

Primary Care Commissioning Committee

22 June 2016

Details	Part 1	✓	Part 2		Agenda Item No.	2.2
Title of Paper:	Whitefield Health and Care Centre – Progress Update					
Board Member:	Mike Woodhead, Interim Chief Finance Officer					
Author:	Louise Rigg, Contractor, Elite Consult					
Presenter:	Mike Woodhead, Interim Chief Finance Officer					
Please indicate:	For Decision		For Information	X	For Discussion	

Executive Summary

Summary	<p>The purpose of this paper is to update Members on progress with regards to the development of the Whitefield scheme. It comprises two key project documents which contain all of the relevant detail specific to the governance framework and the delivery of the scheme. These documents are:</p> <ul style="list-style-type: none"> • The Project Execution Plan; and • The Master Programme. <p>Both of these documents are shared for information and comment at this stage with approval of their content being sought by the CCG's Senior Management Team at its meeting on Monday 27th June 2016.</p>					
Risk	High		Medium	X	Low	
	Please indicate above the overall level of risk associated with the paper then state here what the risks are and how this paper aims to address them. If the above summary itself is around managing risk etc. state "Included in Summary". NB Risks can include failure to act and lost opportunities.					
Recommendations	<p>The Committee is asked to:</p> <ul style="list-style-type: none"> • Note the contents of this paper, particularly with regard to the revised timeframes for approval and delivery. 					

Strategic themes

Deliver improvement in outcomes for patients	X
Deliver service improvement through system redesign in priority areas	X
Develop NHS Bury CCG and Primary Care capability as commissioners and leaders	
Deliver through the Health and Wellbeing Board improved population health and reduction in inequalities	
Deliver the CCG element of QUIPP through effective system management and working with partners and stakeholders and ensuring a culture with focus on quality, fostering innovation, improving health outcomes and reducing inequalities.	X
Equality Impact Assessed?	Supports NHS Bury CCG Governance arrangements

Whitefield Health and Care Centre

Project Execution Plan

GMCA GREATER
MANCHESTER
COMBINED
AUTHORITY


in Greater Manchester


Bury Clinical Commissioning Group

Pennine Care 
NHS Foundation Trust

Bury
COUNCIL


Property Services

Version 1.2 REVISED

June 2016

Author: Louise Rigg

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Appendix 1 - Project Master Programme

Appendix 2 – Confirmation of Commissioners Authorisation to Expend Project Development Costs Template

1. Purpose of Document

The purpose of this document is to define the project, to form the basis for its management and the assessment of overall success.

2. Background

NHS England and NHS Bury Clinical Commissioning Group (CCG) have requested that NHS Property Services (PS) undertake to develop and build a new Health and Care Centre within Whitefield. The purpose of the scheme is to:

- ✓ Provide a fit for purpose building to enable and enhance the delivery of local integrated health and social care services by a multidisciplinary team of health and care providers;
- ✓ Optimise the functioning of integrated health and social care services to meet the needs of the local community;
- ✓ Provide an efficient and financially sustainable facility for the future ensuring efficient use of public money; and
- ✓ Promote better integration of health services and reduce reliance on the local acute sector.

3. Investment Objectives

The objectives of this project as defined by the **Project Sponsors** are as follows:

- ✓ Quicker and more convenient access for patients and carers to a range of services;
- ✓ Provision of one stop shops;
- ✓ Access to a variety of diagnostics and treatments;
- ✓ Extended access to services at weekends in the evenings (7 day services);
- ✓ Increased emphasis on health promotion;
- ✓ Community based support for long term and complex conditions;
- ✓ GPs and specialists working side by side;
- ✓ Integration of the primary & community nursing workforce;
- ✓ Delivery of the benefits of robust workforce planning;
- ✓ More flexible working and use of technology to improve communication; and
- ✓ Shared IT systems, processes and patient records.

4. Project Scope

This Project Execution Plan (PEP) covers the period from approval of the Project Initiation Document (PID) through to approval of the Full Business Case (FBC) for the Project. It is envisaged that the PEP will be updated as the project progresses.

5. Project Management Objectives/Deliverables

The project will deliver the following:

- ✓ Appoint a Project Manager and Design team to work up the detailed technical design;
- ✓ Conclude the size, scale and terms of occupancy relating to all tenancies to be accommodated in the new facility;
- ✓ Confirmation of the long term affordability of the facility and the individual tenancies therein (capital costs, revenue costs and operational costs communicated and accepted by the organisation that will bear those costs);

- ✓ Completion of the 1:200 designs, signed off by all parties and planning approval;
- ✓ Completion of the 1:100 designs, signed off by all parties;
- ✓ Completion of the 1:50 designs, signed off by all parties; and
- ✓ Approval of the FBC.

6. Constraints

- ✓ The current state of repair of the Whitefield Health Centre dictates that a timely solution is of paramount importance and a key risk to the effective and efficient delivery of primary and community services;
- ✓ The scheme will be required to demonstrably deliver value for money in terms of the individual elements (construction, hard facilities management, lifecycle, operating costs, funding costs etc). NHS Bury CCG and individual tenants are to define their own respective overall affordability envelopes; and
- ✓ The building is to be designed in accordance with current Department of Health (DOH) Health Technical Memoranda (HTM)/Health Building Notes (HBN) standards and NHS PS design brief.

7. Project Timetable and Plan

The key milestones for this phase of the project are set out in the table below and detailed in the attached Master Programme as detailed in **Appendix 1**.

Milestone	Date
PID Complete and Approved	July 2015
NHS PS Approval to draw down development costs	April 2016
Schedule of Accommodation Approved	20 th May 2016
Concept Design Approved (1:200)	27 th June 2016
Developed Design Finalised and Approved (1:100)	25 th July 2016
NHS Bury CCG Governing Body Approval of OBC	28 th September 2016
NHS England Approval of OBC – Capital Working Group	29 th September 2016
NHS England Approval of OBC – Capital Steering Group	10 th October 2016
Technical Design Finalised and Approved (1:50)	21 st November 2016
NHS Bury CCG Governing Body Approval of FBC	25 th January 2017
NHS England Approval of FBC – Capital Working Group	TBC
NNS England Approval of FBC – Capital Steering Group	TBC
Commence on Site (Estimated 60 week build)	February 2017
Completion	Est. April 2018

8. Approvals

It is important to recognize that two separate and distinct approvals processes will apply to

this project. These are outlined in the sections below.

8.1 NHS PS Approvals Process

NHS PS's internal approval process is concerned with obtaining NHS PS approval to invest in the project. This approval process seeks to ensure that the proposed project is financially and strategically viable within the context of the company's mandate and governance framework. For the sake of clarity, NHS PS will require clear confirmation at each stage that the scheme is/has:

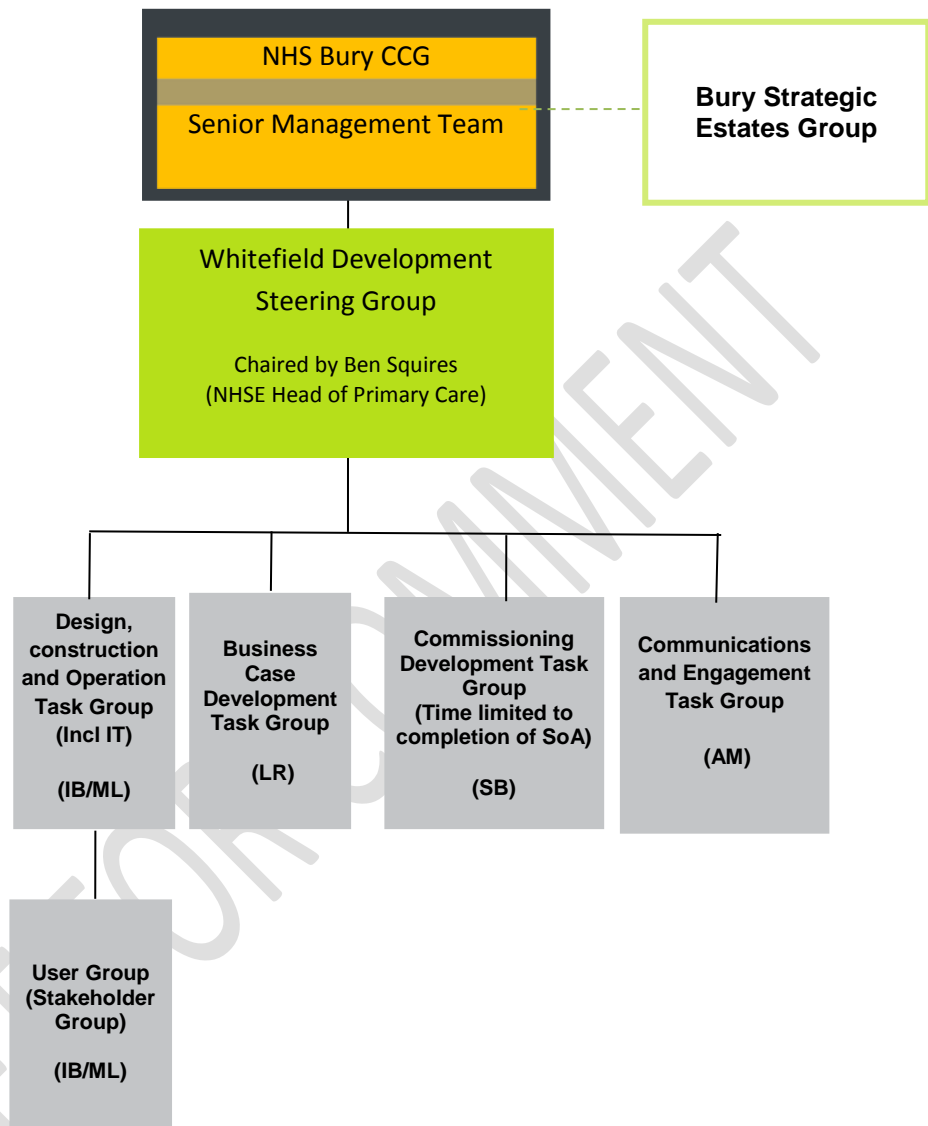
- ✓ Full ownership and commitment from the customer(s);
- ✓ Statutory and technically compliant;
- ✓ Meets relevant NHS guidance;
- ✓ Functional and the right size;
- ✓ Fully occupied;
- ✓ Affordable (in line with the customer's affordability limit);
- ✓ Value for Money;
- ✓ Cost neutral: all the costs being covered by tenancies or underwritten by a customer organisation; and
- ✓ Robust leasing agreements in place with tenants.

8.2 Project Sponsors' Approval Processes

The Project Sponsors' approval processes are concerned with providing assurance in line with current NHS England guidance and the Sponsors' own internal governance arrangements. This approval process seeks to evidence the overarching strategic and financial viability of the proposal and demonstrate that appropriate decision making processes have been applied to arrive at the proposed solution.

NHS PS will assist the Project Sponsors in the development of the FBC required for their own approvals process, but overall ownership of the FBC will remain with the Project Sponsors, in the case of this development, NHS Bury CCG and NHS England.

9. Project Organisation and Structure



The following section outlines the key membership and responsibilities at each level of the organisational structure above. Where tasks groups are referenced above it is perceived that some elements/workstreams can be progressed and completed virtually rather than via the establishment of formal groups.

9.1 Project Sponsors

The scheme is dual sponsored by NHS England and NHS Bury CCG.

The Project Sponsor representing the NHS Bury CCG will be: Mike Woodhead (Associate Chief Finance Officer).

The Project Sponsor representing NHS England will be Ben Squires (Head of Primary Care).

The Project Sponsors have executive decision making responsibility for the project and will define the financial parameters and delegated authority of the **Senior Responsible Officer/Project Lead** (Louise Rigg).

Project Sponsors are required to define how decision making will be apportioned. To this end, Project Sponsors have agreed that decisions will be fed through the Whitefield Development Steering Group, either via scheduled meetings or via email if the decision is required in advance.

Project Sponsors are required to make explicit how liability for abortive scheme development costs will be apportioned. To this end, Project Sponsors have agreed that abortive costs will be apportioned in line with those outlined and approved in the PID.

9.2 NHS Bury CCG Senior Management Team

The Senior Management Team (SMT) has overall responsibility for the planning, procurement and implementation of the project. It is the principal decision making body in relation to the scheme and acts as a decision-making body on behalf of the approving body, NHS Bury CCG.

Decisions will not be financial in nature as the scheme itself is provided through NHS England's Capital Pipeline.

The terms of reference in relation to this project are as follows:

- ✓ Approve the project's organisational structure and governance arrangements;
- ✓ Take overall responsibility for the effective delivery of the project within budget and defined timescales as specified in the approved project governance;
- ✓ Ratify the Master Programme;
- ✓ Ratify the PEP (This document);
- ✓ Approve the Communications and Engagement Strategy and Plan;
- ✓ Monitor and manage project progress and agree significant variations to the project plan;
- ✓ Own the risks and issues associated with the project and develop a collaborative approach to mitigation/resolution;
- ✓ Provide integrity and visible leadership, direction and commitment to the project and encourage a climate of trust and openness;
- ✓ Seek assurance from the Whitefield Development Steering Group on progress against milestones, monitoring risk and items requiring escalation, ensuring the resolution of any escalated issues;
- ✓ Receive and act on reports from the Senior Responsible Officer, NHS PS Project Manager, Whitefield Development Steering Group and external advisors;
- ✓ Provide a collaborative forum for partnership discussion and engagement that will influence and benefit the project and ensure the delivery of NHS Bury CCG's and NHS England's strategic objectives;
- ✓ Ensure that actions and outcomes from meetings are communicated and cascaded appropriately, both within the CCG and externally;
- ✓ Inform the development and rollout of further health and social care sites across the borough; and
- ✓ Take overall responsibility for the effective delivery of the project within budget and defined timescales as specified in the approved project governance.

9.3 Whitefield Development Steering Group

The Whitefield Development Steering Group is established to support the Project Sponsors in order to ensure the successful delivery of the Whitefield Health and Care Centre project.

The Whitefield Development Steering Group will have operational responsibility for the day-to-day management and delivery of the project. It has responsibility for overseeing the development and submission of the FBC and acts as a link between the service providers, the delivery team, the commissioners and the CCG's SMT.

The Membership of the Whitefield Development Steering Group will be as follows:

Name	Role	Organisation	Voting member
Ben Squires	Joint Project Sponsor (Chair)	NHS England	Yes
Louise Rigg	Senior Responsible Officer (Project Lead) (Vice Chair)	NHS England & NHS Bury CCG	Yes
Margaret O'Dwyer	Director of Commissioning and Business Delivery	NHS Bury CCG	Yes
Ian Butterworth (TBC post July)	PS Project Manager	NHS PS	Yes
Mike Woodhead	Project Sponsor (Finance Lead)	NHS Bury CCG	Yes
Alison Mitchell	Communications and Engagement Lead	NHS Bury CCG	Yes

The Whitefield Development Steering Group will be chaired by the Project Sponsor (NHS England) or delegated individual. Day to day management and decision making will be made at Whitefield Development Steering Group level under the direction of the NHS England/ NHS Bury CCG Senior Responsible Officer/Project Lead. The Project Sponsors will keep the Whitefield Development Steering Group updated of any issues and ad-hoc meetings will be convened only if deemed necessary by the Project Sponsors.

The terms of reference of the group in relation to this project are as follow:

- ✓ Recommend for approval the project's organisational structure and governance arrangements;
- ✓ Assume day-to-day responsibility for the effective delivery of the project within budget and defined timescales as specified in the approved project governance;
- ✓ Recommend for approval the Master Programme;
- ✓ Recommend for approval the PEP (This document);
- ✓ Recommend for approval the Communications and Engagement Strategy and Plan;
- ✓ Manage the communication and stakeholder engagement processes;
- ✓ Monitor and manage project progress and agree significant variations to the project plan, escalating upwards as required;
- ✓ Monitor and update the project's risk register;
- ✓ Ratify the appointment of and co-ordinate the work of, all legal, technical and financial advisors;
- ✓ Co-ordinate the activities of the designated workstreams;
- ✓ Implement the procurement processes for the scheme;
- ✓ Advise on approvals required by the Sponsor organisation and deliver the FBC as required;
- ✓ Ensure compliance with NHS wide capital investment regulations;
- ✓ Receive and act on reports from the Senior Responsible Officer, NHS PS Project Manager and external advisors, escalating upwards as required;
- ✓ Take all necessary actions to facilitate the effective management of the project;

- ✓ Authorise the expenditure of all project development costs at each stage of the development within agreed financial parameters, escalating upwards as required; and
- ✓ Approve the progression of key milestones within the project's Master Programme.

9.4 Senior Responsible Officer/Project Lead

A **Senior Responsible Officer/Project Lead** has been designated by the Whitefield Development Steering Group to oversee the project as a whole and to represent the joint commissioners' interests in the development. The **Senior Responsible Officer/Project Lead** has been identified as **Louise Rigg** who will carry out key duties on behalf of the Whitefield Development Steering Group and will delegate tasks to members of the Project team as appropriate.

The Senior Responsible Officer/Project Lead's key responsibilities include:

- ✓ Monitoring the progress of the project against the Project Master Programme;
- ✓ Acting as the single point of contact for NHS Bury CCG and NHS England commissioned services and external stakeholders/providers and providing a direct link to the Whitefield Development Steering Group;
- ✓ Overseeing the appointment of external advisors as required (via NHS Property Services for design, construction and development);
- ✓ Overall responsibility for compiling and submitting the NHS FBC and complying with NHS Approval processes and procedures;
- ✓ Ensuring that the project is successfully delivered within the Whitefield Development Steering Group's time, cost and quality parameters;
- ✓ Establishing appropriate resource through a project team required to deliver the FBC required for NHS approval processes;
- ✓ Manage liaison between the commissioners as well as Tenants and other stakeholders to ensure that necessary elements of the project are signed off in accordance with the current DOH FBC guidance;
- ✓ Provide regular progress reports to the Whitefield Development Steering Group identifying cost, time and quality performance;
- ✓ Define the scope and boundaries of the project;
- ✓ Regular liaison with the appointed Landlord Project Manager (NHS PS);
- ✓ Act as the Whitefield Development Steering Group's main point of contact with the NHS PS Project Manager;
- ✓ Ensure that the NHS PS Project Manager receives Whitefield Development Steering Group decisions on time;
- ✓ Receive and review detailed reports on the project from the NHS PS Project Manager;
- ✓ Establish with the NHS PS Project Manager a common approach to major issues which may arise;
- ✓ Maintain at all times an overview of the project status in relation to the established objectives; and
- ✓ Arrange the post-project evaluation of the scheme.

9.5 NHS PS Project Manager

An NHS PS Project Manager has been identified to take day-to-day responsibility for the development of the new facility on behalf of NHS PS. **The NHS Project Manager is Ian Butterworth (TBC post July 2016).**

The Project Manager's role is to develop the design and specification of the new facility in accordance with the requirements of the sponsoring commissioning organizations. NHS PS will oversee the development of the design and delivery of the build in accordance with the

agreed programme, liaising with the Whitefield Development Steering Group and keeping the Senior Responsible Officer/Project Lead appraised of all major issues and decisions required.

The Project Manager’s key responsibilities include:

- ✓ Develop, monitor & report against the Project Master Programme;
- ✓ Advise the Whitefield Development Steering Group on resources required to complete the estates component of the FBC;
- ✓ Provide the Project Sponsors with a Master Programme for the FBC development process, aligned and integrated with the design development process;
- ✓ Procure and manage resources (both NHS PS and external) to complete the design and construction of the project and the Estates component of the FBC required by the commissioning organisation;
- ✓ Assist the sponsoring organisations to co-ordinate the production of the FBC required in accordance with the DOH Business case guidance and the requirements of the commissioning bodies;
- ✓ Maintain a Project Master Budget for NHS PS incurred project development costs and provide regular updates to the Whitefield Development Steering Group on costs/liabilities incurred to date;
- ✓ Provide technical advice and co-ordinate the technical advice of others during design development. Manage approvals of design (NHS PS Facilities Management (FM), Asset Management (AM), Fire, Health and Safety Standards (HSS), Tenants);
- ✓ Co-ordinate the production of client side information required (FF&E and IT schedule identifying clear lines of responsibility for procurement);
- ✓ Providing a focal point for all tenant contact with NHS PS, providing approvals and decisions as necessary;
- ✓ Day to Day management of the construction project;
- ✓ Escalation of deviations outside of agreed parameters to the Senior Responsible Officer/Project Lead;
- ✓ General contract administration as may be required.

9.6 Individual Task Groups

Sitting below the Whitefield Development Steering Group will be a series of individual task groups established to take forward specific workstreams. Membership of these task groups will vary to suit the needs of the tasks in hand. The section below outlines the key initial workstreams and core task group membership. Meetings will be called as and when required to co-ordinate the work of the individual workstreams.

9.6.1 Business Case Development Task Group

The remit of the Business Case Development Task Group is to lead and co-ordinate the completion of the FBC as required by both the NHS Bury CCG’s and NHS England’s approvals processes.

Membership

Louise Rigg (Chair)	Senior Responsible Officer/Project Lead	NHS Bury CCG and NHS England
Ian Butterworth (TBC post July 16)	NHS PS Project Manager	NHS Property Services
Mike Woodhead	Finance Lead	NHS Bury CCG
Alison Mitchell	Communications & Engagement Lead	NHS Bury CCG

Louise Mort	Provider Lead	Pennine Care NHS Foundation Trust

9.6.2 Design, Construction and Operation Task Group

The remit of the Design, Construction and Operation Task Group is to co-ordinate the development of the options appraisal and construction design. Furthermore, it will ensure that operational considerations are fully integrated in the design solution and signed off by the relevant parties.

Membership

Name	Role	Organisation
Ian Butterworth (Chair)	NHS PS Project Manager	NHS Property Services
Steve Thorley	Project Manager & Lead Consultant	Community Solutions
Mike Culshaw	IT Lead	NHS Bury CCG
Justin Harris	Architect	IBI Group
Mark Reilly	Health Planner	IBI Group
John Murphy	Structural Engineer	Alan Johnston Partnership LLP
Justin Harris	CDM Principal Designer	IBI Group
Abby Chicken	Quantity Surveyor	Rider Hunt

9.6.3 User Group (Stakeholder Group)

The remit of the User Group is to provide detailed input into the development of the options appraisal and construction design. It will make recommendations to the Whitefield Steering Group having ensured that operational considerations are fully integrated in the design solution prior to sign off by the relevant parties.

Membership

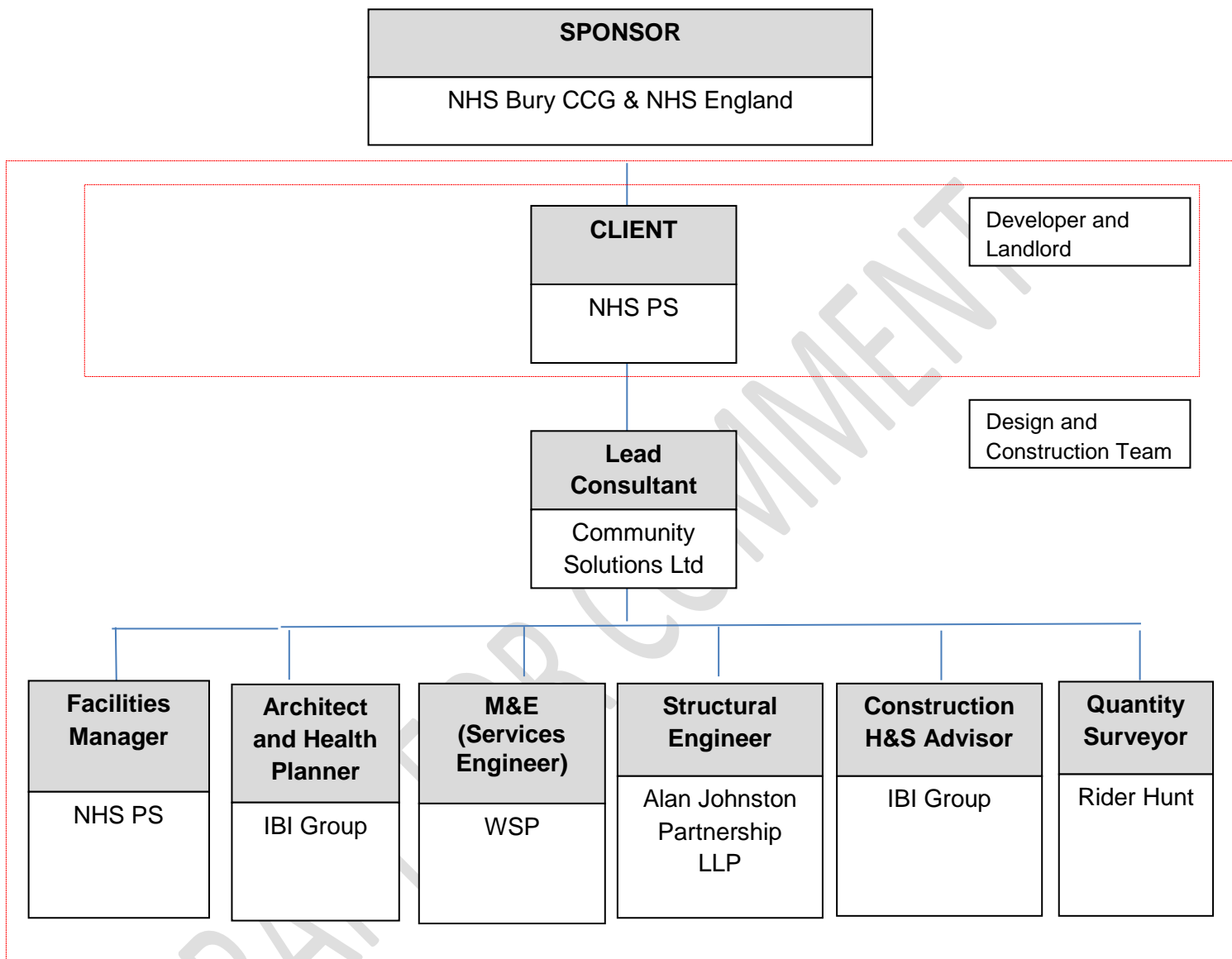
Name	Role	Organisation
Ian Butterworth (Chair)	NHS PS Project Manager	NHS Property Services
Steve Thorley	Project Manager & Lead Consultant	Community Solutions
Mike Culshaw	IT Lead	NHS Bury CCG
Robin Ainley	Architect	IBI Group
Louise Rigg	Senior Responsible Officer/ Project Lead	NHS Bury CCG and NHS England
Louise Mort	Provider Lead	Pennine Care NHS Foundation

		Trust
Dr N Walton	GP	Uplands Medical Practice
Jo Gallagher	Practice Manager	Uplands Medical Practice
Hilary Foxler	Patient Representative	Uplands Medical Practice
Julie Gonda	Assistant Director - Strategy, Procurement & Finance	Bury MBC

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10. Project Contractual Relationships

The contract management structure for the project is indicated below (Pre-contract stages):



11. Key Role Definitions

Lead Consultant

The Lead Consultant provides a single point of responsibility between NHS PS and the multi-disciplinary design team. The lead consultant will co-ordinate the efforts of the specialist designers (Architect, Mechanical and Electrical, structural etc.) to deliver the designs and specifications required for the new facility.

Architect (Appointed by NHS PS)

The Architect is responsible for preparation of the designs and specifications for the new facility, co-ordination with other designers, dealing with statutory approvals, assisting the NHS PS Project Manager, providing design information for initial costing and reviewing any design proposals put forward by the main contractor during the later stages of the project lifecycle.

Health Planner

The Health Planner is responsible for ensuring that the planned capacity and model of care is properly reflected in the functional content, schedule of accommodation and departmental organisation of the facility. They will review both current and planned future activities as well as flows, applying lean planning principles to ensure the building supports both procedural economy and patient focus. They will work with the operational stakeholders and design team to identify opportunities for activities to share rooms, thus maximising the utilisation of space.

IT Lead

The IT lead will provide a day-to-day point of contact and lead the implementation of the IT strategy for new build. They will be responsible for the coordination and procurement of the new infrastructure coupled with the subsequent delivery and transfer of systems and infrastructure.

Structural Engineer

The Structural Engineer will deal primarily in the design of structures in terms of calculating the loads and stresses the construction will have to safely withstand. The structural engineer will factor in the different qualities and strengths delivered by a range of building materials, and understand how to incorporate support beams, columns and foundations.

The Structural Engineer will monitor the progress of an architectural project from its initial stages to its completion. They will create initial design models, using in-depth mathematical and scientific knowledge, and, once construction has started, will monitor the work and meet with contractors to ensure that the designs are being followed closely.

Quantity Surveyor

Rider Hunt will provide Cost Management services during the design development stages. It is envisaged that the Quantity Surveyor will be retained to provide independent cost advice by the client organisation (NHS PS) during the post contract stages.

Construction Health and Safety Advisor

A Health and Safety advisor will be appointed by the lead consultant as part of their team of advisors. The health and safety advisor will provide advice and guidance to the design team regarding their legal duties under the relevant H&S legislation (CDM 2015). The Principle Designer (advised by the Construction Health and Safety advisor) is responsible for ensuring that NHS PS has all necessary Health & Safety documentation in place and that this is being adhered to. The Health and Safety advisor reports to (and is under the direct authority of) the Principle Designer (Medical Architecture).

M & E (Services Engineer)

The Services Engineer is responsible for preparation of designs and specifications for the mechanical and electrical installation, inspection of the works in progress and confirmation of completion to the Project Manager. They should also ensure co-ordination with other designers including IT consultant and contractors.

Facilities Manager (NHS PS)

The Facilities Manager (FM) is responsible for looking after the building users and occupation of the facility upon handover. They will manage Hard Facilities Management such as maintenance, security, pest control and car park management and lifecycle planning.

Other Stakeholders

Other stakeholders identified requiring input into the design process include the NHS PS's Fire Officer, Risk Management and Health and Safety Officers; Estates Maintenance

Engineers; Infection Prevention and Control Team; Facilities Manager; Service Level Agreement Stakeholders and Tenants. Consideration is also being taken to ensure that appropriate public and patient involvement is included in the design stage. Other appropriate groups will be included in the CCG engagement plans during this phase.

These groups will be included in the design process on an “as-needed” basis by involvement in the regular meetings as required with their relevant input filtered through NHS PS Project Manager.

12. Roles and Responsibilities Matrix

The following table sets out the roles and responsibilities for key members of the project team.

	Project Sponsors	Senior Responsible Officer/Project Lead	NHS PS Project Manager	Task Groups
Approve the start and end of a project	x			
Managing NHS PS internal approvals			x	
Managing NHS Bury CCG/NHS England approvals and FBC development	x	x		
Ensuring project remains viable		x	x	
Monitoring progress		x	x	
Reporting progress & highlighting issues		x	x	x
Ad-hoc decisions within tolerance		x	x	x
Ad-hoc decisions exceeding tolerance	x			
Stakeholder Communications and Engagement		x	x	x
Authorising change within tolerance		x	x	
Authorising change exceeding tolerance	x			
Management of risks	x	x	x	x
Identifying, reporting and monitoring risk		x	x	x
Document management and version control			x	x
Briefing the Whitefield Development Steering Group Members		x	x	
Monitoring progress of tasks & work packages		x	x	
Completing tasks & work packages				x

13. Project Controls

A progress report will be produced jointly by NHS PS and the Senior Responsible Officer/Project Lead and circulated to the Whitefield Development Steering Group on a monthly basis.

The Whitefield Development Steering Group will meet to approve or recommend to NHS Bury CCG's SMT the following key stages in the process and to ensure the project remains in line with the business case and continues to meet the needs of the approving bodies.

Approval Stages	Date
PID Approval by NHS England Capital Pipeline Group	8 th July 2015
Steering Group Approval to commence selection and appointment of Project Manager and Design Team	8 th February 2016
Concept Design Approval by Steering Group	27 th June 2016
NHS England PAU Review of OBC	Ongoing Review
NHS Bury CCG SMT Approval of OBC	19 th September 2016
NHS Bury CCG Governing Body Approval of OBC	28 th September 2016
NHS England Approval of OBC – Capital Working Group	29 th September 2016
NHS England Approval of OBC – Capital Steering Group	10 th October 2016
NHS England PAU Review of FBC	Ongoing Review
NHS Bury CCG SMT Approval of FBC	January 2017 (tbc)
NHS Bury CCG Governing Body Approval of FBC	25 th January 2017
NHS England Approval of FBC – Capital Working Group	February 2017 (tbc)
NHS England Approval of FBC – Capital Steering Group	February 2017 (tbc)
Agreement to Lease with Tenants (NHS PS)	Post February 2017

Design Development expenditure will not be committed unless specifically authorised by the Whitefield Development Steering Group (via the form contained at **Appendix 2**). NHS PS will keep a record of all costs committed to the project to date and will provide the Sponsoring Organisation/Whitefield Development Steering Group with monthly updates as part of the project monitoring cycle.

An issues log and risk register will be maintained jointly by the Senior Responsible Officer/Project Lead and NHS PS. Key issues and risks will be highlighted in the monthly progress report, however if urgent ad-hoc direction is required from the Whitefield Development Steering Group then members will be contacted via e-mail for advice. After recommendations have been received from the Whitefield Development Steering Group, the decision will be provided to the Senior Responsible Officer/Project Lead.

14. Communications and Engagement

A Communications and Engagement Strategy will be developed for the project and approval sought firstly from the Whitefield Development Steering Group and subsequently NHS Bury CCG's SMT. This strategy will present an approach to communicating and engaging with various stakeholders to inform the ongoing development and enhancement of health and care services proposed within the new development.

All the key stakeholders will be required to nominate a single point of contact in relation to the project. A Stakeholder Management Plan will be jointly developed between NHS PS, NHS Bury CCG and NHS England.

APPENDIX 1

Project Master Programme

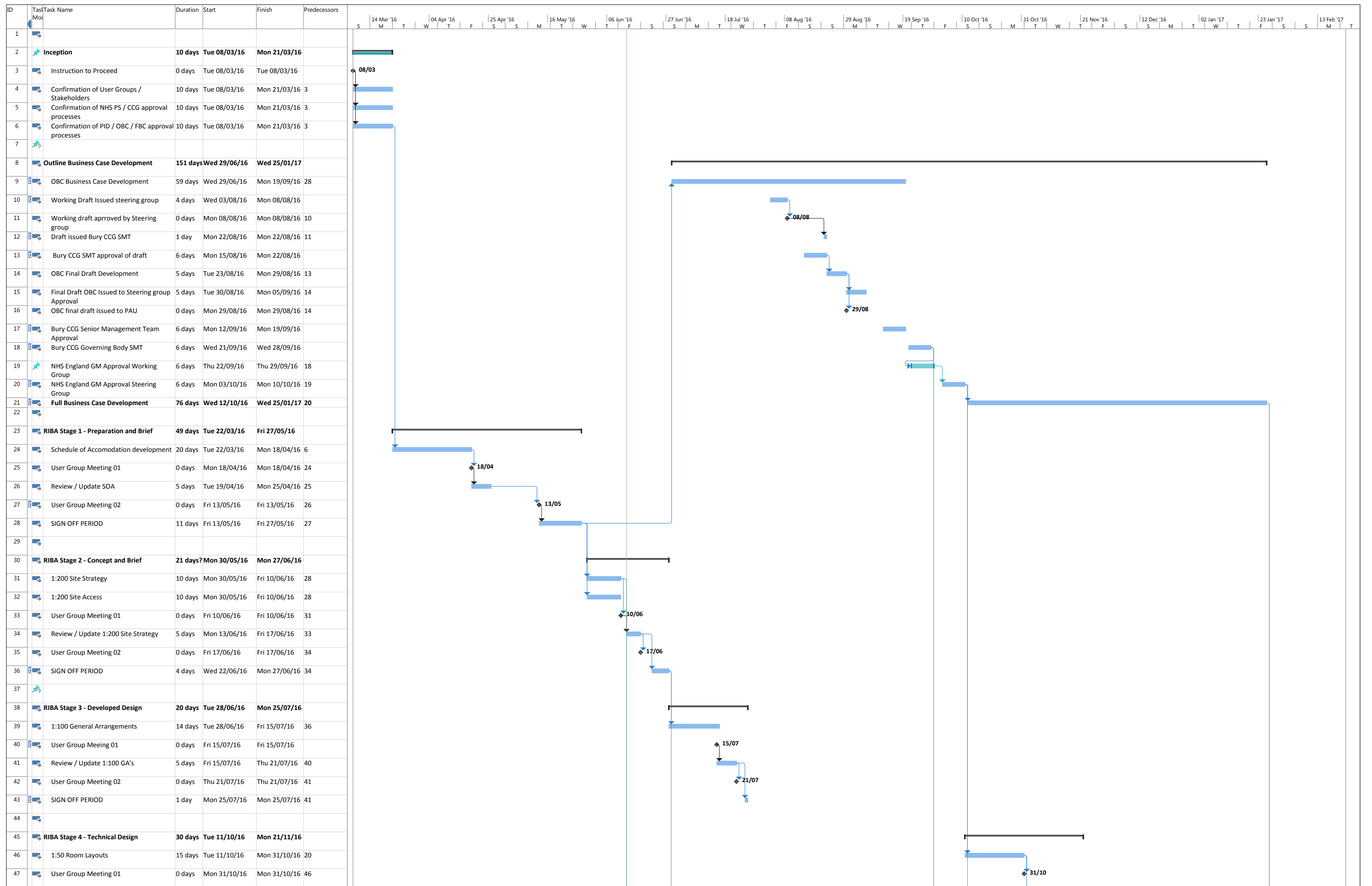


Whitefield
Programme - June 21

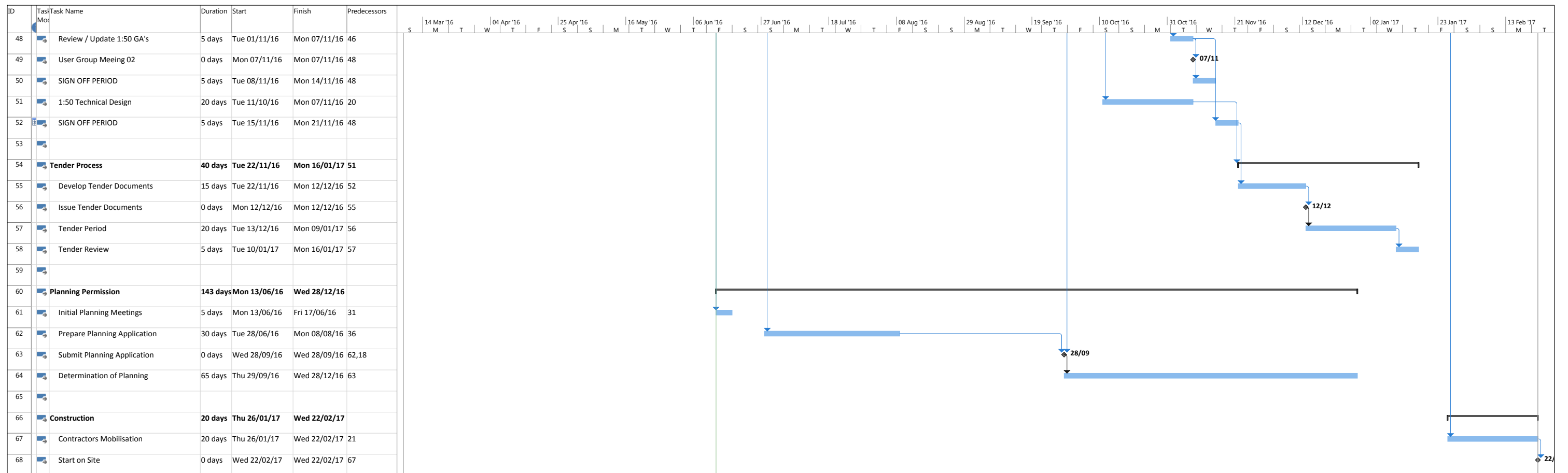
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Confirmation of Commissioners Authorisation to Expend Project Development Costs

<p>This form requests Commissioners' authorisation to draw down project development costs for the following customer capital scheme</p>	
<p>Value of expenditure to be authorised (inc Vat)</p>	<p>£</p>
<p>Details of why cost are required</p>	<p>This form seeks confirmation of sponsor approval to instruct...</p>
<p>The NHS Property Services corporate capital accountant confirms that the costs can be capitalised in line with NHS Property Services Accounting Policies</p>	
<p>The project has been approved by NHS England and added to the pipeline</p>	<p>Yes – Scheme is on Capital Pipeline and has been allocated Capital Code (UC016)</p> <p>***attach link***</p>
<p>Commissioner confirmation regarding abortive costs</p> <p><i>To commit project development expenditure NHS PS require confirmation in writing from the customer (project sponsor) that should the project not proceed as an NHS Property Services scheme the development costs incurred on the sponsors behalf will be fully reimbursed.</i></p> <p><i>By signing below the Project Sponsors are confirming authorisation to incur the item of development expenditure detailed on this form on this basis.</i></p> <p><i>No expenditure beyond that authorised on this form will be committed without project sponsors explicit approval.</i></p>	
<p>By signing this form, the project sponsors instruct NHS PS to commence the development works detailed on the form. In doing so the Project Sponsors agree that the should the project not proceed as an NHS Property Services Scheme the costs expended under the authorisation of this agreement will be fully reimbursed.</p>	<p>***Project Sponsors to sign off***</p> <p>Date:</p>
<p>NHS Property Service Regional Programme Manager Sign Off</p>	<p>Date:</p>
<p>NHS Property Service Regional Director Sign Off</p>	<p>Date:</p>



Project: Whitefield Programme.pd	Task	Summary	Inactive Milestone	Duration-only	Start-only	External Milestone	Manual Progress
	Split	Project Summary	Inactive Summary	Manual Summary Rollup	Finish-only	Deadline	
	Milestone	Inactive Task	Manual Task	Manual Summary	External Tasks	Progress	



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