**Sandwell and West Birmingham NHS Trust**

**Board Committee Chair’s Report**

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| **Meeting:** | MMUH Opening Committee |
| **Chair:** | Mick Laverty |
| **Dates:** | 1st December 2023 |
| **Present:** | |  |  |  | | --- | --- | --- | | **Name** | **1st December 2023** |  | | Mick Laverty, Non-Executive Director **(Chair)** | Attended |  | | Mike Hallissey, Asso Non-Executive Director **(Member)** | Attended |  | | Rachel Barlow, Chief Development Officer **(Member)** | Attended |  | | Richard Beeken, Chief Executive **(Member)** | Attended |  | | Rachel Hardy, Non-Executive Director **(Member)** | Attended |  | | Jo Wass, Asso Non-Executive Director **(Member)** | Attended |  | | Jo Newens, Chief Operating Officer **(Member)** | Attended |  | | Deborah McInerney, Programme Director MMUH **(Member)** | Apologies |  | | Liam Kennedy, Delivery Director **(Member)** | Attended |  | | Mark Anderson, Chief Medical Officer | Attended |  | | Dan Conway, Associate Director of Corporate Governance | Attended |  | | Mel Roberts, Chief Nurse Nursing Officer | Apologies |  | | Simon Sheppard, Director of Operational Finance | Attended |  | | Daren Fradgley, Managing Director/Deputy CEO – Core Organisation | Attended |  | | Riana Relihan, NHSE Representative | Apologies |  | | Kevin Bolger, MMUH Advisor | Attended |  | | Dinah McLannahan, Chief Finance Officer | Attended |  | | Martin Sadler, Executive Director Information Technology & Digital | Attended |  | | Dee Fawcett, MMUH Director of Comms | Apologies |  | | James Fleet, Interim Chief People Officer | Attended |  | | Rachel Heywood-Clarke, PMO Lead | Attended |  | |

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| **1st December 2023** | | |
|  | **BAF** | |
| **Chair’s opinion:**   * Comprehensive rework undertaken. * Core organisation’s capacity to deliver agreed MMUH plans is negatively impacting MMUH’s critical path. | **Partial**  **Assurance** |
|  | **Programme Risk Register** | |
| **Chair’s opinion:**   * Noted. | **Partial**  **Assurance** |
|  | **PMO report inclusive of Ready Set Go triangulation** | |
| **Chair’s opinion:**   * Overall status remains RED. Five RED workstreams, two AMBER and three GREEN. * Workforce workstream remains RED – concerns include insufficient progress re Management of Change and OD. | **Partial**  **Assurance** |
|  | **PAR outputs** | |
| **Chair’s opinion:**   * Comprehensive, high quality external assurance review undertaken, which confirmed known risks/issues. * Four critical issues identified (critical = do now). Two of the four (UTC funding and MMUH revenue funding) seen as blockers to the successful opening of MMUH. The other two critical issues are workforce related (management of change and affordability and staffing of the proposed model of care, including seven day working). * Multiple areas of good practice identified and openness and transparency of the MMUH team noted. | **Partial**  **Assurance** |
|  | **Fundamentals of Care - critical milestones and dashboard assuranceo /No Go decision making** | |
| **Chair’s opinion:**   * Work undertaken to prioritise/phase FoC activity and focus on elements essential to support MMUH opening. | **Partial**  **Assurance** |
|  | **MMUH rightsizing paper** | |
| **Chair’s opinion:**   * Ongoing confusion re progress to date. Multiple schemes in operation. * Simple tracker needed to answer the question – we will fit into MMUH at opening? | **Partial**  **Assurance** |
|  | **UTC Report** | |
| **Chair’s opinion:**   * Funding not yet secured. * UTC will not be open in time for the opening of MMUH, which may/will delay the opening of MMUH by up to 6 months. * Credible Plan B urgently needed and is being worked on. | **Assurance**  **No**  **Assurance** |
|  | **Pharmacy end to end process and funding requirements** | |
| **Chair’s opinion:**   * Proposal supported – but noted that a significant investment was required – funding for which had not been identified. | **Partial**  **Assurance** |
|  | **MOC rephasing for sign-off** | |
| **Chair’s opinion:**   * Progress being made – but significantly slower than previously planned. Concern that lack of progress will negatively impact MMUH opening. | **Partial**  **Assurance** |
|  | **MMUH Service Relocation Plan** | |
| **Chair’s opinion:**   * Noted. | **Partial**  **Assurance** |
|  | **Approval of Monthly MMUH Finance Report** | |
| **Chair’s opinion:**   * Noted. | **Partial**  **Assurance** |
|  | **Benefits Dashboard and strategic delivery framework (inclusive of Benefits Delivery Assurance/Handbook)** | |
| **Chair’s opinion:**   * Noted. | **Partial**  **Assurance** |
| |  |  |  |  | | --- | --- | --- | --- | | **Positive highlights of note** | **Matters of concern or key risks to escalate to the Board** | **Matters presented for information or noting** | **Actions agreed** | | * PAR review didn’t identify any unknown issues and highlighted multiple areas of good practice. | * UTC funding not yet secured. UTC will not be open in time for the opening of MMUH, which may delay the opening of MMUH by up to 6 months. Credible Plan B urgently needed and is being worked on. * MMUH revenue funding is yet to be secured. Insufficient funding will delay MMUH opening. Again, a credible Plan B is urgently needed, to be agreed not just by SWB Trust Board but with our two ICBs also. |  |  | | | |

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| **Reasonable**  **Assurance**  **Substantial**  **Assurance**  **Partial**  **Assurance**  **No**  **Assurance** | Management cannot clearly articulate the matter or issue; something has arisen at Committee for which there is little or no awareness and no action being taken to address the matter; there are a significant number of risks associated where it is not clear what is being done to control, manage or mitigate them; and the level of risk is increasing. |
| **Reasonable**  **Assurance**  **Substantial**  **Assurance**  **Partial**  **Assurance**  **No**  **Assurance** | There is partial clarity on the matter to be addressed; some progress has been made but there remain a number of outstanding actions or progress against any plans so will not be delivered within agreed timescales; independent or external assurance shows areas of concern; there are increasing risks that are only partially controlled, mitigated or managed. |
| **Reasonable**  **Assurance**  **Substantial**  **Assurance**  **Partial**  **Assurance**  **No**  **Assurance** | There is evidence of a good understanding of the matter or issue to be addressed; there are plans in place and these are being delivered against agreed timescales; those that are not yet delivered are well understood and it is clear what actions are being taken to control, manage or mitigate any risks; where required there is evidence of independent or external assurance. |
| **Reasonable**  **Assurance**  **Substantial**  **Assurance**  **Partial**  **Assurance**  **No**  **Assurance** | There is evidence of a clear understanding of the matter or issue to be addressed; there is evidence of independent or external assurance; there are plans in place and these are being actively delivered and there is triangulation from other sources (e.g. patient or staff feedback) |