

# London System Transition Programme T4 Handover and Closure

## Local Programme Plan – *NHS South West London*

**Author:** Jo Silcock

**Date:** 30 May 2012

**Version:** 0.2

**DRAFT**

# Approvals and Reviews

The table below summarises the review and approval trail for this product.

Version No.	Details	Reviewer (s) and Date	Signed-off by and Date
0.1	NHS South West London local submission	Penny Taylor	
0.2	Finance section added, general update	Jo Silcock 30 May 2012	

# Key Terminology

Terminology	Definition & Use in the T4 Handover and Closure Programme
National	Refers to any direction, activities, templates or guidelines provided nationally for England – this may be from the DH, ALBs or other national organisations.
Regional	Refers to any pan-London direction, activities, templates or guidelines. The T4 Handover & Closure Programme Team is a regional function within the pan-London System Transition Programme.
Local	Refers to Handover & Closure programme organisation-level – this is the SHA, POD & Deanery and PCT clusters. Hosted bodies will typically be managed through the local organisation’s programme.
Sub-local	Refers to the range of statutory organisations within the defined local organisation – for example, a single PCT cluster (local) will be composed of a number of individual PCTs (sub-local - with statutory responsibilities until end of March 2013) and hosted bodies.
PLG or working group	Professional Leadership Group (PLG) or other working group which is responsible for confirming the in-scope activities of each Handover & Closure workstream, and/or provides regional direction on content, methodologies and issue resolution.
SME	Subject matter expert (typically also identified as a ‘Strategic Lead’).

# Purpose, Reporting and Monitoring

## Purpose

DH have advised that each of the 33 London organisations will be expected to populate a DH Transfer Order which will detail all people, assets and liabilities that are planned to transfer on 31st March 2013, including the planned destination (e.g. receiving organisation or successor organisation). This will be the key Handover and Closure product – it will be defined nationally, supported and assured regionally (London-level) and delivered locally (organisation-level). The order will be informed by the work defined in the 8 London workstreams - a Workstream Scope document has been developed for each to confirm the subject matter scope of the workstream. This is expected to change as new national guidance emerges or additional activities are identified.

Local organisations will be responsible for delivery of the scope of the workstreams, including any local governance arrangements deemed necessary and will be expected to resource the work locally. Some resource may be provided by the Handover & Closure Programme on a regional basis (pan-London), for specific work packages or to support specific PLG or working group activities, but this will be decided on a case-by-case basis.

This document is intended to provide a baseline Programme Plan for each local organisation to describe their local delivery arrangements. It includes pre-populated information on national & regional planning assumptions, regional governance, roles and responsibilities and national & regional milestones.

## Reporting and Monitoring

1. Each organisation's Handover & Closure Lead will be expected to report monthly on summary progress with each workstream, key risks and issues for raising at regional level. A summary template has been provided and will need to include an assessment of progress against the 8 workstream checklists on a periodic basis (to be defined). These may also be used at the sub-local level by organisations (e.g. at PCT-level).
2. The central Handover & Closure Programme team will help organisations to work through issues identified, making the right links with PLGs, SMEs and national organisations/direction and will also monitor and assure progress with the agreed activities in the checklists.
3. The workstream checklists are expected to be maintained locally and made available to the Handover & Closure Programme on request, so key activity can be tracked.

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## 1.1 Regional Context

NHS London has a responsibility not only to ensure its own closure but also to be assured that necessary processes are in hand regarding the closure of other NHS organisations in London in April 2013 (specifically, PCT clusters, individual PCTs and the hosted organisations).

All assets and responsibilities will be classified in one of three ways during the programme:

1. Those that are known to close, be disposed of, or to be abolished by April 2013;
2. Those that are known to be transferred to a new or continuing organisation by April 2013; and
3. Those for which the destination is unknown at any given time and therefore need to be investigated in order to be categorised as either a) or b) above.

On 9<sup>th</sup> February 2012, the System Transition Group approved proposals to mobilise the London Handover and Closure Programme, including development of the scope of eight workstreams with specific activities to be addressed. A version was discussed at the Audit Committee on 21<sup>st</sup> February 2012, which endorsed the proposals and provided helpful guidance on future review routes. The expanded scope and revised delivery arrangements were again submitted to the System Transition Group meeting on 8<sup>th</sup> March 2012.

On 5<sup>th</sup> April 2012, the System Transition Group approved that the scope and methodology (where appropriate) to deliver each workstream should be signed-off by relevant strategic leads and/or established professional groups. This will help to provide assurance on the scope and approach to each workstream. It also agreed that information and progress updates on local delivery would be provided via the Handover and Closure Leads to the central programme team.

The programme will align and consolidate some aspects of the existing T4 Enabling Programme ('Migrate SHA and Cluster Functions, Posts and People') but will not address people or HR (as these are covered in the People Transition and Organisation Design enabler). The programme is distinguished from the other system transition priorities T1, 2, 3 and 5 in that it will undertake handover and closure activities as opposed to the creation of new organisations. Importantly, the programme will not include business as usual (BAU) activities undertaken within the existing NHS London and PCT functions.

# 1.2 Regional and Local Objectives

## REGIONAL OBJECTIVES

The aim of the pan-London T4 Handover and Closure Programme is for the SHA to ensure, for relevant NHS organisations:

1. The proper and timely termination of their functions and responsibilities that are not continuing beyond disestablishment of the statutory bodies in April 2013; and
2. The safe transfer of all relevant contracts, assets (including estates, physical IT infrastructure), records and organisational knowledge and memory from these NHS organisations to those organisations (existing and new) taking on their functions and responsibilities in future.

## LOCAL OBJECTIVES

1. To work with NHS London, the 6 local CCGs, the 6 Local Authorities in Southwest London and colleagues in South East London to review current arrangements and enable the safe transfer of relevant functions to new commissioning organisations.
2. To support staff working in all areas in South West London to understand the co dependencies between workstreams of the Transition Programme to ensure comprehensive delivery of the elements of handover and closure.

# 1.3 Regional and Local Roles and Responsibilities

London's Senders	5 x PCT clusters & NHS London (including POD/Deanery and hosted bodies)
Role	<ul style="list-style-type: none"> <li>To lead local (organisation-specific) Handover &amp; Closure programme delivery ,including facilitating transfer to receiving organisations.</li> <li>To report to central programme as required, escalating programme risks and issues accordingly.</li> <li>To ensure use of, and maintenance of data held in tracker tool(s).</li> <li>To liaise with local audit and assurance mechanisms as appropriate.</li> <li>To engage local stakeholders in the programme as necessary (sending and receiving organisations).</li> </ul>
Processes	<ul style="list-style-type: none"> <li>To make decisions or carry out activity 'once' (where sensible )or use one 'methodology/approach' across all organisations . To obtain clarity on where decisions or approaches will be determined Nationally and the impact of this on existing workstream plans.</li> <li>Tracking destination of functions, assets, records and other items through transition to either handover or closure</li> <li>Handover and sign-off to receiving organisations</li> <li>Handover and sign-off to (national?) successor organisations</li> <li>Confirmation of disposal of assets or items.</li> </ul>
Products	<ul style="list-style-type: none"> <li>How to Guides</li> <li>Workstream checklists</li> <li>Oversight and assurance mechanisms</li> </ul>
Oversight & governance	<ul style="list-style-type: none"> <li>System Transition Group</li> <li>Pan-London professional working groups (PLGs or similar)</li> <li>Audit Committee chairs and committees</li> <li>Planning assumption that it is the SHAs role to oversee and assure the closedown activity (NOTE - <i>this is distinct from the responsibilities of each statutory organisation and their Boards.</i>)</li> </ul>
Resourcing and support	<ul style="list-style-type: none"> <li>Handover and Closure Programme Team (centrally resourced at SHA) to support areas where activity is unclear and to facilitate working between stakeholders and strategic leads .</li> <li>Strategic Leads – SHA and PCT (some identified already)</li> <li>Local (organisation-specific) Handover &amp; Closure Leads</li> <li>Assumes a locally resourced delivery chain.</li> </ul>



London's Receivers	32 x CCGs, 3 x CSSs and 3 x LETBs, 33 x Local Authorities
Role	<ul style="list-style-type: none"> <li>To confirm requirements for use of exiting sending organisations' functions, assets, records and other items (likely to be dictated largely by National guidelines).</li> <li>To receive, accept and sign-off on the transfer of agreed functions, assets, records and other items (statutory and / or operational)</li> </ul>
Processes	<ul style="list-style-type: none"> <li>Receipt and sign-off process (to be developed and may be subject to National guidance and development of successor organisations)</li> </ul>
Products	<ul style="list-style-type: none"> <li>Signed-off handover / transfer packages of functions, assets , records and other items</li> </ul>
Oversight & governance	<ul style="list-style-type: none"> <li>TBC</li> </ul>
Resourcing and support	<ul style="list-style-type: none"> <li>Assume no dedicated Handover &amp; Closure transition resources in CCGs, CSSs &amp; LETBs</li> </ul>

# 2.1 Finance Closure Workstream - Draft

30<sup>th</sup> May 2012

## Local Scope and Products

Closure - 2012/13 Annual Accounts

### Handover

- Transfer of balance sheets
- Splitting of Budgets
- Cleansing Fixed Asset registers and clarity on transferees.
- Capital Investment pipeline
- Legal claims and liabilities

## National and Regional Planning Assumptions

- To be pre-populated by the regional Handover & Closure Programme

## Current status

Red

- The current priority is the closure of 2011/12 accounts.

## Governance

- SRO and member of PLG - J Robinson,
- Finance Project Lead - T Thomas
- Reports into Transition Working Group monthly.
- Progress reports provided to Transition Executive Group and into Cluster Management Team and then into SWL Joint Boards of PCTs .
- Add. assurance provided by Joint PCT Audit Committee.
- Handover & Closure Lead - member of the Transition Working Group and attends Transition Executive Group PLG representative...

## Delivery Resources

- The existing finance department will complete the handover and closure project.
- Successful Transition Fund bids
  - 3mth accounting team to close 2012/13 accounts
  - 3 wte finance team to support IT & Estates asset transfer

## Key Risks and Issues

1. There is no detailed Finance Handover and Closure Plan. **Mitigation** - The SEL and SWL Cluster Finance Directors have agreed a joint south London workshop will be held in July 2012 that will consider all closure activities and develop an action plan to address these. This action plan will be in place by the end of July 2012.
2. Additional resources will be required to complete the closure of the 2012/13 accounts after 1<sup>st</sup> April 2013. **Mitigation** - This is subject to the DH decision regarding the creation of a Residual functions organisation. A successful bid to the 1% Transition Fund bid has provided funding for 3 months of the accounting team to close the accounts.
3. During the delay to produce the Finance Workstream Plan, the IT and Estates Workstream may also be delayed. **Mitigation** – A successful bid to the 1% Transition fund will provide 3 WTE finance staff to support the asset transfer programmes.

## Key Dependencies

- Development and authorisation of CCGs
- Establishment of other new receiver organisations
- Contract Transition.

## 2.2 Contract Novation Workstream

30<sup>th</sup> May 2012

### Local Scope and Products

- Validate the current contract register 2012/13 to ensure comprehensive coverage (Healthcare and non-Healthcare), confirming the splits in contracts with CCGs, public health, and the LSCG prior to transfer/novation with Borough Management Teams , Cluster colleagues and the Acute Commissioning Unit. 30 September 2012
- Produce list of contracts subject to transfer agreements and those for novation.
- Stabilise healthcare contracts by 30 September 2012, ensuring risks are mitigated in time for transfer or novation.
- Complete risk assessments of non-healthcare contracts by June 2012 with completion of stabilisation for all non healthcare contracts by 30 September 2012.
- Produce Legacy Pack of all contracts and associated documents by receiving organisation and contract. 31 January 2013
- Produce Legacy Document articulating the contract management arrangements for each receiver organisation. 31 January 2013
- Agree method of handover with each receiving organisation where possible and by when. 1 March 2013
- Establish a local panel to monitor and manage derogation requests by April 2012.
- NHS SWL supports local teams to complete contract extensions and tenders as appropriate until 31 March 2013.
- Work with Human Resources to produce key handover ( exit) policy and recording tools.

### National and Regional Planning Assumptions

- **To be pre-populated by the regional Handover & Closure Programme**

### Current status

Green

- This workstream has been running since November 2011, detailed plans are in place and reporting arrangements are familiar to all leads.

### Governance

- SRO and member of PLG J Robinson, Project Lead P Taylor.
- Reports into Transition Working Group monthly.
- Progress reports provided to Transition Executive Group and into Cluster Management Team and then into SWL Joint Boards of PCTs .
- Additional assurance provided by Joint PCT Audit Committee.
- Handover Closure Lead - member of the Transition Working Group and attends Transition Executive Group PLG representative...

### Delivery Resources

The delivery of this workstream has been utilising existing resources but sharing expertise across the cluster. The need for backfill has arisen stage 1 but it is not envisaged that further staff will be needed, however this is dependent on the People Transition Programme.

### Key Risks and Issues

1. Capacity and capability is the most significant risk as a result of staff leaving or moving to new roles . **Mitigation** - Development of the handover tool with HR and establishing this as policy to ensure historical records are not lost.
2. Lack of guidance regarding the destination of some services and the shape of service by receiver organisation. **Mitigation** - Establish the detail of the current services in preparation for the detailed guidance having alerted colleagues in NHS L to the issues.
3. The co-operation of providers to agree to novation to new organisations. **Mitigation** - Early notification and involvement of providers regarding the impact of the Health and Social Care Act 2012 as well as determining key links where possible in receiver organisations.

### Key Dependencies

- Records management, quality and patient safety, IT, finance workstreams
- People and workforce transition programme.
- Development of CCGs and other Receiver organisations.
- Transfer of Public Health to the Local Authorities.
- Development of commissioning support org.
- Development of the NHS CB

## Local Scope and Products

- Ensure effective functioning of SWL Joint Boards within the statutory framework during period of transition to new system.
- Build on shadow governance arrangements for the new system - including revisions to committees, agenda planning etc
- Clarify the destination of statutory functions (including legal advice). Jun 2012
- Review and agree the CSS governance offer required by CCGs; Jun 2012
- Support and advise new organisations in the development of their structures and functions to meet future statutory requirements. Dec 2012
- Clarify the process to handover to receiver organisations.

## Out of Scope

- Ensure the review of current legacy documents and ensure the further development to support the safe transfer of documents. Feb 2013. (Records Management Workstream)

## National and Regional Planning Assumptions

- **To be pre-populated by the regional Handover & Closure Programme**

## Current status

Green

- Shadow arrangements established to test the system
- Governance review underway to ensure current systems are robust during transition.

## Governance

- SRO J Harvey
- Project Lead and member of PLG E Newton.
- Reports into Transition Working Group monthly.
- Progress reports provided to Transition Executive Group and into Cluster Management Team and then into SWL Joint Boards of PCTs .
- Additional assurance provided by Joint PCT Audit Committee.
- Handover Closure Lead - member of the Transition Working Group and attends Transition Executive Group PLG representative...

## Delivery Resources

- Mainly within existing resources
- Additional investment has been made to independently review systems.

## Key Risks and Issues

- 1) Key staff available to provide handover to receiving organisations. **Mitigation** - Planning includes the development of legacy documents where key information will be captured as an on-going issue coupled with exit interviews.
- 2) Maintenance of fit for purpose governance arrangements during transition. **Mitigation** - Review of current arrangements underway and increased scrutiny to be undertaken by Audit Committee.
- 3) Capacity within existing team to deliver commissioning support offer and transition programme. **Mitigation** - Review of management arrangements of staff to provide dedicated leadership.

## Key Dependencies

- People and workforce transition programme.
- Development of CCGs and other Receiver organisations.
- Transfer of Public Health to the Local Authorities.
- Development of commissioning support org.
- Development of the NHS CB

### Local Scope and Products

- Transfer performance measures and responsibilities from the Cluster to the Clinical Commissioning Groups (CCG's), Local Authority's and National Commissioning Board.
- Support establishment of performance framework and performance management arrangements for the CCG's.
- Adapt current governance arrangements to shadow future organisations and their roles where possible to test the proposed regime and reflect the level of delegation to CCGs. May 2012
- Redesign reports / scorecards and assign performance measures to CCG's, NCB and Local Authority's. Consultation with the CCG's about proposed performance accountability framework and escalation process. Mar. 2012
- Handover performance responsibility to CCG's Clinical and Management leads. May 2012
- Establish monthly monitoring meetings Chaired by CCG Clinical and Management Leads. May 2012
- Engagement with Local Authority's to handover of Public Health performance measures Jul. 2012
- Engagement with the NHSCB to handover performance measures that they will be accountable for. Jul. 2012
- Establish definitive offer in commissioning support services to deliver performance information to CCGs. June 2012
- Ensure ongoing delivery of all PCT outcome measures until March 2013.
- Clarify legacy handover to receiver organisations.

#### Out of scope

- Performance framework for Public Health performance measures. (Public Health Workstream)
- Performance framework for NCB performance measures including primary care (Contract Transition Workstream)
- Quality and Patient safety performance (Quality Workstream)

### National and Regional Planning Assumptions

- **To be pre-populated by the regional Handover & Closure Programme**

### Current status

Green

- CCG performance management and escalation framework during the Shadow year has been agreed .
- Monthly Accountability meetings have been set up.
- Scorecards have been redesigned and performance measures assigned to the future receiving organisations.
- CCG's are being involved to jointly lead Provider Performance Management issues.
- Discussions are being held with the Borough MD's about the approach for Local Authority engagement.
- Performance and analysis workshops have been had with CCG to design the service specification for the CSS offer.

### Governance

- SRO and member of PLG - C Bradbury,
- Project Lead - J Olweny
- Reports into Transition Working Group monthly.
- Progress reports provided to Transition Executive Group and into Cluster Management Team and then into SWL Joint Boards of PCTs .
- Additional assurance provided by Joint PCT Audit Committee.
- Handover Closure Lead - member of the Transition Working Group and attends Transition Executive Group PLG representative.

### Delivery Resources

Within existing resources

### Key Risks and Issues

- Non delivery of QIPP **Mitigation** - Each CCG is developing the remedial plan for the delivery of a challenging programme. Monthly monitoring and escalation processes agreed to ensure that remedial plans are developed and implemented when identified as being off trajectory.
- Delayed development of roles with the CCG. **Mitigation** - Early identification of designate posts and individuals and reporting arrangements.
- Ability to make all measures translate to local CCGs due to wider population focus . **Mitigation** - Work to resolve attribution of measures to CCGs and agree holding risk share agreement whilst this work progresses.

### Key Dependencies

- Development of CCGs and other Receiver organisations.
- Development of the commissioning support org.
- Development of the NDTA

## Local Scope and Products

### Scope :

- Quality standards, safety Clinical effectiveness and patient experience including National KPIs quality outcome measures and CQC standards for NHS Cluster, Provider and CCG/ Borough based teams and responsibilities (Primary, Secondary and Tertiary care providers – acute, Mental health and community)

### Out of scope:

- Public health, Local Authority (Public Health Workstream)

### Products:

- In year assurance processes supported by monthly meetings in place with CCG chairs to provide quality assurance (commissioning performance exceptions and risks)
- Consistent Quality reports in place at a cluster and CCG level reporting to the relevant Integrated governance / quality committees including Cluster Clinical integrated governance committee (CIGC)
- CCG delegation and authorisation supported in delivering robust clinical governance plans (structure, capacity, performance management and assurance capability)
- Legacy hand over document in place

## National and Regional Planning Assumptions

- **To be pre-populated by the regional Handover & Closure Programme**

## Current status

Green

This work stream is underway with progress in

- Desk top review of current governance framework
- Establishing key indicators for quality assurance report for SWL cluster
- Agreed reporting and governance framework for quality assurance in year

## Governance

- SRO and Member of PLG D Stubberfield Project Lead TBA
- Reports into Transition Working Group monthly.
- Progress reports provided to Transition Executive Group and into Cluster Management Team and then into SWL Joint Boards of PCTs
- Additional assurance provided by Joint PCT Audit Committee and Clinical integrated governance committee.
- Handover Closure Lead - member of the Transition Working Group and attends Transition Executive Group PLG representative.

## Delivery Resources

- Identified clinical leadership established in Cluster team. DN and MD
- Interim support for quality team to drive work stream to be agreed

## Key Risks and Issues

- Potential lack of insight in CCGs as to the scope and depth of the agenda and therefore unable to build the appropriate capacity and capability **Mitigation** – Additional engagement of Local Integrated Governance Committees.
- Ensuring sufficient specialist clinical advice e.g. Infection control, safeguarding to support CCG commissioning plans **Mitigation** – Additional guidance sought from NHS L on Receiver organisations for these functions.
- Quality performance is variable and needs to be monitored on a regular and comprehensive basis and key clinical risks are not managed effectively. **Mitigation** – Additional engagement of Local Integrated Governance Committees.
- Secure access to additional quality management capacity **Mitigation** – Additional engagement of Local Integrated Governance Committees.

## Key Dependencies

- Development of CCGs and other Receiver organisations.
- Development of commissioning support org.
- Development of the NHS CB
- London Quality & Safety Workstream
- London role in SI Management

## 2.6 Records Management Workstream

30<sup>th</sup> May 2012

### Local Scope and Products

#### Scope

- Enable the safe management of archived records and paper and electronic records during the transition in 2012/13.
- Support the safe storage or transfer of records to new receiver organisations facilitating the ongoing access to critical business intelligence.

#### Products

- Identify and review all archived records in storage across the cluster and arrange for appropriate records to be destroyed. Jun 2012
- Ensure that ongoing archiving policy guidance is understood and implemented, which ensures that all archived records are indexed and have appropriate destruction dates. Jun 2012
- Identify future ownership of active and archived paper records July 2012
- Scope, identify and quantify electronic record collections in the Cluster and Borough's June 2012
- Develop guidance for the review/destruction of obsolete and duplicated and ephemeral records, files, folders June 2012
- Migrate all files to common NHS SWL File Plan Oct 2012
- Develop platforms for the migration of business related records on existing networks and SharePoint Sept 2012
- Develop handover document and transfer of records. Jan 2013
- Formally handover record collections to new legal owners Mar2013

### National and Regional Planning Assumptions

- **To be pre-populated by the regional Handover & Closure Programme**

### Current status

Amber

This workstream is complex and critical to business continuity for receiver organisations. Progress is being made with additional support and training for the continuing delivery at the required pace. (Dependent upon successful outcome of bids for additional resource). Existing staff are being encouraged to commit to the delivery of the review of existing records in Borough areas.

### Governance

- SRO - J Harvey,
- Project Lead P Manager - G Jones.
- Reports into Transition Working Group monthly.
- Progress reports provided to Transition Executive Group and into Cluster Management Team and then into SWL Joint Boards of PCTs .
- Additional assurance provided by Joint PCT Audit Committee.
- Handover Closure Lead - member of the Transition Working Group and attends Transition Executive Group PLG representative.

### Delivery Resources

- Additional resources are required for the destruction of current archived records.
- Additional short term support to enable borough teams to review current records held and the ongoing management, destruction and transfer.

Bids have been submitted to the Programme Office for additional resource.

### Key Risks and Issues

1. Ability of existing staff to dedicate time to reviewing the existing records held by PCTs. **Mitigation** - Staff buy in and then specific time provided for the review of records and expert support provided to teams to undertake this work.
2. PCT staff archive inappropriate information which is unlabelled. **Mitigation** - PCT policy being developed to restrict the right to archive unless records are labelled with contents and destruction dates.
3. Receiver organisations not clearly identified for all record collections and/or not receptive to their receipt. **Mitigation** – Record collections clearly identified and inventorised; Guidance on receiver organisations sought from NHS London; Work with receiver organisations commences at an early stage.

### Key Dependencies

- Contracts transition, IT, performance
- People and workforce transition.
- Performance
- Quality and patient safety.
- Development of CCGs, CSS and other receiver organisations.

### Local Scope and Products

- Define, agree, collect and populate a data set of key premises information to create a fit for the future estate transfer
- Develop a schedule of decisions required on ownership of the estate to ensure that the quantum, location, associated contracts, tenure and staff are employed, hosted, let, or owned by the right body.
- Novate all premises contracts in line with the plan
- Transfer the estate and any SAM staff in line with the plan including other related staff (eg RoE, finance, IT staff who may deliver an "estates" function)
- Deliver agreed disposals (subject of separate PID)

**Phase One** - Asset baseline assessment undertaken, tenure status reviewed, occupancy usage established, plans prepared, MICAD updated, service related contracts assessed 30/06/12, Office accommodation Strategy 12/06/12

**Phase Two** - Lease preparation, Heads of Terms established, financials assessed, legals engaged. 31/07/12  
Schedule of Contracts to be novated 31/07/12, Organisation Functions by receiving organisation 31/08/12

**Phase Three** - Lease negotiations and associated financials undertaken and agreed Schedule of transfers to future bodies:

**Phase Four** - Transition Group, Board and NHSL Approvals undertaken. 31/12/12

**Phase Five** - Review of any outstanding issues, risk assessed for transfer, legacy documentation completed, formal transfer undertaken 31/03/13, Novation of contracts 31/03/2013, Staff Transfers Oct 2012 – Mar 2013

#### Exclusions:

- All disposals prior to transfer ( which will report to QIPP / Strategy) All investment projects with local project leadership(which will report to QIPP/Strategy), All indirect staff transfers such as any non-SAM staff caught by Estate Transition Process, The novation of non-estate related contracts on transfer.

### National and Regional Planning Assumptions

- **To be pre-populated by the regional Handover & Closure Programme**

### Current status -

Green

- Resources and named project lead in place.
- Activity underway in line with the scope plan to deliver Phase 1 within agreed timescale.

### Governance

- SRO - J Harvey,
- Project Lead & member of Estates PLG - T Griffiths.
- Reports into Transition Working Group monthly.
- Progress reports provided to Transition Executive Group and into Cluster Management Team and then into SWL Joint Boards of PCTs .
- Additional assurance provided by Joint PCT Audit Committee.
- Handover Closure Lead - member of the Transition Working Group and attends Transition Executive Group PLG representative.

### Delivery Resources

- There are approximately 81 properties to be transferred 31/10/12 and therefore additional staffing has been bid for .
- Engagement of legal advice and support is to be finalised.

### Key Risks and Issues

1. Lack of System Transition Estate Strategy **Mitigation** - Estate plans to be discussed with CCG / Borough teams and actioned via SWL London Health Partnerships
2. No Formal Leases on Retained Premises Could Impact on 2013 Transfer **Mitigation** – Review of all leases and licenses being undertaken
3. Lack of guidance on employment arrangements for Retention of Employment staff at QMH after 31/3/2013 **Mitigation** – PFU providing legal advice
4. Poor timing and lack of clarity of DH guidance delaying completion of work **Mitigation** – Work and network with NHSL on DH proposals.
5. Late notification of commissioners change in occupancy – **Mitigation** – Advise Commissioning leads on the need to include premises issues at the start of any service tendering issues

### Key Dependencies:

- Records management, quality and patient safety, IT.
- People and workforce transition programme.
- Development of CCGs and other receiver organisations.

### Local Scope and Products

- Ensure that NHS SWL cluster continues to operate effectively during transition, and supports the integration of IT platforms across SW and SE London to provide successful and seamless migration and deployment March 2013
- Review the current business case for the development of infrastructure support for the commissioning support organisation to ensure that proposals will deliver the offer to commissioning groups.
- Support activities resulting from changes in use of estate as defined by the Transition Executive Group. March 2013
- Deliver business continuity in year and identify and implement close down activities for the IM&T infrastructure in conjunction with the London wide and local programmes.

### National and Regional Planning Assumptions

- **To be pre-populated by the regional Handover & Closure Programme**

### Current status

Green

- Centralisation projects running slightly behind schedule due to lack of resource. Funding and posts now agreed can hopefully get back on schedule.
- CSS SMT has commissioned a review of IT and Infrastructure for CSS moving forward. Review started 24<sup>th</sup> May 2012.
- Public IT needs assessments on target for completion at Sutton and Merton and Croydon Borough's.

### Governance

- SRO C Bradbury,
- Project Lead and member of Estates PLG P Trickey
- Reports into Transition Working Group monthly.
- Progress reports provided to Transition Executive Group and into Cluster Management Team and then into SWL Joint Boards of PCTs .
- Additional assurance provided by Joint PCT Audit Committee.
- Handover Closure Lead - member of the Transition Working Group and attends Transition Executive Group PLG representative.

### Delivery Resources

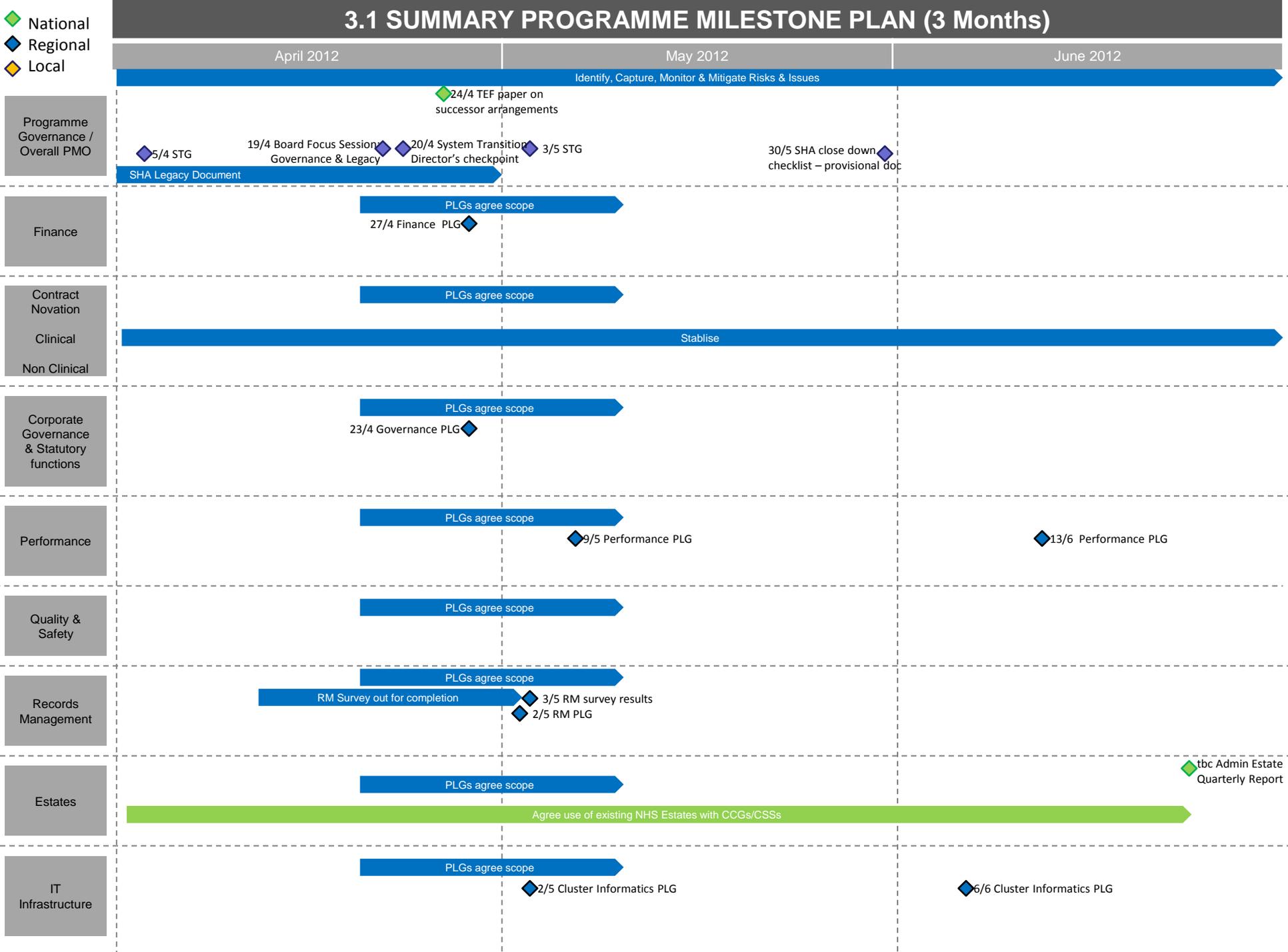
- Existing resources
- Transition bid submitted which includes additional staffing.
- Costs of the review of commissioning service infrastructure.

### Key Risks and Issues

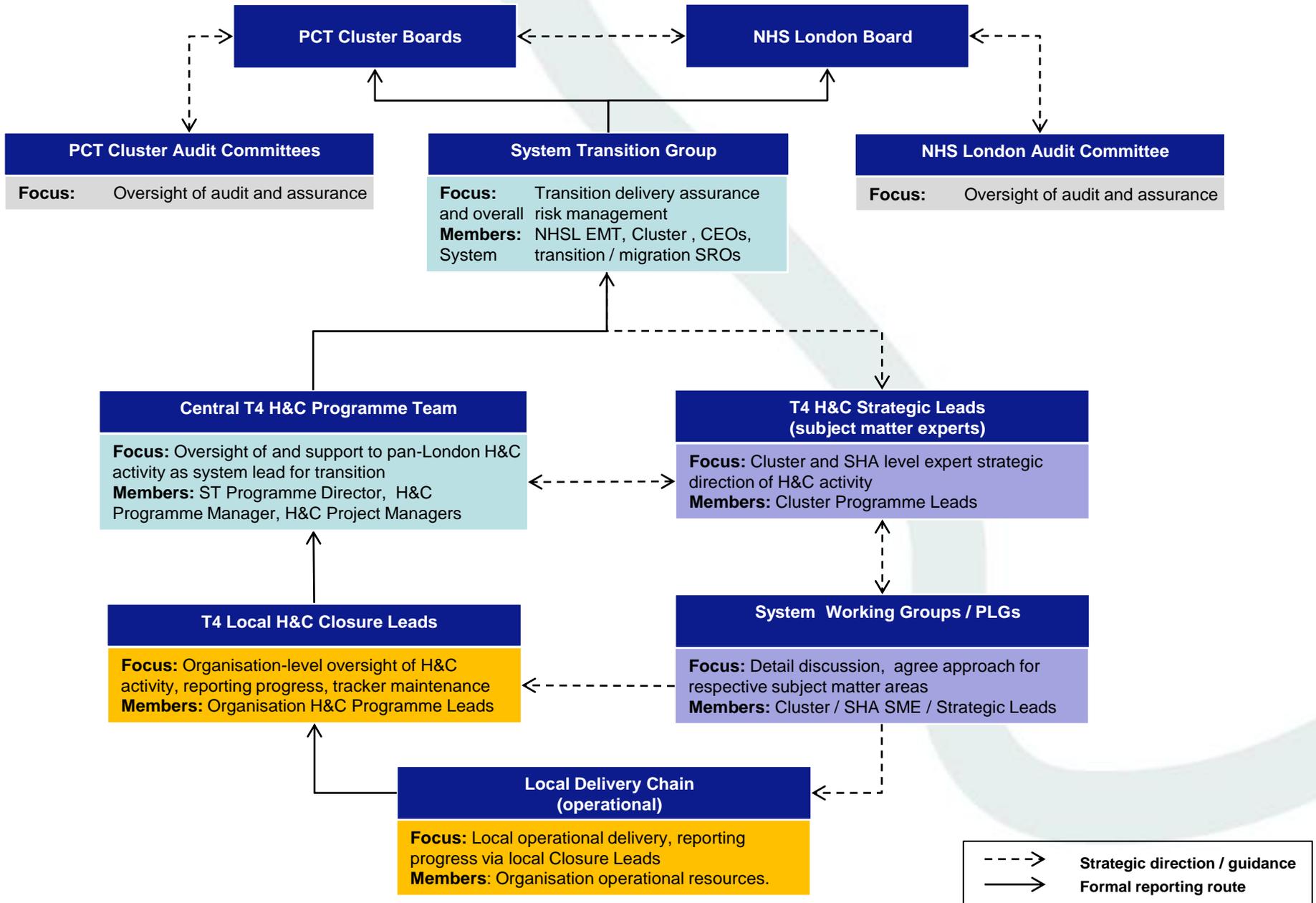
- A lack of agreement on the scope of services to CCGs which impacts on development of the architecture approach and staffing arrangements. **Mitigation** - Review is underway.
- Assumption that the SW London headquarters at 120 The Broadway, Wimbledon, will continue to be included in the on-going estates strategy. **Mitigation** – Ensuring regular communication with Estates department and ensuring that stakeholders are aware that to decommission 120 Broadway would take between 6-9 months and have an IT cost of between £1-£2m
- Delays to the transition projects as resource are not available at the right time (too many requests for same resource). **Mitigation** - SR to escalate to RB and PT. SR to review critical milestones and gain agreement of allocated resource and ensure robust plan is in place. SR and RB to review transition budget and implications from delays 2012\13
- Potential disconnected approach towards informatics strategy development, whereby the CCG community within SW London adopts an uncoordinated direction, which does not deliver an effective and economic solution. **Mitigation** – PT working with CCG community to understand their requirements. CCG workshop held 28th May 2012.

### Key Dependencies

- All workstreams in the handover and closure programme.
- Implementation of the new commissioning arrangements.



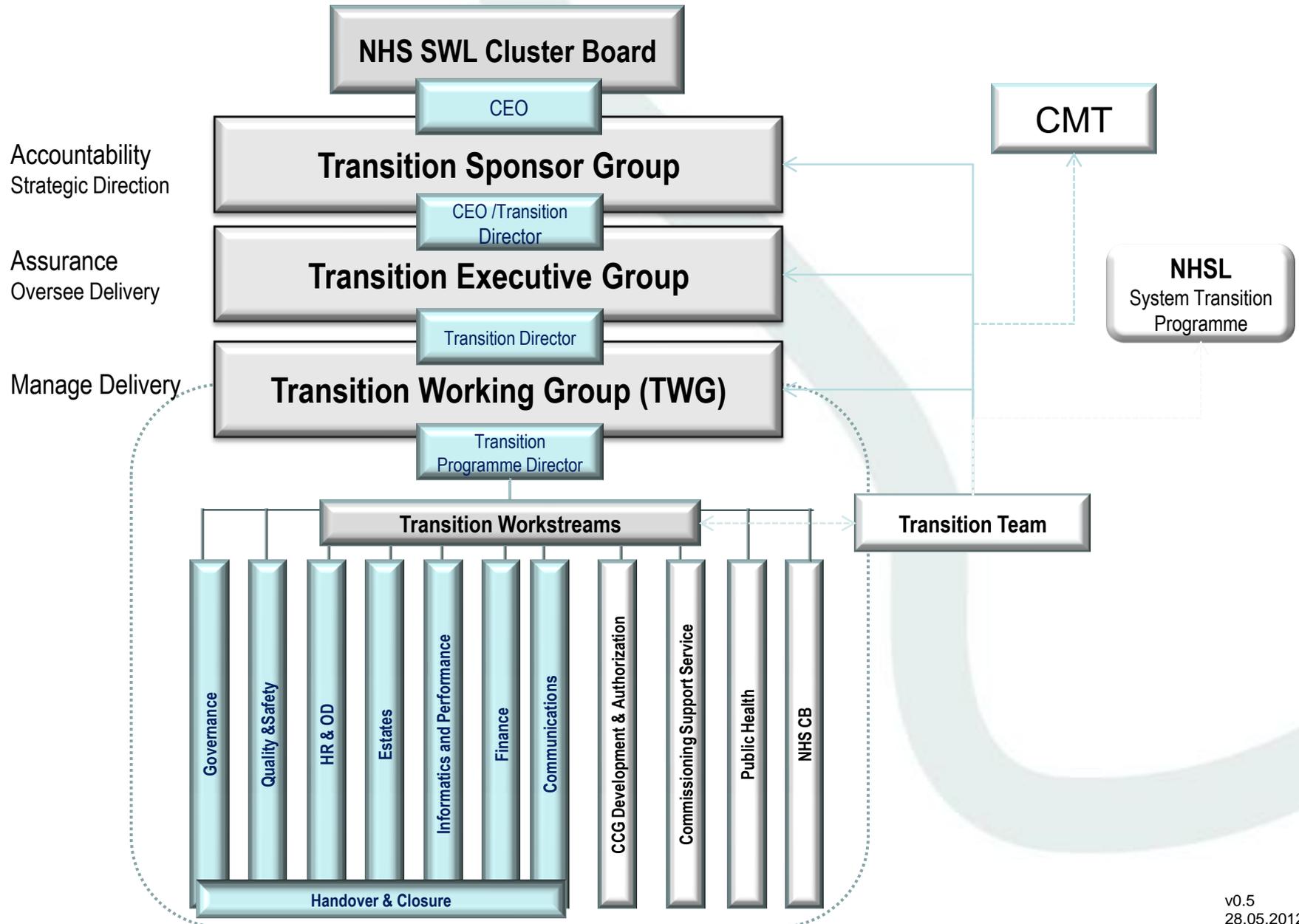
## 3.2 Regional Programme Governance



# SWL SYSTEM TRANSITION PROGRAMME

## ORGANISATIONAL GOVERNANCE STRUCTURE

Policy under development



## 3.4 Key Local Programme Delivery Roles

Role	Name / Resource	Responsibilities
<b>System Transition Programme Director</b>	Pennie Ford	<ul style="list-style-type: none"> <li>• Set up and manage whole System Transition Programme</li> <li>• Align workstreams</li> <li>• Provide programme reporting and assurance</li> </ul>
<b>Handover and Closure Programme Lead</b>	Jo Silcock	<ul style="list-style-type: none"> <li>• Lead local (organisation-specific) Handover &amp; Closure programme delivery.</li> <li>• Report to central programme as required, escalating programme risks and issues accordingly.</li> <li>• Ensure use of, and maintenance of data held in tracker tool(s).</li> <li>• Liaise with local audit and assurance mechanisms as appropriate.</li> <li>• Engage local stakeholders in the programme as necessary (sending and receiving organisations).</li> </ul>
<b>Programme Manager</b>	Maria Kasimi	<ul style="list-style-type: none"> <li>• Provide planning and project management support for the System Transition Programme, and constituent workstreams.</li> <li>• Working with the Directors and the Assistant Directors in the Transition Team on the delivery of specific elements of the Transition Programme.</li> </ul>