

## Programme Initiation Document

Programme Title:	Major Capital Investment (MCI) Programme Board
Sponsor:	Keith Hinkley, Director, Adult Social Care
Customer:	Age Well – East Sussex Project Board
Author:	Paula Kirkland/Lorayne Ferguson (Project Managers)
Date:	31 <sup>st</sup> August 2005
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### 1. Purpose of Document

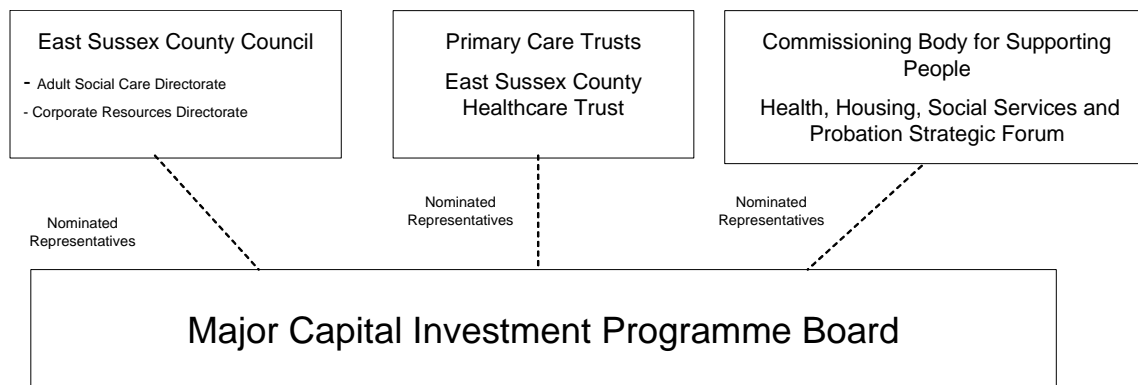
- 1.1 The purpose of this document is to define the:
- Major Capital Investment (MCI) Programme Board;
  - criteria for inclusion of individual Projects within the Programme; and
  - basis for Programme and Project management and the assessment of overall success.

### 2. Background

- 2.1 The MCI Programme Board will provide a forum for considering the future Major Capital Investment requirements of East Sussex across all partner agencies with a primary focus on delivery of assets and services in respect of Health, Housing and Social Care.
- 2.2 The core Programme Board is to include representatives from Health, Housing and Social Care. Additionally representation from Library and Leisure Services may be required.
- 2.3 The Age Well Project is the first Project to be initiated under the MCI Programme and consists of the re-development of buildings and re-profiling of services currently provided at:
- Ridgewood Rise in Uckfield;
  - Harvard Road in Ringmer; and
  - Mount Denys and Pinehill in Hastings
  - Plus new services to be developed in rural Rother
- 2.4 Criteria for Inclusion of further Projects within the MCI Programme can be found in Appendix 1.

### 3. Programme Board Foundation and Objectives

- 3.1 The principal objective of the MCI Programme Board is to establish a vision and maximise opportunities for capital investment based on service delivery programmes in respect of Health, Housing and Social Care strategies across the whole of East Sussex.
- 3.2 The Programme Board approach will be to orchestrate and support the timely and logical progression of individual Projects and to establish, implement and continuously review plans and actions for future capital investments.
- 3.3 The Board will be a forum for each organisation to bring forward proposals for future capital investment. This will help to promote opportunities for joint working and avoid circumstances where individual organisations may develop services in isolation. There will also be opportunities for risk sharing in terms of cost and services delivery in the development of any new capital intensive services. The Programme Board will be derived as follows:



## 4. 4. Appointment of Programme Board

4.1 The Programme Board is accountable for the success of the Programme and the Projects which will be included within it. It comprises the following members to provide overall direction for the Programme and the Projects included within it.

Representation should be at a level which allows the Programme Board to take strategic and commissioning level decisions – not only as the Programme Board, but on behalf of their own organisations. Within East Sussex County Council the Programme Board will report to Scrutiny.

Keith Hinkley	Programme Sponsor and Chairman of the Programme Board	Director of Adult Social Care
Sean Nolan	Customer	Deputy Chief Executive and Director of Corporate Resources
Tony Goss		Lead Commissioner, Mental Health Services, Hastings & St Leonards PCT
Andrew Demetriades		Director of Commissioning and Service Improvement.  Representing Chief Executive, South Downs and Weald PCT
		Representative of District Council Chief Housing Officers
Beverly Hone		Head of Policy and Strategy, Adult Social Care
Lorraine Reid		Deputy Chief Executive, East Sussex County Healthcare Trust
Rita Stone		Assistant Director Resources, Adult Social Care, East Sussex CC
Programme Board Advisors as required and may include:		
Angela Reid		Head of Legal Services, East Sussex CC
Alistair Robson	Advisor	Assistant Director Policy Division,
Richard Seager	Advisor	Audit Manager, Audit & Performance, East Sussex CC
Andrew Ogden		Director Of Law And Performance, East Sussex CC

## 5. Responsibilities

5.1 The overarching role of the Programme Board is to make decisions on and oversee the capital investment priorities for the development of quality resources for the delivery of Health, Housing and Adult Social Care across the County. The Programme Board approach will be to maximise opportunities for capital investment and to orchestrate the timely and logical progression of individual Projects. Responsibilities of the Programme Board include:

- Define a whole systems plan (for provision of services) which delivers optimum services in quality premises.
- Decide on long term objectives and how they will be delivered and if it includes capital investment how that may be raised.
- Consider whether East Sussex should apply to the Department of Health for a LIFT Co as a vehicle for procuring capital assets.
- Review of training needs across the Programme Board and each Project Team to ensure that best practice and consistency is maintained across the entire Programme;
- Link into the Project Board/Team currently undertaking the Review of Future Property Need on behalf of ESCC;
- Set criteria for inclusion of Projects within the Programme;
- Following approval for inclusion,
  - set Project Brief;
  - issue Project Initiation Document to include success and evaluation criteria;
  - Agree individual Project Governance and risk sharing mechanism;
  - Clarify and agree joint working arrangements
  - Appoint Project Managers and Project Teams;
  - Agree and monitor Project Plans
  - Allocate sufficient resources (time/people/money).

## 6. Appointment of Project Teams

6.1 The Programme Board will appoint the Project Managers and the Project Teams to be responsible for the delivery of each project. The key responsibilities of each Project Team will be to:

- Actively lead and support the development of the Project
- Provide regular monitoring and reporting of progress
- Respond to exceptions and risks

6.2 Each Project Team to generically include the following representatives:

- Project Manager
- Legal Services (from lead organisation)
- Finance
- Departmental Finance
- Property
- Departmental Estates
- Personnel and Training Service
- Locality Stakeholders. For example:

- Health
- Mental Health Partners
- Housing
- District Councils
- Voluntary Sector
- Service User representative

## **7. Resource Requirements**

### **8.**

- 7.1 It is not currently envisaged that the Programme Board will require any additional resources except for time allocated by the individuals on the Board itself.
- 7.2 Individual Projects accepted under the MCI Programme will require allocation of additional resources which will form part of the Project sign up.
- 7.3 The Age Well Project has a budget of £xx allocated for Project development for the year 2005/06. This allocation excludes any funds that may be required for Land acquisition.

## **8. Programme Timescales**

- 8.1 The Programme Board has been developed to explore current and future needs of services development. As these areas are dynamic it is not considered appropriate to place a time limitation on the existence of the Programme Board.
- 8.2 The existence, membership and objectives of the Programme Board should be reviewed annually on the anniversary of its inception.
- 8.3 Individual Project timescales will be developed as part of each Project Plan and will incorporate all external timescales.

## **9. Programme Approach**

- 9.1 The Programme Board will approve or decline each Project on its individual merits and how it scores under the Criteria for Inclusion.
- 9.2 Once approved Project Teams will be established and will take each Project forward in accordance with the individual areas of responsibility outlined in the respective PID.
- 9.3 Project Teams will report back to the Programme Board.

## **10. Programme Plan**

- 10.1 See Section 8 – Programme Timescales

## **11. Programme Costs & Funding**

- 11.1 See Section 7 – Resource Requirements

## 12. Programme Benefits

- 12.1 The establishment of the MCI Programme Board will enable East Sussex as a whole economy to develop its infrastructure in a coherent manner and will improve:
- service delivery;
  - cost efficiency in terms of operational costs, maintenance costs and environmental costs;
  - working environment;
  - image and presence in the community
  - links between agencies; and
  - sustainability.

## 13. Deliverables

N/A.....?

## 14. Resource Management Project Controls

- 14.1 The MCI Programme Board will maintain a record of:
- Minutes of meeting
  - Individual Project Initiations/approvals together with supporting evidence for inclusion
  - Appointment of Project Team and agreed Project Plans
  - COMT reports and approvals
  - Cabinet reports and approvals
  - Relevant Partner Organisation reports and approvals (e.g. PCTs)
  - Any more.....?
- 14.2 Each individual Project will be run where practical in accordance with the PRINCE 2 project management standard and methodology. The minimum requirement to include the provision and monitoring of agreed Project Plans.
- 14.3 Each Project Manager will maintain a log of Project Risks and will take these into account in drawing up plans. The Risk Log will be reviewed by the Programme Board at each meeting.

## 15. Programme Communications Plan

- 15.1 The Programme Board will meet at least bi-monthly to:
- Approve new Projects into the Programme;
  - Appoint Project Managers, Teams and Governance;
  - Receive Project updates;
  - Agree progress and sign off key stages as defined within individual Project Plans;
  - Agree any request to change the definition or scope of an individual project;
  - Review and assess Project Risk Logs
  - Ensure creation of an audit trail and demonstrate clear accountability
  - Any more.....?
- 15.2 Additional meetings of the Programme Board will be held if an exception has occurred, external events need to be considered, or there are resourcing issues.

## 16. Exception Process

- 16.1 The individual Project Managers will monitor timescales and costs at regular intervals and will report to the Programme Board at each bi-monthly meeting as part of the Project Update.
- 16.2 Any forecasts that the tolerances for time and cost will be exceeded, will lead to preparation of an exception plan to be presented at an urgent/additional meeting of the Programme Board.

## 17 Constraints

- 17.1 MCI Programme Board will be faced with the following potential constraints which may effects its success:
  - Ability to agree an appropriate risk sharing mechanism
  - Risk averse commissioning climate due to financial pressures
  - The diverse and complex health and social care economy may make long term decision making more difficult

## 18 Change Control

- 18.1 This PID may be varied by negotiation between the Programme Board Members. Any variation to be confirmed in writing. However, no variation can be made that exposes any party to increased risk associated with the MCI Programme.
- 18.2 Any requests to change the definition or scope of a Project as set down in the individual Project Initiation Document will be initially assessed by the Project Manager and an assessment of the impact of the change will be presented at the subsequent meeting of the Programme Board where it will be decided whether or not to accept the request.

## 19 Dispute resolution *(this section to be finalised following consultation with Angela Reid)*

- 19.1 The MCI Programme Board is a complex partnership, involving up to [ ] different statutory organisations. This agreement therefore relies upon goodwill and trust, and a commitment to a mature and effective approach to joint working between the partners.
- 19.2 The parties will use their best endeavours to resolve by agreement any dispute amongst them with respect to any matter relating to this Agreement.
- 19.3 If any party considers that another party has failed to comply with the terms of this Agreement and this dispute has not been resolved in accordance with the preceding paragraph then the Parties shall attempt to settle it by mediation in accordance with the Centre for Dispute Resolution (CEDR) Model Mediation Procedure. Where this is unsuccessful, an accredited arbitrator will be invited (e.g. a member of the Chartered Institute of Arbitrators).

## 20. Risk Log

- 20.1 Each Project Manager will generate and maintain a mitigated Risk Log if risks arise during the course of the project. These will be reviewed at Programme Board meetings.
- 20.2 Programme Board to advise on linking individual Projects to the Risk Registered maintained by each stakeholder organisation.

## 21. Customer Acceptance

Customer Acceptance of PID	
Name:	Sean Nolan, Deputy Chief Executive & Director of Corporate Resources
Signature:	
Date:	

Attachments	
Annex 1	Checklist for Inclusion of Projects within MCI Programme