

# SCHEDULE 11 CAPITAL PROJECTS CONTROL MANUAL

## Document control sheet

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### Appendices

- I Project Checklist
- II Informatics Programme Management Guidelines

The forms to be utilised from the Checklist have been attached to the back of the Control Manual for reference and available electronically via hyper-links from the Checklists - **Appendix I**. The relevance and use of these forms is dependent on the scale and type of Project, however, these forms should be utilised where possible to ensure best practice. The non-utilisation of these forms is subject to approval by the Assistant Director of Strategy (Capital).

## 1.0 INTRODUCTION

This Capital Projects Control Manual is intended to provide a toolkit for managing all capital projects and must be read in conjunction with the Health Board's Standing Orders and Financial Control Procedures. However, it is not intended that all aspects of the manual will be implemented on all projects and each project will be assessed individually to ascertain the level of compliance required.

The Technical Brief sets out the requirements that will ensure that appropriate standards of quality and performance and levels of compliance are delivered in all Capital Projects. The Technical Brief will remain the reference document as the design progresses in terms of bench marking the level of compliance with the works information and client brief requirements

It is considered that use of the manual and its attached checklists will allow a greater level of control on each project, allocate responsibility for key tasks and ensure that accountability is demonstrated.

The manual provides a checklist for use in Capital Schemes. A checklist will need to be completed to cover each stage of a project from inception to completion and evaluation. They will provide examples of the control documentation required or recommended at each stage and this manual is intended to explain the purpose and use of each document.

The manual is intended to be a guide and the checklist will need to be tailored to the scope, size and complexity of each individual project. In some smaller schemes not all of the documentation will need to be completed dependent on complexity and cost but such omissions must be approved by the Assistant Director of Strategy (Capital).

The Project Manager is required to liaise with the Estates Department to ensure that each project meets the Standards that will allow the Health Board to retain its BS EN ISO 14001: Environmental Management Systems (EMS), accreditation. Further information on these Standards is available from the Estates Department and all Project Managers must ensure they are au-fait with all the requirements.

The Project Director will be responsible for agreeing timescales and responsibilities at the inception of the project. The Project Manager on each scheme will be responsible for ensuring the checklist and all relevant documentation is completed.

Where external Project Managers are appointed on a project they must be made aware of the requirements of this manual and be provided with a copy at the outset of their appointment. Companies would be authorised to utilise their own control documents with the approval of the Project Manager.

ICT capital projects are also managed in accordance with the principles set out in this document but are subject to additional requirements in line with WG requirements and the Health Board's ICT Clinical Development Strategy and Implementation Plans. Project management arrangements and documentation

may also differ from those outlined for standard capital programmes. Specific ICT project management arrangements have been put in place to reflect the technical requirements of ICT projects and are mandated for all ICT investment. This document is attached as **Appendix II**.

The Informatics Programme Management Guidelines must be followed for all ICT schemes and approved by the Informatics Programme Board (IPB) to ensure schemes are congruent with local and national plans. Larger schemes will also be subject to NWIS approval.

## **2.0 MANAGING THE CAPITAL PROGRAMME**

The investment of capital is a vital part of the success of any organisation and contributes greatly to its continual development. The allocation of capital monies must be objective and ensure that investment is only made into schemes and projects that have proven quantifiable benefits which are supported by robust calculations of both costs and savings.

The Investment & Benefits Group oversees the management of the Capital Programme and will undertake a strategic role. The role of the Group is to agree and recommend capital investment to the Health Board by:

- Agree a Discretionary Capital Plan for approval by the Health Board.
- Consider and approve changes to the Capital Plan.
- Receive and consider business cases

The Capital Management Group will monitor all aspects of the progress of the Capital Plan on a monthly basis and recommend any changes to scheme budgets to the Investment and Benefits Group.

The Capital Priority Management Group will receive and consider all new risk assessed capital bids originating from Service Units and Corporate Directorates. The review will assist in the construction of the annual capital plan and will continue on a regular basis throughout the financial year to take account of any new or changes to existing risk levels and to prioritise bids against additional funding and or slippage that may be granted to the Health Board.

## **3.0 APPROVALS**

Prior to the commencement of any construction works all necessary approvals and formal contracts will be processed, completed and documented. In the event of any delays in completing the contract documentation the Project Board or Senior Responsible Officer will be informed of the circumstances and their direction sought as to the preferred course of action.

Any requests for approval of award of contracts, additional expenditure above the approved scheme budget, extension of programme that would result in incurred unforeseen revenue or capital cost should be submitted to the Project Board in the first instance and thereafter approval sought in accordance with the Scheme of Delegation, Schedule 1 of Standing Orders.

When such approval is sought a comprehensive report will be provided to the appropriate decision makers that will include a comprehensive cost report, potential risks and consequences so that an informed decision may be reached.

In the event of an urgent decision being required action may be taken on receipt of verbal approval at the correct level however, a full report detailing the situation and identifying costs, risks and consequences will be produced and submitted to the appropriate forum at the first opportunity. It must be made clear within the report that action has already been implemented.

For all Welsh Government funded business cases any proposal to proceed with construction works ahead of formal approval of business cases/award of funding will require Health Board approval to fund the works from Discretionary Capital and notification of the action be provided to Welsh Government.

#### **4.0 INITIATING A CAPITAL SCHEME**

For schemes being funded through the Health Board's Discretionary Capital Programme, the following process will need to be implemented.

In order to initiate a capital scheme a Service Delivery Unit/Corporate Directorate will need to seek funding from the Health Board or an outside organisation. Priority will be given to those developments included and approved as part of the IMTP.

The first step in the process will be the completion of either a Discretionary Capital Bid form (new schemes of a value less than £50K or replacement of capital asset items) or a Business Case (new schemes/assets of a value greater than £50k). Both forms would outline the proposed scheme, detail the anticipated capital cost, summarise the benefits the scheme will bring to the organisation and identify the revenue consequences should the scheme proceed.

Service Delivery Units and Corporate Directorates will need to approve all appropriate capital bids, considering the potential funding source and the overall scope and purpose of the funding bid prior to submission to the appropriate corporate forum for approval (Capital Management Group and Investments and Benefits Group).

Where funding is being sought from Welsh Government, then the type of Business Case will be determined by the financial investment, complexity of the scheme and number of available options. Any such bid must be submitted in compliance with the Welsh Government Infrastructure Investment Guidance. This process will include an initial Scoping Meeting prior to the submission of any BJC or SOC to Welsh Government via the Investments and Benefits Group.

In general, schemes requiring an investment of less than £4m may require a single BJC (Business Justification Case).

For schemes in excess of £4m these projects may have to follow up to four phases identified in the Infrastructure Investment Manual. In some instances a larger programme may also require a SOP (Strategic Outline Programme).

- Phase 1 - Scoping Study:  
Must be undertaken before progressing any Business Case
- Phase 2 - Strategic Outline Case:  
Making a Case for Change
- Phase 3 - Outline Business Case:  
Identify the preferred option
- Phase 4 - Full Business Case:  
Assess and plan the preferred option in detail

Delivery Units are advised that they must obtain the approval of the Investments and Benefits Group to proceed along this route.

The assistance of the Capital Planning Department should be sought to obtain estimated Capital Costs.

These principles also apply to IM&T schemes. The IM&T Business Case checklist should be followed for all IM&T investment with the Five Case Model being used for the larger schemes as directed.

## 5.0 STATEMENT OF NEED

The Statement of Need (SON) must be completed for every scheme included within the Capital Programme that contains construction works or consultant fees and to seek the issue of a capital job number.

Once the Statement of Need is completed, it will be checked by the relevant members of the Planning Team and Capital Finance Team., Only when a scheme has received the necessary approval from the Capital Finance Team, will a job number be issued. The approved Statement of Need will then be returned to the Project Manager.

It is for the Project Manager make the initial assessment of VAT recovery on each scheme. This will be reviewed by the Capital Finance Team who may seek additional advice from the Health Board's VAT advisor.

## 6.0 FRAMEWORK ARRANGEMENTS

Where feasible all capital works that are proposed to utilise the NEC suite of contracts by ABMU Health Board will be undertaken in accordance with a Framework Agreement as follows:-

- **Local Framework**

Where the initial estimate of costs for a scheme amount to below £2m the Local Framework Agreement shall be utilised for both contractors and consultants. The conditions of use for the Local Framework is available from the Capital Planning Department and approval must be obtained for any appointments before they are confirmed. Any variations to the standard agreement documentation must be discussed and agreed with the Capital Planning Department before being implemented.

- **Intermediate Framework Arrangements**

Where schemes with a value of between £2 – 4M are proposed the Health Board will consider what appropriate Frameworks are available in the market place that would be suitable and obtain professional and legal advice to determine which agreement shall be utilised.

- **All Wales Design For Life Framework**

All capital projects with an estimated cost exceeding £4m should be undertaken using the current Design for Life Building for Wales Framework Agreement . The conditions of use for this Framework can be obtained from NWSSP - SES – Strategic Planning and Construction who must be involved in the appointment process. The approval of NWSSP - SES – Strategic Planning and Construction must be sought if works above the £4m threshold are proposed to be undertaken outside of this Framework. Any variations to the standard agreement documentation must be discussed and agreed with NWSSP - SES – Strategic Planning and Construction before being implemented.

## **7.0 ESTABLISHING A PROJECT BOARD & PROJECT TEAM**

Once approval has been obtained to proceed, it will be necessary to establish a Project Board & Project Team. For major capital schemes it will be necessary to establish these forums to help in the preparation of the appropriate Business Cases but the process will remain the same. A Project Structure and Terms of Reference will be developed which will be signed off by the Project Board.

The Capital Monitoring Review Group will act as the forum for reviewing schemes with a value of less than one million pounds.

### **7.1 PROJECT BOARD**

The Project Board will be responsible for the overall direction and management of the project from development and approval of the Business Case(s) through to construction and commissioning

### **7.2 PROJECT TEAM**

The Project Team will be responsible for the delivery of the project through the design, construction and commissioning stages including post project evaluation.

The three senior roles in the Project will be:

### **7.3 SENIOR RESPONSIBLE OWNER**

This will normally be an Executive Director who will define the project objectives and will be responsible for ensuring that they are met to the agreed time, cost and quality constraints. The Senior Responsible Owner will provide a broad specification of what the project should deliver and ensure that any change in circumstances affecting the project is evaluated and appropriate action taken.

### **7.4 PROJECT DIRECTOR**

This role will be undertaken by an Executive Director, a Member of the relevant Delivery Unit Management Board, a Clinical Director or a suitably qualified senior person. This person will be the single point of responsibility for the project brief and product design and for the day to day oversight of progress. A formal letter of appointment setting out the roles and responsibilities of the post will be issued and signed off at the start of the project.

### **7.5 PROJECT MANAGER**

The holder of this post may be internally appointed or recruited from an external organisation. Their task will be to manage the day-to-day activities of the project and to anticipate, identify and resolve any problems that occur. The Project Manager will report to the Project Director and be a member of the Project Board.

A formal letter of appointment setting out the roles and responsibilities of the above posts will be issued and signed off at the start of the project.

The duties and responsibilities of each of these three roles are set out in the Infrastructure Investment Guidance.

## **8.0 FEASIBILITY STAGE**

Where a scheme is being considered which requires the appointment of an external advisor to determine whether the proposal is feasible to proceed to design and business case development the Assistant Director of Strategy (Capital) may approve a budgetary allocation of no greater than £5k and this will be authorised by completion of an SON, Such approvals will be reported to the CMG at their next meeting.

## **9.0 OVERALL PROJECT MANAGEMENT**

### **9.1 PROJECT EXECUTION PLAN**

The preparation of a Project Execution Plan (PEP) is mandatory for major Capital schemes above one million pounds unless otherwise agreed by the Project Director. However, it will not be required for minor schemes.

The format of the PEP has been standardised to a large extent and an example document is included in the checklist. It must however, be emphasised that this is not a definitive document and this example PEP must be individualised to meet the particular circumstances of each project, and updated where necessary, throughout the duration of the scheme. It is the scope of the project that will dictate



the size and complexity of the PEP. Further guidance on the development of a PEP can be obtained from the Infrastructure Investment Guidance.

## **9.2 PROJECT PROGRAMMES**

Programmes will be established at the outset of each scheme and will be updated throughout the course of the works. They will incorporate additional programmes for separate activities, such as construction, equipping and commissioning.

### **9.2.1 MANAGEMENT CONTROL PLAN**

A MCP is to be developed by the Project Manager (PM) at the outset of each scheme depicting key dates from feasibility stage through to post project evaluation. Programme to be updated regularly throughout the course of the works.

### **9.2.2 CAPITAL HIGHLIGHT REPORT**

A report will be prepared on a monthly basis by the PM which will include information on cost, programme, relevant events, quality control and risk and will be submitted to the Capital Planning Manager/Assistant Director of Strategy (Capital). The report will be utilised to update the Capital Management Group with regard to the status of schemes.

### **9.2.3 CONSTRUCTION PROGRAMME**

In addition to a project programme a construction programme will be established and updated regularly by the contractor. Once a contract is let the programme will be updated to show the key construction activities from pre-construction to handover and contract completion and will identify any long lead items.

## **9.3 CONTRACTOR/CONSULTANT APPOINTMENT REQUEST**

When a scheme is approved, authorisation to appoint Consultants and/or Contractors from the existing Local Framework Agreement must be sought from the Health Board's Quantity Surveyor in accordance with the established procedure. Consideration must also be given at this point to whether a Principal Designer must be appointed under current Construction (Design and Management) Regulations.

## **9.4 FINANCIAL VETTING**

Before appointing any Framework Contractors above £25K or Consultants above £50k a financial vetting pro-forma must be completed and submitted to Finance for authorisation to appoint. If a company fails the vetting procedure they cannot be appointed and advice must be obtained from the Finance Manager Capital on their status.

## **9.5 BRIEF ACCEPTANCE CERTIFICATE FROM CONSULTANT**

Once the Brief is finalised it will be given to the lead consultant and once they've had a chance to review the content and are satisfied it provides all relevant information they are required to complete and submit this Certificate.

## **9.6 LETTER OF APPOINTMENTS**

The appointment of all Contractors and Consultants must be formalised in writing confirming the date of appointment, scheme details, costs and programme if finalised using the approved letter.

## **9.7 PROFESSIONAL SERVICES CONTRACTS**

For all appointments for Consultants with a value over £5,000 a Professional Services Contract must be completed by both parties.

## **9.8 NEW CONTRACT PRO-FORMA**

When a contract commences the Finance department will be advised of all the details of the agreement by the completion and submission of the new contract pro-forma which will be utilised to update the contracts register.

## **9.9 DEPARTMENT RISK ASSESSMENT**

When a contract commences the Project Manager must complete a Risk Assessment for ABMU Health Board Capital Planning Staff Working on Live Construction Sites which can be downloaded from the Knowledge Bank – Checklist Documents.

## **10.0 DESIGN**

### **10.1 STATEMENT OF NEED – FEASIBILITY / BUDGET**

The SON will be prepared to reflect the estimated and budget costs for the scheme at the appropriate stages where required.

### **10.2 DEVELOP BRIEF WITH END USERS**

A brief will be developed with the User Group addressing all areas set out in the Project Brief template. Once the Brief has been agreed the User Group will be required to sign and date the brief, and in addition the certificate will be completed to signify approval for sketch plans to proceed.

### **10.3 DEVELOP OPERATIONAL POLICIES WITH END USERS**

The users will be required to develop the appropriate operational policies for the project that will be used to inform the design process and estimate cost.

#### **10.4 SKETCH PLANS AGREED & SIGNED OFF BY CLIENT**

Once the Sketch Plans have been agreed the user group will be required to sign and date paper copies of the plans, and in addition the certificate will be completed to signify approval for design to proceed.

#### **10.5 MAINTAIN & MONITOR PROJECT BRIEF**

At this stage of the scheme the Brief is still being developed and the Project Manager must ensure it remains within the approved allocation or seek additional approvals.

#### **10.6 PROJECT CHARTER**

At the pre-contract meeting a copy of the project charter shall be tabled and signed by all members of the team.

#### **10.7 ROOM DATA SHEETS AGREED AND SIGNED OFF**

Once the room data sheets have been agreed the user group will be required to sign off the master copy.

#### **10.8 CDM INFORMING HSE FORM F10**

The Project Manager will ensure that a F10 form is completed and submitted to the HSE at the appropriate stage of the project and in accordance with the current regulations. An amended form may need to be submitted if programme dates are affected by the design or construction process.

#### **10.9 CERTIFICATE OF READINESS TO PROCEED TO DETAILED DESIGN**

Once the Sketch Plans and Room Data Sheets have been signed-off, a certificate will be completed to signify approval for design to proceed

#### **10.10 DEROGATIONS**

During the design process where derogations are required away from HTM's, HBN's or any other standard design guidelines a Derogation Certificate shall be completed and be signed off by the Project Board.

#### **10.11 PRODUCTION OF PRE-TENDER HEALTH & SAFETY PLAN**

On schemes where CDM regulations apply the project manager shall ensure that a pre-tender health & safety information pack will be developed and given to the contractor.

## **10.12 PRODUCTION OF RISK REGISTER**

When required, for schemes over £1M, the project manager will ensure that a risk register is developed for the scheme and updated on a monthly basis. The format of the register will depend on the size and complexity of the scheme.

For schemes under £1M a risk register will be produced, at the discretion of the Assistant Director of Strategy (Capital), based on the risk profile of the project.

## **10.13 BREEAM / AEDET**

At the appropriate point in the design process BREEAM and AEDET evaluations shall be undertaken, if warranted by the size of the project.

## **10.14 CHILD PROTECTION ISSUES**

On relevant schemes the Project Manager will ensure that any issues involving Child Protection will be addressed and that the Contractors are advised of any specific requirements that must be met.

## **10.15 MENTAL HEALTH ACT ISSUES**

On relevant schemes the Project Manager will ensure that any issues involving Mental Health will be addressed and that the Contractors are advised of any specific requirements that must be met.

## **10.16 REPRESENTATIVES OBSERVATIONS**

The project manager will ensure that all parties who may have a professional interest in the design of the scheme are informed of the scope and content and invited to submit any comments they feel necessary to ensure the design meets their requirements. A record should be kept of these comments and any action which is taken as a result.

## **10.17 DESIGN PRESENTATION**

A meeting will be arranged to review the scheme in detail and to ensure Health Board representatives are fully aware of the detailed specifications of the scheme.

## **10.18 PLANNING/ BUILDING REGULATIONS SUBMISSION/APPROVAL**

The project manager will ensure that any applications are submitted in a timely manner and all approvals are in place before work proceeds.

## **10.19 GROUP 2, 3 OR 4 EQUIPMENT SPECIFIED AND ESTIMATED COSTS RECEIVED**

Once the room data sheets are signed off a copy should be provided to the procurement department who will produce a priced equipment schedule, the cost of this will be included in the budget for the scheme.

## **11.0 NEC CONTRACT**

### **11.1 REVIEW TARGET COST**

The contractor shall submit his target cost with all supporting information. The Cost Advisor will review and evaluate the submission and produce an evaluation report for consideration by the Health Board to ensure that value for money has been achieved. Where a bill of quantities is submitted by the contractor in place of a target cost the document will be reviewed by the Cost Advisor who will prepare a report for the consideration of the Health Board.

### **11.2 VALUE MANAGEMENT REVIEW**

If at this stage of the design the estimated cost of the scheme is above the budget figure a value management review shall be undertaken to attempt to identify areas of cost savings.

### **11.3 RE-VET PREFERRED CONTRACTOR**

If the financial vetting on the Contractor was undertaken more than TWO MONTHS previously – the company will need to be re-vetted in accordance with financial procedures. If the company fails the re-vetting procedure they cannot be appointed and advice must be obtained from the Finance Manager, Capital on their status.

### **11.4 CAPITAL SCHEME APPROVAL MEMO**

When the scheme is ready to proceed approval must be sought in accordance with the requirements of Standing Orders and in accordance with the Scheme of Delegation utilising the relevant certificate appropriate to the scheme value.

### **11.5 CONTRACTOR HEALTH & SAFETY PLAN REVIEWED**

The Project Manager will ensure that a Construction Health and Safety Plan is provided by the Contractor in accordance with the current regulations and, where appropriate, is reviewed by the Clients Principal Designer.

### **11.6 PREPARE & EXCHANGE CONTRACT DOCUMENTS WITH THE CONTRACTOR**

As soon as possible the contract documents will be prepared and issued to the contractor for their completion before they are submitted to the Director of Corporate Governance to arrange for counter completion by the Health Board.

### **11.7 COLLATERAL WARRANTIES**

Where Collateral Warranties are required to be provided as part of the contract they will take the form of the example included within the current Framework

Agreement and will be completed by all parties prior to the contract commencement.

Where an alternative for of Warranty is proposed a check will be undertaken to ensure that all clauses contained on the Framework Agreement version are included within the alternative document.

## **11.8 AGENDA PRE-CONTACT MEETING**

The standard agenda will be utilised for all pre-contract meetings.

## **11.9 KPI PROJECT REPORTS**

The project manager will ensure that KPI's are completed for all disciplines and submitted to the capital support officer.

## **12.0 TRADITIONAL TENDERS & QUOTATIONS**

### **12.1 CONTRACTOR / CONSULTANT APPOINTMENT PROCESS**

When a scheme is ready to invite tenders an invitation would be published in accordance with Standing Orders, Schedule 6 – Standing Financial Instructions, Schedule 1 Section 7 – Electronic Tendering/Quotations Code.

### **12.2 PRE-TENDER ESTIMATE**

Prior to the invitation of tenders being issued a pre-tender estimate would be prepared and submitted for approval to proceed.

### **12.3 VALUE MANAGEMENT REVIEW**

If at this stage of the design the estimated cost of the scheme is above the budget figure a value management review shall be undertaken to attempt to identify areas of cost savings.

### **12.4 PREPARATION OF TENDER LIST AND FINANCIAL VETTING**

Before reviewing and evaluating tenders a financial vetting exercise must be undertaken. Companies that fail the vetting process will not be considered further. Subsequent if a company fails the vetting procedure during the tender evaluation period they cannot be appointed and advice must be obtained from the Finance Manager, Capital on their status.

### **12.5 SINGLE TENDER/QUOTE ACTION IF REQUIRED**

Prior to single tender/quotation action being taken approval has to be obtained in accordance with standing orders.

## **12.6 ISSUE OF TENDER DOCUMENTATION**

Once all approvals are in place tender documentation will be issued in accordance with Standing Orders, Schedule 6 – Standing Financial Instructions, Schedule 1 Section 7 – Electronic Tendering/Quotations Code.

## **12.7 VALUE MANAGEMENT REVIEW**

If at this stage of the design the estimated cost of the scheme is above the budget figure a value management review shall be undertaken to attempt to identify areas of cost savings.

## **12.8 TENDER REPORTS**

Once tenders are opened the project manager will arrange for them to be collected and evaluated following which a report should be prepared seeking approval to award the contract.

## **12.9 RE-VET PREFERRED CONTRACTOR**

If the financial vetting on the Contractor was undertaken more than two months previously – the company will need to be re-vetted in accordance with financial procedures. If the company fails the re-vetting procedure they cannot be appointed and advice must be obtained from the Finance Manager, Capital on their status.

## **12.10 SUCCESSFUL / UNSUCCESSFUL TENDER NOTIFICATIONS**

Once approval is received to award the contract all companies will be informed of the results of the tender in accordance with the contracts code.

## **12.11 CONTRACTOR HEALTH & SAFETY PLAN REVIEWED**

The Project Manager will ensure that a Construction Health and Safety Plan is provided by the Contractor in accordance with the current regulations and, where appropriate, is reviewed by the Clients Principal Designer.

## **12.12 EXCHANGE CONTRACT DOCUMENTS WITH THE CONTRACTOR**

As soon as possible the contract documents will be prepared and issued to the contractor for their completion before they are submitted to the Director of Corporate Governance to arrange for counter completion by the Health Board.

## **12.13 AGENDA PRE-CONTRACT MEETING**

The standard agenda will be utilised for all pre-contract meetings.

## **12.14 PROJECT CHARTER**

At the pre-contract meeting a copy of the project charter shall be tabled and signed by all members of the team.

## **12.15 EXTENSION OF TIME & NON COMPLETION CERTIFICATE**

Should the contract programme overrun either an extension of time or a non completion certificate must be issued citing the relevant contract clauses.

## **12.16 KPI PROJECT REPORTS**

The project manager will ensure that KPI's are completed for all disciplines and submitted to the capital support officer.

## **13.0 CONSTRUCTION & EQUIPMENT SUPPLY**

### **13.1 AGENDA SITE MEETINGS**

Standard agenda will be utilised in all site meetings.

### **13.2 PROGRESS NOTES / MEETINGS**

The Project Manager will ensure that notes / minutes are taken and distributed at each progress meeting.

### **13.3 ESTABLISH EQUIPPING GROUP & DEVELOP COMMISSIONING PLAN**

The Project Manager shall work with the equipping team to establish an equipping group with the membership drawn from all disciplines and will meet as required to develop an equipment schedule.

For larger Capital Schemes a commissioning plan will be developed.

### **13.4 PRODUCTION OF MONTHLY VALUATIONS**

Monthly valuations will be issued as required under the contract and in accordance with the Health Board's established procedures. Once approved an interim certificate will be raised.

### **13.5 CRL & PROJECT PROGRESS REPORTS UPDATE**

CRL's to be updated on a monthly basis in accordance with the Health Board's established procedures. For larger All Wales schemes Project progress Reports are to be updated on a monthly basis in accordance with the Health Board's established procedures.

### **13.6 EARLY WARNING NOTICES & REGISTER**

The Project Manager shall ensure that a register is maintained to record all Early Warning Notices and any resulting actions.



### **13.7 PROJECT MANAGERS INSTRUCTION & REGISTER**

The Project Manager shall ensure that a register is maintained to record all Project Managers Instructions and any resulting actions.

### **13.8 UPDATE COMPENSATION EVENTS & REGISTER**

The Project Manager shall ensure that a register is maintained to record all Compensation Events and any resulting actions and issue the relevant paperwork as and when these are agreed.

### **13.9 GROUP 2 EQUIPMENT DELIVERED & RECEIPTED**

The Contractor shall be provided with a list of all Group 2 equipment that will be procured for the scheme and instructed to retain all delivery notes which will be passed to the PM who will ensure that receipting is undertaken in a timely manner.

## **14.0 TECHNICAL COMMISSIONING & HANDOVER**

### **14.1 INDUCTION VISIT CARRIED OUT FOR OPERATIONAL & TECHNICAL STAFF**

The Contractor shall work with the PM and Estates Department to develop a schedule of demonstrations to the Health Boards staff.

### **14.2 PRE-HANDOVER INSPECTION CARRIED OUT & SNAGGING LIST PRODUCED**

The Site Works Officers and members of the Design Team will undertake a final inspection of the scheme and produce a snagging list to be submitted to the Contractor.

### **14.3 AGENDA FOR HANDOVER MEETING**

Standard agenda will be utilised in handover meeting.

### **14.4 BUILDING CONTROL CERTIFICATE OBTAINED**

Building Control Certificate will be obtained from the Local Authority or Building Control Inspector and copies included in both the scheme file and Deeds of the property.

### **14.5 RECEIPT OF TECHNICAL MANUALS & DRAWINGS FROM CONTRACTOR / CONSULTANTS**

At handover the Health Board will ensure it has a working copy of the manuals and drawings on-site. The Project Manager will ensure that remaining copies are fully updated and returned to Health Board within an agreed timescale.

## **14.6 RECEIPT OF HEALTH & SAFETY FILE**

At handover the Health Board will ensure it has a working copy of the Health and Safety File on-site. The Project Manager will ensure that remaining copies are fully updated and returned to Health Board within an agreed timescale.

## **14.7 HANDOVER OF MANUALS, DRAWINGS & ACCESS CONTROLS TO OPERATIONS & TECHNICAL STAFF**

The Project Manager will ensure that all manuals, drawings and access controls are handed over to the Estates department and a receipt obtained for the same.

## **14.8 FINAL ACCOUNT PROCEDURE**

At the appropriate time the Audit Checklist has to be produced and sent to finance.

## **14.9 CERTIFICATE OF PRACTICAL COMPLETION WITH FINAL SNAGGING LIST ATTACHED**

The Site Works Officers and members of the Design Team will undertake a final inspection of the scheme and produce a snagging list to be tabled at the handover meeting and attached to the Practical Completion Certificate. A programme will be agreed for the rectification of all outstanding snags.

## **14.10 DEFECTS – PROCEDURE FOR REPORTING DEFECTS**

All defects should be notified to the Estates Department initially. They will investigate the issue and carry out any remedial work they are able to undertake. If the matter is found to be a contractual issue it will be reported to the main contractor on the appropriate form.

## **15.0 POST COMPLETION**

### **15.1 DELIVERY OF GROUP 3 EQUIPMENT & RECEIPTED**

The Equipping Team will be responsible for the ordering and delivery and receipting of all Group 3 items.

### **15.2 DEFECTS – END OF DEFECTS CHECKLIST**

At the end of the defects period an inspection shall be arranged of the scheme and a schedule of any outstanding defects produced and submitted to the Contractor. A timescale for the remedial works will be agreed.

### **15.3 AUDIT CHECKLIST PRODUCED**

Once the Completion Certificate is issued the Final Account will be negotiated and agreed with the Contractor and details provided to the Project Manager. The Project Manager will complete a Final Account Checklist schedule and, together with a copy of the Final Account, will submit the same to the Capital Support

Officer for review. The Capital Support Officer will maintain a log of all risk assessments and the associated documents which will be made available for review by NWSSP Audit and Assurance when requested.

The completed checklist will be passed to the Assistant Director of Strategy (Capital) for review. Where the completed Checklist schedule indicates a risk the ADS will investigate and determine the cause and impact of the risk. Once satisfied that the final account is correct the ADS will authorise the checklist form and confirm all necessary investigations/actions have been undertaken. The form will then be forwarded to the Capital Finance Team.

The Capital Finance Team will confirm with the Capital Support Officer on behalf of the ADS that the checklist has been completed before releasing final retentions on the scheme.

At the next Capital Management Group meeting the ADS will report on the findings of his investigation on highlighted risks for information.

#### **15.4 DEFECTS – CERTIFICATE OF MAKING GOOD DEFECTS**

On completion of remedial works final inspection will be undertaken and a certificate will be issued.

#### **15.5 KPI PROJECT REPORTS**

The project manager will ensure that KPI's are completed for all disciplines and submitted to the capital support officer.

#### **15.6 FINAL CERTIFICATE ISSUED & RETENTION RELEASED**

Once agreement has been reached on the final account figure the final certificate may be issued and the remaining retention released.

### **16.0 OPERATIONAL COMMISSIONING**

#### **16.1 OPERATIONAL COMMISSIONING CARRIED OUT TO COMMISSIONING PLAN**

All activities detailed in the commissioning plan, where applicable, shall be undertaken.

#### **16.2 DEMONSTRATION OF PLANT & EQUIPMENT**

The Contractor shall work with the Project Manager and Estates Department to develop a schedule of demonstrations to the Health Boards staff.

#### **16.3 INITIAL INDUCTION OF USERS TO PROJECT**

The Contractor and Estates Department and any other relevant departments shall work with the Project Manager to develop a schedule of demonstrations to the Health Boards staff.

## **17.0 POST PROJECT EVALUATION**

### **17.1 LESSONS LEARNED**

Within three months of the occupation of the building a meeting with all parties involved in the Design, Construction, Commissioning and Operation of the scheme will be held to identify any issues that could be used to benefit future schemes.

### **17.2 DISCRETIONARY CAPITAL POST PROJECT EVALUATION**

If required, by the Investments & Benefits Group a full Post Project Evaluation will be undertaken in accordance with the principles in Infrastructure Investment Guidance.

### **17.3 ALL WALES CAPITAL POST PROJECT EVALUATION**

A Post Project Evaluation will be undertaken on All Wales funded Capital schemes in accordance with the procedures established by Welsh Government.

## **18.0 SUPPORTING DOCUMENTATION**

The following documentation is to be utilised as and when additional steps need to be incorporated into the overall Capital Control procedure in response to variations within the project, the event of insolvency or liquidation, a requirement to obtain additional financial guarantees or where funds other than Capital are to be utilised.

### **18.1 INSOLVENCY & LIQUIDATION – RECOMMENDATION ON ACTIONS & PROCEDURES**

In the event of a contractor entering into insolvency or liquidation actions the procedures set out in Financial Control Procedure 15 must be followed.

### **18.2 PERFORMANCE BOND**

The finance department will indicate whether a performance bond is required following the financial vetting exercise.

### **18.3 PARENT COMPANY GUARANTEE**

The finance department will indicate whether a parent company guarantee is required following the financial vetting exercise.

### **18.4 COLLATERAL WARRANTIES**

Where Collateral Warranties are required to be provided as part of the contract they will take the form of the example included within the current Framework

Agreement and will be completed by all parties prior to the contract commencement.

Where an alternative for of Warranty is proposed a check will be undertaken to ensure that all clauses contained on the Framework Agreement version are included within the alternative document.

#### **18.5 ESTIMATE – ENDOWMENT / CHARITABLE FUNDS / OTHER SOURCES**

Formal approval must be obtained for the use of endowment funds on all occasions. This may include correspondence as well as the completed FCP 20 form.

#### **18.6 INTERIM CERTIFICATES**

Interim Certificates will be issued as required under the contract and in accordance with the Health Board's established procedures.

#### **18.7 CLIENT VARIATION REQUEST**

Any changes requested by the Client must be notified and approved using the Client Variation Request form.

#### **18.8 DESIGNER VARIATION**

Any changes requested by a member of the Design Team must be notified and approved using the Variation Request form.

### **19.0 FINANCIAL MONITORING**

The Director of Finance has a duty to monitor expenditure within approved estimates for building/engineering contracts.

#### **19.1 CONTRACTS REGISTER**

As an integral part of this financial control the contracts register should provide a record of the main financial, scheme time related information and legal provisions included in each written contract. The information contained therein should enable a continuous control to be exercised over all architects' and engineers' certificates issued and payments made to each contractor and/or consultant without having to refer on each occasion to the legal documents, specifications, bills of quantities, consultants agreement or to the accounts previously passed for payment.

To facilitate this monitoring role capital contract register control sheets have been devised to perform the functions required. The sheets will be prepared by the Finance Department once a capital job number has been requested based upon information supplied by the Project Manager. The sheets will be continually updated throughout the course of a scheme.

The function of each sheet is described below:-

### **Form A – Contractor Payment Sheet**

This sheet controls details of the interim certificates paid against that job number. It also has the facility to record details of the contractors name and address, creditor number, financial code and tax exemption details. This enables the officer entering the register to check that the payment to be processed is being made to the appropriate creditor. The benefits therefore are that the Director of Finance is able to be assured that:-

- a contract has been entered into;
- appropriate contractual certificates have been issued on a timely basis;
- the financial code entered at the payment is correct;
- duplicated payments are not paid;
- total payments made do not exceed the approved sum and where they do that additional approval is sought and demonstrated at the register;
- a performance bond has been received on a scheme, if appropriate;
- VAT is being correctly recovered;
- retentions have been correctly accrued and released;
- Scheme risk assessments have been completed on release of retentions

### **Form B – Consultant Payment Sheet**

As Form A except that it records payments made to consultants. The specific benefits of this sheet are that the Director of Finance is able to demonstrate:

- that an appointment has been made;
- that the appropriate NHS Agreement has been completed;
- the percentages for stage payments indicated at the agreement.

## **19.2 CAPITAL RESOURCE LIMIT**

Achievement of the Capital Resource Limit (CRL) is a statutory target. Any under-spend against the CRL is a “lost” resource, and therefore HBs must work to minimise this value. Overspending against the CRL is not permitted. An overspend of just £1k would result in qualification of the Health Board’s Annual Accounts. The following activities will be undertaken to minimise the risk of not achieving the CRL;

- The Director of Strategy submits an annual Capital Plan to Investments & Benefits Group for approval.

- Detailed expenditure profiles are developed and routinely updated to forecast achievement against the CRL.
- Monthly meetings between the HB and WG are undertaken to ensure queries are resolved and the CRL maintained and finalised before the end of the year.
- The Capital Programme will be monitored by the Capital Management Group.
- The Principal Finance Manager (Capital) meets monthly with the Assistant Director of Strategy (Capital) to ensure regular communication takes place.

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Planning Directorate**

**Checklist**

A checklist is to be completed for all Capital Schemes  
The Major Checklist format is to be completed for all schemes not classified as minor

Project Name:  
Project No:  
Project Manager:  
Scheme Budget:

**MAJOR**  
Over £500,000

**MINOR**  
Under £500,000

Change Box  
to Green when  
Completed

Change Box  
to Green when  
Completed

**Feasibility Stage**

- 5.1 [Initial Project Proposal Form or Formal Business Case](#)  
5.2 Develop Brief with users which is signed off

Send to Capital Support Manager for logging

**Overall Project Management**

- 6.1 [Project Initiation Document or PEP](#)  
6.2.1 Management Control Programme  
6.2.2 Highlight Report  
6.2.3 Project Programme produced/Updated throughout the project  
6.3 [Contractor/Consultant Appointment Request - Framework](#)  
6.4 Financial Vetting - USE FINANCE PORTAL  
6.5 [Brief - Acceptance Certificate from Consultant](#)  
6.6 [Letter of Appointment \(Contractors/Consultants\)](#)  
6.7 Prepare and Exchange Professional Services Contract with Consultant(s) - USE PORTAL  
6.8 New Contract Pro-Forma - USE FINANCE PORTAL  
6.9 [Scheme Risk Register](#)

**See Comments** **Not Required** PEP - mandatory on schemes over £1M unless otherwise agreed with the Project Director. PEP - not required on Minor schemes  
MCP Design Programme - PM Report  
PM to complete for monthly submission to LS/SD  
Construction Design/Programme - Contractor/Architect Led  
Request Contractor or Consultant to the Framework Manager  
To finance for them to check via Constructionline  
New link include limits details  
PSC only required for Consultants Fees over £5K / USE CAPITAL PORTAL  
Send to finance to populate the Contractor/Consultants Register  
To be completed on each individual project

**Workstage 2 - Design**

- 7.1 Statement of Need Form - Feasibility/Budget - USE FINANCE PORTAL  
7.2 [Sketch plans agreed and signed off by Clerk, including any alterations](#)  
7.3 [Maintain and Monitor Project Site](#)  
7.4 [Project Charter Produced](#)  
7.5 Room data sheets agreed and signed off  
7.6 CDM Informing HSE Form F10  
7.7 [Certificate of Readiness to Proceed to Detailed Design](#)  
7.8 [Production of Pre-Construction Health and Safety Plan](#)  
7.9 [Production of Risk Register](#)  
7.10 [BREEAM / AEDET if applicable](#)  
7.11 [Child Protection Issues to resolve](#)  
7.12 [Mental Health Act issues to resolve](#)  
7.13 [Representatives Observations](#)  
7.14 [Design Presentation](#)  
7.15 Planning/Building Regulations Submission/Approval  
7.16 [Group 2, 3 or 4 equipment specified and estimated costs received](#)

Send to Capital Support Manager in order to obtain a Job Number  
To be signed by all parties  
As applicable to the CDM Regs 2007 (PM decision)  
As applicable to the CDM Regs 2007 (PM decision)  
**See Comments** **See Comments** Risk Register is required on all schemes over £1M. Schemes under £1M is at the discretion of the ADOF (Capital)  
**Not Required** BREEAM Consultant to be appointed. AEDET information via hyperlink  
PM decision  
Evidence needed (Meeting/Email)  
If applicable  
New Equipping form to be completed

**Workstage 3 - NEC Contract**

- 8.1 Review Target Cost and produce cost report  
8.2 Value Management Exercise carried out if required  
8.3 Statement of Need - Actual Costs (Including VAT Assessment) - USE FINANCE PORTAL  
8.4 Financial Vetting - USE FINANCE PORTAL  
8.5 [Capital Scheme Approval Memo \(Contractors and Consultants\)](#)  
8.6 [Project Director Appointed and Certificate signed off](#)  
8.7 [Project Manager Appointed and Letter Signed Off](#)  
8.8 Assemble Project Board for schemes in excess of £1m  
8.9 Contractors Construction Health and Safety Plan Confirmed as adequate by CMD-C  
8.10 Prepare and Exchange Contract Documents with Contractor - USE PORTAL  
8.11 [Agenda Pre-contract Meeting](#)  
8.12 [NPI Project Reports](#)

To establish value for money  
Firmed up costs  
To finance for them to check via Constructionline. Second check if required  
Authorised Levels (ADOF - £75K, DoF - £250K & CE - £500K)  
**Not Required** Potentially combine form with PM appointment  
**See Comments** **Not Required** Meeting frequency to be agreed by Board, minutes to be produced of meetings. CMRG will monitor schemes under £1M  
As applicable to the CDM Regs 2007 (PM decision)  
Discretion of PM - possible short form of contract - USE PORTAL  
Carried out before works commence on-site  
Request direct to Capital Support Officer

**Workstage 3A - Traditional Tenders & Quotations**

- 9.1 Contractor/Consultant Appointment Process - Traditional  
9.2 [Pre-Tender Estimate produced by Cost Adviser](#)  
9.3 Value Management Exercise carried out if required  
9.4 [Preparation of Tender List and Financial Vetting](#)  
9.5 [Issue of Tender/Quotation action if required](#)  
9.6 [Issue of Tender Documentation](#)  
9.7 Notification of Tender Returns to Headquarters  
9.8 Value Management Exercise carried out if required  
9.9 [Tender Returns](#)  
9.10 [Successful/Unsuccessful Tender Letters](#)  
9.11 [Statement of Need - Actual Costs \(Including VAT Assessment\) - USE FINANCE PORTAL](#)  
9.12 [Capital Scheme Approval Memo](#)  
9.13 [Project Director Appointed and Certificate signed off](#)  
9.14 [Assemble Project Board for schemes in excess of £1m](#)  
9.15 Contractors Construction Health and Safety Plan Confirmed as adequate by CMD-C  
9.16 Prepare and Exchange Contract Documents with Contractor - USE PORTAL  
9.17 [Agenda Pre-contract Meeting](#)  
9.18 [Project Charter Produced](#)  
9.19 [Extension of Time or Non-Completion Certificate Issued \(UCT only\)](#)  
9.20 [NPI Project Reports](#)

Section to be deleted if contract undertaken within Framework  
Select list to be added when agreed  
Hyperlink to STA / SQA folder  
Firmed up costs  
Authorised Levels (ADOF - £75K, DoF - £250K & CE - £500K)  
**Not Required** Potentially combine form with PM appointment  
Meeting frequency to be agreed by Board, minutes to be produced of meetings  
As applicable to the CDM Regs 2007 (PM decision)  
Discretion of PM - possible short form of contract  
Carried out before works commence on-site  
To be signed by all parties  
**Not Required** Request direct to Capital Support Officer

**Workstage 4 - Construction and Equipment Supply**

- 10.1 [Agenda Site Meetings](#)  
10.2 Progress Notes/Minutes  
10.3 Establish Equipping Group & develop Commissioning Plan  
10.4 [Production of monthly valuations](#)  
10.5 [Update SQA](#)  
10.6 [Update Early Warning Notices and Register](#)  
10.7 [Update Project Managers Instructions Register](#)  
10.8 [Update Commissioning Events Register](#)  
10.9 Group 2 Equipment delivered and receipted

Monthly progress meetings  
Draft document from WHS?  
Monthly  
To be included

**Workstage 5 - Technical Commissioning and Handover**

- 11.1 [Induction Visit carried out for Ops and Tech](#)  
11.2 Pre-Handover Inspection Carried Out and snagging list produced  
11.3 [Agenda for Handover Meeting](#)  
11.4 Building Control Certificate Obtained  
11.5 [Receipt of Technical Manuals and Drawings from Contractor/Consultants](#)  
11.6 Receipt of Health and Safety File  
11.7 [Handover of manuals, drawings and access controls to Ops and Tech](#)  
11.8 Final Accounts Procedure - USE FINANCE PORTAL  
11.9 [Certificate of Completion with any outstanding issues attached](#)  
11.10 [Defects - Procedure for Reporting Defects to PM](#)

Need to amend the form to incorporate keys / cards / controls, etc  
New document from IM

**Workstage 6 - Post-completion**

- 12.1 Delivery of Group 3 equipment and receipted  
12.2 [Defects Procedure](#)  
12.3 [Final Accounts Procedure - Audit Checklist](#)  
12.4 [Defects - Defects Certificate](#)  
12.5 [NPI Project Reports](#)  
12.6 [Final Certificate issued and retention released](#)

Documented evidence required  
New document from IM  
Request direct to Ian Jones

**Workstage 7 - Operational Commissioning**

- 13.1 Operational Commissioning Carried out to Commissioning Plan  
13.2 Demonstration of Plant & Equipment to Ops and Tech  
13.3 [Initial Induction of Users to system](#)

**Workstage 8 - Post-project Evaluation**

- 14 [Lessons Learned](#)  
14 [Post-Project Evaluation carried out](#)

Any major issues to be discussed at PMs meeting and added to Lessons Learned Log





## **Informatics Programme Management Guidelines**

### ***Objective***

To achieve a consistent, transparent and repeatable process to select the right projects and to manage and deliver the selected projects effectively.

### ***Process***

The Project Intake and Delivery process consists of five stages to ensure that projects are formally controlled and managed from the initial idea and requirement through to service operation. The end-to-end process is shown in the diagram, **Intake Process** (available in the Informatics Programme Office SharePoint site). Project approvals are required to progress between stages. All documents referred to in this guidance are available on the Informatics Programme Office SharePoint site.

## **Stage 1 - Feasibility**

### ***Objectives***

- To evaluate the benefits and risks of the proposal
- To liaise with the person / team proposing the idea to better understand the objectives to be achieved

### ***Summary***

During this stage, the **Project Evaluation** is completed. The **Evaluation** scores the expected high-level benefits of undertaking the project as well the risks of undertaking the project. This is also the first opportunity to document the costs, objectives and expected outcomes of the project.

### ***Governance***

During this stage, the evaluation report and **Project Brief** are reviewed by:

- Service Delivery Unit/s
- Clinical Reference Group
- Informatics Project Review Group.

The evaluation report is the first opportunity to assess the feasibility of the project. It documents the high-level objectives and deliverables and scores the likely benefit of successfully delivering the project against agreed criteria as well as scoring the potential risks that are likely to be faced while implementing the project.

The Service Delivery Unit will need to initially sponsor and approve the proposal from their unit. The Clinical Reference Group will review the proposal to ensure that it addresses the requirement. The Informatics Project Review Group will work with the team proposing the solution to ensure that it fits with the Strategic direction and looks at alternative options to deliver the requirements. The governance in place enables the Health Board to validate that the project is feasible, is a priority and that alternative options to deliver the objectives have been reviewed.

During this stage, the Informatics Project Review Group will decide if further resource should be provided to develop a project brief and if necessary a business case for Stage 2.

### ***Outputs***

1. Project Evaluation spreadsheet
2. Project added to CAMMS system
3. Project Brief

Once the Evaluation spreadsheet has been completed, the Project Review Group will recommend that either that no further and resource can be committed at this time or that a Project Brief should be developed and assign a resource to work with the SDU to develop one. After the approval of the Brief and approval of the Informatics Programme Lead, the project moves onto Stage 2.

## **Stage 2 - Definition and Investment**

### ***Objective***

- To ensure that the Health Board has approved the capital resources and ongoing revenue for the project to deliver the expected benefits proposed by the project.

### ***Summary***

For projects with a capital cost or ongoing revenue stream over £50,000, the Health Board's Investment and Benefits Group (IBG) will review the project before it can proceed further.

### ***Outputs***

1. Approval from IBG
2. Budget approved

All projects that do not exceed the capital or revenue investment levels will proceed directly past Stage 2 and be added to the Portfolio for oversight by the Informatics Programme Board. All projects approved by the IBG will also be added to the Portfolio.

#### **Informatics Programme Board**

All projects that have passed Stage 2 will be added to the Informatics Portfolio with the intention that the projects are initiated and delivered when resources are available and can be scheduled, taking account of other dependencies. The bubble diagram represents the active and queued projects, showing benefits vs. project risk.

Quarterly and at the request of the Head of Informatics Programme, the Programme Board will review the Portfolio for projects that await initiation. The Board will take advice on the scheduling, resourcing and prioritisation of the projects. After approval by the Board, queued projects can then be formally initiated, scheduled and begin Stage 3.

### **Stage 3 - Initiation**

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#### **Objective**

- To ensure that the project is well defined planned and resourced before starting implementation.

#### **Summary**

At this stage, the objectives, scope, deliverables, work packages and work breakdown structure, milestones and governance controls are finalized. During this stage, the **Project Initiation Documentation** (PID) is completed and approved, project management controls are agreed and set up (risk and issue logs, status reporting) and the project governance is agreed (inaugural Project Board set up).

#### **Governance**

During initiation, the project will finalise and baseline the schedule, produce the initiation document and put in place the RAID (risk, assumptions, issues and dependencies) controls that will help manage the project effectively through to completion. Overseeing the governance will be the Project Board, headed by the Project Sponsor who with the project manager will agree the project tolerances and status reporting processes for the duration of the project.

#### **Outputs**

1. Project Initiation Document (CAMMS)
2. Benefits Realization Plan (CAMMS)
3. Risk Log (CAMMS)
4. Issue Log (CAMMS)
5. Status Reporting (CAMMS)
6. Project Schedule (CAMMS - baselined after Project Board approval)
7. Privacy Impact Assessment

### **Stage 4 - Implementation**

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#### **Objective**

- To deliver to the agreed implementation plan

#### **Summary**

This stage is the culmination of the planning and aims to deliver the products and outputs set out in the PID and scheduled as milestones in the project plan.

#### **Governance**

The project will be managed by exception in this Stage. The project manager will lead the project team to deliver according to the schedule and report to the Project Board by exception when agreed tolerances are likely to be exceeded.

#### **Outputs**

1. Transition to Service package

### **Stage 5 – Handover and Closure**

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#### **Objective**

- To ensure that the project objective/s have been achieved, outputs have been delivered and that the solution is embedded with users and can be supported as an operational service.

#### **Summary**

This stage completes the project and is the formal handover from a project to live operations. The Project Board (or the business assurance role on the Board) must confirm that the outputs have been delivered and the objectives achieved. Most project benefits derived from business change are only likely to be realised partly or

fully after the project has closed and so the business owners will need to agree the realization plan before the handover is completed.

***Governance***

It is the role of the Project sponsor (as part of the Project Board) to formally agree the transition of project to operations therefore approve the closure of the project. The ongoing plan for the realization of the business benefits will also need to be approved by the project board.

***Outputs***

1. Lessons Learnt document (CAMMS)
2. Benefits Realisation Plan

