


Programme and Project Management Policy

Document Status:

This is a controlled document. Any printed or downloaded copies are not controlled. The version of this document published on the Bedfordshire, Luton & Milton Keynes Integrated Care Board website is the controlled copy

www.befordshirelutonandmiltonkeynes.icb.nhs.uk

Sustainable Development - Environmental

 Do you really need to print this document?

Please consider the environment before you print this document and where possible copies should be printed double-sided. Please also consider setting the page range in the print properties, when relevant to do so, to avoid printing the document in its entirety.

Document Control	
Document Owner:	Director Corporate Services
Document Author(s):	Head of Programme Governance
Directorate:	Corporate Services
Approved By:	Operational Group
Date of Approval:	01-07-2022
Date of Next Review:	01-07-2024
Effective Date:	01-07-2022

Version Control			
Version	Date	Reviewer(s)	Revision Description
Draft v1.0	01-07-2024		The Board of the Integrated Care Board adopted the policy as approved.

Implementation Plan:

Development and Consultation:	The following individuals were consulted and involved in the development of this document: (To be confirmed – a CCG version of this same policy was consulted upon and the policy was approved by COG)
Dissemination:	Staff can access this document via the Intranet and will be notified of new / revised versions via the staff briefing. (TBC: This policy will be included in the ICB's Publication Scheme in compliance with the Freedom of Information Act 2000)
Training:	The following training will be provided to make sure compliance with this document is understood: (to be confirmed, but training is likely to include: <ul style="list-style-type: none">• Access to a Powerpoint slide deck• Lunch and learn sessions• Offers of Directorate/ team training sessions• Other resources found in the PMO 'learning zone'• Inclusion on any future staff induction process
Monitoring:	Monitoring and compliance of this document will be carried out via: <ul style="list-style-type: none">• Any audits related to compliance with delegated authority.• Any audits of finances where change proposals are initiated• Any audits of efficiency planning/ delivery• PMO involvement in meetings where change proposals are raised/ discussed• PMO support for, and oversight of change proposals and projects.• PMO maintenance of a register of change proposals• Project 'lessons learned' reviews
Review:	The Document Owner will ensure this document is reviewed in accordance with the Review Date on page 2.
Equality, Diversity and Privacy:	Appendix 1 - Equality Impact Assessment Appendix 2 – Data Protection Impact Assessment
Associated Documents:	The following documents must be read in conjunction with this document: <ul style="list-style-type: none">• BLMK ICB Programme and Project Management Framework.

References:	<p>The following articles were accessed and used to inform the development of this document:</p> <ul style="list-style-type: none"> • Guide To Developing The Project Business Case – HM Treasury • 'Public Sector Business Cases Using The Five Case Model' - from the "Green Book Supplementary Guidance on Delivering Public Value From Spending Proposals" – HM Treasury. • BLMK ICB 'Governance Handbook' • PRINCE2 Project Management (Projects In Controlled Environments) - Office of Government Commerce. • PRINCE2 Agile - AXELOS in partnership with HM Government. • MSP Programme Management (Managing Successful Programmes) - AXELOS in partnership with HM Government.
--------------------	--

Table of Contents

1.0	Introduction	6
2.0	Scope.....	7
3.0	Definitions	7
4.0	Policy Statement (work based rule).....	8
5.0	Roles and Responsibilities	9
6.0	Processes and Procedures	11
	Appendix 1 - Equality Impact Assessment Initial Screening	14
	Appendix 2 - Data Protection Impact Assessment Initial Screening	17
	Appendix 3 - Expanded List of Definitions Used In This Policy	18

1.0 Introduction

- 1.1 NHS Bedfordshire, Luton and Milton Keynes Integrated Care Board (ICB) aims to ensure robust governance through its formal written procedural documents, such as this document, which communicate standard organisational ways of working. These documents help clarify operational requirements and consistency within day-to-day practice. They can improve the quality of work, increase the successful achievement of objectives and support patient safety, quality and experience. The ICB aims to ensure its procedural documents are user friendly, up-to-date and easily accessible.
- 1.2 The ICB must design and implement procedural documents that meet the diverse needs of our service and workforce, ensuring that none is placed at a disadvantage over others, in accordance with the Equality Act 2010. The Equality Impact Assessment initial screening, which was used to determine the potential impact this policy might have with respect to the individual protected characteristics is incorporated at Appendix 1.
- 1.3 A Data Protection Impact Assessment is a process which helps assess privacy risks to individuals in the collection, use and disclosure of personal information. The Data Protection Impact Assessment initial screening, which was used to determine the potential impact this policy might have with respect to an individual's privacy is incorporated at Appendix 2.
- 1.4 Transforming and improving operations means introducing change. There are a number of characteristics of programmes and projects that distinguish them from 'business-as-usual (BAU)'. These are that they:
- introduce change
 - add uncertainty
 - are unique
 - are often cross-functional
 - are temporary
 - are delivered by teams brought together for the purpose.
- 1.5 It is because of these characteristics that a programme and project management policy is needed: to ensure staff are adequately guided, equipped, appropriately empowered and supported to manage them effectively.
- 1.6 The primary aim of this policy is to ensure that changes (be they standalone or part of a programme) requiring a project management approach are identified and subsequently managed and governed in a proportionate manner, in order to maximise the realisation of benefits from them. Additionally, the policy seeks to ensure that ICB commitments to wider system changes are equally informed by a case for change.

2.0 Scope

2.1 This policy applies to all ICB staff members, including Governing Body Members and Practice Representatives, involved in the ICB's policy-making processes, whether permanent, temporary or contracted-in under a contract for service (either as an individual or through a third party supplier).

2.2 This policy applies, as appropriate, to:

- Establishing new services (both patient facing or back-office / administrative)
- Significantly changing existing services (both patient facing or back-office / administrative)
- Any other type of service-redesign work
- Transformation / Merger programmes
- Changes proposed in isolation or as part of a wider programmes
- Efficiencies programmes and projects (QIPP)
- Significant changes brought about new or changed policies where these impact how or where patients access services.
- Introducing new IT systems
- Capital Investments that require planning, i.e. Estates

3.0 Definitions

3.1 This section provides staff members with an explanation of the main terms used within this policy. A fuller list of the terms used can be found at Appendix 3 to this policy. In addition, further guidance on the terms used within programme and project management work can be found in a document in the PMO 'Learning Zone'.

Business case - an argument - almost always in the form of a document - that outlines the reason for proposing a change, the costs of that change and the benefit/ improvements that it will yield. A document to inform, to enable discussion and ultimately to solicit a decision. BLMK ICB use a business case template for consistency.

Incremental change – continuous improvement to 'business as usual' work. Gradual changes to capability and performance, usually introduced by those with functional responsibility for a service or service area. A typical approach used is 'PDSA' (Plan, Do, Study, Act).

PMO - The ICBs Programme Management Office, established centrally to manage the investment process, strategic alignment, prioritisation and selection, progress tracking and monitoring, optimisation and benefits achieved by an organisation's projects and programmes on behalf of its senior management.

Programme - defined in BLMK ICB as: “a temporary, flexible, organisation structure created to coordinate, direct and oversee the implementation of a set of related projects and activities in order to deliver outcomes and benefits related to the organisation's strategic objectives”.

Project - defined in BLMK ICB as “a unique, temporary endeavour which is undertaken in order to produce a product or service that will have a measurable positive outcome, otherwise known as a benefit”. Projects are the building blocks of programmes.

Transformational change - significant step changes in capability and performance, usually necessitating fundamental changes in how services are configured and delivered and requiring a temporary specialist team to be assembled to deliver the change. Because of the risks, costs and time involved in such changes, a structured and consistent approach is taken by managing such changes as programmes and/or projects.

4.0 Policy Statement (work based rule)

4.1 The BLMK ICB Programme and Project Management Policy is intended to improve the organisations identification of, and delivery of, change proposals – be they:

- standalone proposals,
- proposals forming part of existing or new programmes of work or
- proposals for the ICB to commit to wider system changes.

In all cases, the need to ensure that proposals are aligned to goals, affordable, deliverable and value-adding is paramount. The policy is built around five principles:

4.2 **Principle 1: Transparency:** proposals for developing and implementing ‘business change’ will be notified to PMO at start of the development process.

4.3 **Principle 2: Prioritisation:** PMO will facilitate engagement with subject matter experts to advise on ‘fit’ and deliverability. Feedback will be provided to the proposer and Executive lead.

4.4 **Principle 3: Beneficial:** high value/ high risk proposals for change will be articulated in a business case setting out the case for change and the benefits relative to the cost/ effort/ risk.

Where a business case is deemed necessary to inform a proposal for change, BLMK ICB will use a template based on that recommended by HM Treasury for public finance initiatives – the ‘Five Case Model’.

- 4.5 **Principle 4: Assurance:** completed business cases will be subject to a quality–assurance and a ready/ not ready recommendation made.
- 4.6 **Principle 5: Approval:** business cases will be considered/ approved at an appropriate level within the organisation.
- 4.7 Where transformation change is required, BLMK ICB will take a programme and project management approach, derived principally from the structured methodologies developed by the UK Office of Government Commerce:
- PRINCE2 Project Management (Projects In Controlled Environments)
 - PRINCE2 Agile
 - MSP Programme Management (Managing Successful Programmes)
- 4.8 **Delivery:** Where paragraph 6.5 of this policy applies, transformational change projects will be constructed in, managed in and reported through, the corporate project management IT system.

5.0 Roles and Responsibilities

- 5.1 The following have specific responsibilities in relation to this policy:

- 5.2 **Governing Body.** Approval of (decision maker for) all business cases impacting how or where patients access services and which will require statutory public consultation.

Approval of (decision maker for) other very high cost business case investment proposals (excluding Primary Care business case proposals).

- 5.3 **Finance and Investment Committee.** The noting of high and very high cost business case investment decisions made.

Responsible for the development and delivery of Efficiency Plans in the pursuit of a balanced budget and so a key stakeholder in the delivery of improvements to release cashable efficiencies.

- 5.4 **Quality and Performance Committee.** The noting of decisions made on business cases for changes impacting how and where patients access services. Excludes access to Primary care services.

The noting of recommendations from the Executive Team to the Governing Body concerning business cases that necessitate statutory consultation.

- 5.5 **Audit & Risk Assurance Committee.** Assurance on the delivery of key programmes within the ICB, including the Operational Plan and Efficiencies Plan.

This policy ensures those key programmes are managed in a way that meets the needs of the Audit Committee.

5.6 **Primary Care Commissioning & Assurance Committee.** The noting of business cases for changes impacting how and where patients access Primary Care services.

5.7 **The Executive Management Team.** Approval of (decision maker for) all business cases that which impact how or where patients access services, but which do not necessitate statutory consultation. Recommendations to the Governing Body of an appropriate decision regarding business cases that impact how or where patients access services and which do necessitate statutory consultation.

Approval of (decision maker for) moderate and high business case investment proposals.

Recommendations to the Board of the ICB of an appropriate decision regarding very high cost business cases investment proposals.

5.8 **Director of Performance and Governance.** Major responsibility for identifying and supporting the prioritisation of key performance outcomes, to inform the prioritisation of proposals for change and the perceived value of any related business cases. Responsible for the delivery of change and improvements intended to positively impact performance.

5.9 **Staff Designated as Programme and Project Managers.** Responsible for developing, delivering and reporting on programmes and projects in accordance with this policy and the associated process and procedures.

5.10 **All other persons as defined at section 2.1 of this policy.** When involved in the identification of, and development of proposals for change and business cases, to adhere to the requirements of this policy.

5.11 **BLMK ICB PMO.** Responsible for developing and maintaining appropriate policy and procedure to enable efficient, effective and benefit-adding improvements to performance and delivery.

Responsible for supporting the organisation in the identification, design and delivery of change.

Responsible for supporting staff to deliver change through the provision of training, development and other learning to improve the understanding of programme and project management and to increase competence and ability in the delivery of change.

6.0 Processes and Procedures

- 6.1 Prioritisation Of Change** To support those proposing change in understanding the value-of, and organisational appetite-for change and improvement, PMO will assess and advise on the 'organisational fit' of a proposal and so the likely level of support and resourcing. PMO will facilitate engagement with subject matter experts to advise on 'fit' and deliverability of proposed projects. Feedback will be provided to the proposer and Executive lead.

PMO will assess the perceived complexity or risks (direct and indirect) associated with a proposed change and so advice on whether the proposal is considered to necessitate a programme and project approach or not.

- 6.2 Use of Business Cases.** High value/ high risk proposals for change will be articulated in a business case setting out the case for change and the benefits relative to the cost/ effort/ risk. To provide for transparency and comparability, the standard BLMK ICB business case template will be used.

In cases of dispute, the need for a business case will be determined by the Executive Management Team, be based on a judgement of the scale of costs/ benefits and complexity (likelihood of success) of the change involved, and upon advice from PMO in consultation with others.

- 6.3 Quality of Business Cases.** Prior to offering business cases for consideration/ recommendation, completed business cases will be subject to a quality–assurance by key stakeholders and a ready/ not ready recommendation made by PMO on their behalf.

PMO will support authors with business case development/ authorship throughout the process, ensuring that value for money, deliverability and risks are considered, and providing assurance of an appropriate co-design/ MDT-approach

- 6.4 Approval of Business Cases.** Business cases will be considered/ approved at an appropriate level within the organisation and as determined by Standing Financial Instructions.

- 6.5 Programme and Project Governance.** Following a business case decision to introduce change, or other appropriate authorisation to implement a change, where the subsequent project is managed by the ICB, an appropriate and proportionate level of governance and management will be established - either as part of a wider programme or as appropriate for standalone projects.

BLMK ICB PMO will advise on appropriate governance and this will in part be informed by the value, complexity and risks to successful delivery of the changes to be introduced.

- 6.6 **Project Methodology and Approach.** BLMK ICB Programmes and projects will be managed and governed in accordance with the BLMK ICB Programme and Project Management Framework and using the tools and techniques therein.

The BLMK ICB policy uses methodology derived from the UK Government Cabinet Office best practice tools for public sector project management:

- PRINCE2
- Managing Successful Programmes (MSP)

This is particularly so for changes where the products of the changes are well-defined or prescribed or the solution can only be implemented when fully built. In these scenarios, a classic, sequential 'waterfall' approach to delivering change is likely to be advocated and/ or advantageous.

- 6.7 **Use of 'Agile' and 'Lean'.** When advising on the project methodology and approach, PMO will use the BLMK 'Agilometer' to inform any recommendation as to the approach to be used.

For projects where:

- the solution is emergent (not fully defined)
- some early benefits can be realised during project implementation
- the project is of lower risk or complexity
- there is a low risk to successful implementation and benefit realisation

then the BLMK Agile project management approach will be considered for use.

- 6.8 **Use of the Project Management IT System.** Where paragraph 6.5 of this policy applies, use of the ICB project management IT system is the default expectation for all projects covered by this policy. Only by exception will use of the system be deemed discretionary and by determination by the Executive Management Team.

BLMK ICB PMO will advise on a case-by-case basis during the start-up and initiation stage of a programme/project, as to whether use of the system is deemed mandated or discretionary. Factors considered will include, but will not be limited to, the scale of benefits to be delivered, complexity of the project and perceived strategic value to the organisation.

BLMK ICB PMO will provide training and support in the use of the ICB project management IT system and ongoing support for projects managed through it.

- 6.9 **Authority to initiate a project.** Where the scale of a project is such that it is governed by a formal project board, or where it forms part of one of the ICBs

agreed portfolio of Programmes, approval to initiate a project will be given by the designated project executive and will be based on satisfactory assurance of the completion of appropriate project management planning and delivery tools, using the appropriate BLMK ICB templates and software.

BLMK ICB PMO will advise on, and support, use of software and other tools, and the completion of templates to the necessary standards.

Appendix 1 - Equality Impact Assessment Initial Screening

Please answer the questions against each of the protected characteristic and inclusion health groups.

If there are significant impacts and issues identified a full EQIA must be undertaken.

For support and advice on undertaking EQIAs please contact: agcsu.equalities@nhs.net

Name of Policy:	BLMK ICB Programme and Project Management Policy
Date of Initial Screening	11 March 2022

Protected characteristic and inclusion health groups	Could the policy create a disadvantage for some groups in application or access? (if yes, give a brief summary of the possible disadvantages)	If yes - are there any mechanisms already in place to mitigate the potential disadvantage identified? If not, please detail the additional actions that will be put in place. If this is not possible please explain why (e.g. Agenda For Change requirements)
Age A person belonging to a particular age (for example 32 year olds) or range of ages (for example 18 to 30 year olds).	No	
Disability A person has a disability if she or he has a physical or mental impairment which has a substantial and long-term adverse effect on that person's ability to carry out normal day-to-day activities.	No	
Gender reassignment The process of transitioning from one gender to another.	No	
Marriage and civil partnership Marriage is a union between a man and a woman or between a same-sex couple. Same-sex couples can also have their relationships legally recognised as 'civil partnerships'.	No	
Pregnancy and maternity	No	

Pregnancy is the condition of being pregnant or expecting a baby. Maternity refers to the period after the birth, and is linked to maternity leave in the employment context. In the non-work context, protection against maternity discrimination is for 26 weeks after giving birth, and this includes treating a woman unfavourably because she is breastfeeding.		
Race Refers to the protected characteristic of race. It refers to a group of people defined by their race, colour, and nationality (including citizenship) ethnic or national origins.	No	
Religion or belief Religion refers to any religion, including a lack of religion. Belief refers to any religious or philosophical belief and includes a lack of belief. Generally, a belief should affect your life choices or the way you live for it to be included in the definition.	No	
Sex A man or a woman.	No	
Sexual orientation Whether a person's sexual attraction is towards their own sex, the opposite sex, to both sexes or none. https://www.equalityhumanrights.com/en/equality-act/protected-characteristics	No	
Carers Individuals within the CCG which may have carer responsibilities.	No	

Please summarise the improvements which this policy offers compared to the previous version or position

The Policy formalises the way in which changes (including patient facing changes) will be conducted and so offers additional safeguards to the thoroughness of EIAs conducted as part of future change proposals. This, in turn, has the potential to ensure that any potential disadvantages created from change proposals are identified and addressed as necessary.

How will the implementation and impact of the policy be monitored and reviewed, and by whom?

The ICB PMO has a primary role for 'quality assuring' change proposals and so will monitor it's application – including the completion of EIAs as part of developing proposals and business cases. As authors of the Policy, PMO will review it's application and workability Initial review date proposed as July 2022 – upon formation of the ICB)

Timetable for monitoring, with dates?

Monitoring is dependent on the pace at which proposals for change are made. PMO anticipate an increase in transformational activity in the early months of 2022 – both in support of the development of a new Operational Plan and in the face of the need to develop an Efficiency (QIPP) Plan.

Initial Screening undertaken by:	
Name	Paul BurrIDGE
Position	Head of Programme Governance

Appendix 2 - Data Protection Impact Assessment Initial Screening

Data protection is the fair and proper use of information about people. Before completing this form, please refer to the Data Protection Impact Assessment (DPIA) Guidance in the Information Governance (IG) section on the staff Intranet or contact the Data Protection Officer for support via blmkicb.ig@nhs.net

A DPIA is a process to help you identify and minimise the data protection risks. You must do a DPIA for processing that is likely to result in a high risk to individuals. You can use our screening checklist below to help you decide when to do one. If you have answered 'Yes' to any of the 10 screening questions, you must then carry out a full DPIA using the Stage 2 form, which is also available on the Intranet in the IG section.

Name of Policy:	BLMK ICB Programme and Project Management Policy
Date of assessment:	28-03-2022
Screening undertaken by:	Paul Burrige, Head of Programme Governance

Stage 1 – DPIA form

please answer 'Yes' or 'No'

1. Will the policy result in the processing of personal identifiable information / data? This includes information about living or deceased individuals, including their name, address postcode, email address, telephone number, payroll number etc.	Yes / No
2. Will the policy result in the processing of sensitive information / data? This includes for living or deceased individuals, including their physical health, mental health, sexuality, sexual orientation, religious belief, National Insurance No., political interest etc.	Yes / No
3. Will the policy involve the sharing of identifiers which are unique to an individual or household? e.g., Hospital Number, NHS Number, National Insurance Number, Payroll Number etc.	Yes / No
4. Will the policy result in the processing of pseudonymised information by organisations who have the key / ability to reidentify the information? Pseudonymised data - where all identifiers have been removed and replaced with alternative identifiers that do not identify any individual. Re-identification can only be achieved with knowledge of the re-identification key. Anonymised data - data where all identifiers have been removed and data left does not identify any patients. Re-identification is remotely possible, but very unlikely.	Yes / No
5. Will the policy result in organisations or people having access to information they do not currently have access to?	Yes / No
6. Will the policy result in an organisation using information it already holds or has access to, but for a different purpose?	Yes / No
7. Does the policy result in the use of technology which might be perceived as being privacy intruding? e.g., biometrics, facial recognition, CCTV, audio recording etc.	Yes / No
8. Will the policy result in decisions being made or action being taken against individuals in ways which could have a significant impact on them? Including profiling and automated decision making. (This is automated processing of personal data to evaluate certain things about an individual i.e., diagnosis and then making a decision solely by automated means - without any human involvement)	Yes / No
9. Will the policy result in the collection of additional information about individuals in addition to what is already collected / held?	Yes / No
10. Will the policy require individuals to be contacted in ways which they may not be aware of and may find intrusive? e.g., personal email, text message etc.	Yes / No

Appendix 3 - Expanded List of Definitions Used In This Policy

Agile - A style of working where requirements and solutions evolve through collaboration between self-organising, cross-functional teams. Agile promotes adaptive planning, evolutionary development and delivery, a timeboxed (fixed time periods), iterative approach and encourages rapid and flexible response to change.

Agilometer – A tool to help assess the degree to which a PRINCE2 approach to a proposed project can be tailored to enable the project to be managed and delivered in a more agile and lean way.

Business case - an argument - almost always in the form of a document - that outlines the reason for proposing a change, the costs of that change and the benefit/improvements that it will yield. A document to inform, to enable discussion and ultimately to solicit a decision.

Incremental change – continuous improvement to 'business as usual' work. Gradual changes to capability and performance, usually introduced by those with functional responsibility for a service or service area. A typical approach used is 'PDSA' (Plan, Do, Study, Act).

Initiation – the decision point following stage during which the project has been designed and planned and is considered to be ready for implementation. The initiation decision marks the point, after which more significant cost and effort is likely to be expended.

Lean - the 'Lean' methodology focuses on eliminating waste and smoothing the process flow. When applied to the delivery of change, 'lean' relates to an 'Agile' approach and refers to the design and delivery of improvements in a way that reduces wasted effort, increases the likelihood of delivering the project within tolerances and adds early value/ delivers early benefit.

Mandate – a statement, short document or other written confirmation that acts as the initial trigger for a project. A mandate confirms that there is a recognised problem or opportunity that might be addressed

PMO - The ICBs Programme Management Office, established centrally to manage the investment process, strategic alignment, prioritisation and selection, progress tracking and monitoring, optimisation and benefits achieved by an organisation's projects and programmes on behalf of its senior management. Responsible for Programme and project policy and tools, for staff development, for supporting the consistent development and delivery of projects and programmes and for assuring the wider organisation of the progress of delivery and delivery of benefits.

Programme - defined in BLMK ICB as: “a temporary, flexible, organisation structure created to coordinate, direct and oversee the implementation of a set of related projects and activities in order to deliver outcomes and benefits related to the organisation's strategic objectives”.

Project - defined in BLMK ICB as “a unique, temporary endeavour which is undertaken in order to produce a product or service that will have a measurable positive-outcome, otherwise known as a benefit.”

Project Executive - the individual appointed to be ultimately responsible for delivery of a specified project – in terms of delivering a product that will achieve the projected benefits.

Transformational change - significant step changes in capability and performance, usually necessitating fundamental changes in how services are configured and delivered and requiring a temporary specialist team to be assembled to deliver the change. Because of the risks, costs and time involved in such changes, a structured, consistent and repeatable approach is taken by managing such changes as programmes and/or projects.