational Plan has been produced which articulates service developments currently under review, initiatives to support retention and references the draft recruitment strategy and the various supply</p>		

Appendix 2: Getting to Good Project Status Overview

		approaches that will be undertaken in the next year. The first submission of the 2024/25 operational plan is in January 2024.		
Workforce Transformation	Training and Education	<p>All milestones of the Training and Education project have been delivered and project closure documentation has been approved at the Operational People Group on the 20th of December 2023. The project will be presented at the OGD Assurance meeting in January 2024, and will include evaluation feedback from training delegates.</p> <p>As of December 2023, the Trust's mandatory training compliance was at 92.18%, exceeding the 90% target. Appraisals was at 80.01% and advisory support continues to be provided.</p>		
Workforce Transformation	Equality, Diversity & Inclusion	<p>During December 2023, the Trust celebrated Disability History Month. The Equality, Diversity and Inclusion (EDI) team supported this with a library book display and advice and guidance provided to staff at both hospital sites. The Disability, Ability and Wellbeing Network (DAWN) meeting was open to all to share information on the support available.</p> <p>The Race & Equality Network and LGBTQIA+ Network meetings, were also held and included discussion on how improvements to the networks can be made, to make them more inclusive to staff.</p> <p>The Statutory Safety Update ED&I mandatory training Level 1 was delivered with high levels of engagement from the doctors in attendance.</p> <p>The ED&I team are currently completing the Equality, Diversity and Inclusion Annual report and Gender Pay report, with Trust board submission due in January 2024 and national submission in March 2024.</p>		
Workforce Transformation	Medical Staffing	<p>New rotas for Medicine and ENT went live on the 6th December 2023, providing both additional cover at night on the Medicine rota to improve patient flow and greater teaching opportunities for Junior Doctors within ENT.</p> <p>The bank and agency doctor exit strategy continues to maintain momentum and progress against the strategy is being monitored collaboratively with divisions. Agency doctor numbers have reduced from 82 to 64 and there has been an increase of bank doctors to 400.</p>		

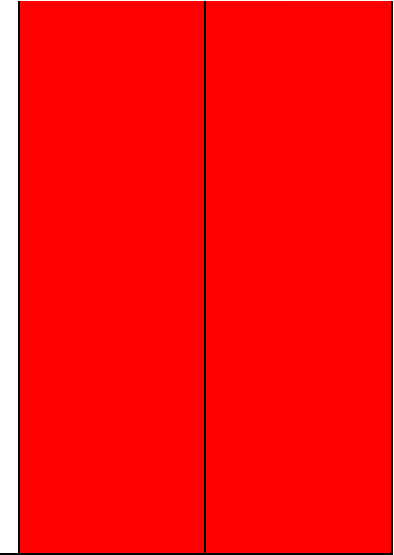
Appendix 2: Getting to Good Project Status Overview

The Medical People Services team are working closely with Agile to reduce the cost of agency doctors, as part of the Trust wide cost efficiency programme.

A recruitment trajectory is in place until August 2024, which captures the NHSE expansion posts. All Junior Doctor posts or equivalent have recruitment plans in place. Relevant stakeholders are updated weekly with the medical establishment document and bi-weekly team meetings.

Hosting rotas on Medic on Duty has enabled monitoring of compliance hours and the creation of action plans to address non-compliance issues. To maintain a consistent rota management approach a Rota Co-ordinator role has been appointed within Anaesthetics.

The overall project plan and milestones are currently being reviewed to reflect the most up to date strategic priorities of Medical People Services.



Appendix 3: Month on Month Status

G2G - Month on Month Progress Status		Dec-23											
Programme	Name	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23	Oct-23	Nov-23	Dec-23
Corporate Governance	Communications & Engagement	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
	Risk Management	Yellow	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Digital Transformation	Digital Infrastructure	Green	Green	Green	Yellow	Green	Green	Green	Green	Green	Green	Green	Green
Elective Recovery	Cancer Performance	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
	Diagnostics Recovery	Yellow	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
	Outpatient Transformation	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red
	Theatre Productivity	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red	Red
Maternity Transformation	Performance & BI	Green	Green	Yellow	Green	Red	Red	Red	Yellow	Green	Green	Green	Green
	Maternity Transformation	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Quality & Safety	Expansion of Medical Examiners Office	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Yellow	Yellow
	Delivery of the Quality Strategy	Yellow	Yellow	Yellow	Green	Red	Red	Red	Yellow	Green	Green	Green	Green
	Fundamentals in Care	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
	Learning from Deaths	Green	Green	Green	Yellow	Green	Green	Green	Green	Green	Green	Green	Green
	Levelling-up Clinical Standards	Green	Green	Yellow	Red	Red	Red	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow
	Quality & Regulatory Compliance	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow
	Quality Governance	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Urgent Care Improvement Programme	Flow Improvement Programme	Yellow	Yellow	Yellow	Green	Green	Green	Green	Green	Green	Green	Green	Green
	Emergency Care Transformation	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Workforce Transformation	Culture and Behaviours	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Yellow	Yellow
	Equality, Diversity & Inclusion	Green	Green	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow
	Medical Staffing	Green	Yellow	Yellow	Red	Red	Red	Red	Red	Red	Red	Red	Red
	Future Workforce Design	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
	Leadership Development Framework	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
	Recruitment & Retention	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow
Training and Education	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	