

Annual Business Plan 2018/19

Summary Exception Report on Performance, Period Ending March 2019







Introduction

The purpose of this report is to provide a summary of progress to date to the BSO Board and DHSSPS Sponsor Branch on how well the organisation is delivering the key actions identified within the annual Business Plan 2018/19. These actions are linked to the organisation’s Corporate Objectives for 2018-21 and include Departmental Priorities and Targets.

Traffic Light System Rating

The Traffic Light System is a summary of progress to date and an indication of the level of confidence that actions identified in the Business Plan will be delivered by the completion date. A brief commentary will be included against all those actions where the rating is Red or Amber: this should make clear the remedial action being taken to ensure achievement by year end and reasons for extension of timeline or any cancellation of action.



Traffic Light BRAG Rating Description Key	
RED 	Action forecast to be or has been delivered significantly (i.e. in excess of one quarter) outside completion date or: significantly outside agreed tolerance level (e.g. on Corporate Scorecard).
AMBER 	Action forecast to be or has been delivered outside (but no more than one quarter) of completion date or: outside agreed tolerance level (e.g. on Corporate Scorecard).
GREEN 	Action forecast to be delivered by the completion date or: within agreed tolerance level (e.g. on Corporate Scorecard).
BLUE 	Action complete.

Summary of Traffic Light Rating System (Period Ending 31 March 2019)

The table below shows a summary of the Traffic Light rating system assigned to 53 Actions within the Business Plan for the period ending 31 March 2019.

Traffic Light	Period Ending June 2018	Period Ending Sept 2018	Period Ending Dec 2018	Period Ending March 2019
RED	-	-	1 (2%)	2(4%)
AMBER	7 (15%)	5 (9%)	7 (13%)	9(17%)
GREEN	38 (79%)	36 (68%)	30 (57%)	2(4%)
BLUE	3 (6%)	12 (23%)	15 (28%)	40(75%)

At the end of the 4th quarter of 2018/19, 79% of the actions within the Business Plan were reported as Blue/Green.


Frequency of Reporting




The report will be produced on a quarterly basis for consideration by the Board and the DoH.

Exception Reporting



Exception Reporting for those actions rated Red and Amber will occur as noted above. It should be succinct and structured in terms of providing a reasons for the exception and identifying actions to address the situation and highlighting any emerging organisational risk as a consequence of the exception. The Board may wish to receive a Summary Exception Report only.

BSO Strategic Objective 2: Develop Our Services in Partnership with Our Customers

Key Priorities / Targets	Key Actions	BRAG Status	Comment
<p>5. Continue to expand Shared Services.</p> <p>[carried over from BSO Business Plans 2016-17 and 2017-18]</p>	<ul style="list-style-type: none"> Implement plans for new Interpreting Service provision to Deaf and Hard of Hearing Community in line with HSCB policies and direction by September 2018 (Responsibility: Chief Executive – Head of Shared Services to co-ordinate); <p><i>carried over from BSO Business Plan 2017-18]</i></p>	<p>11</p> 	<p>Delays due to HSCB. HSCB has appointed a project manager to progress implementation for September 2019.</p> <p>PM has met with HSCB re: proposed supplier Terms and Conditions.</p> <p>Once HSCB approve, the T&Cs will be put to the suppliers. When agreement is secured, progression will move to the operational stage. To be rolled over to next year's business plan, subject to DoH approval.</p>





	<ul style="list-style-type: none"> • <u>Subject to DoH decision</u>, implement delivery plans for the preferred options identified in the Shared Services feasibility studies by March 2019 and beyond (Responsibility: Senior Management Team); 	12 	Subject to DoH decision, rolled over into next year's Business Plan.
<p>8. Implement new services to NI Fire and Rescue Service (NIFRS).</p> <p><i>[carried over from BSO Business Plans 2016-17 and 2017-18]</i></p>	<ul style="list-style-type: none"> • Continue to scope potential for provision of Legal Services to NIFRS by December 2018. 	16 	Continue to scope potential for provision of DLS services to NIFRS in relation to procurement advice.
<p>10. Plan for new HSC Regional Clinical Systems.</p> <p><i>[carried over from BSO Business Plan 2017-18]</i></p>	<p>Support the Senior Responsible Officer (SRO) to complete an Outline Business Case (OBC) for replacement of:</p> <p>the regional Pathology system by December 2018 (with the aim of completed procurement by December 2019)</p>	19 	<p>1. Continued strong Pathology buy-in, alongside regional approach. Technical issues continue to be resolved. Agreed approach to resolve ongoing OBC delays. Additional resource made available through BSO PaLS to facilitate approach.</p> <p>2. Resources in place for Blood Production and</p>


		<p>Tracking, work in understanding detailed regional requirements and required approach underway.</p> <p>3. First phase of PFK standardisation outputs approved by Regional Pathology Network Speciality Fora, Project Board, Regional Clinical Approval Board & by the Information Standards Board. A pilot of new standards has been successful. Rollout continues, with products maturing for Phase 2. Standardisation project is continuing to deliver. Further clinical approval board meeting scheduled for February, with a number of papers being put forward for final approval. 2. Four products from Phase 1 forwarded to Information Standards Board for logging in January.</p> <p>3. Implementation complete for one set of tests in one Trust for Biochemistry. Subject to DoH decision,</p>
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			this will be rolled over to next year's business plan.
<p>11. Encompass is a regional programme hosted by the BSO. The Chief Medical Officer is the Senior Responsible Officer (SRO). The purpose of the <i>Encompass</i> Programme is to deliver a digital health and care record for every citizen in Northern Ireland that will support health and well-being throughout life by 2026. The embedding of an ethos of collective responsibility throughout the HSC will be key to the delivery of the Programme.</p> <p><i>Encompass</i> will be in the early stages of implementation in 2018-19 and aim to have put in place and provided support for appropriate governance mechanisms, structure and plans to ensure successful procurement and delivery.</p>	<ul style="list-style-type: none"> • appointment of main <i>Encompass</i> solution supplier by March 2019. 		<p>Final tender submission and evaluation is planned for May 2019, with Notice of Intention to Award Contract expected in June 2019.</p> <p>Award of contract expected in Oct / Nov 2019.</p> <p>Subject to DoH approval, this will be rolled over to next year's business plan.</p>
<p>12. Work in partnership approach to begin scoping detailed project</p>	<ul style="list-style-type: none"> • Carry out initial scoping work in conjunction with key stakeholders regarding the proposed hosting 	<p>24</p> 	<p>Subject to DoH decision, this will be rolled over to next year's business plan.</p>

arrangements required in BSO following proposed closure of HSCB.	arrangement of HSCB staff by BSO (to March 2019 and beyond) Responsibility: Chief Executive and Senior Management Team		New expected completion date set for March 2020 and beyond.
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BSO Strategic Objective 3: Demonstrate Continuous Improvement in Pursuit of Excellence

<p>19. Commission a study of key HSC Leadership Centre programmes to demonstrate the link between leadership development and better outcomes for patients, clients and service users.</p>	<ul style="list-style-type: none"> Academically validated study produced and formation of increased leadership development alliances by March 2019 <p>Responsibility: Chief Executive (Head of HSC Leadership Centre to co-ordinate)</p>	<p>38</p> 	<p>HSCLC have opened discussions with UU on carrying out a study on the links between leadership development and increased organisational effectiveness. A literature review was carried out. Subject to DoH approval, this will be rolled over to next year's business plan</p>
<p>22. Implement an improvement plan in relation to Payroll Shared Services.</p>	<ul style="list-style-type: none"> Complete improvement plan by March 2019. <p>Responsibility: Director of Finance (Head of Shared Services to co-ordinate)</p>	<p>43</p> 	<p>Subject to DoH decision this will be rolled over to next year's business plan. Full plan expected to be implemented by September 2019.</p>
<p>23. Continue to work towards continuous improvement of cyber-security arrangements and expanding out-of-hours support arrangements for ITS.</p>	<ul style="list-style-type: none"> Recruitment of Cyber Security Programme and Project Management staff by September 2018; 	<p>45</p> 	<p>Recruitment taking longer than expected. Funding approved for 8a post. This is currently with RSSS.</p>
	<ul style="list-style-type: none"> Put in place 24/7 support arrangements for BSO Tier 1 (clinical/business critical) Services, subject to business case approval by March 2019 	<p>46</p> 	<p>Delayed to July 2019 The OOH BC for resourcing has been approved and a programme manager has been appointed to take forward the development of</p>

			the full OOH BC. Cybersecurity arrangements and improvements continue to be monitored via the BSO Corporate Risk Register and mandatory reporting arrangements within the organisation.
24. Streamline HSC pre-employment checks, through the use of innovative technology.	<ul style="list-style-type: none"> Lead the Performance Improvement Workstream within the Strategic Resourcing Innovation Forum (SRIF) to implement new pre-employment process by March 2019. <p>Responsibility: Director of Finance (Head of Shared Services to co-ordinate)</p>	47 	Delayed to March 2020. Subject to DoH decision this will be rolled over to next year's business plan.