







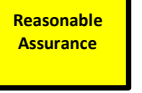


Sandwell and West Birmingham NHS Trust Board Committee Chair's Report

Meeting:	MMUH Opening Committee		
Chair:	Mick Laverty		
Dates:	2nd February 2024 & 1st March 2024		
Present:	Name	2nd February 2024	1st March 2024
	Mick Laverty, Non-Executive Director (Chair)	Attended	Attended
	Mike Hallissey, Asso Non-Executive Director (Member)	Attended	Attended
	Rachel Barlow, Chief Development Officer (Member)	Attended	Attended
	Richard Beeken, Chief Executive (Member)	Attended	Attended
	Rachel Hardy, Non-Executive Director (Member)	Attended	Attended
	Jo Newens, Chief Operating Officer (Member)	Apologies	Apologies
	Deborah McInerney, Programme Director MMUH (Member)	Attended	Attended
	Liam Kennedy, Delivery Director (Member)	Attended	Attended
	Mark Anderson, Chief Medical Officer	Apologies	Attended
	Dan Conway, Associate Director of Corporate Governance	Attended	Attended
	Mel Roberts, Chief Nurse Nursing Officer	Attended	Attended
	Simon Sheppard, Director of Operational Finance	Attended	Attended
	Daren Fradgley, Managing Director/Deputy CEO – Core Organisation	Apologies	Attended
	Riana Relihan, NHSE Representative	Attended	Attended
Kevin Bolger, MMUH Advisor	Attended	Attended	
Martin Sadler, Executive Director Information Technology & Digital	Attended	Attended	

* See Reading Room for assurance classification

	Jayne Ilic, MMUH Director of Comms	Attended	Attended
	James Fleet, Interim Chief People Officer	Attended	Attended
	Rachel Heywood-Clarke, PMO Lead	Attended	Attended
	Jayne Dunn, Director of Commissioning & Equipping	Attended	
	Richard Molloy, Trust Construction Director	Attended	
	Demetri Wade, Deputy Chief Operating Officer	Attended	Attended

1 st March 2024			
1.	Programme Risk Register		
	Chair's opinion: <ul style="list-style-type: none"> Risks segmented by: building handover; patient day one; and transfer to BAU. Seven programme risks behind trajectory – including bed-fit/rightsizing, length of stay concerns and operational readiness/capacity risks. Workforce: affordability of MMUH stage 3 roles and impact on safe staffing was also noted. UTC funding resolved, but UTC won't be open until 2025 and credible Plan B to cover period following MMUH opening <u>still</u> needs working up urgently. 		
2.	PMO Ready Set Go Report		
	Chair's opinion: <ul style="list-style-type: none"> Considered the factors that will help the go/no go decision over four dimensions: Critical success factors (CSF) – Red, Operational Readiness – Amber, Risk – Amber; and Clinical Hazards - Green. CSF: (again) bed-fit/rightsizing and length of stay are issues of concern. Construction defects also noted as a concern. UTC impact not is not currently reflected across the four dimensions – and needs to be. Fundamentals of Care: <u>still</u> no metrics available. 		
3.	Bed fit and winter plan assurance		
	Chair's opinion: <ul style="list-style-type: none"> Winter plan 2023 didn't work. Plausible rationale for underperformance of rightsizing schemes and increases in length of stay discussed. Governance improvements made which should bring more focus. Performance being tracked and improvements expected. 		
4.	UTC assurance paper inclusive of transitional service plan		
	Chair's opinion: <ul style="list-style-type: none"> Verbal update. No proposal provided/considered. Workable proposal is needed urgently. 		NA

5.	Logistics assurance <u>Chair's opinion:</u> <ul style="list-style-type: none"> Progress noted. 	
6.	Workforce assurance <u>Chair's opinion:</u> <ul style="list-style-type: none"> Paper not considered – was issued less than 24 hours before MMUH committee. 	NA
7.	Move plan with costs <u>Chair's opinion:</u> <ul style="list-style-type: none"> Progress noted. Three patient move days proposed. Additional cost estimated at (a maximum) of c£580k. Can be funded via taper relief. 	
8.	Retained estates plans <u>Chair's opinion:</u> <ul style="list-style-type: none"> Progress noted. Next iteration needs to consider/include current and future plans re home/hybrid working. 	
9.	Travel Plan <u>Chair's opinion:</u> <ul style="list-style-type: none"> Good progress being made with various stakeholders including the WMCA, BCC and SMBC. 	
10.	Stakeholder plan <u>Chair's opinion:</u> <ul style="list-style-type: none"> Good progress noted. Messaging needs to reference back to MMUH vision and objectives. 	
11.	Planned Completion critical path and risk assessment <u>Chair's opinion:</u> <ul style="list-style-type: none"> Balfour Beatty are signalling further practical completion (PC) delays and are in negotiations with the NHP team. The issues they are signalling still need understanding and sore-thumbing by the SWB team – but include some 'red-line' issues. Too early to say what impact there will be on proposed PC date and MMUH opening date. 	

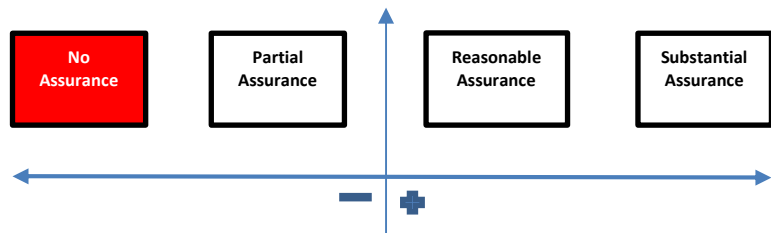
12.	PAR review outcome and IPA Gate 4 self-assessment and timeline			
	Chair's opinion: <ul style="list-style-type: none"> Preparation for the Gate 4 review underway, including a planned away-day. Gate 4 review likely to be in June. 			Partial Assurance
13.	Approval of Monthly MMUH Finance Report			
	Chair's opinion: <ul style="list-style-type: none"> c£60m revenue funding gap remains. Potential funding for the capital charges element (c£19m) may be available, but no current source of funding for the energy/inflation and clinical model identified. 			Partial Assurance
14.	BAF Report			
	Chair's opinion: <ul style="list-style-type: none"> Noted. 			Partial Assurance
15.	PMO Report			
	Chair's opinion: <ul style="list-style-type: none"> 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
	<ul style="list-style-type: none"> 	<ul style="list-style-type: none"> Bed-fit/rightsizing & length of stay UTC Plan B Finances – c£60m revenue funding not confirmed 	<ul style="list-style-type: none"> 	

2nd February 2024

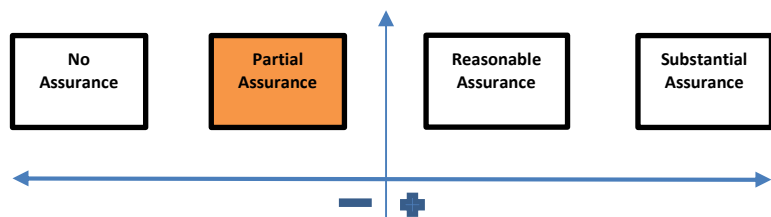
16.	Critical path decision - oversight paper			
	Chair's opinion: <ul style="list-style-type: none"> Noted – dry run for pre-Board March MMUH Committee. Overview of seven components that will be considered as part of Board decision: Ready, set, go; Bed fit; Workforce assurance; Activation plan; Move plan; Risk assessment re Practical Completion; Financial assurance & benefits. 			Partial Assurance

17.	Programme Risk Register	Partial Assurance
	<p>Chair's opinion:</p> <ul style="list-style-type: none"> • Bed-fit/rightsizing and operational readiness risks are of significant concern. • UTC funding resolved, but UTC won't be open until 2025 and credible Plan B to cover period following MMUH opening needs working up urgently. 	
18.	PMO report inclusive of Ready Set Go	Partial Assurance
	<p>Chair's opinion:</p> <ul style="list-style-type: none"> • Reviewed the factors that will impact the go/no go decision – excluding workforce which was subject to a deep dive at previous committee. To be revisited at next MMUH Committee. • Still no measures available re Fundamentals of Care. 	
19.	Bed fit assurance	Partial Assurance
	<p>Chair's opinion:</p> <ul style="list-style-type: none"> • Limited assurance – rightsizing schemes underperforming and significant length of stay issue has developed. • Real concern given winter plan didn't work. • Governance needs strengthening and a Plan B needs developing. • Significant impact on go/no go decision. 	
20.	Activation Plan	Partial Assurance
	<p>Chair's opinion:</p> <ul style="list-style-type: none"> • Noted. Comprehensive plan in place. 	
21.	Move Plan	Partial Assurance
	<p>Chair's opinion:</p> <ul style="list-style-type: none"> • Noted. Three patient move days proposed. Cost still to be provided. 	
22.	Planned Completion risk assessment	Partial Assurance
	<p>Chair's opinion:</p> <ul style="list-style-type: none"> • Noted. • Operational readiness is still an issue. 	
23.	Risk Assessment for Suicide by Jumps or Falls in Public Areas of MMUH	Partial Assurance
	<p>Chair's opinion:</p> <ul style="list-style-type: none"> • Noted. Comprehensive risk assessment undertaken, further control measures being explored. 	

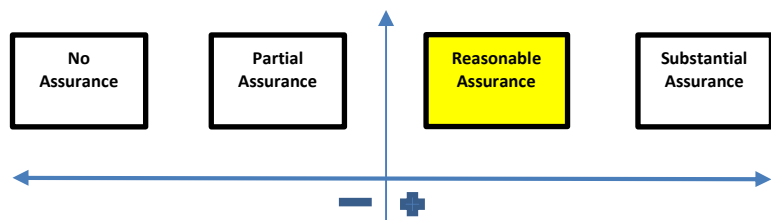
24.	Approval of Monthly MMUH Finance Report			
	Chair's opinion:			Partial Assurance
	<ul style="list-style-type: none"> Noted. c£60m revenue funding gap still exists – difficulty concluding discussions with national/regional partners (NHSE and ICBs). 			
25.	MMUH Service Relocation Plan			
	Chair's opinion:			Partial Assurance
	<ul style="list-style-type: none"> Noted. 			
26.	Benefits Report and Handbook			
	Chair's opinion:			Partial Assurance
	<ul style="list-style-type: none"> Noted. 			
27.	Communications Plan 2024			
	Chair's opinion:			Partial Assurance
	<ul style="list-style-type: none"> Noted. Stakeholder communications need to reference back to the MMUH Purpose & Vision. 			
28.	PMO report			
	Chair's opinion:			Partial Assurance
	<ul style="list-style-type: none"> Noted. 			
	Positive highlights of note	Matters of concern or key risks to escalate to the Board	Matters presented for information or noting	Actions agreed
	<ul style="list-style-type: none"> Ready, set, go – decision framework 	<ul style="list-style-type: none"> Bed-fit/rightsizing & length of stay UTC Plan B Finances – c£60m revenue funding not confirmed 	<ul style="list-style-type: none"> 	



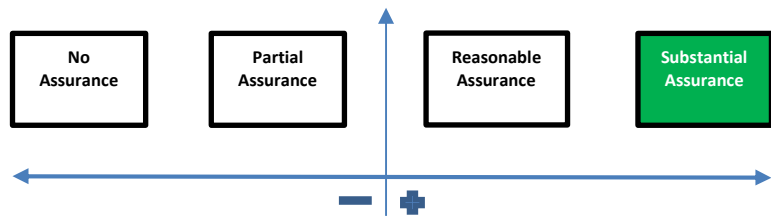
Management cannot clearly articulate the matter or issue; something has arisen at Committee for which there is little or no awareness and no action being taken to address the matter; there are a significant number of risks associated where it is not clear what is being done to control, manage or mitigate them; and the level of risk is increasing.



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.



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.



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)