

CPMO – Change Initiative Mandate

** Please ensure you 'save as' with the initiative name and save in:*

Purpose:

The Change Initiative Mandate is the first document required to initiate a project. It is considered to be a pre-project document; it encapsulates the ideas and basic information that is available at this point.

The mandate has been prepared to provide a defining document to which stakeholders can sign up, and under which the project (up to and including the production of a Business Case may be delivered).

Requested By	[REDACTED]
Initiative Name <i>No more than 50 characters</i>	IC.02 HCS24
Commissioned By	Marlin Warnette
Date Submitted	09/04/2021

Pre Form – complete sizing matrix

Base Information

Description <i>No more than 950 characters</i>	<p><i>Please provide a high-level description:</i></p> <ul style="list-style-type: none"> - Current state / problem statement - Desired outputs / objectives / outcomes <p>In its current state, Jersey's intermediate care function is small and disjointed. It primarily operates as a one-off service, with the majority of its activity seen in general inpatient care, as a result of substantial gaps in workforce and finance.</p> <p>The aim of the project is to deliver a high-functioning intermediate care service that is deeply embedded in the community and operates 7 days a week from 24 hours a day delivered through bed-based care, home-based care, crisis response, reablement and supported discharge to lower avoidable inpatient admissions, promote earlier discharge pathways and independence at home.</p>
High Level Objective(s) (up to 3) <i>No more than 120 characters for each</i>	<ol style="list-style-type: none"> 1. Undertake extensive assessment across all areas to define what services will be provided within the HCS24 Hub and what appropriate estates can be used. 2. Create a front door workforce through the co-location of staff to a permanent HCS24 Hub. 3. Consider further integration across Care Groups and analyse how these can enhance the services offered by HCS24.

Lead Department	Health and Community Services
Department Section	Health and Community Services
Impacted Departments (s)	<i>Please specify which Department(s) would be impacted as a result of delivering this initiative (choose from the following list – delete as appropriate)</i> COO, HCS, T&E
Start Date	01/03/2021
End Date	31/12/2024
Current Lifecycle Phase <i>See link to our CPMO SharePoint site here</i>	Delivery
Common Strategic Priorities <i>See link to our CPMO SharePoint site here</i>	Improve Well-being and Mental & Physical Health
Implication(s) of not progressing	<i>What would happen if this initiative was not delivered? What would the impact be against CSP objectives</i> Not delivering the HCS Portfolio would: <ul style="list-style-type: none"> • Fail to meet the HCS strategic objectives • Result in a failure to meet objectives set by the Jersey Care Model • Increase the operational pressure on health care services • Fail to improve quality of health care services delivered to patients • Perpetuate inefficient working practices • Fail to address the need to improve the health care services operations in preparation for the development of Our Hospital • Waste capital investment allocated specifically improving health care services

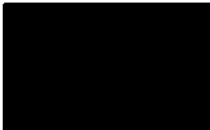
Budget	
In-year Budget estimate	<i>Please provide a high-level total cost estimate for the current financial year (£)</i>
Total expenditure estimate	<i>Please provide a high-level total cost estimate for completion of the initiative (£)</i>

Has funding been agreed by your Director General (DG) / Senior Responsible Officer (SRO)	<i>Director General (DG) / Senior Responsible Officer (SRO) that has commissioned this mandate</i>
Approval Route	<i>GP Process, IAB in year request, Base Budget, Sub Project of a Programme</i>

Initiative Type	
Initiative Type <i>If Workstream, enter parent below</i>	<i>Workstream</i>
Parent Programme Name	<i>Intermediate Care Programme (IC)</i>
Initiative Type classification Refer to the CPMO Sizing Matrix here – Link - Examples	<p>Key</p> <p>Embed or link to your completed CPMO Sizing Matrix here:</p> <p>(To embed of document: Insert>Object>Create from File>Browse to select your completed Sizing Matrix. To link to a document on Teams: Insert>Link)</p>
Dependencies add more definition in clear terms	<i>Please describe all known outward dependencies on other projects / programmes</i>

Roles		
Role	Description of Role	Name
Project Manager	<i>The person given the authority and responsibility to manage a project on a day-to-day basis to deliver the required products within the constraints agreed with the project board.</i>	
Programme Manager	<i>The person responsible for the setup, management, and delivery of a programme.</i>	
Programme Sponsor	<i>The person with the main driving force behinds and programme or a project</i>	Robert Sainsbury
Senior Responsible Officer	<i>The person with overall responsibility for ensuring that a project or programme meets its objectives and delivers the projected benefits.</i>	Martin Warnette
Senior User	<i>The person accountable for ensuring that the user needs are specified correctly and that the solution meets those needs.</i>	Martin Warnette

Benefits – Perform Input	
Benefit 1	
<i>No more than 50 characters</i> Benefit 1 name	Improved Services
<i>No more than 120 characters</i> Benefit description	Following the completion of this project we aim to have a high-functioning intermediate care service that is deeply embedded in the community and operates 24/7.
Benefit type	Customer / External Stakeholders
Date benefit will be realised	31/12/2024
Amount (if applicable)	
Benefit 2	
<i>No more than 50 characters</i> Benefit 2 name	Service Expansion
<i>No more than 120 characters</i> Benefit description	Following the completion of this project we aim to have expanded the services offered to include Mental Health, Social and Pharmacy.
Benefit type	Customer / External Stakeholders
Date benefit will be realised	31/12/2024
Amount (if applicable)	
Benefit 3	
<i>No more than 50 characters</i> Benefit 3 name	
<i>No more than 120 characters</i> Benefit description	
Benefit type	Choose an item.
Date benefit will be realised	Click or tap to enter a date.
Amount (if applicable)	

Sponsor Sign Off: 	Name: 12 SANSBURY	Signature: (Embed email approval or Insert Electronic Signature)	Date: 11/5/21
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Senior Responsible Officer Sign Off:	Name: Martin Warnette	Signature: (Embed email approval or Insert Electronic Signature) See below	Date: 29/04/2021
https://govje.sharepoint.com/sites/HCSModernisation/Shared%20Documents/General/Business%20Planning/Perform%20Documents/Change%20Initiative%20Mandates/Project%20Mandates/Intermediate%20Care/Rev%201/RE_%20IC%20Intermediate%20Care%20-%20Mandates.msg			

