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|  manx care <small>Kiarail Vannin</small> | SUMMARY REPORT | Meeting Date: | 25th May 2021 |
| | | Agenda Item: | 38/21 |
| | | Enclosure Number: | 13 |

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|---|----------------------------------|----------------------|--|
| Meeting: | Manx Care Board | | |
| Report Title: | CIP GOVERNANCE FRAMEWORK | | |
| Authors: | Jackie Lawless, Finance Director | | |
| Accountable Director: | Jackie Lawless, Finance Director | | |
| Other meetings presented to or previously agreed at: | Committee | Date Reviewed | Key Points/Recommendation from that Committee |
| | FPC COMMITTEE | 17/05/21 | Governance process accepted. |

Summary of key points in report

The CIP Programme work continues to progress. The team have identified the Long List of opportunities and have identified 5 key areas of focus and are in the process of carrying out Deep Dive sessions for each of those areas, namely:

- Workforce
- Procurement
- Elective care
- Emergency Ambulatory Care & Mental Health
- Primary Care
- Secondary Care Medicines

The purpose of these sessions is to review the proposed CIP plans, define the likely savings, agree timescales and identify risks or barriers to achievement. The outcome of these discussions will inform the development of targeted action plans for implementation.

The target CIP saving for Year 1 is £2.7m, which will be a challenge so efforts are focussed on ‘quick wins’ that will release cash quickly. These are likely to be predominantly reducing spend on medicines and procurement. However, much of the work will be directed at laying the groundwork for further savings in future years.

The approach and governance structure for the CIP programme set out in this report was considered at the Finance, Performance & Commissioning Committee on 17th May 2021. The Committee agreed in principle with the approach being made and recommended that the CIP Programme Board considered a name for the programme which focussed more on quality improvement and transformation than costs.

Recommendation for the Board to consider:

| | | | | | | | |
|----------------------------|--|-----------------|--|------------------|----------|--------------------|----------|
| Consider for Action | | Approval | | Assurance | X | Information | X |
|----------------------------|--|-----------------|--|------------------|----------|--------------------|----------|

The Board is invited to ACCEPT the report for assurance and for information.

| Is this report relevant to compliance with any key standards? YES OR NO | | State specific standard |
|---|-----------|---|
| IG Governance Toolkit | NO | |
| Others (pls specify) | | |
| Impacts and Implications? | YES or NO | If yes, what impact or implication |
| Patient Safety and Experience | YES | The CIP is a key tool for the Manx Care Board in addressing its strategic priority to improve patient safety. |
| Financial (revenue & capital) | YES | The CIP is a key tool for the Manx Care Board in addressing its strategic priority to improve financial health. |
| OD/Workforce incl H&S | YES | The CIP is a key tool for the Manx Care Board in addressing its strategic priority to create a positive working culture |
| Equality, Diversity & Inclusion | YES | EDI impacts will be considered as part of the check and challenge process |
| Legal | NO | |

Section 1: Purpose and Introduction

Background

- 1.1 This report updates the Manx Care Board on progress made with the design and delivery of the cost improvement programme.

A Cost Improvement Programme (CIP) considers opportunities for saving money, improving efficiency and throughput, reducing demand or a combination of approaches. While annual in year saving plans may deliver 'quick wins', taking a strategic approach in combination with service transformation have the potential to deliver greater long-term financial sustainability, cost-effective service delivery, best value for money and an improved patient experience.

The CIP programme will be developed in line with the following principles.

- Ensure projects are aligned to strategic plans, and have multi-disciplinary stakeholder involvement in identifying, shaping, developing, and implementing plans
- Savings projections will be supported by a clear evidence base, data and where possible benchmarking information
- Project will have clearly defined patient cohorts, project scope and parameters
- Savings and other quality benefits tracked with appropriate key indicators and metrics
- The CIP process will be underpinned by robust governance, scrutiny and effective stakeholder communications

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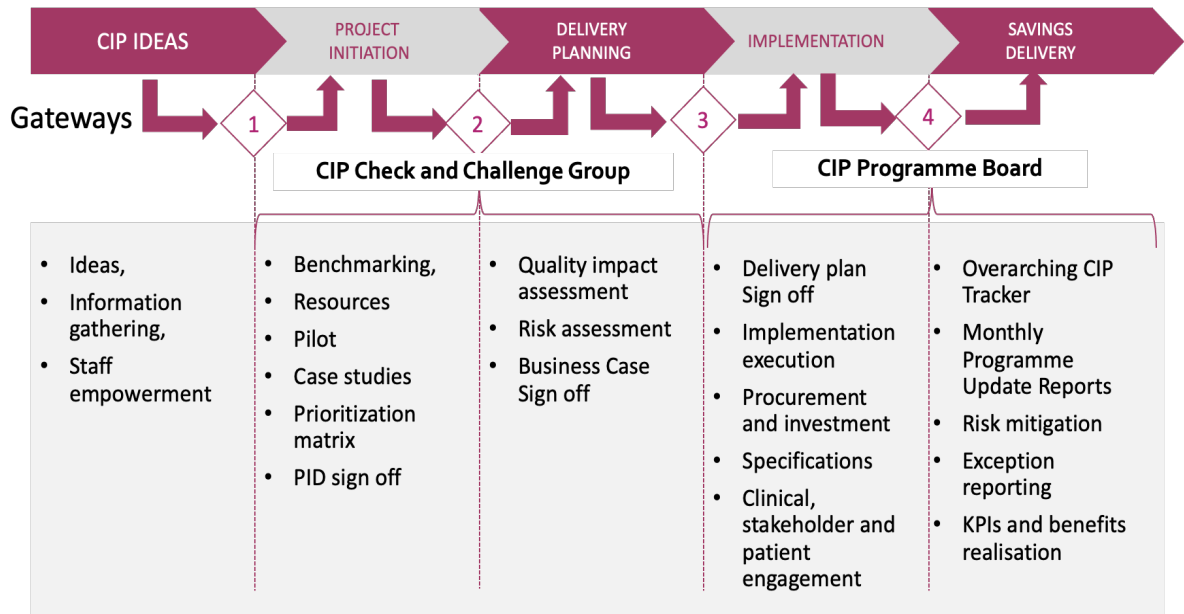
Section 2: Programme stages and governance approach

- 2.1 A series of gateways should be implemented to provide opportunities for review and scrutiny as CIP projects move from ideas through to maturity and onto delivery, ensuring they meet basic requirements before the projects commence. These gateways are set out in the diagram below.

Documentation will support each stage, ensuring formality, a consistency of decision making and an audit trail. The gateways are as follows:

- Gateway 1: Project Identification and Project Initiation
- Gateway 2: Business Case Development
- Gateway 3: Delivery Planning
- Gateway 4: Implementation

2.2



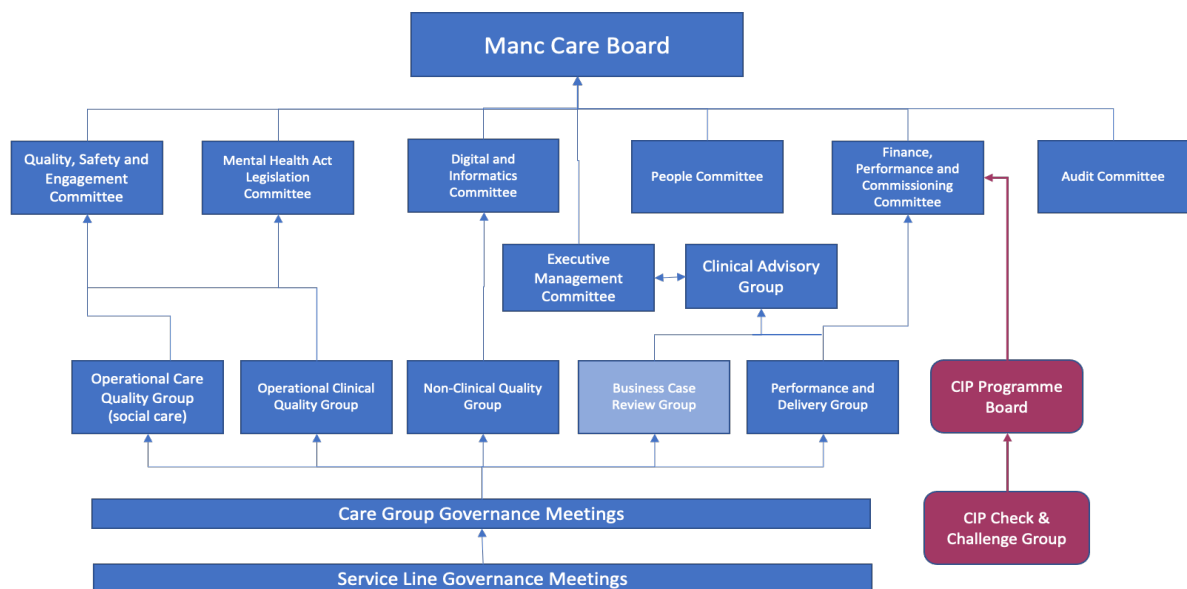
2.3 The governance approach will mean that CIP Check and Challenge meetings should be used as the forum for Gateway 1 and 2 to ensure these areas of scrutiny have been addressed.

THE CIP Programme Board will be the forum for Gateway 3 and 4.

THE CIP Programme Board will report directly to the Finance, Performance & Commissioning Committee providing assurance on progress and impact/benefits realisation of the annual CIP.

This structure is set out below.

2.4



Section 3: Accountability structure

- 3.1 There is Board-level ownership in setting out the vision and priorities for CIP, which is given high priority within Manx Care and communicated widely within the organisation via a range of mechanisms. All staff groups feel empowered to get involved in the CIP process.

The accountability structure includes:

Programme Management Office - Providing a centralised and coordinated management of CIP projects and project management support to Manx Care. The PMO function will instil a PRINCE2 methodology for the CIP programme providing governance and Board assurance on project delivery, improvements to patient care and experience, while delivering agreed savings targets.

Senior Responsible Officer (SRO) – these are Executive leads for each CIP project within the annual programme. In this SRO capacity, they will act as Executive sponsor for all projects within their portfolio, ultimately accountable for implementation and benefits realisation.

Project Leads - Responsible for operational delivery of plan and achieving the target saving value by delivering their CIP project(s) on time, within scope and within budget.

Clinical Lead - Clinical input is provided via a clinical lead to all projects that require it and to all project which have clinical implications. The clinical lead is identified at Gateway 1.

PMO Admin lead – works as part of the PMO.

Jackie Lawless
Finance Director

18th May 2021