

# Wilson Health and Wellbeing Campus

## Project Governance

### New Project Proposal to Financial Close

7 June 2018



right care  
right place  
right time  
right outcome

# Programmes and Projects

The ultimate goal of a **Programme** is to realise **outcomes and benefits** i.e. a measurable improvement resulting from the changes and outcomes introduced, which is of strategic relevance to the organisation(s) involved.

A programme is likely to have a life that spans several years and usually requires the commitment and active involvement of more than one organisation to achieve the desired outcomes.

A **Project** is usually of shorter duration with a defined start and finish date. It will be made up a series of unique activities focused on the creation of a set of **deliverables** within agreed cost, time and quality parameters.



# Project Governance

Separate project governance structures need to be established as it is recognised that an organisation's governance structures do not provide the necessary framework to deliver a project. Projects require flexibility and speed of decision-making and the hierarchical mechanisms associated with organisational charts do not enable this. Project governance structures overcome this by drawing the key decision makers out of the organisational structure and placing them in one forum thereby avoiding delays in decision making, which invariably cause delays and increased costs to a project.



# What the project needs to deliver.

- A new health and well being model for East Merton
- A new healthcare facility
- The disposal of surplus land
- Development of Wellbeing Campus
- Planning approval for all of the above
- A decant Strategy and Plan for the Wilson site
- An affordable scheme



# The next phase.....

We have substantially expressed our vision for the Health and Wellbeing model for East Merton and have defined the role that the Wilson site will play in the realisation of this vision.

We are now moving into the detailed planning and delivery phase of the project. New parties are coming to the table and we will be turning our attention to the commercial and legal aspects of delivering a scheme of this size.

We need to ensure that the project governance structure is responsive and specifically that decisions can be made, by senior executives, with delegated authority from their host organisations.



# Who's Who

- Merton Clinical Commissioning Group – the project sponsor and user
- London Borough of Merton – partner, stakeholder and user
- Community Health Partnerships – senior user
- NHS Property Services – land owner and senior user
- South London Health Partnership – senior supplier

## The Project Executives:

- Andrew McMylor – MCCG Senior Responsible Officer
- Adrian Powell – NHSPS Head of Property Development
- Eugene Prinsloo – CHP Developments Director
- Stephen Spall – Fulcrum Chief Operating Officer



# Responsibilities – Merton CCG

- Work with LBM to develop the East Merton Health and Wellbeing Model
- Agree the clinical requirements for the healthcare facility
- Set the affordability cap and prove affordability
- Develop the business cases – internal and external approvals
- Commission services and confirm sub-tenants
- Communication and engagement with public and stakeholders



# Responsibilities – London Borough of Merton

- Working with the community establish the wellbeing model
- Identify delivery mechanism
- Preparation of business case
- Identification of suitable facilities
- Identify funding sources – capital and revenue
- Communication and engagement with public and stakeholders





# Responsibilities – Community Health Partnerships

- To manage the interface with SLHP
- To lead the design development process for the users
- Lead on legal and commercial negotiations with SLHP
- To work with NHSPS to agree commercial terms for retained land
- Representing the user and ensuring that their requirements and expected benefits are realised.
- To ensure best possible value for all stakeholders



# Responsibilities – NHS Property Services

- Development of decant strategy and plan with MCCG
- Working with SLHP – master planning of the site
- Planning strategy for site and applications for surplus land
- Marketing and disposal of surplus land
- Negotiations with LBM regarding the use of land/property for wellbeing campus.
- Agree commercial terms with CHP for retained land (ground rent)
- Site surveys and investigations - in partnership with SLHP



# Responsibilities – South London Health Partnership

- Proposal within affordability cap
- Work with NHSPS and CCG to identify extent of land required for healthcare development (size, location, rights, etc.)
- Work with NHSPS to establish masterplan for the Wilson site
- Design development of the healthcare facility
- Planning approvals for the healthcare development as part of the wider site planning strategy agreed with NHSPS
- Negotiate debt funding for the scheme
- Construction and commissioning of the new facility



**NHSPS BOARD**

**CHP Investment Committee**

**LIFTCo Investment Committee**

**Strategic Partnering Board (virtual)**

**NHSE PAU (?)**

**LBM Cabinet**

**MCCG Governing Body**

**APPROVING AUTHORITIES**

**WILSON PROJECT BOARD  
(Chaired by SRO)**

Responsible for overseeing the development of the Wilson and Birches sites. To act as the decision making forum for the delivery of the project. To agree performance tolerances and ensure implementation of all project controls. To be responsible for the approval of key documentation and to provide assurance to the organisational Boards/Committees with regard to the accuracy of content.

**WILSON PROGRAMME BOARD  
(Chaired by CCG)**

Responsible for providing the strategic direction and coordination of the programme to ensure that the identified outcomes and benefits are realised. To receive project updates from the Project Board. To directly oversee the project activities of the CCG and LBM and ensure that the outputs are accurately presented in the business cases. To act as gatekeeper for all external communications.

**PROJECT DELIVERY GROUP  
(Chaired and led by CHP)**

Chaired by the CHP Project Director. Brings together the senior delivery team from CHP, NHSPS, LIFTCo and CCG. Delivery the key inputs to the development of the business cases. Monitoring progress and instructing remedial action to ensure delivery within the agreed performance parameters.

**CCG/LBM PROJECT TEAM  
(Chaired by MCCG)**

Chaired by the MCCG Estates Lead – provides direction to the CCG and LBM work streams and monitors progress against programme and budgets.

**Land and Property  
(Led by NHSPS)**

Responsible for master planning of the site. Development and execution of the decant strategy. Business case development for the development/disposal of surplus land. To work closely with the design development work stream.

**Design Development  
(Led by CHP)**

To work with NHSPS to develop the master plan. Detailed design development and planning application process for the healthcare facility (as a minimum). To work closely with the Land and Property work stream

**Legal and Commercial  
(Led by CHP)**

Responsible for the NHS LIFT commercial negotiations and consolidation into the Standard Form Contract and Financial Model. Key workstream personnel to take lead roles at Financial Close.

**Information Technology and Equipment  
(Led by CCG)**

Responsible for the development of the IT strategy for the healthcare facility. To provide guidance on technical requirements and liaise with contractor during the project

**Service Design and Commissioning  
(Led by CCG)**

Chaired by the MCCG Clinical Lead. To lead on the service design and commissioning of services, including health, social and non-medical community services at the Wilson Hospital site.

**Community Development  
(Led by LBM)**

Responsible for the development of the community model and the specification of the associated accommodation requirements. To develop a sustainable delivery and financial model to support the capital and revenue costs.

**Communication and Engagement**

An underpinning resource delivering consultation and engagement across the whole of the Transformation Programme for all partners. For the Wilson project specifically managing the “Community Conversations” that will inform the community resources provided on the Wilson site. Responsible for communication of the process and outcomes to the wider population and to clinical and non-clinical colleagues. To manage and organise the engagement and input from the Wilson Community Reference Group

# Programme Board Membership

Independent Representative – Co-chair – Peter Derrick

MCCG Clinical Lead – Co-chair - Dr. Doug Hing

MCCG SRO – Andrew McMylor

Managing Director Merton and Wandsworth LDU– James Blythe

MCCG CFO – Neil McDowell

MCCG Communications and Engagement Lead – Lucy Ing

LBM Chief Executive – Ged Curran

LBM Director of Public Health – Dagmar Zeuner

LBM Director of Community and Housing – Hannah Doody

MVSC Chief Executive – Khadiru Mahdi

NHSi Strategic Estates Lead – Matthew Parish

OPE Programme Manager – James Bridgewood



# Project Board Membership

MCCG SRO – Andrew McMylor (Chair)

MCCG CFO – Neil McDowell

NHSPS Head of Property Development – Adrian Powell

CHP Development Director – Eugene Prinsloo

CHP Investments Director – Jamie Andrews

Fulcrum COO – Stephen Spall

In Attendance

MCCG/CHP Project Director – Sue Howson

CHP Programme Manager – Julian Humphreys

NHSPS Senior Property Development Manager – Victoria Shaw

SLHP Project Manager - TBC



# **Project Delivery Group** – the role of the group is to manage the day to day delivery of the healthcare building project and any other land and property issues relating to the project.

MCCG/CHP Project Director (Chair) – Sue Howson

MCCG/CHP Project Manager – Caron Hart

MCCG Estates Lead – Lucy Lewis

MCCG Finance Lead - TBC

NHSPS Senior Property Development Manager – Victoria Shaw

NHSPS Property Development Manager – Martha Coakley

NHSPS Project Manager (TBC)

SLHP Project Manager (TBC)



**MCCG/LBM Project Team** – the group is responsible for ensuring that the MCCG and LBM outputs and deliverables for the project are managed in line with the agreed programme.

MCCG Project Clinical Lead – Dr Doug Hing

MCCG Estates Lead – Lucy Lewis

MCCG Commissioning Lead - TBC

MCCG Finance Lead – TBC

MCCG Communications Lead – Lucy Ing

LBM Public Health Consultant – TBC

Community Development Project Manager – Dave Curtis

LBM OPE Lead – Katharine Thomas

MCCG/CHP Programme Manager – Caron Hart

