

Programme Initiation Document

The purpose of this document is to describe in detail the purpose, scope and outcomes of the programme, how it will be delivered and when, the ways in which the programme will be managed, governed, resourced (people and finance). This then allows the governance group to decide on whether the programme should proceed.

Programme Title	Powys Improving the Cancer Journey Programme
Programme Manager	Cerys Humphreys
Estimated Budget	£571,710
Programme Sponsors	Paul Buss, PTHB, Dylan Owen, PCC and Richard Pugh, Macmillan

Version Control

Version	Author	Comment	Date
0.1	Cerys Humphreys	Initial draft for review	5/2/2020
0.2	Cerys Humphreys	Updated with comments from PCC Communications & Engagement, PTHB Information and Governance, PTHB Programme Manager and Macmillan	24/02/2020
0.3	Cerys Humphreys	Correction to the objectives Updated with further comments from programme team	12/03/2020
0.4	Cerys Humphreys	PTHB Sponsor updated Updated term PLWC to PLWC The National and Local drivers have been updated to include The Parliamentary Review of Health & Social Care in Wales, the Wales Cancer Network Person Centred Care and Social Services and Wellbeing (Wales) Act 2014 EQIA updated to reflect that this has now been drafted The Delivery Stages as agreed by SPB in July A flag to query whether scope includes GP registered / residents – TBC October SPB Information Governance & Security Governance Organogram as agreed by SPB in July Milestones and Activity Plan	10/09/2020
0.5	Cerys Humphreys	Confirmed programme scope as individuals living with cancer registered with a GP in Powys.	

Version 0.1 Distribution list

Name	Title	Organisation
Ann Camps	Partnership Manager	Macmillan
Dawn Cooper	Partnership Quality Lead	Macmillan
Mia Evans	Services Project Manager	Macmillan
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Information Governance Team		PTHB

Version 0.2 Distribution List

Name	Title	Organisation
Ann Camps	Partnership Manager	Macmillan
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Dylan Owen	Head of Commissioning	PCC
Mr Wyn Parry	Medical Director	PTHB
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Dr Jeremy Tuck	Assistant Medical Director	PTHB

Version 0.3 Distribution List

Name	Title	Organisation
Programme Board Members		

Version 0.4 Distribution List

Name	Title	Organisation
Marie Davies	Deputy Director of Nursing	PTHB
Rebecca Membury	Senior Manager – Putting Things Right	PTHB
ICJ Strategic Board Members		PTHB, PCC, Macmillan, Bracken Trust, Credu, PAVO.

Sign off:

Name	Title	Organisation	Date
Dylan Owen	Head of Commissioning	PCC	
Dr Paul Buss	Director of Clinical Strategy	PTHB	
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Programme Description

Purpose

The aim of the Improving the Cancer Journey (ICJ) programme in Powys is to develop a sustainable, supportive, integrated community model of care to support people living with cancer (PLWC) in Powys. The essence of this scoping and development programme is to make sure everyone with cancer will have a conversation about all their needs and concerns and get the support that's right for them.

The programme will be delivered by taking a co-productive approach, ensuring that we involve people with cancer and their families, as well as the support organisations/networks in the local communities to drive the programme from the outset. In order to achieve this, the programme will build on our existing skills, assets, and competencies to support a collaborative approach and to enable effective multi-disciplinary working.

High level buy in from the 3 Executive Sponsors (Macmillan, PCC and PtHB) will encourage system thinking and leadership at all levels. The three sponsors will regularly monitor and review a shared approach in order to learn and improve ways of working together to deliver better outcomes for people living with cancer.

The programme will develop a deeper understanding of the issues and experiences for the residents of Powys, taking into account its rurality. By working together with key partners, including people living with and affected by cancer, community and voluntary sector representatives, health and care partners across community, primary, secondary and tertiary care, the programme will develop a full understanding of the needs of people living with cancer, the challenges they face, the gaps in provision and support, the services and support that are already out there.

This understanding of the needs of people living with cancer will then contribute to the development of new and existing strategic initiatives and potential different ways of working that will meet the challenges of rurality and an ageing population head on. Communicating plans with all strategic and operational stakeholders is a key priority, so that Personalised Care can be understood and embedded for our shared population.

Programme Drivers - Overview of National Strategic Drivers

Macmillan's Strategy¹ (2019 – 2023).

Macmillan wants to help everyone with cancer live life as fully as they can. Their five-year strategy sets out how they will focus their work on five objectives and what they will be doing to be "*right there with people at their time of need, whatever cancer throws their way.*" One of the key objectives within the strategy is Objective 2, which is that everyone with cancer will have a conversation about their needs and concerns and get the support that's right for them. This principal is at the heart of the ICJ in Powys.

Well-Being of Future Generations (WBFGs) Act 2015²The **Well-being of Future Generations (WBFGs) Act 2015** provides us with the opportunity to think differently and to give new emphasis to improving the well-being of both current and future generations. The Act requires us to think more about the long-term, work better with people, communities and

¹ <https://learnzone.org.uk/strategy/>

² <https://www.legislation.gov.uk/anaw/2015/2/contents/enacted>

other organisations, seek to prevent problems and take a more joined-up approach. The Act puts in place seven well-being goals for Wales: globally responsible, prosperous, resilient, healthier, more equal, cohesive communities, vibrant culture and thriving Welsh language. In addition to the well-being goals it identifies five ways of working which we need to think about when working towards this: Long term, Collaboration, Integration, Involvement and Partnership. The ICJ Journey in Powys will embed the WCFG's Ways of Working into the programme, by aiming to bring providers, stakeholders and commissioners together routinely to deliver a common vision. The programme will build on organisational commitment to quality, equity and evidence-based services to make the most of resources at our disposal.

A Healthier Wales: our Plan for Health and Social Care³

This recently published plan focuses on the need for a holistic approach, which provides an equitable level of treatment, care or support to people throughout their lives. A whole system approach will enable teams to work together, harnessing the full range of community assets, and based on a solid foundation of common values, shared information and mutual respect. The ICJ programme in Powys works towards the future vision within A Healthier Wales – that of a single whole system approach in which services delivered by different providers are co-ordinated seamlessly for and around the individual.

The Parliamentary Review of Health and Social Care in Wales⁴

This report recommends key actions that need to be taken in order to meet the 'Quadruple Aims' as highlighted within the report. These have been identified as: improve population health and wellbeing, improve the experience and quality of care for individuals and families, enrich the wellbeing, capability and engagement of the health and social care workforce and increase the value achieved from funding of health and care through improvement, innovation, use of best practice and eliminating waste. The Review recommends clarity around what a new model of care may look like, strengthening the power of citizens and users to make change and harness digital, scientific and technological infrastructure developments to underpin modernised models of care. The ICJ work towards meeting the Quadruple Aims, with a specific focus on improving the experience and quality of care for individuals and increasing the value achieved from funding through innovation.

Social Services and Wellbeing (Wales) Act 2014⁵

The Social Services and Wellbeing (Wales) Act 2014 aims to make care and support personal to individual needs, helping individuals to live the life they choose and stay independent for longer. The Act aims to create a national approach to the way in which Local Authorities promote wellbeing and protect people from abuse and neglect. The main principles of the Act are:

1. Voice and control
2. Prevention and Early Intervention
3. Wellbeing
4. Working Together

³ <https://gov.wales/sites/default/files/publications/2019-10/a-healthier-wales-action-plan.pdf>

⁴ <https://www.childreninwales.org.uk/policy-document/final-report-parliamentary-review-health-social-care-wales-published/#:~:text=On%2016%20January%202018%20the%20final%20report%20of,building%20on%20positive%20aspects%20of%20the%20current%20system.>

⁵ https://socialcare.wales/cms_assets/hub-downloads/Workbook-What-does-the-Act-mean-for-me.pdf#:~:text=About%20the%20Social%20Services%20and%20Well-being%20%28Wales%29%20Act.,2014%20and%20came%20into%20force%20in%20April%202016.

These principles will underpin the ICJ programme in Powys, enabling PLWC to have control over the support they need and make decisions about their care and support as an equal partner.

The Wales Cancer Network – Person Centred Care⁶

“Person Centred Care is a Cancer Implementation Group (CIG) priority highlighted in the Cancer Delivery Plan (CDP) 2016/2020.”

The Wales Cancer Network Person Centred Care sub-group “highlights the strategic need to improve the overall holistic approach to supporting people with cancer, throughout their experience with an emphasis on partnership across care sectors. As such the purpose of the group is to develop standards and measures for reviewing the progress of health boards/trusts and Multi-Disciplinary Teams (MDTs), including those which cross organisational boundaries, in delivering person centred care. These measures will provide assurance of quality, through contribution to the cancer performance framework for Wales. This group will share and disseminate service developments across care sectors in Wales to promote and embed a consistent best practice approach to person centred care.”

The ICJ is well positioned to support PTHB in delivering the national requirements around offering holistic needs assessments to people living with cancer.

Local Strategic Drivers

Powys’ Integrated Health and Care Strategy⁷

This document outlines the vision for Health and Social Care in Powys to 2027 and beyond. It identifies the importance of enabling people to ‘Start Well’, ‘Live Well’ and ‘Age Well’ through focusing on wellbeing, early help and support, the big four health challenges and joined up care. Addressing the ‘Big Four’ (cancer, mental health, circulatory and respiratory) aims to make a fundamental shift to refocus the health and care system on prevention, early help and support, in order to improve wellbeing and in the longer term, reducing the burden of disease. The Strategy specifically states that Powys is keen to learn from examples of good practice such as the successful Implementing Cancer Journey Programme from Glasgow. The Regional Partnership Board who oversees progress on the strategy is working with Macmillan to explore the opportunities for implementing a proactive community response to the needs of people with cancer in a rural setting, through the ICJ Programme in Powys.

PTHB Integrated Medium Term Plan (2018 – 2021)⁸

This plan provides assurance to NHS Wales on how services will be commissioned and provided, within available resources, to meet the needs of individuals and improve outcomes for the population they serve. Tackling the ‘Big Four’ continues to be one of the four well being objectives within the IMTP, with milestones around the development of the ICJ included within the Cancer Transformation Programme priorities.

Equality Impact Assessments (EQIA’s)

An EQIA has been completed and will be presented to the Regional Programme Board at the end of October 2020 as part of the documentation that is being submitted.

⁶ <http://www.walescanet.wales.nhs.uk/person-centred-care>

⁷ <https://powys.moderngov.co.uk/documents/s18645/Health%20and%20Social%20Care%20Strategy.pdf>

⁸ <http://www.powysthb.wales.nhs.uk/document/324113>

The Activity Schedule includes sign off of the EQIA by the ICJ Strategic Programme Board at end October.

Objectives:

The aim of the proposed programme is to develop a sustainable, supportive, integrated community model of care to support people living with cancer in Powys. Our approach to achieving this aim will be by involving those affected by cancer and those supporting people with cancer to:

1. Develop a deeper understanding of issues and experiences for residents* of Powys
 - Hold ongoing conversations with those affected by cancer via various engagement events/multi-media resources
 - Establish a cross section of health, council and third sector staff perception of issues and experiences for residents diagnosed with Cancer of Powys
 - Desktop exercise to review and gather information around where residents diagnosed with cancer receive their treatment and around the ways in which holistic needs assessments are being carried out
 - Based upon the information gathered, trial and evaluate a number of approaches
 - Output: Report and recommendations to Strategic Programme Board
2. All individuals affected by cancer to be offered a supportive conversation, based on their needs, out of which a care plan and relevant supporting arrangements will be developed.

*Residents in this sense means people aged 18 and who are registered with a GP in Powys.

In Scope

- *All Powys residents over the age of 18 who have a confirmed cancer diagnosis and have been informed of their diagnosis by a relevant healthcare professional; this includes those who are living with and beyond the cancer diagnosis.*
- The national optimal pathways that have been developed to support delivery of the single cancer pathway.
- Map and review current sources of care and support for people who have received a cancer diagnosis.
- To identify gaps in service and develop recommendations to develop business cases where required.

Out of Scope

- Children, teenagers and young people up to the age of 18.
- Screening
- Access to diagnostic waiting times.
- The programme will not focus on the pre-diagnosis stage (i.e. screening, waiting for diagnosis, presenting with symptoms to healthcare professional.)
- The programme will not focus on access to diagnostic waiting times.

- The ICJ programme will not fund new treatment sites or transport links, although other providers may do so as a result of the programme findings / recommendations.

Development Approach

Stage 0: Programme Set Up

Deliverables:

- Partnership Agreement for the Programme
- Partnership Agreement for the Programme Manager
- Partnership Agreement for the Project Manager
- Partnership Agreement for the Communications and Engagement Officer
- Recruitment and recruitment strategy (i.e. 2 years or 3)
- Governance Framework
- Programme Scope and Delivery Approach (Programme Initiation Document)
- Programme Activity Schedule
- EQIA
- Stakeholder Mapping Analysis

Stage 1: Build on current knowledge and understanding of the needs of Powys residents affected by Cancer.

Deliverables

- Programme Launch
- Scope document that includes:
 - Outcomes of conversations with Healthcare providers around HNA existing HNA services
 - Outcomes of conversations with Powys County Council Providers around service availability for a) delivering care plans b) potentially participating in tests for change
 - Outcomes of conversations with PTHB around service availability for a) delivering care plans b) potentially participating in tests for change
- Engagement Document that includes feedback on all engagement activity that has taken place during stage 1.

At the end of stage 1, the programme seeks to be able to answer the questions: what is going on now, what needs to change, for whom and why?

Stage 2: Develop, implement, test and evaluate different options (models) for Powys

Deliverables:

- A menu of options that could deliver the priorities identified during stage 1 together with high level implementation plans and pro's and con's of implementing each option
- An options appraisal methodology to support decision making around which models to test
- An implementation plan (activity schedule) for each agreed option
- Implementation and evaluation of each agreed option

Stage 3: Develop the preferred model into a business case

Deliverables:

- Business Case

Progress and Measurement

To ensure we understand the progress and impact of the programme we will:

- Identify learning from all available sources including but not limited to the ongoing evaluation of the ICJ Programme in Glasgow.
- Procure and work with an independent evaluator to track the impact and effectiveness of the programme through the development of measures that demonstrate
 - more people who have cancer have a conversation about their needs (care and support)
 - people who have cancer state that they feel their care and support is personal to them and their needs
 - integration and coordination across the care and support systems
 - improved knowledge of services and support available
 - improved specialist and generic cancer knowledge within the health, social care and third sector network in Powys
- Determine and measure impact and effectiveness from the perspective of different stakeholders such as:
 - People with cancer
 - their families/carers
 - the wider local community
 - existing support networks
 - stakeholder organisations
- Produce regular reports to Programme Board and Powys Regional Partnership Board
- Produce regular communications for a variety of audiences to ensure ongoing stakeholder buy in.

Information Governance & Security

It is envisaged that Stage 1 will confirm whether or not there are any data sharing / information governance requirements arising from this programme. The programme team have already established links with the PtHB Information Governance Team and will continue to work with them to ensure any requirements for Data Protection Impact Assessments can be identified, understood and scheduled.

Benefits and Outputs

Benefits

During the first year, the programme will research and review data collections to ensure appropriate measures are identified with baselines assessed. Additionally, as part of the programme, an external evaluator will be appointed and part of the evaluator's remit will be to review and suggest appropriate benefits and measures. Together, these streams of work may alter and refine the benefits outlined below, subject to the approval of the Strategic Partnership Board.

Benefits Description	How will the benefit be measured
<i>Benefits for people living with cancer</i>	
<p>People living with cancer have a better experience of services used</p> <p>People receive personalised care in response to what really matters most to them.</p>	<p>Improved scores in the patient experience survey (measures to be agreed)</p>
<p>People living with cancer have a better quality of life</p>	<p>Evaluation of programme</p>
<p>People living with cancer feel less anxious</p>	<p>Reduction in severity of concern scores over time (measures to be agreed)</p>
<p>People living with cancer feel more supported</p>	<p>Evaluation</p>
<p>People feel their concerns are reduced</p>	<p>Concern severity measures</p>
<p>Reduced feeling of isolation</p>	<p>Evaluation</p>
<p>Individuals, families and carers feel they are more informed and engaged in the decision making about their care and support</p>	<p>Evaluation</p>
<p>Increased sense of resilience and control</p>	<p>Evaluation</p>
<p>The benefits are recognised outside of the programme and incorporated into plans to improve services for people affected by other chronic conditions</p>	<p>IMTP (for year xyz) includes HNA for people affected by other chronic conditions</p> <p>TBC PCC measure</p>
<p>To create a culture shift from current practice to ensure people living with cancer in Powys feel supported wherever they in the cancer journey.</p> <p>Everyone with cancer will be offered a conversation about their needs and concerns and get the support that's right for them.</p> <p>Everyone with cancer has the offer of a proactive community response to their needs.</p>	<p>Implementation of recommended service model</p> <p>Evaluation Report</p> <p>Expansion of model to other services (through IMTP)</p> <p>TBC PCC Measure</p>
<i>Benefits for professionals</i>	

Benefits Description	How will the benefit be measured
Professionals have increased confidence and skills in discussing and identifying the holistic needs of people living with cancer	Evaluation of programme
Professionals have improved awareness and knowledge of services and support in their geographic area	Evaluation of programme
<p>Services tell us that their services are accessed appropriately and without delay</p> <p>a single whole system approach in which services delivered by different providers are co-ordinated seamlessly for and around the individual</p>	Professional feedback
Removal of longstanding barriers to innovation (such as IT / data sharing, repeated steps) (Long term, Collaboration, Integration, Involvement and Partnership)	Professional feedback

Outputs

Outputs Description	How will the output be measured
Programme learning, impact and best practice	Procurement and appointment of an external evaluator Final evaluation report
A detailed understanding of what takes place now	Scope Document
<p>Evidence based approach to increasing the number and frequency of HNAs being undertaken with people living with cancer</p> <p>Optimal approach to using, sharing and storage (e.g. paper based or electronic) HNA</p> <p>Evidence based approach to reducing the concerns for people who are affected by cancer (including a shared understanding of the most appropriate</p>	Results of the Tests of Change and Options appraisal

Outputs Description	How will the output be measured
timing and frequency of offering HNAs and care plans to people living with cancer.)	
Implementation of a new model to improve the cancer journey for people living with cancer in Powys, including equitable access for service users.	Approved Business Case Evaluation of programme
Facilitation of seamless working between statutory and third sector organisations	Information sharing investigation

Budget

Cost Centre & Activity Code:

Budget Area	Cost (over 3 years)
Salary	£482,210
Set up costs (year one only)	£4500
Travel & Expenses cap	£18,000
Evaluation costs	£55,000
User Engagement	£12,000
Total:	£571,710

Programme Governance

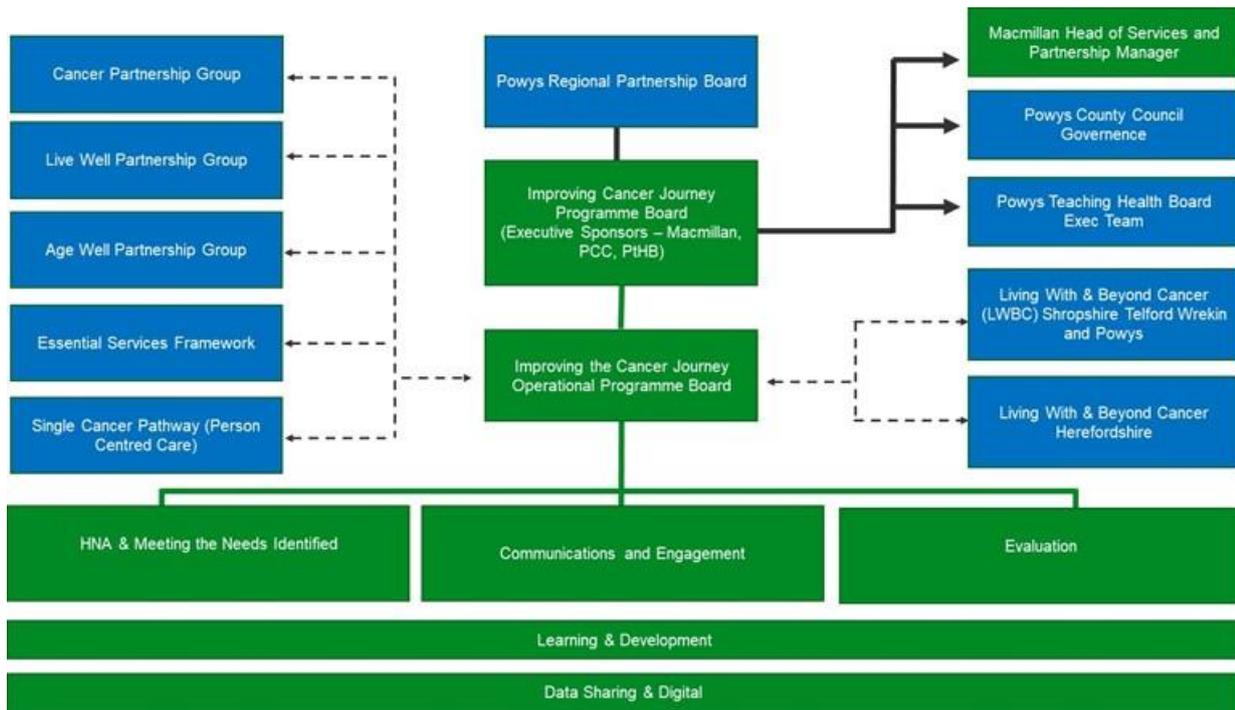
The governance structure outlines strategic ownership of this programme at Executive level, ensuring a shared ambition to integrate health and social care services together into a seamless whole system approach and provides assurance that projects and activities are on track and remain aligned to the overarching programme's objectives and strategic priorities throughout its lifecycle. It ensures that the Executive Sponsors are updated and assured throughout the lifecycle of the programme. The governance structure also helps to ensure that the range of partners and stakeholders we need to interface with can be engaged in a seamless way.

The structure has been set up to report into the Powys Regional Partnership Board (PRPB) (TBC) with a Strategic Programme Board (SPB,) an Operational Programme Board (OPB) and sub groups:

- The Programme Board (SPB) provides overall strategic direction to the programme and assurance, whilst also overseeing the overall progress of the programme.
- The Operational Programme Board (OPB) is tasked with operationally implementing the strategic direction and vision set out by the SPB.
- Sub groups to support the work of the OPB will be created once the different work streams have been identified.

Partnership Governance agreements around Communication i.e. decision making around branding, social media, media releases, key messages etc will be finalised as part of the Communications and Engagement plan.

Organogram depicting the ICJ governance structure:



Terms of Reference

Name of Group	Macmillan ICJ Strategic Programme Board
<p>Purpose</p>	<p>The purpose of the Board is to provide overall strategic direction to the programme and assurance, whilst also overseeing the overall progress of the programme.</p> <p>The Group is also in place to ensure that the programme is strategically planned in a coordinated, evidence based way through partnership working and to ensure robust governance mechanisms are in place to manage delivery of plans.</p>
<p>Responsibilities</p>	<p>The ICJ Strategic Programme Board is responsible for:</p> <ul style="list-style-type: none"> • Providing overall strategic direction for the programme. • Quality assurance for the programme and its associated projects. • Approving programme identification and definition and signing off relevant documentation. • Agreeing all major plans. • Confirming and communicating the programme vision. • Approving the programme blueprint and the means of achieving it.

	<ul style="list-style-type: none"> • Authorising any major deviations from the agreed programme stage plans. • Signing off each gateway, including the deliverables and giving approval to the start of the next stage. • Communicating information about the programme to organisations and stakeholder groups. • Ensuring the required resources are available. • Resolving any conflicts escalated. • Agreeing programme tolerances for time, quality and cost. • Risks and issues associated with the programme via a risks and issues log, including those escalated from project level. • Approving and championing the external evaluation of the programme • Approving end-project reports, including lessons learned reports. • Approving plans for post project reviews and overseeing those reviews within the programme. • Ensuring that the post project review is scheduled and takes place. • Resolving deviations from plans or escalating as necessary.
Membership	<p>In Attendance</p> <p>Executive Medical Director, PTHB Head of Commissioning, PCC Macmillan Head of Service, Wales Macmillan Partnership Manager Assistant Medical Director, PTHB Head of Health and Wellbeing,PAVO Director of Nursing, PTHB Senior Nurse, Bracken Trust Macmillan Programme Lead – Macmillan ICJ Credu - TBC Citizen Rep Macmillan Lead Nurse for Cancer and Palliative Care, PTHB Head of Housing, PCC - TBC</p>
Frequency	<p>Quarterly</p> <p>These meetings may be supported by supplementary conference calls and e-mail discussions as required.</p>
Quorate	<p>At least 50% of members must be present for the Programme Board to be quorate, including essential representation from</p>

	Powys Teaching Health Board, Powys County Council and Macmillan Cancer Support.
Accountability	The ICJ Strategic Programme Board will report directly to the Powys Regional Partnership Board.
Reporting Arrangements	<p>The Board will provide quarterly updates to the Powys Regional Partnership Board. This report will take the form of a highlight report.</p> <p>Annual Report and Plan updates will be developed by the Board and submitted to the Powys Regional Partnership Board on an annual basis.</p> <p>To enable sovereign bodies to maintain involvement and monitor programme development, timely updates will be provided to various committees within partnership bodies.</p>
Secretariat and Administration	<p>The Programme Manager will ensure all papers are distributed at least five working days prior to the date of the meeting; with agenda items will be agreed prior to the meeting.</p> <p>Administrative support will be available for the Programme Board meeting; this will include circulation of agenda, minute taking, room booking and arranging meeting dates.</p> <p>The draft minutes will be circulated to ICJ Powys Strategic Programme Board members within two weeks of the meeting; with formal sign off at the next Programme Board meeting. Approved minutes will be made available on a defined shared facility.</p>
Engagement	<p>The Chair will ensure that the members of the ICJ Strategic Programme Board are able to make informed decisions through open, balanced, objective discussion. In turn Board members must be able to make decisions on behalf of the NHS organisation they represent as well as the professional group they may also represent.</p> <p>Strategic Programme Board members must ensure there is mechanism to communicate decisions from the Strategic Programme Board meetings within their organisation.</p>

Operational Programme Board Terms of Reference

Terms of Reference

Name of Group	Macmillan ICJ Operational Programme Board
Purpose	The purpose of the Operational Programme Board is to operationally implement the strategic direction and vision set out by the Strategic Programme Board.
Responsibilities	<p>The ICJ Strategic Programme Board is responsible for:</p> <ul style="list-style-type: none"> • the day to day operation, management and delivery of the ICJ Powys Programme Plan, objectives and outcomes. • ensuring that effective programme planning and management arrangements are in place and the effective management of programme risk. • overseeing the work of any Programme Sub Groups and co-ordinate the activities of Programme Workstreams. • developing an engagement strategy and delivery plan. • developing a communications strategy and delivery plan • working in partnership with externally commissioned evaluators to develop an evaluation framework, to prioritise actions and outcomes and identify measurements to demonstrate benefits, impact and change.
Membership	<p>In Attendance</p> <p>Macmillan Partnership Quality Lead Macmillan ICJ Programme Lead Macmillan ICJ Project Manager Macmillan ICJ Communication and Engagement Officer Macmillan Partnership Manager Macmillan Services Project Manager</p> <p>Others to be co-opted dependent on relevance to agenda.</p>
Frequency	Monthly

	These meetings may be supported by supplementary conference calls and e-mail discussions as required.
Quorate	At least one member from each partner organisation would need to be present for it to be quorate.
Accountability	The ICJ Operational Programme Board is accountable to the ICJ Strategic Programme Board.
Reporting Arrangements	<p>The Operational Programme Board will provide quarterly updates to the Strategic Programme Board. This report will take the form of a highlight report.</p> <p>The sub groups will provide updates to the Operational Programme Board in the form of highlight reports.</p>
Secretariat and Administration	<p>The Programme Manager will ensure all papers are distributed at least five working days prior to the date of the meeting; with agenda items will be agreed prior to the meeting.</p> <p>Administrative support will be available for the Programme Board meeting; this will include circulation of agenda, minute taking, room booking and arranging meeting dates.</p> <p>The draft minutes will be circulated to ICJ Powys Operational Programme Board members within two weeks of the meeting; with formal sign off at the next Operational Programme Board meeting. Approved minutes will be made available on a defined shared facility.</p>
Engagement	<p>The Chair will ensure that the members of the ICJ Operational Programme Board are able to make informed decisions through open, balanced, objective discussion. In turn Board members must be able to make decisions on behalf of the NHS organisation they represent as well as the professional group they may also represent.</p> <p>Operational Programme Board members must ensure there is mechanism to communicate decisions from the Operational Programme Board meetings within their organisation.</p>

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Decision Making Authorities

Each programme team member will escalate upwards, first to the Programme Manager who will then escalate to the Programme Board in the event that:

- The scope may need to change / it becomes apparent that the agreed scope may not be fully delivered,
- Any risks that, with mitigating action in place, are RAG rated Amber (for information,) or Red (for input and approval.)
- Any tasks that impact upon the critical path and are or are at risk of falling behind schedule.
- Any potential or actual overspend against the agreed budget.
- Any adverse feedback.
- Any unintended consequences of this programme of work.
- Any interdependency between ourselves and areas outside of this programme that is either negatively affecting our delivery or negatively affecting the delivery of other areas.

Budget Responsibilities

The Programme Manager has responsibility for spending the programme budget as agreed.

Any of the non-salary costs incurred will need to be managed by the programme manager and discussed at the monthly meeting with the Macmillan Partnership Manager. Macmillan can only reimburse on presentation of an invoice that has been paid by the Health Board or Council.

Risk Management Authorities

A risk log will be maintained and proactively managed by the operational board to mitigate risk. This log is available on request and shared at the programme board meetings.

Any risk that, with mitigating action in place, is amber, will be escalated to the programme SROs for information and / input and approval.

Any risk that, with mitigating action in place is red, will be escalated to the programme board for information, input and / or decision making.

Programme Reporting Process

The programme provides a progress report on a monthly basis, highlighting:

- Anything that requires escalation
- Achievements
- Learning
- Impact
- Support needed
- Looking ahead
- Risks
- Engagement
- Programme Team Learning and Development
- Budget

The programme also reports quarterly to the Programme Board, highlighting:

- Progress Summary
- RAG rating detailed by schedule, scope, cost, benefits
- Milestones
- Benefits, Risks, Assumptions, Issues, Dependencies and Dis-benefits
- Spend against budget

As part of the programme initiation phase, the team have scoped out all other reporting requirements the three partners may have.

Programme Plan

Key Milestones

Milestone Description	Date Due	Owner
Programme Team Established and Fully Inducted	31/03/2020 (Complete)	Dr Jeremy Tuck/ Dylan Owen
Programme Initiation Document developed and agreed	21/03/2020 (Complete)	Cerys Humphreys
Programme Governance developed and agreed	July 2020 (Complete)	Cerys Humphreys
HNA PID	30/03/2020	Cerys Humphreys
Reporting requirements and processes in place	31/05/2020 (Complete)	Cerys Humphreys
Communications and Engagement Plan signed off by Programme Board	July 2020 (Complete)	Sue Ling
EQIA signed off by Programme Board	October 2020	Cerys Humphreys
Scope different pathways that Powys residents access when diagnosed with cancer.	November 2020	Cerys Humphreys
Research and review how HNAs are used for PLWC in Powys	January 2021	Cerys Humphreys
Research and review how HNAs could best be used in Powys	January 2021	Cerys Humphreys

Milestone Description	Date Due	Owner
External Evaluation procurement (invitation to tender) documentation	March 2021	Cerys Humphreys
External Evaluator Appointed	May 2021	Cerys Humphreys
PLWC Scope Document	March 2021	Cerys Humphreys
Tests of Change completed	TBC	Cerys Humphreys
Options appraisal developed	TBC	Cerys Humphreys
Proposed Model / Business Case complete	TBC	Cerys Humphreys

Programme Activity Schedule:

The ICJ Programme Activity Schedule is embedded below. Please note, macros will need to be enabled in order to view this document.



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Activity Schedule 9 Se

Gateway Review Meetings Required

There will be a number of gateway review meetings as part of the three year programme. At the time of writing, it is envisaged that, at a minimum, these will include:

1. Programme Mandate (complete)
2. Programme Proposal (complete)
3. Business Case (complete)
4. Sign off by the Programme Board of the ICJ Programme Initiation Document and Programme Plan/Activity Schedule
5. Gateways to approve the detailed planning (project initiations or their equivalents) for each of the workstreams as they are more fully defined
6. Programme Delivery of each phase and approval to move to the next
7. Programme Closure

Dependencies and Interdependencies

The programme is dependent upon:

- People living with cancer engaging with the programme
- Health professionals providing us with the information we need
- Gateway approvals received in a timely way
- The programme being fully resourced for its duration

There are also interdependencies between this programme of work and other areas, including:

- Holders of real time information to help us to identify patients who have been newly diagnosed with cancer so that we can offer to them a holistic needs assessment

- The Macmillan Primary Care Cancer Framework which involves GP practices offering an HNA to their own patients
- The Shrewsbury & Telford Living with and Beyond Cancer which will involve secondary care providers offering HNAs to the patients they treat
- The Hereford Living with and Beyond Cancer which will involve secondary care providers offering HNAs to the patients they treat
- The Gloucester with and beyond cancer which will involve secondary care providers offering HNAs to the patients they treat
- The Wales Cancer Network which develop national optimal pathways, including use of HNAs
- The Single Cancer Pathway work in Powys whose delivery may include the use of HNA along pathways
- The national strategic direction around the use of eHNAs and associated information sharing agreements
- The National Delivery Plan for Cancer post 2020 to ensure cancer remains a priority

Assumptions

This PID is based on the assumption that:

- Macmillan's existing holistic needs assessment tool will be used to facilitate conversations with persons affected by cancer. As part of the delivery strategy, the programme team will develop recommendations around use of paper based / electronic versions of this HNA.
- the ICJ programme will remain a priority for partner organisations, and
- there are existing suppliers who will want to put forward tenders to do the evaluation.
- Covid 19: Stakeholders and partner organisations will continue to be able to engage with the programme in line with drafted timescales. We will work to mitigate and absorb any impact of Covid 19 where possible and escalate to the programme board where appropriate and in line with our agreed escalation procedures.

Communications and Engagement Plan

The ICJ Communications and Engagement Plan sets out how the programme will engage and communicate with our stakeholders and key partners. The plan will identify key messages, a range of engagement activities so as to hear from key stakeholders and support the delivery of the vision, mission and objectives. The plan includes a stakeholder map and analysis of the current organisations providing appropriate services to people living with cancer.

Programme Acronyms

Acronym	Meaning
BRAIDD Log	An excel workbook containing spreadsheet logs to help manage Benefits, Risks, Assumptions, Issues, Dependencies and Dis-benefits
eHNA	Electronic holistic needs assessment
HNA	Holistic Needs Assessment

Acronym	Meaning
ICJ	Improving the Cancer Journey
LW&BC	Living with and beyond cancer
PLWC	People living with cancer
RBY	Right by You