

Wave 4 Capital Allocations for Primary Care

Primary Care Commissioning Committee meeting

23 January 2020

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Purpose of Paper	
<p>The purpose of this paper is to provide Primary Care Commissioning Committee (PCCC) with information about progress to date and the current position of the NHS Sheffield Clinical Commissioning Group (SCCG) programmes and seek approval for the proposed governance arrangements suggested for SCCG.</p>	
Key Issues	
<p>South Yorkshire and Bassetlaw Integrated Care System (SY&B ICS) received £57.5m capital funding for projects to support primary care transformation as part of national Wave 4 capital allocations.</p> <p>The schemes proposed by Sheffield include the highest value and most complex schemes within the ICS bid with a total value, following an ICS led review process, of £35.7m</p> <p>This paper sets out progress to date, timescales and a proposed governance process for NHS Sheffield Clinical Commissioning Group projects.</p>	
Is your report for Approval / Consideration / Noting	
Approval	
Recommendations / Action Required by Primary Care Commissioning Committee	
<p>The Primary Care Commissioning Committee is asked to:</p> <ul style="list-style-type: none"> • approve the proposed governance process for SCCG • consider the contents of this paper and the progress outlined 	
What assurance does this report provide to the Primary Care Commissioning Committee in relation to Governing Body Assurance Framework (GBAF) objectives?	
<p><i>Which of the CCG's objectives does this paper support?</i></p> <p>Strategic Objective - To ensure there is a sustainable, affordable healthcare system in Sheffield. It supports management of the CCG's principal risks 3.1, 4.1, 4.2 and 4.3 in the Assurance Framework.</p>	

Does this report relate to a formal statutory / delegated Primary Care responsibility of the CCG?
<i>If so please state which function?</i> Yes - planning
Are there any Resource Implications (including Financial, Staffing etc)?
Yes, resourcing plans to support delivery of the programme are in development, while project management costs are included within the capital bid additional resource will be required to successfully deliver the programme. There are revenue consequences to the CCG of the programmes, these have been quantified and acknowledged as part of the bid development.
Have you carried out an Equality Impact Assessment and is it attached?
This will form part of the business case process for the programme and projects.
<i>Have you involved patients, carers and the public in the preparation of the report?</i>
The business case process for the projects will include engagement and where necessary consultation.

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1. Introduction

- 1.1. South Yorkshire and Bassetlaw Integrated Care System (SY&B ICS) received confirmation, in July 2019, of the award of £57.5m capital funding for projects to support primary care transformation as part of national Wave 4 capital allocations. The award is based on an historical ICS application submitted in July 2018. The award is subject to successful completion of the required business case process which demonstrates that the standard investment criteria are met, including affordability and value for money.
- 1.2. The purpose of this paper is to provide Primary Care Commissioning Committee (PCCC) with information about progress to date and the current position of the SCCG schemes.

2. Background

- 2.1. The original ICS bid was based upon submissions from all places across SY&B and included specific schemes from SCCG (to the value of £42m). An ICS task and finish group led a review of all the schemes within the original bid to determine whether they remained fit for purpose. Each CCG reviewed if their existing schemes were deliverable within the timescale and costs identified and were likely to satisfy the requirements of the business case process (strategic case, value for money).
- 2.2. CCGs have agreed the principle that, wherever possible, public ownership should be the preferred ownership model for schemes involving a new build.
- 2.3. The schemes proposed by Sheffield include the highest value and most complex schemes within the ICS bid. Unsurprisingly, these schemes were subject to greater scrutiny by the task and finish group to assess deliverability. This process re-confirmed key issues to address in the business case and management of the Sheffield development programme, including:
 - developing a robust ownership model;
 - ensuring delivery of the large complex schemes within the timescales; determined, including passing through NHSE assurance and approval processes;

- producing a business case that meets the requirements approval process including value for money.

2.4. The schemes supported by SY&B ICS for progression in Sheffield fall into two programme areas described in table 1 below.

Table 1: SCCG Capital Funding Programme Supported by SY&B ICS

Programme Area	Purpose
Building Capacity	<ul style="list-style-type: none"> • Small, low value schemes to reconfigure existing space to build capacity for core and network services. • Reconfiguring void space to support the Sheffield Strategic and CCG Estates Strategy and delivery of CCG commissioning strategy. • Reconfiguration to support urgent care in primary care programme.
Supporting Transformation	<p>Large capital projects to build new primary care hubs in three Primary Care Networks:</p> <ul style="list-style-type: none"> • City Centre – bringing together a number of practices to co-locate on a single site. • SAPA 5 – a development bringing together a number of practices into a new hub • North 2 – bringing together a number of practices into new hubs and redevelopment of a LIFT building within the network.

3. Context for Sheffield

3.1. As PCCC members are aware the investment currently allocated to SCCG plans, while not without challenges, is welcome. Compared to other areas of the SY&B ICS, Sheffield has:

- the oldest age profile of primary care premises;
- the highest proportion of small practices;
- the highest proportion of practices operating from converted properties.

3.2. These issues compound each other, and collectively demonstrate the need to significantly invest in our primary care premises to ensure they become sustainable, can operate efficiently and are capable of supporting the range of services that our population needs as we redesign the way in which care is to be delivered. Smaller, older properties or properties that were not built to deliver primary care are unlikely to enable the full range of services we seek to provide.

3.3. The recent capital investments that have been announced will make significant inroads in addressing these challenges, but we will need to ensure sustained, large scale investment in our primary care premises through a variety of means over the longer term too.

3.4. While managing the delivery of the projects funded by the current capital allocation, the CCG is committed therefore to developing plans for future waves of funding, subject to national availability of capital.

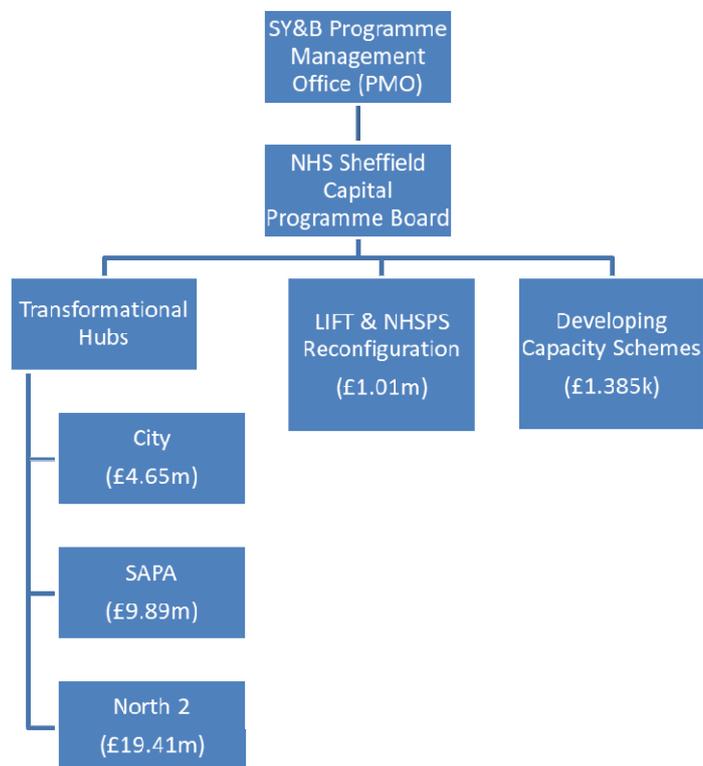
4. Governance Arrangements

4.1. A SYB ICS Programme Board has been established. Detail on the process for administering allocations continues to emerge, a full business case must go through an approval process determined by HM Treasury and NHS England & NHS Improvement. A programme management office has been established to support the process.

4.2. SCCG has established a task and finish group, led by the Director of Finance, to oversee delivery. High level timelines have been agreed. Plans are in pace to develop and implement a resourcing plan for programme delivery.

4.3. Given the scale and complexity of local bids NHS Sheffield propose to establish a programme board to oversee the multiple projects. The proposed governance arrangements are set out at figure 1 below.

Figure 1: Sheffield Wave 4 Capital Funding Proposed Governance Arrangements



4.4. Resourcing Requirements

- 4.5. Whilst the Transformational Hubs are of such scale and complexity to warrant a dedicated Project Team for each (with most roles working across all three schemes), the nature of the LIFT and NHS Property Services property reconfiguration, and the Developing Capacity Schemes require a different approach, but will draw on some shared resources and reporting.
- 4.6. The Developing Capacity scheme will need some dedicated Project / Technical support to ensure consistency, progress and compliance.
- 4.7. A detailed resourcing requirement is being prepared, options for securing resource including Sheffield City Council, our local LIFT provider and other options explored. Plans will be finalised shortly. The capital bid programme offers an opportunity to call down funding to support business case development, and this is being co-ordinated across South Yorkshire and Bassetlaw through the Programme Management Office.

5. South Yorkshire and Bassetlaw Outline Programme Business Case

- 5.1. The probable primary route for approval of the overall SYB programme of development is through a SYB Programme Business Case, a timeline has been prepared and work has commenced to develop the outline business case. The paper attached at appendix 1 sets out the plan and process.

6. Actions for Primary Care Commissioning Committee

- 6.1. The Primary Care Commissioning Committee is asked to:
- approve the proposed governance process for SCCG
 - consider the contents of this paper and the progress outlined.

Prepared by: Abigail Tebbs, Deputy Director of Strategic Commissioning and Planning

On behalf of: Jackie Mills, Director of Finance

Date: 14 January 2020

9 December 2019

Proposed process and timeline for the development and submission of the Programme Business Case

As more information and guidance relating to the over-arching approvals process for the SYB Primary Care Capital programme emerges, including likely requirements for the production of both the Programme Business Case (PBC) and project level documentation, it is useful/timely to consider the practical implications of these, particularly in relation to the timescales associated with the production and approval (local, regional and national) of the PBC.

Emerging thinking outlines an approach whereby the primary route of approval for the programme as a whole is the PBC, with a delegated Regional approvals process for projects (below £15m). Guidance on requirements for production is still to be determined, but a useful reference document in planning the development of the SYB PBC outlines an approach whereby key elements are developed, agreed and articulated to give sufficient assurance that the programme is well thought through, deliverable and offers the benefits expected from a transformational programme of this scale and ambition.

The HM Treasury publication "[Guide to developing the Programme Business Case](#)" outlines an approach and best practice in the development of PBC's, an extract from which is attached at Appendix 1, and highlights the type of activity expected during the development process. These activities have been applied to a high-level draft timeline for local production and approval, which is shown below.

	Dec 19	Jan 20	Feb 20	Mar 20	April 20	May 20	Jun 20	July 20	Aug 20	Sep 20	Oct 20
PBC development (based on recommended activity/process)											
Local approvals (CCG and ICS)											
Regional approvals											
Submission and national approval process											
Project level Business Case development											

It is clear that the scale of the task is significant, and the realistic timings should be established, particularly when requirements for local approvals/Governance are factored into thinking. It may be that some of the activities outlined within Appendix 1 are un-necessary in the case of SYB, but an approach that utilises workshops to establish information on key elements of the PBC will not only support higher quality output, but also build consensus across ICS partners. Key to successful production will also be sufficient project level information to allow an aggregated view of benefits to be established.



Further work will be undertaken in the short-term to establish a detailed timeline and activity plan for production, but in the meantime it is recommended that:

1. The ICS Primary Care Capital Programme Board note the anticipated timeline for the production of the PBC and where appropriate communicate this thinking to local and regional partners;
2. A series of workshops be diarised for the early part of 2020 to support PBC production;
3. Localities ready themselves to provide sufficient information to support production;
4. The PMO allocates sufficient resource to production including determining roles and responsibilities of existing staff and appointment of supplementary expertise as appropriate;
5. Liaison with the regional and national approvals teams continues and the timeline is updated based on the availability of further guidance.



Appendix 1 – Extract from HM Treasury Guidance on PBC development (page 85)

Annex B: Overview of how to develop the Programme Business Case

A typical process for developing the Programme Business Case could be as follows:

1. Ensure the mandate and brief for the programme have been completed
2. Undertake the Strategic Assessment
3. Complete the Risk Profile Assessment
4. Draft the Scoping Document for the Programme Business Case and arrange a meeting with the business case reviewer/approver to agree the content, governance, reporting, and approval arrangements for the PBC, including any additional assurance requirements.
5. These could include: Programme Validation and Programme Assessment Reviews, Gateway Reviews, Regulatory Impact Analysis and Independent Quality Assurance.
6. Contact the Gateway Unit to arrange a Gate 0 review, if required.
7. Prepare the Strategic Case section following completion of Workshop 1 (Determining the Case for Change).
8. Prepare the Economic Case section following Workshop 2 (Appraising the long-list).
9. Outline the Commercial, Financial and Management Case sections.
10. Share the early draft of the Programme Business Case with senior management and stakeholders, in order to obtain feedback and agreement to the proposed way forward.
11. Revisit and complete the Economic Case section following Workshop 3 (Appraising the short-list).
12. Complete the Commercial Case section following Workshop 4 (Developing the Deals).
13. Complete the Financial Case section.
14. Prepare the Management Case section following Workshop 5 (Successful Delivery Arrangements).
15. Undertake an internal review of the Programme Business Case – review criteria are provided at Annex D for this purpose and a Gateway Review 0 (Strategic Assessment), if required. Incorporate feedback.
16. Finalise the Programme Business Case, seek final sign-off from the sponsor and submit for approval to proceed with the programme.
17. Monitor delivery and update Programme Business Case upon completion of each tranche of projects within the Programme and resubmit to approving authority.
18. Use the Programme Business Case to support post implementation evaluation and benefit realisation.
19. Feedback findings into the strategic planning process for the future development of the strategy and strategic portfolio.