

Transformation Programme Board

A meeting of the Transformation Programme Board will be held **on Thursday 7 September 2017 at 9.30 am** in the **Board Room, Level 10, Ninewells Hospital**. Apologies/enquiries to: Susan Taylor, Committee Support Officer, Direct Dial 01382 740764, extension 40764 or email: susantaylor3@nhs.net

	AGENDA	LEAD OFFICER	REPORT NO	
1	Welcome and apologies	Prof J Connell		
2	Minutes of Meetings held on 3 August 2017	Prof J Connell		Attached
3	Action Points Update	Prof J Connell		Attached
3.1	Standardised Shifts Update	Mr G Doherty		Verbal update
4	Key High Risk Areas			
4.1	Finance Update	Mr L Bedford		Presentation
5	Major Strategic Issues			
5.1	Assurance & Advisory Group Self Assessment Report	Ms L McLay		Presentation
6	Transformation Programme Delivery Report (For Information)			
6.1	Transformation Programme Delivery Report: Workstream Report	Mr B Nicoll Mr G James	TPB38/2017	To Follow
7	Record of Attendance	Prof J Connell		Attached
8	Any Other Competent Business			
9	Date of Next Meeting			

Thursday 5 October 2017 at 9.30 am in the Board Room, Level Ten, Ninewells Hospital

Professor J Connell
Chairman
September 2017

Distribution

Mr Lindsay Bedford, Director of Finance
Professor John Connell, Chairman
Mrs Gillian Costello, Nurse Director
Dr Andrew Cowie, Non Executive Member
Mr Doug Cross, OBE, Non Executive Member/Vice Chair Transformation Programme Board
Mr George Doherty, Director of HR and Organisational Development
Mrs Jane Duncan, Head of Corporate Communications
Ms Margaret Dunning, Board Secretary
Mrs Judith Golden, Employee Director
Mr Stephen Hay, Non Executive Member
Mr Alan Hunter, NHSScotland Director of Performance, Scottish Government (for information)
Mrs Vicky Irons, Chief Officer, Angus Health and Social Care Partnership
Mr Gordon James, Transformation Programme Director
Mr David Lynch, Chief Officer, Dundee Health and Social Care Partnership
Mrs Christine McLaughlin, NHSScotland Director of Health Finance, Scottish Government (for information)
Ms Lesley McLay, Chief Executive
Mr Bill Nicoll, Director of Strategic Change
Mr Rob Packham, Chief Officer, Perth & Kinross Health and Social Care Partnership
Mr Alan Pattinson, Transformation Programme Lead
Mr Hugh Robertson, Non Executive Member
Professor Andrew Russell, Medical Director
Dr Drew Walker, Director of Public Health
Ms Lorna Wiggin, Chief Operating Officer

TRANSFORMATION PROGRAMME BOARD

Minute of the above meeting held at 10:00 am on Thursday 3 August 2017 in the Board Room, Level 10, Ninewells Hospital & Medical School, Dundee.

Present

Mr Lindsay Bedford	Director of Finance, NHS Tayside
Professor John Connell	Chairman, NHS Tayside
Mrs Gillian Costello	Nurse Director, NHS Tayside
Mr Doug Cross OBE	Non Executive Member, Tayside NHS Board
Mr George Doherty	Director of Human Resources & Organisational Development, NHS Tayside (to item 4.3)
Ms Margaret Dunning	Board Secretary, NHS Tayside
Mrs Judith Golden	Employee Director, NHS Tayside (to item 4.3)
Mr Stephen Hay	Non Executive Member, Tayside NHS Board
Mr David Lynch	Chief Officer, Dundee Health & Social Care Partnership
Ms Lesley McLay	Chief Executive, NHS Tayside
Mr Bill Nicoll	Director of Strategic Change, NHS Tayside
Mr Hugh Robertson	Non Executive Member, Tayside NHS Board
Professor Andrew Russell	Medical Director, NHS Tayside
Ms Lorna Wiggan	Chief Operating Officer, NHS Tayside (to item 4.2)

Apologies

Dr Andrew Cowie	Chair, Area Clinical Forum, NHS Tayside
Mrs Vicky Irons	Chief Officer, Angus Health & Social Care Partnership
Mr Rob Packham	Chief Officer, Perth & Kinross Health & Social Care Partnership
Dr Drew Walker	Director of Public Health, NHS Tayside

In Attendance

Mr David Coulson	Associate Director of Pharmacy, NHS Tayside
Mrs Sarah Dickie	Associate Nurse Director, NHS Tayside (for item 6)
Mrs Jane Duncan	Head of Corporate Communications, NHS Tayside
Mr Gordon James	Transformation Programme Director, NHS Tayside
Ms Sue Muir	Service Manager, Operations Directorate, NHS Tayside (for item 6)
Mr Alan Pattinson	Transformation Programme Lead, NHS Tayside
Ms Jane Smith	Chief Finance Officer, Perth & Kinross Health & Social Care Partnership
Ms Yvonne Summers	Programme Manager, Health and Social Care Directorates
Ms Susan Taylor	Committee Support Officer, Chief Executive's Office, NHS Tayside

Professor Connell in the Chair**1. Welcome and Apologies**

Professor Connell welcomed all present to the meeting particularly Ms Yvonne Summers representing the Transformation Support Team.

The apologies were noted as above.

ACTION

2. Minutes of Meetings held on 28 June 2017 and 6 July 2017

The Minutes of the Transformation Programme Board meetings held on 28 June 2017 and 6 July 2017 were approved.

3. Action Points Update

Repatriation and Out of Area Treatment

Update to be provided to December 2017 Programme Board meeting.

Standardised Shift - Grievance Update

Noted constructive and positive ongoing discussion with staff partners.

Other agenda items were deferred to a future meeting of the Programme Board meeting to allow today's meeting to focus on the Assurance & Advisory Group's (AAG) report.

The Programme Board:

- **Noted the Action Points Update.**

4. Assurance & Advisory Group Report

Ms McLay spoke to the report *NHS Tayside Assurance and Advisory Group Staging Report on Findings and Recommendations* copies of which had previously been circulated. This report had been prepared for the Scottish Government in response to the request to review the deliverability of NHS Tayside's 5 Year Transformation Programme and offered 14 key recommendations for consideration and urgent implementation.

Ms McLay reported that over the last 4 weeks focus has been around transitioning to ensure the readiness of the organisation to take on board and implement these key recommendations. The Executive Review Team will ensure the organisation is set to deliver these recommendations.

Professor Connell and Ms McLay had met with Ms Christine McLaughlin and Mr Colin Brown to provide an update and discuss progress. A reporting process was now in place with Executive Review Team weekly huddles to consider matters of significance and review the actions that are scheduled for completion.

Professor Connell said the key recommendations will drive this work therefore clear communication and transparency at all levels with internal stakeholders, wider public and politicians will be necessary. It is incumbent on all of us to ensure this happens. The organisation should now move to a place where all material, except for issues taken in reserved business, from the Programme Board meetings is fully available.

A discussion about partnership working and engagement would take place this afternoon with Professor Connell, Ms McLay and Staff Side representatives.

The Programme Board:

- **Noted the NHS Tayside Assurance and Advisory Group Staging Report on Findings and Recommendations report.**

4.1 Transformation Support Team Terms of Reference

Ms McLay spoke to the report *Transformation Support Team (TST) NHS Tayside Terms of Reference (draft)* copies of which had previously been circulated and highlighted the support and challenge around the work of the organisation and provides a clear statement that the responsibility and delivery of executive outcomes lies with Tayside NHS Board.

Noted that future key milestone dates arising from the AAG report were:

By end September 2017:

NHS Tayside to have completed a rigorous and comprehensive review of its financial planning framework.

By end December 2017:

NHS Tayside to have agreed the content and a realistic timeline for completion of the Integrated Clinical Strategy, with partners.

In relation to these two dates, the TST will produce reports for the core AAG (Sir Lewis Ritchie, Professor Stephen Logan and Mr Paul Hawkins) on the Board's delivery of these recommendations as well as progress against their wider action plan.

Ms Summers said that the document recognises the organisation's own internal arrangements and the AAG were keen this be as transparent as possible.

Mr Cross welcomed the transparency and the approach the organisation is seeking to take.

The Programme Board:

- **Noted the Transformation Support Team Terms of Reference.**
- **Noted the finalised Transformation Support Team Terms of Reference would be issued to the Programme Board.**

BN

4.2 Key Recommendations & Response

Each of the Lead Executives spoke to the actions in response to the recommendations from the report and how these would be progressed.

Ms Wiggin left the meeting.

The Programme Board:

- **Noted the Key Recommendations and Responses.**

- **Noted Professor Connell to discuss the Board Sub Committee structure with Ms Dunning.**

JC/MD

4.3 Assurance & Advisory Group Report Draft Action Planner & Tracker (TPB37/2017)

Mr Nicoll spoke to the report *Assurance and Advisory Group Report Action Planner and Tracker* copies of which had previously been circulated and advised that Mr Paul Gray, Director General, Health & Social Care and Chief Executive NHSScotland, had written to the NHS Tayside Chairman requesting an initial plan in response to the AAG Staging Report by 11 July 2017.

The report set out the general approach that has been taken to frame a structured action plan response against each of the ten areas of recommendation within the AAG. Each recommendation action response has an identified Lead Executive responsible officer matched to the identified TST lead(s).

Professor Connell sought assurance that the process of having this action tracker would enable the organisation to assess key milestones and escalation of key deliverables and avoid any sense of confusion or duplication with the Transformation Programme.

Mr Nicoll acknowledged that the action planner tracker needs to be more than a single list of actions or deadlines. Identifying the significant milestones that are critical to the success and those early wins identified will build momentum towards delivery of an outcome framework. Will aim to keep this high level and consider how we can publish internally and externally to give a high level feel to the work we are doing without losing the supporting detail and evidence.

Mrs Costello welcomed the different levels of reporting and milestones.

Mr James re-emphasised the importance of understanding the critical milestones, incorporating these into a high level dashboard with successes and any risks for review by the Programme Board and TST. This would then formulate a weekly conversation with the level of detail going behind the scene.

Mr Cross agreed this was a rigorous process, but most important was the delivery. He felt that the Transformation Programme Board should focus on key areas and therefore development of the dashboard would be extremely useful and would allow the Transformation Programme Board to be more effective.

Mr Hay asked for assurance of how this aligns with the transformation programme and the emerging strategy.

Ms McLay said that a briefing meeting had been held with the Associate Medical Directors where they had raised the same commitment and engagement around bigger transformation change.

Mr Robertson agreed with comments made and welcomed the document. He was assured the level of detail is there but also sees this as a management type of document. As a Board we should concentrate on a report on outcomes rather than details.

Ms McLay highlighted that the focus will be on quality and service implementation. The example of formulary compliance being focussed on the chronic pain pathway. This is a maturing process which is still at the first level, however, is about everyone having confidence and ownership of what needs to be done.

Professor Connell welcomed the dashboard measures to ensure the Board of outcomes being achieved.

The Programme Board

- **Considered and endorsed the Action Plan Tracker for recommended approval by the NHS Tayside Board.**
- **Endorsed the work undertaken by the Chief Executive and Executive Team in the initial response to the AAG Report recommendations.**
- **Supported the arrangements for reviewing and monitoring of progress in conjunction with the TST.**
- **Noted the need to identify the additional supporting resources required for delivery.**
- **Noted that Mrs Golden would forward her questions and comments on the report to Mr James.**

JG

Mr Doherty and Mrs Golden left the meeting.

5. **Integrated Clinical Services Strategy for NHS Tayside – Update (TPB38/2017)**

Ms Dickie and Ms Muir were in attendance for this item.

Professor Russell spoke to the paper *Integrated Clinical Services Strategy for NHS Tayside – Update* copies of which had previously been circulated and provided an update on progress, following endorsement by NHS Tayside Board in June 2017, to the development of an 'Integrated Clinical Services Strategy' for NHS Tayside.

Professor Russell outlined the critical nature of this work to set out a strategy to deliver safe and sustainable health and care services in Tayside into the future. He stressed the need to be bold, brave and courageous in taking the opportunity to set out an ambitious plan and to take the big decisions required to achieve future transformational change.

He reflected that clinicians were anticipating leadership from the Board and Executive Team to take decisive steps and referred to the perspective from a leaving consultant that he would have wished to remain in Tayside with a future plan in place.

It will be necessary to limit choice and this would be very challenging requiring strong clinical leadership and evidence base.

Mr Hay welcomed Professor Russell's positive comments and the reference to sustainability of services was long overdue.

The Programme Board

- **Noted the Integrated Clinical Services Strategy for NHS Tayside – Update report.**
- **Noted progress made to date.**
- **Endorsed early development of the engagement plan.**
- **Ms Muir agreed to share with the Programme Board the presentation she is preparing reflecting some of the challenges in Tayside in terms of affordability.**

SM

6. Rapid Improvement Event 5, 6 and 7 September 2017

Professor Russell advised of the forthcoming Rapid Improvement Event to help shape and transform the future of health and care in Tayside. Work on planning the event was moving forward at pace with the aim of ensuring that everybody in the organisation, partners and wider stakeholders, has a sense of where we are going. He wanted to get key representatives together with external Organisational Development facilitation to develop a common understanding of our future vision for services.

Professor Russell will meet with Professor Connell and Ms McLay to identify proposed speakers, facilitators and also develop a programme and letter of invitation to participants. This event was a big investment and high risk for the organisation but would ensure we are all aligned to a common vision goal and purpose. .

Ms Summers said this related to how wider stakeholders are involved and would be key for Tayside and NHS Scotland. Of particular importance was how NHS Tayside takes this work forward now and in the future in order to be seen as representatives of good practice. The feeling from TST is that wider involvement needs to start at the beginning; therefore, involving staff side and partnership working together with public and wider community was crucial.

Professor Connell advised consideration of how we can engage with the public using different and less conventional means, for example, social media and also using our own staff as advocates. He would be content if, by December 2017, we have the direction of travel for some of the key strategies in place.

Ms Muir and Mrs Dickie left the meeting.

The Programme Board

- **Noted the forthcoming Rapid Improvement Event.**

7. Transformation Programme Delivery Report: Workstream Report (TPB39/2017)

Mr James spoke to the report *Transformation Programme Delivery Report: Workstream Report* copies of which had previously been circulated.

It was noted that discussions were ongoing with individual groups and Directors to consider each initiative, savings and forecast savings. This report provided a snap shot that will change over time. Overall, from June 2017, a deficit of £790k was shown against the plan; however, we need to go through the resource process to look at the year-end outcome.

Professor Connell said significant variance was a concern, in particular, agency use which was significantly high across June and early July 2017.

Mrs Costello reported that an initial analysis is supporting a change of configuration introduced in Perth Royal Infirmary (PRI). Enhancement of night nurse – Mrs Costello has asked for further information to support that assumption and build into the workforce and care assurance workstream.

Mr James reported that fast track initiatives had been identified and teams identified to take these forward.

Ms McLay said this would build on a report that has been commissioned on workforce, including funded establishment; vacancies; sickness; Roster Compliance Group etc.

Mr Robertson liked the format of the report and could see where the organisation was from a finance point. He could also see the achievement of outcomes and asked if the report could also show where there was negative variance together with a brief explanation.

The Programme Board:

- **Noted the Transformation Programme Delivery Report: Workstream Report.**
- **Agreed the report to also show where there was negative variance together with a brief explanation.**

GJ

8. Revised Financial Framework 2017/18

Mr Bedford gave a verbal update on the revised Financial Framework 2017/18 and advised the Programme Board to be mindful of the predicted variance as this will require action to escalate.

Mr Cross said it would be helpful to include some commentary within the framework to provide an explanation of the position; however, this would need to be underlined by Mr Bedford's professional view as NHS Tayside Finance Director.

The Programme Board

- **Noted the verbal update.**

9. Action Notes of Meetings of the Transformation Programme Board Executive Group

The following Actions Notes were noted for information:

9.1 Transformation Programme Executive Group - 26 June 2017

The Action Note from the Transformation Programme Executive Group meeting held on 26 June 2017 was noted.

9.2 Transformation Programme Executive Group – Special Meeting 10 July 2017

It was noted a Special Meeting of the Transformation Programme Executive Group was held on 10 July 2017.

9.3 Transformation Programme Executive Group – Special Meeting 17 July 2017

It was noted a Special Meeting of the Transformation Programme Executive Group was held on 17 July 2017.

10. Record of Attendance

The record of attendance was noted.

11. Any Other Competent Business

Date of Programme Board November 2017 meeting to be changed to accommodate General Medical Council (GMC) visit to NHS Tayside.

12. Date of Next Meeting

The next meeting of the Transformation Programme Board will be confirmed.

**Committee
Support**

The meeting finished at 12:23 pm

Actions Points Update

NHS Tayside

Transformation Programme Board – 3 August 2017

No.	Meeting	Minute Reference	Heading	Action Point	Owner	Status
1	1 June 2017	3 9	Clinical Services Strategy Development	Develop proposal for creating integrated clinical services strategy with timescales, resources and risks for delivery.	Medical Director/ Nurse Director	Regular progress updated to the Programme Board. Final Report to be provided in December 2017.
3	1 June 2017	4.1	Repatriation and Out of Area Treatment	Programme Board agreed formal workplan	Director of Strategic Change	Update in 6 months time (December 2017).
4	1 June 2017	6	Standardised Shifts	Further detailed report on implementation progress, revised roll out plan and other associated governance matters will be provided.	Chief Executive/ Director of HR/ Employee Director	Agenda item 6 July 2017 Programme Board meeting.
	6 July 2017	7		Collective grievance raised.	Chief Executive/ Director of HR/ Employee Director	Agenda item following resolution of the collective grievance.
	3 August 2017	3		This item was deferred to the next meeting of the Programme Board to allow today's meeting to focus on the Assurance & Advisory Group's (AAG) report.	Director of HR	Agenda item 7 September 2017 to update on progress.
5	1 June 2017	10	One Year Plan/ Workstream Report	Refresh of Properties Workstream.	Director of eHealth	Agenda item 3 August 2017 Programme Board meeting.
	3 August 2017	3		This item was deferred to a future meeting of the Programme Board to allow today's meeting to focus on the Assurance & Advisory Group's (AAG) report.	Director of eHealth	Deferred to future meeting of the Programme Board.
6	6 July 2017	8	Delayed Discharges 72 Hour Target	<ul style="list-style-type: none"> Key Metrics Performance paper to be prepared for the 3 August 2017 meeting. Standard reporting template to be developed. Updated capacity paper showing trajectory for how we will improve or effect discharges within 72 hour period. 	Chief Officers HSCPs	Agenda item 3 August 2017 Programme Board meeting.

	3 August 2017	3		This item was deferred to a future meeting of the Programme Board to allow today's meeting to focus on the Assurance & Advisory Group's (AAG) report.	Chief Officers HSCPs	Deferred to future meeting of the Programme Board.
7	6 July 2017	12	Assurance & Advisory Group	<ul style="list-style-type: none"> Project Initiation Document to be produced. Source of savings target for prescribing to be presented. Outcome of Programme Board Executive discussion to be reported to Programme Board. Key 3/6 months actions scope and timelines to be provided. 	Chief Executive Director of Finance Director of Strategic Change Director of Strategic Change and Transformation Programme Director	Agenda item 3 August 2017 Programme Board meeting.
	3 August 2017	3		This item was deferred to a future meeting of the Programme Board to allow today's meeting to focus on the Assurance & Advisory Group's (AAG) report.	Chief Executive	Agenda item 7 September 2017 Programme Board meeting.
8	6 July 2017	14	Transformation Programme Initiative Finance Matrix 2017/18	Accountable Directors to complete planning process.	Director of Strategic Change	Agenda item 3 August 2017 Programme Board meeting.
	3 August 2017	3		This item was deferred to a future meeting of the Programme Board to allow today's meeting to focus on the Assurance & Advisory Group's (AAG) report.	Director of Strategic Change	Deferred to future meeting of the Programme Board.
9	6 July 2017	16	Value your NHS – Communication & Engagement Update	Report on proposed approach for staff engagements.	Head of Communications	Agenda item 3 August 2017 Programme Board meeting.
	3 August 2017	3		This item was deferred to a future meeting of the Programme Board to allow today's meeting to focus on the Assurance & Advisory Group's (AAG) report.	Head of Communications	Deferred to future meeting of the Programme Board.
10	3 August 2017	4.1	Transformation Support Team Terms of Reference	Noted the finalised Transformation Support Team Terms of Reference would be issued to the Programme Board.	Director of Strategic Change	Completed. Final TST Terms of Reference distributed to the Programme Board members on Friday 18 August.
11	3 August 2017	4.2	Key Recommendations and Response	Noted Professor Connell to discuss the Board Sub Committee structure with Ms Dunning.	Chairman/ Board Secretary	Discussion held on 22 August 2017.

12	3 August 2017	5	Integrated Clinical Services Strategy for NHS Tayside	Ms Muir agreed to share with the Programme Board the presentation she is preparing reflecting some of the challenges in Tayside in terms of affordability.	Service Manager, Operations Directorate, NHS Tayside	Completed. Presentation distributed to the Programme Board members on Friday 18 August.
13	3 August 2017	7	Transformation Programme Delivery Report: Workstream Report	Report to also show where there was negative variance together with a brief explanation.	Transformation Programme Board Director	Agenda item 7 September 2017 Programme Board meeting.

ITEM 5.1



TPB38/2017
Transformation Programme Board
6 September 2017

TRANSFORMATION PROGRAMME DELIVERY REPORT:

WORKSTREAM REPORT

Mr B Nicoll
Director of Strategic Change

Mr G James
Transformation Programme Director

August 2017

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Version and Issue Control

Date	Version	Changes	Status
25Aug2017	V001	Document created	Draft
06Sep2017	V002	Document updates	Issued

Date	Version	Distribution	Role
06Sep2017	V002	Mr Lindsay Bedford	Director of Finance, NHS Tayside
		Professor John Connell	Chairman, NHS Tayside
		Dr Andrew Cowie	Chair, Area Clinical Forum, NHS Tayside
		Mrs Gillian Costello	Nurse Director, NHS Tayside
		Mr Doug Cross	Non Executive Member, Tayside NHS Board
		Ms Margaret Dunning	Board Secretary, NHS Tayside
		Mrs Judith Golden	Employee Director, NHS Tayside
		Mr Stephen Hay	Non Executive Member, Tayside NHS Board
		Ms Lesley McLay	Chief Executive, NHS Tayside
		Mr Hugh Robertson	Non Executive Member, Tayside NHS Board
		Professor Andrew Russell	Medical Director, NHS Tayside
		Mr Ian Reid	Independent Business Advisor
		Mrs Jane Duncan	Head of Communications, NHS Tayside
		Mr Alan Gall	Independent Business Adviser
		Mr Alan Pattinson	TP Lead, NHS Tayside
		Mr Gordon James	TP Director, NHS Tayside
		Ms Susan Taylor	PA, Chief Executive's Office, NHS Tayside
		Mrs Vicky Irons	Chief Officer, Angus H&SCP
		Mr David Lynch	Chief Officer, Dundee H&SCP
		Mr Rob Packham	Chief Officer, P&K H&SCP
		Mr Drew Walker	Director of Public Health

Board Report 07Sep2017

1. Resources

The Transformation Team and PMO are the subject of restructuring to consolidate and strengthen support to the Transformation Programme through the Organisational Change Policy and Transition Team.

Mariya Toneva's secondment as a Data Analyst to the Better Buying & Procurement Workstream has been reviewed and will be extended from 1 September 2017 with an increase from 1 day a week to 3 days. The increase is to support various projects/initiatives in relation to departmental integration with NHS Lothian as well as continued work to identify and validate potential savings opportunities and ongoing work enabling post-implementation data to be passed back to Finance to enable budgetary adjustment. This is in addition to the other Transformation Initiatives - Realistic Medicine redesign of community supply of dressings, wound management, ONS etc - which crossover significantly with the BB&P workstream and which Mariya is currently engaged in supporting.

The resources identified in response to the AAG report are being sought, including a dedicated Senior Finance Accountant.

AAG Recommendation	Lead	Resource Requirement	Timeline	Organisational	External Resources
				Capacity	
1 2017/2018 Outturn & Transformation	LB	Senior HR Practitioner	6 Months	Reallocate capacity - subject to agreement	
		OD Practitioner	6 Months	Reallocate capacity - subject to agreement	
		Senior Finance Manager	Permanent	Recruit - Internal appointment - 2/3 weeks	
		Management Accountant	Permanent	Recruit - interviews 10/11 August	
		Strategic Planner	6 Months	Require external resource	Request Support from TST
		2 x Service Planners	6 Months	Reallocate capacity - subject to agreement	
		2 x Business Analyst(s)	9 Months	Require external resource	Request Support from TST/NSS
		Senior Capital Accountant	Permanent	Recruit - external - awaiting advert	
		2 x Strategic Planner	6 Months	Reallocate capacity - subject to agreement	
		1 x Programme Manager	6 Months	Recruit - Internal - by secondment	
2 Financial Planning	LB	Management Accountant	Permanent	Recruit - interviews 10/11 August	
3 Integrated Clinical Strategy	AR/GC	Engagement practitioner	6 Months	Require external resource	Potential commissioned consultation lead
		1 x Strategic Planner	6 Months	Require external resource - initial discussions with NHS G/L	Requested Support - TST
		1 x HR Lead	6 Months	Reallocate capacity - subject to agreement	
		2 x Workforce Analysts	6 Months	Reallocate capacity - subject to agreement	
		Data Analyst	6 Months	Require external resource	Requested Support - TST
4 Workforce Review	GD	National Workforce Planning Advisor	6 Months	Require external resource	Requested Support - TST
		1 x Workforce Analyst	6 Months	Reallocate capacity - subject to agreement	
5 Medicines Management	FR	Pharmacy Data Analyst	6 Months	Utilise PSU Analyst	Currently Supported - NSS
6 Strategic Focus	LW	(Outlined in Recommendation 1)		as above	
7 Engagement	JG / GD	Partnership Support	6 Months	Secured Resource - facilitation	
8 Executive Structure	MD / GD	HR Advisor	6 Months	Secured Resource - external consultancy support	
9 Scrutiny	MD	No Requirement Identified		not required	
10 Leadership	GD	Coaching Capacity	6 Months	Require external resource	Request commissioned support - NES

2. Finance Report –

2.1 Service Redesign & Productive Opportunities

Workstream	Action	Target 2017/18	Plan to July	Actual to July	Variance from Plan Adv/Fav (-)
Service Redesign & Productive Opportunities	Improved electronic ways of working	0.100	0.013		0.013
	Review of external diagnostic reporting	0.400	0.051	0.033	0.018
	Endoscopy service redesign	0.100	0.013	0.009	0.004
	Implement outcomes of National Burns review	0.200	0.026		0.026
	Local service redesign/skill mix changes	1.900	0.244	0.137	0.107
	Review of NSS Discovery tool to identify areas where variation to other Scottish Board exists and exploit opportunities to improve the patient pathway	0.500	0.000		0.000
	Progression of Shaping Surgical Services Clinical Strategy	0.000	0.000		0.000
	PRI - 12 beds re-alignment to deliver safe and effective care	0.200	0.026		0.026
	Reduced Ward 7 PRI bed complement at weekends	0.000	0.000		0.000
	Children's Homecare skill mix review	0.100	0.013		0.013
	ACU - Operational efficiency	0.200	0.026	0.041	-0.015
	Achievement of 72 hour target for delayed discharges following being assessed as clinically fit for discharge	1.500	0.000		0.000
	Review of Corporate functions and redesign of workforce	1.500	0.192	0.192	0.000
	Interpretation & Translation services	0.200	0.007		0.007
	Service Redesign & Productive Opportunities	6.900	0.610	0.412	0.198

Achievements:

The Clinical Strategy Workshop has been scheduled for September 5th and 6th.

Alignment modelling between the AAG recommendations and reporting and the Transformation Programme has been undertaken.

2.2 Facilities and Estates

Workstream	Action	Target 2017/18	Plan to July	Actual to July	Variance from Plan Adv/Fav (-)
Estates & Facilities	Reduction in energy costs	0.100	0.033	0.007	0.026
	Review of leased accommodation	0.000	0.000		0.000
	Smarter Office working	0.000	0.000		0.000
	Property disposals non operational assets release of running costs	0.200	0.033	0.017	0.016
	Catering wastage	0.100	0.017	0.012	0.005
	Staff catering opportunities	0.000	0.000		0.000
	Reduced taxi use	0.100	0.018		0.018
	Sterile Services Department production	0.100	0.033	0.034	-0.001
	Strategy for Print	0.000	0.000		0.000
	Income generation opportunities	0.100	0.033	0.017	0.016
	Estates & Facilities	0.700	0.168	0.087	0.081

Achievements:

The Facilities and Estates Team have refreshed plans for 2017/18 and are working on the delivery plans with support from Finance to identify deliverable cash-releasing savings. These will be delivered by the Business As Usual teams for CSSD; Support Services and Estates.

2.3 Property Sales

Workstream	Action	Target 2017/18	Plan to June	Actual to June	Variance from Plan Adv/Fav (-)
		£m	£m	£m	£m
Property Disposals	Reduction of estate	2.900	0.000	0.000	0.000
Property Disposals		2.900	0.000	0.000	0.000

Achievements:

Work continues on the disposal of properties currently declared surplus to requirements. Strategic planning is also underway, in partnership between NHST, DCC and Health and Social Care Partners, to identify the medium to long term service needs in terms of property. The next phase in the programme focuses more on transformation, investment and development to ensure the successful creation of a future shared, sustainable, compliant and flexible property portfolio that meets the needs of all services for at least 15-20 years.

A closure report on the Business As Usual component is being submitted to the TPEG in September.

2.4 Better Buying and Procurement

Workstream	Action	Target 2017/18	Plan to July	Actual to July	Variance from Plan Adv/Fav (-)
Better Buying & Procurement	Input to national contract negotiation and application of improved prices when agreed	0.000	0.000		0.000
	Optimal stock levels at ward/department level/Adoption of first ranked product	0.000	0.000		0.000
	Adoption of first ranked product	1.500	0.500	0.420	0.080
Better Buying & Procurement		1.500	0.500	0.420	0.080

Achievements:

On 28th July, Procurement held a joint engagement meeting with the Orthopaedic service, Theatres with one of NHS Tayside's key suppliers Stryker to progress a number of issues/key projects. Results from this meeting included

- Agreement on progressing a short trial of Stryker revision knee systems for approximately 4 cases resolving both a potential wastage issue of obsolete hip implants, enabling 4 revisions to be carried out effectively free of charge in terms of implant costs as well as enabling testing of clinical efficacy over current alternative systems having benchmarked a lower average cost per procedure of approx £1000 per case against alternative Depuy Synthes system.
- Agreement to convert to Stryker for Pulse Lavage systems resolving a live product complaint whilst simultaneously facilitating cash releasing saving in excess of £10k per annum

Ongoing review of New Product/Trial Proforma documentation progressed and a new prototype is being tested for smoke evacuation trial at Stracathro

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NHS Tayside Procurement team has implemented weekly virtual performance and implementation review meetings for the Medical Locums Direct Engagement contract with Brookson to ensure any issues associated with performance are identified and mitigation actions with associated ownership agreed, and drafted an SBAR to recommend further enhanced governance and improved management of Medical Locums pay rates are implemented which has been approved.

Confirmation has been given to continue the role of the current Data Analyst.

2.5 Workforce and Care Assurance

Workstream	Action	Target 2017/18	Plan to July	Actual to July	Variance from Plan Adv/Fav (-)
		£m	£m	£m	£m
Workforce & Care Assurance	Reduce reliance on non contract agency, supplementary staff & overtime	5.100	0.654	0.000	0.654
	Implementation of Standardised Shift patterns across Tayside	0.236	0.000	0.000	0.000
	Reduction in non compliant junior medical training grade rotas	0.400	0.000	0.000	0.000
	Reduction in call outs	0.200	0.067	0.000	0.067
	Reduction in pay protection	0.200	0.067	0.000	0.067
	Vacancy Management (non medical & nursing)	2.000	0.667	1.237	-0.570
	Collaborative working with Regional partners	0.000	0.000	0.000	0.000
	Balance to be found	0.264	0.003	0.000	0.003
Workforce & Care Assurance		8.400	1.457	1.237	0.220

Achievements:

Locum contracting improvements have been approved with the assistance of the Procurement Team.

Progress focused on the delivery of the AAG recommendation 4 (workforce). This is aligned with the Workforce workstream and focuses on the Development, Deployment of workforce toolsets and the enhanced intelligence to implement ward staffing decisions.

2.6 Realistic Medicine

Workstream	Action	Target 2017/18	Plan to July	Actual to July	Variance from Plan Adv/Fav (-)
Realistic Medicine	Optimisation of operating theatre resource leading to release of mobile theatre capacity	1.500	0.500	0.500	0.000
	Restrict Board resourced TTG capacity	0.400	0.051	0.000	0.051
	Active monitoring of secondary care medicines resource	1.500	0.192	0.138	0.054
Realistic Medicine		3.400	0.744	0.638	0.106

Achievements

Care Pathways: An implementation plan is being developed to offer all GP practices across Tayside BNP testing for patients with a suspicion of heart failure and identify those that require to be progressed through the care pathway as a matter of priority. It is anticipated that this will lead to up to a 70% reduction in demand for echocardiogram testing. ISD are continuing to work with NHS Tayside to explore variation identified by the Discovery tool and understand the reasons behind this together with the service teams involved in delivery. In some cases this has improved our understanding of differences in NHS Boards' approach to coding activity. However, where the variation has been verified, service teams are analysing patient pathways and models for service delivery to improve our understanding of any emerging variance.

Medicines: A series of reviews with Secondary Care directorates, and all three HSCP areas has been undertaken to ensure they all have prescribing action plans that are in line with Medicines Management and are supported as far as is possible.

GP Formulary dashboards are complete and will begin publication to practices from the start of September.

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Communication materials for patients on medicines changes are completed and ready for distribution.

2.7 Repatriation

Workstream	Action	Target 2017/18	Plan to July	Actual to July	Variance from Plan Adv/Fav (-)
Repatriation	Reduced private sector stays/placements	1.400	0.392	0.392	0.000
Repatriation		1.400	0.392	0.392	0.000

2.8 Angus IJB

Workstream	Action	Target 2017/18	Plan to July	Actual to July	Variance from Plan Adv/Fav (-)
Angus IJB	Operational efficiencies	0.113	0.038	0.038	0.000
	Minor Injury review	0.100	0.033	0.033	0.000
	Inpatient review	0.434	0.145	0.145	0.000
	Angus IJB Plan	0.647	0.216	0.216	0.000
	Balance of Target per NHST Financial Framework	-0.047	-0.016	0.000	-0.016
Angus IJB		0.600	0.200	0.216	-0.016

2.9 Dundee IJB

Workstream	Action	Target 2017/18	Plan to July	Actual to July	Variance from Plan Adv/Fav (-)
Dundee IJB	Reprofiling of budgeted staff costs to reflect actual staff deployment	1.100	0.362	0.362	0.000
	Minor Service Redesign	0.100	0.033	0.033	0.000
	Transformation Programme benefits	1.100	0.000	0.000	0.000
	Large Hospital Set Aside - reduced beddays	0.500	0.000	0.000	0.000
Dundee IJB		2.800	0.395	0.395	0.000

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2.10 Perth & Kinross IJB

Workstream	Action	Target 2017/18	Plan to July	Actual to July	Variance from Plan Adv/Fav (-)
Perth & Kinross IJB	Community Hospital Review	0.105	0.000	0.000	0.000
	Workforce Review, inc Mental Health & Wellbeing, Business Support, Physio and Podiatry	0.136	0.073	0.073	0.000
	Transformation of District Nursing	0.055	0.010	0.010	0.000
	Inpatient Review	0.180	0.004	0.004	0.000
	Supplies & Procurement	0.193	0.001	0.001	0.000
	Integrated Locality Management	0.143	0.049	0.049	0.000
	Inpatient Mental Health	0.283	0.000	0.000	0.000
	Balance to be formalised	0.264	0.088	0.000	0.088
	Identified Recurring Savings Gap	0.564	0.188	0.000	0.188
	P&K IJB Plan	1.923	0.413	0.137	0.276
	Balance of Target per NHST Financial Framework	0.277	0.092	0.000	0.092
Perth & Kinross IJB		2.200	0.505	0.137	0.368

2.11 IJB Prescribing

Workstream	Action	Target 2017/18	Plan to July	Actual to July	Variance from Plan Adv/Fav (-)
IJB Prescribing	Implementation of NHS Tayside Medicines Management proposals	4.200	0.628	0.286	0.342
IJB Prescribing		4.200	0.628	0.286	0.342

2.12 Financial Flexibility

Workstream	Action	Target 2017/18	Plan to July	Actual to July	Variance from Plan Adv/Fav (-)
Financial Flexibility	Non Cash DEL	7.000	2.333	2.333	0.000
	Refinancing of NPD projects	1.000	0.000		0.000
	Capital to Revenue	1.000	0.000		0.000
	Earmarks & Reserves	1.800	0.600	0.600	0.000
Financial Flexibility		10.800	2.933	2.933	0.000

2.13 Programme Total

Workstream	Action	Target 2017/18	Plan to July	Actual to July	Variance from Plan Adv/Fav (-)
Total		45.800	8.532	7.153	1.378

3. Workstream Status

Transformation Programme Overall Status				
Workstream	July 2017	Aug 2017		Commentary
Workforce & Care Assurance			General Update	<ol style="list-style-type: none"> Supported resignation <ul style="list-style-type: none"> Confirmation this will be BAU and confirmation document for closure to be written. Recruitment and Marketing <ul style="list-style-type: none"> Marketing Strategy to be distributed for comment before next meeting. Corporate Review <ul style="list-style-type: none"> GC to receive presentation on report. SBAR agreed at Chief Exec and Directors meeting on 5 June 17 to concept of creating A&C team to support Tayside NHS Board and its corporate functions. Initiative to be progressed with staff side and Project Team in line with brief from GD, WL. Locum Agency (Direct Engagement) / VAT Recovery <ul style="list-style-type: none"> Brookson have confirmed credits will be secured with regards to recovery off loss although no settlement received yet. No payment of invoices has gone through. Confusion over savings to be clarified. Recruitment framework to non patient facing roles <ul style="list-style-type: none"> Confirmation of closure/BAU required from HR Rostering Effectiveness (Standardised Shifts) <ul style="list-style-type: none"> Identified 8 areas as early implementer sites – introduce September 17. The change to software required for roll out will take time. Centralised Rostering Bureau has sites enrolled Drs Rotas – risk remains around non-compliant wards Meeting held with AC and GD to discuss accountability. Outcome will be taken to Clinical Leads meeting. Reduction in use of agency staff (Supplementary Staffing) <ul style="list-style-type: none"> Daily Bank & Agency Usage reports indicate a steady reliance in agency use. Weekly HoN meeting: focus on supplementary staffing eRostering progressing to plan. Safecare revised schedule: PRI roll out Sept 2017
			Decisions	n/a

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Realistic Medicine			General Update	<p>Care Pathways: The Discovery Impact Huddle is meeting every 2 weeks and is currently examining variation across outpatient appointments in mental health and gastroenterology and daycase rates and length of stay in general surgery, orthopaedics and breast surgery. Recently, the NHS Tayside Dental Services have asked for a data pack across all their services to support ongoing improvement work. Draft SBARs have been produced and will be finalised for gastroenterology and adult mental health when all stakeholders have had the opportunity to discuss the draft recommendations.</p> <p>The Diabetes Out There Project Group (consisting of paediatric and adult clinical teams) continues to meet monthly to review actions/progress against project plan and promote integrated working.</p> <p>The Palliative care project final report is completed and planning is underway for the official launch of the Palliative & End of Life Care Managed Care Network (MCN).</p> <p>Still awaiting confirmation of GP representation on the Leg Ulcer Care in the Community project steering group. The Leg ulcer care in the community team continues working to establish a new referral process, collate outcome measures, quantify patient numbers in Tayside and identify trends in referral rates into Dermatology.</p> <p>A decision on the development of the Menzieshill site for use as a community hub facility for 0-25 year old type 1 diabetes patients is outstanding. An SBAR reporting on the impact of this will be presented to the Transformation Programme Executive Group on 5 September.</p> <p>A process is in place for requesting BNP testing. The project team (Dr Elder, Dr Dougall and Dr Bartlett) have been undertaking some background work in preparation for roll out of the test requesting into primary care such as configuration of the ICE Test Requesting System. Communication for primary care has been drafted and both Dr Elder and Dr Dougal are to present the plans for roll out at the September meeting of the GP Sub Committee.</p> <p>The Transformation team has been tasked with undertaking preliminary work with a view to moving to a full implementation group for MOP (Managing Outpatients) in December 2017.</p> <p>Medicines:</p> <p>Prescribing Reviews: Secondary Care directorates, and all three HSCP in September to produce action plans that are in line with Medicines Management and are supported as far as is possible.</p> <p>GP Formulary dashboards are complete and will begin publication to practices from the start of September.</p> <p>Communication materials for patients on medicines changes are completed and ready for distribution.</p>
			Decisions	
			General Update	On Trajectory
Better Buying & Procurement			Decisions	na
Facilities & Estates			General Update	<p>The workstream has been reviewed as part of the Transformation Programme refresh. The majority of the initiatives have been identified to be delivered as part of Business as Usual (BAU) with Mark Anderson and Mark Scholes leading their BAU elements.</p> <p>Catering will continue to be a key focus and this will be supported and reported through the transformation PMO.</p>
			Decisions	Support for the above change is requested. This will be provided from the PMO.
Repatriation			General Update	Total 14 Patients reviewed (8 identified for return to Tayside)
			Decisions	na

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Property			General Update	<p>The Programme continues to progress the disposal of properties on all fronts in line with the stated milestones.</p> <p>A review of the existing property disposal programme has identified two distinct, emerging work streams. The work stream driving the marketing and sale of the remaining properties targeted for disposal has now moved into a business-as-usual phase. A new work stream has emerged which has yet to be scoped and resourced. It recognises that the intelligence-gathering and decision-making / disposal phases are now embedded and no longer transformational and focuses more on the investment and deployment phases of the property transformation programme. This work stream is driven predominantly by the emerging service delivery modelling initiatives in the acute services, primary care and across the IJBs.</p> <p>Market conditions will remain extremely difficult throughout this year, specifically in terms of securing clean offers for property at DV-assessed levels. Conditional offers were received in line with DV valuations but when Section 75 issues are taken into account, offer figures reduce considerably, often in excess of 50% to 60%. It is anticipated that this will continue to impact significantly on the Programme's ability to deliver on its forecasted financial targets in year 2017/18.</p>
			Decisions	<p>The Transformation Board is asked to consider the scope changes in the Property Sales and Brokerage Programme as described above when the papers come forward, support the initiation of a new programme that will focus on the necessary intelligence-gathering, investment decisions, implementation plan and deployment of resources that will deliver a sustainable, affordable, flexible and compliant property portfolio that meets the needs of key stakeholders. A presentation/briefing paper on the proposed scope changes will go to the Transformation Executive Group in September 2017 and to the Programme Board in October 2017.</p>

4. AAG Milestone Status

NHS Tayside - TST Action Tracker

Recommendation	Owner	July Monthly Actions			Last Week Actions 21st to 25th Aug			August Monthly Actions in Next Period		
		Due	Completed	%	Due	Completed	%	O/S	Due	Total
1 - 2017/18 Outturn	LB	1	1	✓ 100%	0	0	✓ 100%	0	2	2
2 - Financial Planning	LB	0	0		0	0	✓ 100%	0	2	2
3- Integrated Clinical Strategy	AR / GC	9	9	✓ 100%	0	0	✓ 100%	0	3	3
4- Workforce Review	GD	2	2	✓ 100%	2	2	✓ 100%	0	7	7
5- Medicines Management	FR	4	4	✓ 100%	0	0	✓ 100%	0	3	3
6- Strategic Focus	LW	4	4	✓ 100%	0	0	✓ 100%	0	2	2
7- Engagement	JG / GD	0	0		1	1	✓ 100%	0	2	2
8- Executive Structure	MD / GD	4	4	✓ 100%	2	2	✓ 100%	0	1	1
9- Scrutiny	MD	0	0		0	0	✓ 100%	0	0	0
10- Leadership Development	AR / GD	0	0		0	0		0	0	0
		24	24	✓ 100%	5	5	✓ 100%	0	22	22

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5. Risks (latest update 11Aug2017as V052)

Transformation Programme - Risk Assessment											
Risk Assessment Transformation Programme Office (latest update 30Aug2017 as v054)											
N	Risk Name	Risk Type	Raise by	Date Raised	Description	Prob 1-5	Impac 1-5	Score 0-25	Owner	Mitigation	Review Date
028	PMO	People	AP	5-May-17	Transformation Programme Board have agreed the changes to the structure of the delivery of the initiatives. The risk is that staff involved in the changes become unsettled and delivery does not proceed as planned/	4	4	16	BN/AP	Ongoing briefings and updates to keep the team informed with support from Staffside to ensure due process is being adhered to. Risk increased as this is now impacting on what is being reported to SG.	18-Aug-17
030	PMO	Financial	AP	9-Jun-17	1YP Matrix remains unconsolidated with the current Workstream Structure. Accountable Directors have been identified and meetings are planned for discussion. Risk is the timescales mean that work will not start on these initiatives until Q2 delaying financial benefits.	4	2	8	All directors	New financial target matrix has been matched to current Matrix and re-issued to all accountable directors for updates. Issued This will be complete by 31Aug2017.	18-Aug-17
031	WF&CA	Financial	AP	16-Jun-17	Current reporting shows Non Contract agency at an average of 28 shifts per day. This number is not reducing. The risk is that financial benefits will not be delivered.	5	4	20	GD/LW/GC	Beds removed from PRI which should also have a positive effect on agency usage. Reviews ongoing with service and Bank to understand cause and effect. Weekly NCA huddles reinstated.	18-Aug-17
032	WF&CA	Process	AP	14-Jul-17	The implementation of Standardised Shifts is the cause of a Staffside grievance. The risk is this delays the implementation of the new shift pattern and impacts on the patient safety and staff benefits identified and reduces the 2017/18 financial benefit	1	4	4	GD/LW/GC	WF have reported that this project is on target to deliver the changes within the agreed timescales.	18-Aug-17
033	WF&CA	Process	AP	14-Jul-17	Changes to the scope of the Corporate Review have been identified by Staffside as not having followed due process. The risk is that a grievance raised at this stage would delay the staff and financial benefits.	1	2	2	GD/LW/GC	Corporate Management and Administration Review team have met and established the way forward for this work.	
034	PMO	People	AP	14-Jul-17	Since the launch of the programme the only mandated communication route was through VYN campaign. There has been no review of the effectiveness of this campaign. The Transformation Delivery Framework paper recommended a communications review and refresh around the Internal Engagement. This has not happened. The risk is that staff become increasingly switched off by the VYN branding and broadcast approach and support for the programme disappears.	2	3	6	LMcL/BN/AP	Refresh of Internal Engagement is Recommendation 7 of the AAG report and an action plan is being developed to deliver this. HR and Staffside Representatives leading on this work. Draft comms Pla developed.	18-Aug-17
035	WF	People	AP	21-Jul-17	Currently no MD lead has been established to oversee the proper application of Dr In Training Rotas. The risk is a projected overspend of £1.3M .	1	4	4	GD	Discussions with the MD to establish this support.	30-Aug-17

Record of Attendance Transformation Programme Board 1 April 2017 – 31 March 2018

		6 April 17	3 May 17	1 June 17	6 July 17	3 Aug 17	7 Sept 17	5 Oct 17	2 Nov 17	13 Dec 17	1 Feb 18	1 March 18
Members												
Mr L Bedford	Director of Finance	Present	Apologies	Present	Present	Present						
Mr J Connaghan	NHSScotland Chief Operating Officer	Apologies	Apologies	Apologies								
Prof J Connell	Chairman	Present	Present	Present	Present	Present						
Mrs G Costello	Nurse Director	Present	Apologies	Present	Present	Present						
Dr A Cowie	Non-Executive Member	Present	Apologies	Present	Present	Apologies						
Mr D Cross	Vice Chair	Present	Present	Present	Present	Present						
Mr G Doherty	Director of HR & Organisational Development	Present	Apologies	Present	Apologies	Present						
Mrs J Golden	Employee Director	Present	Apologies	Present	Present	Present						
Mr S Hay	Non-Executive Member	Present	Present	Present	Present	Present						
Mrs V Irons	Chief Officer, Angus HSCP		Present	Present	Present	Apologies						
Mr D Lynch	Chief Officer, Dundee HSCP		Present	Present	Apologies	Present						
Ms L McLay	Chief Executive	Present	Present	Present	Present	Present						
Mr B Nicoll	Director of Strategic Change	Present	Apologies	Present	Present	Present						
Mr R Packham	Chief Officer, Perth & Kinross HSCP		Present	Present	Present	Apologies						
Mr H Robertson	Non-Executive Member	Present	Present	Present	Apologies	Present						
Prof A Russell	Medical Director	Present	Present	Present	Present	Present						

Record of Attendance Transformation Programme Board 1 April 2017 – 31 March 2018

Dr D Walker	Director of Public Health			Present	Apologies	Apologies						
Ms L Wiggin	Chief Operating Officer	Present	Present	Present	Apologies	Present						
In Attendance												
Mrs J Duncan	Head of Corporate Communications	Present	Present	Present	Apologies	Present						
Ms M Dunning	Board Secretary	Apologies	Present	Present	Apologies	Present						
Mr A Gall	Interim Director of Performance	Apologies	Present	Present								
Mr G James	Transformation Programme Director	Present	Present	Present	Present	Present						
Mr A Pattinson	Transformation Programme Lead	Present	Present	Present	Apologies	Present						