National Leadership & Innovation Agency for Healthcare
Centre for Equality & Human Rights
Delivery & Support Unit
Clinical Governance Support & Development Unit

Transition Project

Project Closure Report

8 March 2013
Purpose

The Project Closure Report is the final document produced for the project and is used by the Transition Board to assess the success of the project; resolve any open issues and risks; agree any follow-on activities; and formally close the project.

Background

With a remit to clarify and streamline accountabilities, in April 2012 a project was established to review the functions within NLIAH, DSU, CEHR and the CGSDU. Over several months work was undertaken to establish stakeholders’ views on these all-Wales functions as well as to consult with staff. In October 2012 the Transition Board decided that Welsh Government would:

- develop a new Delivery Unit to build on the work of the Delivery & Support Unit (DSU) and undertake functions associated with intervention and turnaround. It would also incorporate the functions currently associated with the Clinical Governance Support and Development Unit (CGSDU), and the National Patient Safety agenda, (previously within NLIAH);

- take forward leadership development functions by transferring the relevant functions within NLIAH to AcademiWales thereby supporting leadership models within a wider agenda as proposed in the Programme for Government (2011);

- repatriate the policy function associated with offender health to the Department for Health, Social Services and Children.

Similarly, it was decided that the improvement functions which were undertaken in various directorates in NLIAH and the Public Health Wales NHS Trust would be brought together and be hosted by Public Health Wales (PHW). The functions associated with the Centre for Equality & Human Rights (CEHR) would also transfer to Public Health Wales. It was assumed that 2013/14 would become a transition year for Public Health Wales, as a receiving host, to ensure continuity of priority business and enable scope for change.

Workforce functions would operate from NHS Wales but with Welsh Government continuing to retain responsibility for the Health Professional Education and Training budget. The workforce functions of workforce planning, intelligence, modernisation, education commissioning and contracting, including education contracting finance and the Student Awards Unit, would transfer to the NHS Wales Shared Services Partnership (NHSWSSP).

It was further agreed that corporate functions were allocated in relation to core or specialist support. Staff associated with Innovation House (current offices of NLIAH)
would transfer to the Shared Services Partnership as the organisation taking over the responsibility for the lease.

**Project Objectives**

Within the context of the decisions on the split of functions, in October 2012, the project moved into its implementation phase with a view to managing a controlled closure of the National Leadership & Innovation Agency for Healthcare and the associated functions. Further, the project was to work with receiving organisations on the effective transfer of functions, staff, finances and assets by 31 March 2013. In doing so, the project needed to take account of the need to continue business as usual and deliver the service level agreement with Welsh Government. In addition, the project needed to ensure that the Abertawe Bro Morgannwg University Health Board was left with no financial or staffing liabilities post 31 March 2013.

Outwith the scope of the NLIAH project were:-

- employer responsibilities of receiving organisations in relation to staff transferring
- governance arrangements surrounding the future delivery of functions and responsibilities of receiving NHS Boards
- arrangements to determine work programmes for delivery of functions after 31 March 2013
- following advice from CEHR, each receiving project would need to consider the requirement for an equality impact assessment of changes to work going forward

**Summary of Progress**

The project has produced 40 products which have been the building blocks to decisions on the following areas:

- the methodology underpinning the split of staff resources and their transfer under TUPE
- decisions on those roles being undertaken by temporary, fixed term or seconded staff
- all relevant TUPE communications with staff
- due diligence work to support staff transfer
- a methodology for splitting financial resources and assets
- agreed division of financial resources
- agreement on the split of assets
- the management of Innovation House from 1 April 2013
- the development of a comprehensive legacy statement for formal agreement by receiving organisations
- assurance that staff will be able to operate effectively post transfer e.g. IMT arrangements
- any changes to the statutory framework needed to support the transfer such as changes to Establishment Orders
- timely and appropriate communication with staff, stakeholders and the Local Partnership Forum (ABMU)
Taking the above work into consideration, in terms of the main objectives of the project – to split staff and financial resources – the outcome is:

**OVERARCHING SUMMARY OF STAFF AND BUDGET TRANSFERS**

*(At 21.03.13)*

<table>
<thead>
<tr>
<th>NLIAH Resource</th>
<th>PHW</th>
<th>NHSWSSP</th>
<th>ABMu (DU)</th>
<th>WG</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff numbers</td>
<td>51</td>
<td>37</td>
<td>8</td>
<td>12</td>
</tr>
<tr>
<td>Staff costs £</td>
<td>2,428,470</td>
<td>1,950,617</td>
<td>236,120</td>
<td>570,160</td>
</tr>
<tr>
<td>Overheads £</td>
<td>147,586</td>
<td>663,206</td>
<td>7,239</td>
<td>16,641</td>
</tr>
<tr>
<td>Programme funding £</td>
<td>1,446,037</td>
<td>442,824</td>
<td>58,782</td>
<td>632,886</td>
</tr>
<tr>
<td>CEHR £</td>
<td>380,098</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>4,402,192</strong></td>
<td><strong>3,056,648</strong></td>
<td><strong>302,142</strong></td>
<td><strong>1,219,686</strong></td>
</tr>
</tbody>
</table>

In terms of the overall performance of the project, all products have been completed largely as planned. There were no significant deviations from the project plan. At the time of writing some products are yet to be completed in full, though they are on track to be delivered by 31 March 2013. These are largely administrative tasks which are not critical for completion by the end of the project though plans are in place to meet that timetable. They are,

- the reorganisation of the folder structure to store electronic files
- the review and transfer where appropriate of hard copy personnel files
- archiving of hard copy files and old corporate records
- providing the ABMU policies which will transfer with staff
- closure of the NLIAH accounts by May 2013
Project Organisation

The following organisational structure was designed and established.

Membership of this Board was:

- Neil Wooding  WG Interim Director W&OD (Chair)
- Sally Attwood  NLIAH Transition Director
- Barbara Bale  NLIAH Joint Project Lead
- Richard Bowen*  WG Director of Operations (Chair)
- Andy Butler  NLIAH
- Jayne Dando**  WG W&OD
- Janet Davies  WG Quality and Safety
- Emrys Elias  DSU
- Kevin Flynn***  WG Director of Delivery
- Bob Hudson  NHS Vice Chair NHS Wales CEO Group
- Huw Llewellyn  ABMU (for Eifion Williams)
- Janet Wilkinson  NHS W&OD lead
- Abigail Harris  WG Director of Strategy
- Donna Hill  WG HR
- Trevor Purt  NHS CE lead for NLIAH project
- Andrew O’Leary  ABMU Local Partnership Forum

* until September 2012, ** until November 2012, *** from September 2012

Project Assurance & Support

The project took advantage of in-house expertise in project assurance which was applied from the outset. This provided independent assurance to the Transition Director regarding quality of the project process and deliverables. In addition, this role maintained close oversight of risks and issues.

Two support staff co-ordinated the work of the project, including the support for each workstream in terms of planning and monitoring. The timely development of some key products was largely the result of this level of support.
WORKSTREAMS

HR Workstream
Comprising senior HR representatives, this workstream planned and delivered on a range of staff related matters including individual letters to all staff setting out the outcome of the TUPE assessment. The workstream also developed agreed lines in anticipation of queries from staff as well as developing and following through on the due diligence work to support the TUPE transfers. A sub-group managed the detailed plans for ensuring appropriate tasks were completed regarding the Electronic Staff Record. All products were developed within the agreed timescale.

Finance Workstream
This workstream developed the methodology for splitting financial resources and, ahead of schedule, the first cut of that split for the Transition Board. Thereafter, the workstream has developed several iterations of the financial distribution to reflect changing circumstances and in responses to further refinements.

Legacy
This workstream ensured that appropriate governance arrangements and legacy processes were in place to enable closure of NLIAH at 31st March 2013 and effective transfer of functions, staff, assets and liabilities to receiving organisations commencing 1st April 2013.

A Legacy Statement was developed following the guidance provided by the Welsh Government and Wales Audit Office. It comprises an overarching summary of staff and budget transfers followed by four Sections, one for each organisation receiving resources from NLIAH. Each receiving organisation’s Legacy Statement will be presented to the LHB/Trust Board for acceptance in March 2013.

Additional detailed information (staffing, financial, governance and corporate) has been provided to the relevant Director/Board Secretary in each receiving organisation.

IM&T
This workstream was established to ensure a seamless transfer of information management and technology to receiving organisations by 31st March 2013. This included a review of the existing provision as part of AMBU SLA arrangements, to determine options for future IT provision. They have also explored the legal implications of transfer of files and will oversee the distribution of electronic and hard copy documents to receiving organisations.

The workstream have proposed pragmatic solutions to ongoing operational support to staff who will be co-located in one building, undertaking a number of pilots to ensure that all processes are in place to ensure seamless transfer on 1 April 2013.

NLIAH Portfolio 2005 - 2013
At the outset, it was envisaged that a separate workstream would be needed to pull together information on the value of NLIAH programmes. In moving forward, this
information has been developed by the Director of Service Improvement and formed part of the Legacy Statement.

Communications

In the preparatory phase, 26 briefings for staff were produced following updates for Directors which were held on a weekly basis. Thereafter, fortnightly staff briefings have been issued which have included ‘Frequently Asked Questions’ and the NLIAH weekly staff round up bulletin. Liaison with the ABMU Local Partnership Forum has been undertaken on a regular basis.

Staff engagement events for all NLIAH/DSU employees have been organised at key points in the process. A briefing for external stakeholders was developed in January 2013 and cascaded widely throughout existing networks.

An in-house commemorative event is planned for 22 March 2013 to acknowledge the contribution to the NHS from NLIAH staff.

Receiving Projects

Each recipient of NLIAH resources has established proportionate project arrangements. Where possible these mirror the arrangements in this project and effective and transparent linkages have been made through membership of workstreams. A Transition Team comprising senior managers from the NLIAH project and the receiving projects, has met on a fortnightly basis to share information and plans; monitor progress; and resolve issues.

Risk Management

Workstreams have identified, assessed and managed risks using a proven template. Significant risks have been considered by the Transition Team. Around 30 - 35 risks have been monitored at the project level – none were assessed as ‘high’. As the close of the project approaches, the Transition Team has taken stock of the risks on the Risk Log and proposals were made on whether receiving projects should look to incorporate these risks into their own risk logs. Of the matters discussed, it was noted that the receiving organisations, in particular, Public Health Wales, were at risk of being unable to fulfil OD commitments in going forward owing to the method by which the resources within the Leadership & OD function in NLIAH had been split.

Similarly, the project had a systematic process for logging issues. These could be concerns or queries about the project and could be raised at any level. Following a review, there are no significant issues transferring to receiving organisations.

The Project Risks and Issues Logs are available at ..\Project Assurance, Risk and Issue Registers.

Lessons Learned & Evaluation

A review of the project will be undertaken primarily to inform learning for the future. As this project was the forerunner of a broader programme of change, formal evaluation would be premature at this stage. This should be a matter considered
once the receiving organisations’ projects have concluded and the new functional arrangements are embedded.

**Project Closure Tasks**
A record of the project is located at: ..\0 Transition Board
Operational information is held at: ..\0 Support Groups
Overall project gantt charts and workstream end product checklists and decision logs can be found via ..\Project Assurance, Risk and Issue Registers

*Sally Attwood*
*Transition Director*
*March 2013*