Essex Partnership University NHS Foundation Trust

PROJECT – Mid Essex Community MH Transformation Project TOR

Overall Purpose of Project Group

Mid Essex Community Transformation is separated into 4 phases, these include:

Phase 3 - Disaggregation of wider Journey's model (Adult Services) to fit hub and spoke model across Mid Essex (phase 4)

The focus of this group will be the implementation of phase 3 and

The Mid Essex Community MH Mobilisation Project Group is responsible for developing the clinical and operational aspects of the new transformation models (Community MH). It will lead the service pathway development of the new models, providing clinical and operational guidance for safe implementation of a high quality service. This will also require the disaggregation of the psychosis and non-psychosis teams from the current "journeys" model and into integrated locality based teams within a hub and spoke model.

Through this rebuild Mid Essex services will be fit for the future.

Name of Project Group: Mid Essex Community MH Mobilisation Project Group (Monthly)

Chair: Associate Director Community Mental Health Services Mid and South

STP

Reporting to: Transformation Leadership Group

Terms of Reference Roles and Objectives

- To provide expert advice to clinical pathways delivery that forms the new model of care
- To ensure stakeholder, service user and co-production is undertaken as part of the new model of care project planning and implementation.
- Responsible for providing clinical and professional leadership
- Responsible for defining the key performance indicators (KPIs) required for the transformed services
- Identify and review risk management and the issue log and escalate where necessary through the governance structure.
- To provide objective, evidence based solutions on major clinical changes which address quality and safety issues to the new model of care.



- Oversee the effective clinical operations of the new model and ensure performance metrics are being met whilst reviewing progress in implementation.
- Provide clinical guidance on the new model and interface with other specialties.
- Review operational issues and outcomes including capacity, IM&T, review clinics and other interdependent operational resources and facilities.

Authority and responsibilities

- The Mid Essex Community MH Mobilisation Project Group is responsible for developing the clinical and operational aspects of the new model and will inform the service specification.
- The Mid Essex Community Mental Health Mobilisation Project Group will lead the service pathways development of the new model, providing clinical and operational guidance for safe implementation of a high quality service.
- These Terms of Reference shall be read in conjunction with the Transformation Leadership Group Terms of Reference.

Function:

Strategic Planning

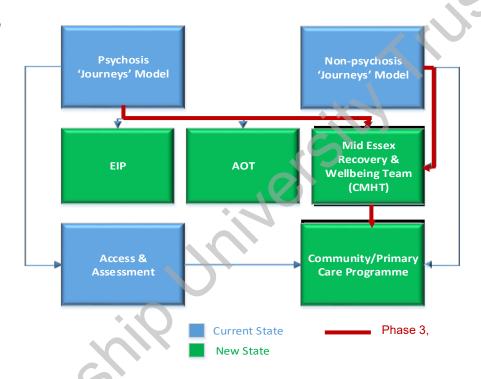
- The Mid Essex Community Mental Health Mobilisation Project Group will escalate any conflicts of transformation into the for Transformation Leadership Group resolution.
- The Mid Essex Community Mental Health Mobilisation Project Group will provide verbal updates into the, Transformation Leadership Group on the progress of transformation & service implementation.
- The Mid Essex Community Mental Health Mobilisation Project Group will consider and discuss the impact of other strategies within the Transformation Leadership Group and to provide feedback on policy development with the Transformation Leadership Group as appropriate.

Work Plan and Risk

- To develop The Mid Essex Community Mental Health Mobilisation Project Group of work setting out proposed actions, priorities and objectives, against which its performance is to be evaluated on an a monthly basis.
- To provide monthly verbal updates into the Transformation Leadership Group

- To create a programme risk register, identifying risks and issues that could impact on programme progress and agree priorities and actions to mitigate such risk and issues.
- To escalate to the Transformation Leadership Group any unresolved risks arising within the scope of these Terms of Reference that require action or that pose significant threats to transformation, resources or reputation to the Health and Care system

Diagrammatic View of the Current to New State



Membership:

Phase 3- Disaggregation of wider Journey's model (Adult Services) (internal)

internal)				
Project Team (proposed)	Role			
	AD Mental Health Services MSE			
	TBC Project Manager Ops Service Manager Older Adult			
	Community MH Dementia & Frailty (M&SE)			
	Head of Property and Development Chief Pharmacist Deputy Chief Pharmacist			
	Head of Resourcing			
	Senior Finance Manager			
	HR Business Advisor			
	Communications Manager			
	TBC			
	Consultant Psychiatrist			

Reporting Arrangements

to the Trust Board:

The Mid Essex Community Mental Health Mobilisation Project Group will provide monthly verbal updates into Transformation Leadership

Group

Frequency of Meetings: Monthly

Minutes of Meetings:

Minutes of the meetings, resolutions and any action agreed will be

recorded and circulated to group members for approval.

Date Originally

N/A

Approved:

TBC

Approval Dates:

Frequency of Review:

Bi Monthly

Extract from Mid Essex Community Transformation Mobilisation Plan (Phase 3) Disaggregation of Patient Journeys

Version V4 Modified 03.08.2020

Executive Sponsor:			Operationa	al Lead:	1 1 V	
Program Supervisor:			Project Ma	inager:		
			·			
Associate Director – Cor	mmunity Mental heal	th Services – Mid and South	n Essex in post at the time	e headed the project team		
Reporting to: Transform	nation Leadership Gro	ир)	
RAG Key	Failing/Late	Risk of failing	In Progress	Complete	Closed/Cancelled	
Workstreams: Set up, Ro	eview Redesign					
Work stream 1: Project S						
Work stream 2: Review	& Redesign					
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Workstream 2: Review and Redesign Phase LEAD					
No.	Action	Due Date	RAG	Comments & update	

	Review caseloads.	17/08/2020	Completed –	Specialist Mental Health Team (Non-Psychosis)
	 Related staff activity against cluster 		December	Psychosis Treatment Team
	and diagnosis profiles.		2022	
	Combined info from:			The teams will transform from carrying specialist or diagnosis specific
2.1	Performance			caseloads, to having a mixed case load of clients with varied needs and
	Team Leads			complexities.
				03/08-Paper already produce, refresh required

The rest of the document has been redacted as information is not relevant to the FOI EPUT.FOI.23.2934.