Whittington Health
Trust Board – 22nd February 2012

QIPP Board – Update

1.0   Introduction
This is the first quarterly report to the Trust Board giving an update on the Whittington Health Quality, Innovation, Productivity and Prevention (QIPP) Board.

The role of the QIPP Board is to monitor Whittington Health's overall strategic work programme delivered through a portfolio of 12 programmes of work:

- Strategy, engagement and business development
- CIP
- Clinical Transformation
- Foundation Trust Application
- Workforce strategy
- Estates Strategy
- IT Strategy
- Integrated Corporate Governance
- Nursing Midwifery and AHP Strategy
- Quality Strategy
- Safety and Patient Experience
- UCLP programme.

The QIPP Board meets monthly, is supported by a Programme Management Office and has the following membership:

- Chief Executive (Chair)
- Director of Strategy
- Chief Operating Officer
- Director of Planning and Programmes
- Director of Finance
- Director of People
- Director of Estates and Facilities
- Director of IT
- Director of Nursing and Patient Experience
- Medical Director
- Medical Director Integrated Care
- Chief Information Officer
- Director of Medical Education
- Chair of Medical Committee
- Divisional Director ICAM
- Divisional Director SCD
- Divisional Director WCF
- Directors of Operation ICAM
- Directors of Operation SCD
- Directors of Operation WCF
- Head of Pharmacy

2.0   Performance Monitoring
Each month the QIPP Board receives a monitoring report from each of the projects identified to date within the QIPP programmes, giving an update on progress and identifying risks to delivery. A rolling programme of project presentations has been

established to enable more extensive consideration of project progress. These presentations are led by the individual project leads.

A rolling dashboard approach to performance monitoring has been established, based on risks to delivery. Programme leads determine the RAG rating based on progress against project timelines and wider intelligence against dependencies. The following table shows projects currently monitored by the QIPP Board and the RAG rating for each over the period beginning December 2011 to beginning of February 2012.

		QIPP Board Project Performance Dashboard	2011 DEC	2012 JAN	2012 FEB
1	SEBD1	FT Communications and Engagement	Amber	Green	Green
2	SEBD2	Private Patients	Green	Green	Green
3	SEBD3	Whittington health 5 year strategy	Green	Red	Amber
4	SEBD4	WH website and patient information	Green	Red	Amber
5	CT1	Ambulatory Emergency Care	Amber	Amber	Amber
6	CT2	Diabetes Intermediate Care	Green	Green	Green
7	CT3	Chronic Pain Management	Red	Red	Green
8	CT4	COPD	Green	Amber	Amber
9	CT5	Heart Failure	Green	Green	Green
10	CT6	End of life care			Amber
11	CT7	Transformation of care for older people	Amber	Amber	Amber
12	CT8	Health Promotion Strategy	Amber	Green	Green
13	CT9	Fractured Neck of Femur	Red	Amber	Red
14	CT10	Developing Community Gynaecology/sexual health services		Amber	Amber
15	CT11	Access/triage/referral management for Children's service & pathway development		Amber	Amber
16	CT12	Care from birth to school' pathway		Red	Red
17	FT1	Developing the FT Membership	Green	Green	Green
18	FT2	Developing the IBP	Amber	Amber	Amber
19	FT3	Developing the LTFM	Red	Red	Red
20	WS1	Develop the Workforce Strategy	Amber	Amber	Amber
21	WS2	Equality and Diversity project	Amber	Amber	Amber
22	WS3	E-Learning	Green	Green	Green
23	ES1	Estate Strategy formulation and transformation	Red	Red	Red
24	ES2	Enacting the work of the BTA	Red	Red	Red
25	IT1	EPR Procurement and Implementation	Green	Red	Red
26	IT2	RIS\PACS\Image Archive Procurement and Implementation	Green	Amber	Amber
27	IT3	Develop an integrated WH ICO IT Infrastructure	Green	Amber	Amber
28	IT4	IT Strategy	Green	Amber	Amber
29	IT5	Electronic Communications with GPs		Red	Red
30	NS1	Nursing Midwifery and AHP Strategy	Amber	Amber	Amber
31	Q1	Quality Strategy	Green	Green	Green
32	Q2	Quality Account	Green	Green	Green
33	Q3	Medical Revalidation	Amber		*To follow*
34	S1	Datix Development	Amber	Amber	Amber
35	S2	CQC Regulation System	Amber	Amber	Amber
36	PE1	Releasing time to care (Productive Series)			*Initiation Stage*
37	PE2	Patient Experience Strategy	Amber	Amber	Amber
38	PE3	Outpatients	Amber	Amber	

3.0   Project performance review - exception reports (red rated)

CT9: Fractured Neck of Femur/Enhanced Recovery
The aim of this project is to reduce length of stay and enhance recovery within orthopaedics. Key to project delivery are additional resources for an ortho-geriatrician which have been identified and agreed. The red rating relates to delays in implementing this resource due to a delay in the locum start date, combined with consultant annual leave.

CT12: Care from birth to school' pathway
This project contains a number of strands of work to develop services in line with a national agenda:
- Health Visiting Early Implementer's programme (EIS)
- Preparing for Birth and Beyond in Islington and Haringey.
- 2 – 2 ½ year review.
- Developing the antenatal to school nurse pathway

This project is red rated due to the current level of Health Visitor (HV) vacancies, combined with recently published commissioner HV expansion targets. A range of recruitment and retention plans are being developed and implemented.

FT3: Long Term Financial Model (LTFM)
The delivery of the LTFM has been red rated due to the risks associated with the identification and delivery of CIP; the uncertainty surrounding the 2012/13 contract; and the delay in the modelling of I&E changes in future years.

These concerns are being addressed through engagement with commissioners to agree the 2012/13 payment mechanism, developing a five year savings programme through the CIP board; and the commencement of I&E modelling on a service by service basis.

ES1: Estate Strategy formulation and transformation
Work has progressed on the Estates strategy discussion document and the Trust Board has received this at its February seminar. The next stage of work will be the appointment of external advisors to test and refine some of the critical aspects that underpin the viability of the site development options.
The project is red rated due to two risk areas:
- Potential lack of collective consensus leading to a lack of corporate will to drive through some of the more contentious or difficult decisions – being addressed through the creation of "buy in" and support from CEO and key leaders
- Changing of internal priorities or the external environment – being addressed through ensuring that the strategy is flexible and versatile enough to accommodate necessary changes, as well as key leaders understanding the direction of the Estates strategy, enabling them influence within it.

ES2: Enacting the work of the Business Transfer Agreement (BTA)
Delays with enacting the work of the BTA (relating to the transfer of community assets) continue to be of significant concern with the following risks identified:
- Lack of robust information from NCL – the deadline for completion of financial data has been extended, this has yet to be formally agreed by NCL, but NCL senior managers are aware and working to the revised timetable.

- Changes to DoH guidance or lack of clarity of current guidance – a meeting has taken place with Pamela Chapman Head of Strategic Asset Management at the DoH.
- Lack of commitment to provide data from PCT as it nears abolition - all measures to drive out information have been adopted, including escalation to NHSL, legal to legal letters and meetings with DoH.
- Quantum of funding insufficient to manage properties to required standards - benchmark market price have been obtained are to be analysed.

IT1: Electronic Patient Record (EPR) Procurement and Implementation

An Invitation to Tender (ITT) has been issued to suppliers on 13th January 2012, with the tender evaluation due to be completed in February, with the award of contract scheduled for March 2012.

The key risk associated with this project is the level of funding required to deliver the EPR. A lack of external funding will require the identification of funds internally adding to the size of the CIP. A bid for £7.1m capital funding was submitted to NHS London 06.01.12 with NCL Cluster approval. The Trust is awaiting written confirmation of the sum it will be awarded with early indications being £5m.

IT5: Electronic Communications with GPs

Improving electronic communication with GPs is a 2011/12 CQUIN and has required changes in working practices across inpatients, day cases and outpatients. The latest stage in this project has been red rated due to the significant changes in working practices required for surgery day cases and maternity who are paper based, and for medical secretaries to e-mail rather than post.

Focused work has taken place with day surgery services to enable a go live date of the end of January 2012. In addition the IT team are liaising with NCL to establish a comprehensive list of secure GP NHS mail addresses.

4.0   Actions

The Trust Board is asked to:
- Consider whether the report provides sufficient detail for Board information and assurance of the progress in implementing Trust strategy

- Discuss any areas of concern