



Acceleration and Pace Highlight Report

Reporting Period: June - September 2018

- Organisational Development & Cultural Change
- IT, Infrastructure and Data Sharing
- Modernising Primary & Community Care
- Supporting Self-Management of Long Term Conditions and Building Community Capacity
- Strategic Commissioning
- Acute Care @ Home
- Efficient Resources Workstream

Highlight Report 5.0 V1.0

Overall Transformation Programme

The Aberdeen City Health and Social Care Partnership's Transformation Programme seeks to deliver the change that is required for the partnership to deliver its strategic priorities.

General Comments:

Activities and Projects within the programme are categorised as follows:

- TRANSFORMATIVE activities that are intended to change the current operating arrangements into new, different operating arrangements
- INNOVATIVE activities that will introduce a new way of working into the current operating system
- ENABLING activities and infrastructure which are essential to support innovation and transformation to happen.

Overall Programme Expenditure

Our transformation programme seeks to manage increasing demand, and where appropriate release savings, through the development of leaner and smarter systems, and most of our initial work and investment seeks to create the environment which will allow this to happen.

The table below sets out the current financial plan for our transformation programme. Note that there may be some delays in receiving information about the actual spend in the current year, due to a range of reasons including invoice processing, budget transfer schedules etc.

Programme Work stream	Investment/ Spend to 31/3/18	2018/19	Actual Spend (to date) 2018/19	Projected Spend 2019/20
Infrastructure, IT and Data Sharing	£1,200,987.39	£885,532.00	£3,643.09	£920,900.00
Acute Care @ Home	£36,555.86	£482,000.00	£124,228.78	£675,081.00
Supporting Management of Long Term Conditions and Building Community Capacity	£1,015,604.59	£1,203,631.50	£117,965.62	£1,147,680.00
Modernising Primary & Community Care	£1,897,415.24	£1,766,373.00	£346,259.04	£2,809,173.00
Culture and Organisational Change	£705,936.56	£112,400.00	£7,065.00	£120,400.00
Strategic Commissioning and Development of Social Care	£188,047.36	£485,685.00	£56,157.85	£512,312.00
Delayed Discharge	£1,375,616.36	£716,226.00	£141,051.09	£641,035.00
Integration and Transformation Programme Delivery	£1,314,412.25	£1,493,580.00	£285,926.85	£1,291,578.00

Abbreviations used throughout the report:

ACHSCP: Aberdeen City Health and Social Care Partnership

EPB: Executive Programme Board

MPCC: Modernising Primary & Community Care

SMCC: Supporting Self-Management of Long Term Conditions & Building Community Capacity

ODCC: Organisational Development & Cultural Change

IIDS: IT, Infrastructure and Data Sharing

SC: Strategic Commissioning

AC@H: Acute Care at Home

Organisational Development and Cultural Change

1. Programme Summary and Anticipated Benefits

This **ENABLING** work stream recognises that people are key to delivering our integration and transformation ambitions. The appropriate organisational culture is an essential core building block and we will be unable to successfully embed the transformation we week without changing the culture of our organisation and the people who make it.

The work will be aligned to the strategic priorities of the partnership and will work in a coordinated manner to ensure activities in this work stream support this new "Team Aberdeen" culture to be developed and support the development of people in the right places and with the right skills and attributes to support people in communities. The work stream also recognises the anxiety many of our staff will feel as we transition into our new partnership and integrate at every point of delivery, aligning with our values of caring, person centred and enabling. To learn from both host organisations and enable and support colleagues to be able to work effectively and productively within an integrated environment. Identifying areas of good practice and sharing learning and impact.

Key milestones deliverables	Planned Date	Achieved Date	Update	Comments
Anticipated milestone	s from previo	us Programn	ne Status Report:	
Training passport outline business case to be developed and agreed.	Sept 2018	Ongoing.	Multi-partner working group set up. Draft outline business case under discussion. Likely to be October before developed further due to staff capacity.	
Completion of 2nd iMatter Survey for all health and social care staff. Results of this survey are anticipated to be available in June 2018.	Sept 2018	Achieved.	The second survey has been completed by July 2018: Questionnaire was sent out. The response rate was 65% (10% less than previous year) and Employee Engagement Index score (EEI), which represents how engaged our employees are, was 78%. Overall employees rated working within the ACHSCP as 6.94 out of 10. All managers will receive their team and partnership reports and will create an action plan based on their results. The action plans are to be finalised and uploaded by October 2018.	
Updates on the modern apprenticeship and succession planning actions to be identified.	Sept 2018	Complete.	Apprenticeship Lead from NHSG gave an overview and presentation of the current landscape and options around delivery. Next steps to develop workforce plan and identify areas of workforce challenges.	

Planning for the next annual conference which will take place in early October 2018.	Sept 2018	Ongoing.	A workshop took place in July to finalise theme and format of conference. Main conference event will be held on 2nd October at Pittodrie with further activities taking place during the week at various venues across the city. Conference week theme is "Share, Discover and Grow".	
One of the Partnership's Development Facilitators are expected to be accredited as an Aston facilitator Other milestones deliv	Sept 2018	Complete.	Development Facilitator now accredited as Aston Facilitator.	
Systems Leadership Development	Ongoing	Aug 2018: Cohort 1 and 2 complete	Systems leadership 2-day programme for senior managers continues. Feedback has been very good. Cohort 2 is week beg. 20/08. Third is in December 2018. There will then be an open space event in February 2019 to bring all the delegates together to discuss shared learning / experiences.	
Development of Leadership and Management Training	August 2018	Complete	Course outcomes, agenda and materials have been developed and drafted. This half day session for new line managers will support development of staff in a new role and give activities to consider the type of leadership they have as an individual. An initial 'test' course will be run in the coming weeks before being opened up to NELC and its partners.	
Dignity at work survey delivered and reported	Sept 2018	Ongoing	The recommendations following the Dignity at Work results which were discussed at the last OD&CC meeting were approved by the Clinical Care and Governance Committee in June. A report is to be drafted to go to EPB in September 2018 to agree actions.	
OD and team interventions staff testimonials	July 2018	Complete.	Staff testimonials developed as part of the Aston team journey approach. This will be used to promote the OD team and tools to support staff and teams and increase effectiveness. These will be developed on an ongoing basis.	

Change	Impact		
Change	Budget/Resource	Schedule	

Healthy Working Lives	Reduction: £5000 to £2000 from original business case.	A revised business case will be submitted to ESPB in October to note this change and for approval of funding.

4. Issues and Opportunities New and Update

There is an opportunity to link up iMatter results / reports to offer support to managers from the OD team and wider NELC developments / training. This will support the workstream to make wider use of its resources across partners for the benefit of staff.

5. Major Risks New and Update

No major risks during current reporting period

6. Outlook and Next Period

Anticipated milestones for the coming period include:

- Training passport outline business case to be developed and agreed.
- Completion of Partnership iMatter report to Executive Programme Board (EPB) by September 2018.
- Completion of Dignity at Work report to EPB by September 2018.
- Workforce Planning Workshop with a discussion on need and areas of focus.
- Delivery of annual conference
- Leadership and Management Training Course delivered and evaluated.

IT, Infrastructure and Data Sharing

1. Programme Summary and Anticipated Benefits

This programme considers a range of enablers including Infrastructure, ICT, Technology Enabled Care and Data Sharing, which are significant complex activities that are essential for realising our integration and transformation ambitions.

There are clear links between this enabler work stream and delivery programmes including: the Modernising Primary and Community Care programme, including the provider of smart devices to support our workforce directly caring for people in our communities; the Self-Management and Building Community Capacity programme, including the provision of technology enabled care to support people in communities to effectively self manage their long term conditions.

Key milestones deliverables	Planned Date	Achieved Date	Update	Comments
Anticipated milestone	es from previ	ous Prograr	mme Status Report:	
A City Technology Enabled Care Framework approved.	Sept 2018	July 2018	TEC framework approved by ESPB July 2018	
Business Case developed for replacement for Care First.	Sept 2018		Further discovery and investigation have raised questions over the legal implications of not going to tender. Steer meeting scheduled to agree next steps.	
Project close Edison Replacement.	Sept 2018	August 2018	Project closed	Close meeting and lesson learned to be arranged
Partnership devices advisory paper	Sept 2018		On hold. Procurement departments from ACC and NHSG need further resource to investigate prototypes. Leasing investigated and not an option.	
Technology direction to collaboration with intranet diary's and file sharing etc.	Sept 2018		Federation Partnering Agreement NHSmail for Business with NHS mail & skype possible. Currently no technical resource at ACC available to investigate which may delay implementation.	Meeting planned with new Digial lead at ACC to discuss plans and supporting resource.

Timeline for implantation of GovRoam (a public sector wifi solution).	Sept 2018		WIFI Options & Timings GOVRoam There are three steps to activating GOVROAM for NHS at Marischal Step 1: Tests complete August 2018 to make GOVROAM available in Marischal. Step 2;:Current investigation by NHS team to check if NHS devices can authenticate via this method	
			GOVRoam – September 2018 Step3: Deploy software to NHS devices to access GOVRoam 1-2 days	
			Step 2 is crucial to move to step 3.	
Other milestones deli	vered			
GP wifi in city practices	Dec 2018	August 2018	Additional 107 wireless access point installed in GP practices across the city. Project complete earlier than expected.	

Change	Impact		
Change	Budget/Resource	Schedule	
N/A			

4. Issues and Opportunities News and Update

A preferred candidate has been identified for the vacant IT Project Manager post. Vacant Business Analyst – awaiting potential redeployment of council staff.

5. Major Risks New and Update

Staff shortage – delays in replacing IT project management and business analyst staff, are impacting on pace of delivering projects. This is being partially mitigated through the reprioritisation of projects and ongoing discussions with partners.

Access to technical resource ACC – technical resource funding is allocated to Aberdeen City Council. Access to these resources has been limited. Meeting arranged between Programme Sponsor and ACC Digital Chief Officer.

6. Outlook and Next Period

Anticipated milestones for the coming period include:

- Business Case developed for replacement for Care First.
- Project close GovRoam (a public sector wifi solution).
- Interim partnership intranet solution
- Partnership devices advisory paper.
- Technology direction to collaboration with intranet diary's and file sharing etc.

Modernising Primary & Community Care Programme

1. Programme Summary and Anticipated Benefits

This work stream includes reviewing and developing strategies for:

- Collaborative working, in locality hubs, with increased pharmacist provision, social work links and GP led beds to help to reduce admissions to hospital
- Locality hubs supported by the design of integrated health and care teams, and investigating new models such as Buurtzorg and Advanced Nurse Practitioners
- New service delivery models for primary care and modernising of infrastructure

A long-term initial blueprint and vision for reimagining primary and community care has been developed and this long-term plan was approved by IJB in January 2018. A Primary Care Improvement Plan has subsequently been developed to resource and drive delivery of changes required.

Key milestones deliverables	Planned Date	Achieved Date	Update	Comments
Anticipated milestone	es from previ	ous Prograr	nme Status Report:	I
West Visiting Evaluation Report (initial evaluation)	Sept 2018	Aug 18	Evaluation Report presented to Executive programme Board 8/8/18	Positive evaluation from all stakeholder perspectives – strong case for expansion. City Visiting service included within Primary Care Improvement Plan
Completion of caseload analysis for community nursing	Sept 2018	Sept 2018	Work ongoing to complete analysis of nursing activity. This has been made more difficult because of lack of a computerised notes system for community nursing	Will be completed on time
Other milestones deli	vered			
Development of Primary Care Improvement Plan (PCIP) in partnership with wide range of stakeholders	Sept 2018	Sept 2018	PCIP agreed by GP Sub Committee and LMC, and submitted to Scottish Government in July 2018, and presented for IJB approval at August meeting	
Development and progression of key project Business Cases through governance channels to support delivery of PCIP	Sept 2018	Sept 2018	Key Business Cases presented to IJB approval at August meeting: - MSK - Mental Health Hubs - Pharmacy	
Development of Action 15 Plan in partnership with a range of stakeholders	August 2018	August 208	Action 15 Plan submitted to Scottish Government in July 2018, and presented for IJB approval at August meeting	

Change	Impact		
Change	Budget/Resource	Schedule	
MP311 – MKS / Physios in GP Practices – new project aligned with implementation of PCIP	£1,185,000 over 4 years	Phased scale-up to full implementation over 4 years	
MP314 – Community Mental Health Hubs – recruitment of additional permanent roles to support implementation of Action 15 Plan	£2,515,000	Phased scale-up to full implementation over 4 years	
MP317 – Integrated Triage Ways of Working – change of name and budget. Previously called Transforming Urgent Care – GP Triage.	£408,000	Implementation planned for 2020-2022.	
MP318 – Unscheduled Visiting Service – change of name and budget. Previously called West Visits. Project aligned with implementation of PCIP.	£220,000	Phased scale-up to become city-wide visiting service	
MP321 – Phlebotomy – change of budget aligned with implementation of PCIP	£266,000	Phased implementation over 4 years.	
MP323 – Vaccinations Transformation – new Grampian- wide project in development – indicative budget allocation for Aberdeen City. Business Cases in development.	£765,000	Phased implementation of Vaccinations transformation over 4 years	

4. Issues and Opportunities New and Update

INCA Update – Risk reported in June became an Issue - see below. Teams have experienced difficulties in retaining staff. A review of the project was undertaken by the project team and a decision was taken to consolidate all remaining staff in the Peterculter area.

5. Major Risks

New and Update

June 2018 - There are risks associated with the INCA / Buurtzorg project. There is a potential of being unable to recruit to vacant posts. The project team and INCA teams are regularly reviewing staffing and case load management.

Sept 2018 Update – A project review has taken place resulting in the consolidation of project staff in the Peterculter area. This review is also looking at elements of the model which have been problematic – such as the self-managing team element.

6. Outlook and Next Period

Anticipated milestones for next reporting period include:

- Approval of Primary Care Improvement Plan and underpinning business cases.
- Recruitment process nearing conclusion for filling roles needed to implement year 1 across a number of projects in the Primary Care Improvement Plan

Supporting Self-Management of Long Term Conditions and Building Community Capacity

1. Programme Summary and Anticipated Benefits

This work stream recognises that pressures on mainstream primary and community care services cannot be reduced through a "more of the same" approach. The work stream seeks to shift our relationship with communities to enable a more co-productive approach and to nudge the culture towards being more empowered and responsible in relation to ourselves and each other. A number of referrals and appointments in primary care currently relate to social issues and low level anxiety/depression, and evidence exists that this can be reduced through "non-clinical" support and link resources, embedded in the community and our locality teams.

To deliver population level impact and change we need to go beyond small tests of change and develop at scale activities.

Key milestones deliverables	Planned Date	Achieved Date	Update	Comments
Anticipated milestone	es from previ	ous Prograr	nme Status Report:	
Community Links Development Manager in post	September 2018	1 st June 2018	Postholder is now in post and good progress being made with project.	
Phase one roll out of link practitioners in practices and start date agreed	September 2018	23 rd July 2018	4 Senior Link Practitioners and 7 Primary Link Practitioners now in post covering 18 GP practices. 3-week induction taken place and referrals from GPs to commence in September 2018	Significant amount of work has been carried out in relation to information governance and data sharing agreements in line with GDPR Legislation
Social Transport demand responsive transport and booking office review completed with initial findings and recommendations.	September 2018		Business Case for interim solution going to IJB in August 2018.	
Draft Living and Ageing Well in Aberdeen framework developed.	September 2018		Three workshops planned for rapid development and completion of framework	
Other milestones delivered				
House of Care Project Manager Recruitment	July 2018	July 2018	Successful recruitment and preferred candidate will commence in Sept 2018 to support the 3 practices in the city (Scotstown, Gilbert Road and Kincorth/Torry)	

Link Practitioner Phase 2 recruitment timescales agreed	August 2018	August 2018	Link Practitioner Recruitment for phase 2 implementation will commence in late October/ early November 2018.	
Community Chaplaincy Listening Service Business Case Developed	September 2018	Septemb er 2018	Business Case developed to provide capacity to support planned growth of number of volunteer listeners in the city. This project is linked to the Primary Care Improvement Plan	
National Service Directory	August 2018		Project Team established and ongoing work with NHS 24 for city content to go live in January 2019	
Community Builder	August 2018		Community Builder recruitment complete and postholder now in post. Initial audit of community started.	

Change	Impact		
Change	Budget/Resource	Schedule	
Remove budget allocated to support GP practices to become link practices.	£300,000	No impact on schedule	

4. Issues and Opportunities New and Update

N/A

5. Major Risks New and Update

No major risks identified in current period.

6. Outlook and Next Period

Anticipated milestones for the coming period include:

- Draft Self-Management Framework in place
- Draft Living and Aging Well Framework complete
- Link practitioner's phase two recruitment commenced

- National Service Directory 'live' in Aberdeen City
 Community Chaplaincy Listening Service project progressing
 Silver City Business Case

Strategic Commissioning

1. Programme Summary and Anticipated Benefits

The Partnership was required by the Public Bodies legislation to produce a Strategic Commissioning Plan/Strategic Plan and this was published on our 'Go live' date in 2016.

Aligned to this will be a Commissioning Implementation Plan which will translate the Strategic Plan's ambitions and priorities into commissioning intentions for the next six years and include a Market Facilitation Statement which will outline how the partnership can best support the local health and social care market.

The Strategic Commissioning Programme Board has now met and relevant workstreams are being formed.

Anticipated benefits include contractual arrangements that are fit for purpose; more appropriate care models; improved quality of experiences and outcomes for individuals, particularly in terms of being supported to remain safely at home for longer; and improved efficiency.

Key milestones deliverables	Planned Date	Achieved Date	Update	Comments	
Anticipated milestones from previous Programme Status Report:					
Identification of priority workstreams	Sept 2018	Ongoing	Several areas of work have been identified as priority such as the implementation plan of the commissioning strategy (and market facilitation statement), mental health strategy development, Bon Accord Care contract review and LD action plan	Priorities are considered by the board at each meeting and actioned appropriately.	

To review BAC service delivery and 5 year contract (ALEO) by March 2019 (2019 - 2024)	March 2019	March 2019	July/Aug 2018 - half day workshops with senior team to discuss and agree overall approach To align BAC 5 year plan to our strategic plan and intention. Agreed the new plan would be outcome focused and less time/tasked focused Aug 2018 - Alison Watson from CPS to draft outline contract based on high level outcomes Sept 2018 - five workshops for all service delivery pathways between the partnership identifying clients and then setting them into BAC services- based on outline contract. High level service specification. (QA)	Report to go to IJB for approval in January 2019
Development of Market Facilitation Working Group, which will be charged to engage with and support the market to engage with and support the delivery of our Commissioning Plan and draft plan complete.	Sept 2018	Sept 2018	Refreshed Market Facilitation Group to develop TOR, agree membership and project plan/actions – meeting arranged mid-Sept	
Report to IJB on review of properties used for delivery of social care.	Sept 2018		Work is ongoing	
Care At Home contract renewal	March 2019	March 2019	Due to expire March 2019. Currently reviewing current contracts. Understanding what the requirements of the services is currently being reviewed	
Mental Health Strategy development	Sept 2018	Dec 2018	Oct 2018 - CPA Management Group meeting to consult and gain input into the strategy Dec 2018 - Final draft to go to IJB for approval	
Other milestones delivered				
Learning Disability Strategy Action Plan	Sept 2018	Sept 2018	July 2018 - Action planning workshops with colleagues, professionals, and Aberdeen citizens.	LD Strategy launched during LD week in May 2018.

Change	Impact		
	Budget/Resource	Schedule	

4. Issues and Opportunities New and Update

This is an extremely broad and complex workstream and it is taking time to form and identify priorities to progress.

5. Major Risks

New and Update

The BAC care review is a high risk however the project is on track within project timelines and tolerances.

6. Outlook and Next Period

Anticipated milestones for next reporting period include:

- Annual Review of the ASHSCP Commissioning strategy to be considered by Audit and Performance Systems Committee in November. IJB approval in the December
- Implementation of the ACHSCP Commissioning Strategy and Action Plan to finalise the contracts register and commissioning workplan to ensure new services are in place in a timely manner. Working with commissioning and contracts team and partners to do this.
- Mental health strategy to be finalised and approved by IJB in December 2018.
- 'Contributing to you care' workstream to develop new policy, guidance, and criteria for means tested charging of services.
- Report to IJB on review of properties used for delivery of social care.

Acute Care @ Home

1. Programme Summary and Anticipated Benefits

Our Acute Care at Home service will provide, for a limited time period, active treatment by appropriate professionals, in the individual's home, for condition(s) that would otherwise require acute hospital in-patient care.

The development of such a service fits with our ambition for our strategic intentions to have a greater preventative impact especially since we know that prolonged length of stay for the frail elderly and those with long term conditions can lead to a higher risk of acquired infection and other complications such as loss of confidence, function and social networks.

Increasingly, given the choice, individuals and their carers show a preference for receiving care at home, when they have confidence that it will be provided by skilled practitioners working collaboratively to ensure continuity of care.

2. Key milestones during reporting period

Key milestones deliverables	Planned Date	Achieved Date	Update	Comments
Anticipated milestone	es from previ	ous Progran	nme Status Report:	
Performance monitoring report on first two months showing incremental expansion of service (June 2018)	Sept 2018	Sept 2018	PDSA cycle tests of change have been run to test the processes of ACH approach. As improvements have been made and competencies of staff have been assured an expanded but still modest caseload has been serviced.	The caseload carried has been affected by low admission rates to GAU ward in ARI throughout the reporting period – this has meant a limited number of appropriate patients. This will change with the onset of winter.
Planning begun for Phase 2 expansion (June 2018)	Sept 2018	Sept 2018	Planning at advanced stage. Expansion in hours of operation of service from 8am – 4pm to 8am – 11pm (Monday to Friday) will take effect from mid-September. Further expansion of service to 7-day service being planned and likely to take effect upon recruitment of additional nurses by year end.	
Other milestones delivered				

3. Change Control

Change	Impact		
Change	Budget/Resource	Schedule	
No changes in current reporting period.			

4. Issues and Opportunities New and Update

Ongoing staffing challenges related to recruitment of staff and staff absence has impacted on the progress of the operational delivery of the service. From September 2018, the clinical team is fully recruited to. The team still have only 5 clinical sessions of Consultant Geriatrician time aligned which to this point has limited ability to provide the alternative to admission element of the service. The limited nursing input to the team has also limited the hours of operation which currently runs from Monday to Friday 8am-4pm.

In the last reporting period strong links have been made with the Community Links Coordinator team which along with project budget reprofiling will allow us to provide an expanded service covering 7 days – Monday to Friday 8am – 11pm from September onwards and Saturday and Sunday 8am – 4pm on the recruitment of two additional nurses within the Acute Care at Home team.

5. Major Risks

New and Update

No major risks.

6. Outlook and Next Period

Anticipated milestones for next reporting period include:

Performance monitoring report on previous quarter showing continued incremental expansion of service

Efficient Resources Workstream

1. Programme Summary and Anticipated Benefits

In line with the Partnership's Medium-Term Financial Strategy (approved by IJB on 13 February 2018), a number of themed working groups have now been established with specific savings targets linked to each of these work streams.

These work streams would report on progress on a monthly basis through the Transformation Programme Management Governance Structure. A lead officer, responsible for reporting to the Programme Boards, has been identified for each work stream.

The anticipated benefits are cashable financial savings:

Work Stream	Savings Target				
	2018/19 £'000	2019/20 £'000	2020/21 £'000	2021/22 £'000	2022/23 £'000
Theme 1: review of pricing/ charging policies across the partnership	0	(300)	(300)	(300)	(300)
Theme 2: Review processes and ensure that these are streamlined and efficient: Direct Payments Cards; Financial Assessment Processes	(250)	(250)	(250)	(250)	(250)
Theme 3: Review of out of hours service	(400)	(100)	(100)	(100)	(100)
Theme 4: Review out of area placements	0	0	(500)	(500)	(500)
Theme 5: Bed Base Review	0	0	tbd	tbd	tbd
Theme 7: 3 rd Party Spend	(250)	(500)	(500)	(500)	(500)
Theme 8: Prescribing/ Medicine Management	(200)	(1,000)	(1,000)	(1,000)	(1,000)
Theme 9: Service Review	0	(2,692)	(2,460)	(1,985)	(2,274)

Key milestones deliverables	Planned Date	Achieved Date	Update	Comments
Groups formed and Terms of Reference for each group in place	1/5/18	July 2018	Terms of Reference for all groups now approved	
Service Review Methodology developed	1/7/18	June 2018	Service Review methodology developed and approved by EPB. This process will be refined as required on implementation	

Service Review of first service carried out	September 2018	ongoing	Learning Disability identified as first service for service review. Planning work and field work took place during July – August 2018. Preparation now underway for presentation to Service Review Board which will	
			Review Board which will be scheduled in	
			September 2018.	

Change	Impact		
Change	Budget/Resource	Schedule	
No changes in current reporting period.			

4. Issues and Opportunities New and Update

Additional resource will be required to deliver against some of the workstream activities (spend to save.)

5. Major Risks

New and Update

No major risks during current reporting period.

6. Outlook and Next Period

Anticipated milestones for next reporting period include:

- First Service Review Board complete.
- Service review programme developed and approved.
- Implementation plans for all workstreams developed.

Document Location

This document is only valid on the day it was printed and the electronic version is located with the document owner (Lead Transformation Manager)

Document Status

The current status for this document is *Final*

Distribution

This document has been distributed as follows

Name	Responsibility	Date of	Version
		issue	
APS consultation list	S Gibbon	24/8/18	V5.0

Purpose

The purpose of a Highlight Report is to provide the Integration Joint Board/ Audit and Performance Systems Committee/ Executive Programme Board with a summary of the stage status at intervals defined by the board. The board will use the report to monitor stage and project progress. The Lead Transformation Manager (who normally produces the report) also uses the report to advise the Project Board of any potential problems or areas where the Board could help.

Quality criteria

- Accurate reflection of checkpoint information
- Accurate summary of Risk & Issue Logs
- Accurate summary of plan status
- Highlighting any potential problem areas