

Change Challenges in the NHS



Visible accountability to the stakeholder communities for :

- ✓ the outcomes that the changes will achieve
- ✓ the continuing value of the change programmes
- ✓ the progress that is being made towards achieving the outcomes

PMOs at the heart of change programmes



P = Project

- ✓ Administration
- ✓ Chasing
- ✓ Meetings
- ✓ Reports



Incorrect and unfair perspective



Information Hub,
one version of the truth

P = Portfolio

- ✓ Governance assurance
- ✓ Planning assistance
- ✓ Risk Management guidance
- ✓ Cost controls
- ✓ Improve effectiveness and efficiency



Three case studies of PMOs in the NHS



1. **Planning & Governing Strategic Programmes for Clinical Commissioning Groups (CCG)**
2. **Delivering “Shaping a healthier future” programmes at one CCG**
3. **Delivering Cost Improvement Programmes at an NHS Foundation Trust**



Case Study 1 – NW London CCG Collaboration

North West London Collaboration of
Clinical Commissioning Groups

Planning and Governing Strategic Programmes

- ✔ Eight settings of care : Brent, Ealing, Hammersmith & Fulham, Harrow, Hillingdon, Hounslow, Kensington & Chelsea, Westminster
- ✔ Seven Day Services programme
- ✔ Strategy & Direction provided centrally, local implementation
- ✔ Four key strategic programmes of work
- ✔ Reporting and governance in 2013 using Excel



PMO

- Established governance processes
- Set up a 2-weekly reporting cycle
- Use a cloud-based PPM tool **pm3**
- Support the strategy implementations
- Concise, accurate progress and status information

<http://www.healthiernorthwestlondon.nhs.uk/>

Delivering “Shaping a healthier future” programmes

- ✔ To ensure that the residents of Hillingdon can access high quality, evidence-based care in a setting appropriate to their needs by transforming the way care is delivered
- ✔ Three programmes to help achieve the vision :
 1. reconfiguration of hospital services through ‘Shaping a healthier future’
 2. out of hospital strategy
 3. financial recovery and savings programme
- ✔ Quality, Innovation, Productivity and Prevention (QIPP) focus on savings



Central PMO

- Provide governance assurance to programmes
- 2-weekly reporting cycle
- Interactive PMO meetings using **pm3**
- Visibility and consistency across all initiatives
- Identify early any ‘at risk’ of not making savings

North Hillingdon	Uxbridge and West Drayton	Hayes and Harlington
<ul style="list-style-type: none">• Northwood and Northwood Hills• Harefield• South Ruislip• Eastcote• West Ruislip• Manor• Cavendish• East Ruislip	<ul style="list-style-type: none">• Brunel• Hillingdon East• Ickenham• Uxbridge North• Uxbridge South• West Drayton• Yiewsley	<ul style="list-style-type: none">• Barnhill• Botwell• Charville• Heathrow Villages• Pinkwell• Townfield• Yeading

<http://www.hillingdonccg.nhs.uk/>

Delivering Cost Improvement Programmes (CIP)

- ✔ One of the first 35 Trusts in England and Wales to achieve NHS Foundation Trust status
- ✔ Provides a wide range of health services to a population of ca. 252,000
- ✔ Approximately 55,000 inpatients and 250,000 outpatient attendances each year
- ✔ CIP savings target in excess of £ 10m in 2015/16
- ✔ Building a new Emergency Care Centre
- ✔ Management Committees were unsure of true, accurate status of projects

Programme Management Office

- Improved, streamlined, standardised processes for the supply of the information
- Implement a centralised PPM tool **pm3**
- Training and supporting the project managers on governance processes and the tool



<http://www.therotherhamft.nhs.uk/>

Lessons Learned



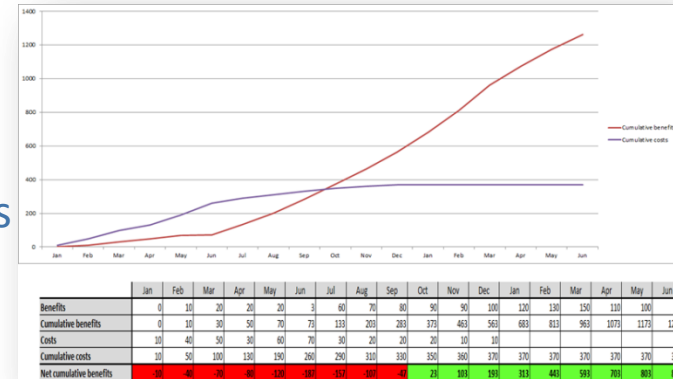
- ✔ Understand your stakeholders and their information needs
- ✔ Understand your data providers and ensure they take ownership for their data
- ✔ Get the basics in place first (register with dates & RAGs)
- ✔ Quickly establish a drumbeat of regular reporting
- ✔ Be holistic : people, process and technology



Looking ahead for the PMOs



- ✔ Annual planning rounds, to help prioritise ideas and initiatives
- ✔ Planning the delivery and governance of new projects
- ✔ Gateway meetings, where proceed/do not proceed decisions are taken Lessons learned reviews
- ✔ Knowledge Management and Process Improvement
- ✔ Benefits realisation and savings reviews



Category	Assessment Criteria	Mandatory?	Evidence	Evidence
CCOSTS	Necessary costs defined, reasonable and acceptable	Y	Y	Y
VALUE	Sufficient funds are available to progress the project to Gateway 2	Y	Y	Y
VALUE	If marked non-discretionary, the project is genuinely non-discretionary	Y	Y	Y
VALUE	Necessary financial benefits are defined and reasonable	Y	Y	Y
VALUE	The organisational value of the project is defined and compelling	Y	Y	Y
VALUE	The adverse organisational impact of not performing the project is defined and...	Y	Y	Y
VALUE	The proposed project is accurately aligned with the organisational, systems an...	Y	Y	Y
VALUE	The payback period is defined and reasonable	Y	Y	Y
VALUE	The payback assumptions are defined and reasonable	Y	Y	Y
RESOURCES	Sufficient resources are available to progress the project to Gateway 2	Y	Y	Y
STAKEHOLDERS	There is an agreed Project Sponsor	Y	Y	Y



PROJECT OUTPUTS



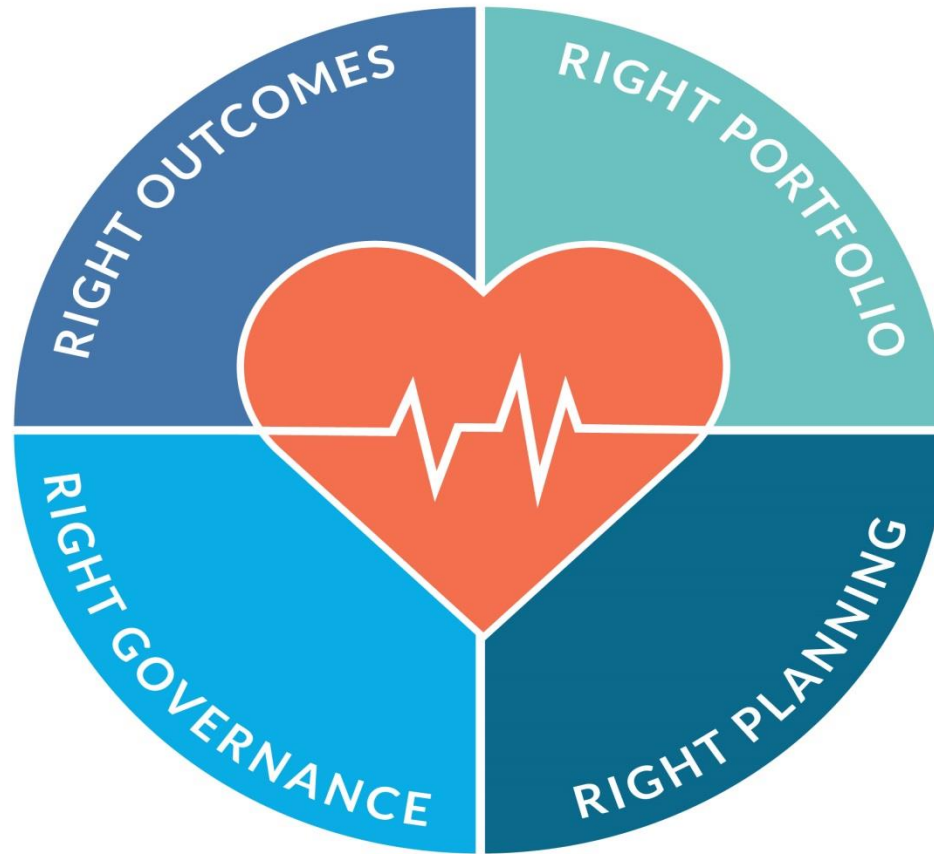
CAPABILITIES



OUTCOMES



BENEFITS



Making the PMO the beating heart of the NHS Change Agenda

About Bestoutcome



The Company

- ✓ Specialist Project & Programme Management Consultancy, founded in 2000
- ✓ Outcome driven – focus on the required business outcomes
- ✓ Proven track record in NHS

Services

- ✓ Programme and project delivery
- ✓ PMO: setup and management

Solutions

- ✓ **PM3** Project Portfolio Management tool: “developed *by practitioners for practitioners*”
- ✓ Light touch, easy to use intuitive interface
- ✓ Less than 5 mins to update a plan
- ✓ **PM3time**: professional timesheet service



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