

## Freedom of Information Act 2000 disclosure log entry

### Reference

18-19202

### Date sent

17/10/2018

### Subject

EPR (Electronic Patient Records) Details

### Details of enquiry

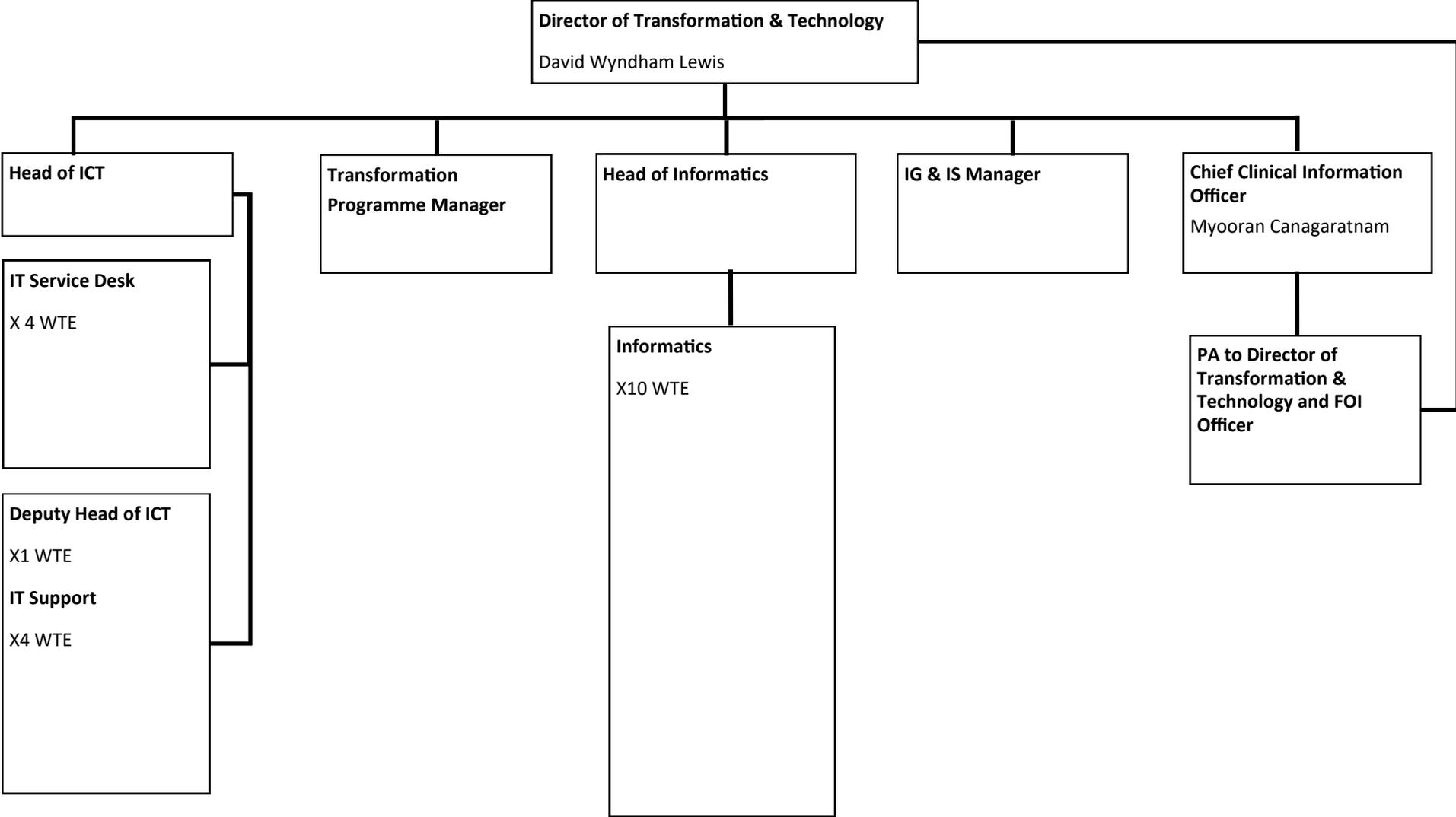
1. Who is the Trust's current supplier for their Electronic Patient Record?
2. What is the contract start and end date for the Electronic Patient Record?
3. Who is the Trust's current supplier for your Patient Administration System?
4. What is the contract start and end date for the Patient Administration System?
5. When are you due to start looking to re-procure your clinical systems?
6. Who supplies the Trust's integration system?
7. Please supply a copy of the Trusts latest Informatics Strategy
8. How regularly does the Trust review their Informatics Strategy?
9. Has the Trust developed a Digital Strategy?
10. How often does the Trust assess their Clinical Systems?
11. Who is the Trust's current Chief Clinical Information Officer?
12. Which member of the board is responsible for IT?
13. As part of planning for the replacement of PAS how much has your organisation assigned a specifically for data migration to offset the risks to revenue generation post go-live of the new system?
14. Please provide an organisation chart for your IM&T department?
15. Which member of the Trust is the SRO for the Local Digital Roadmap engagements?
16. Who at the Trust is responsible for ensuring the changes to IR35 are being enforced?

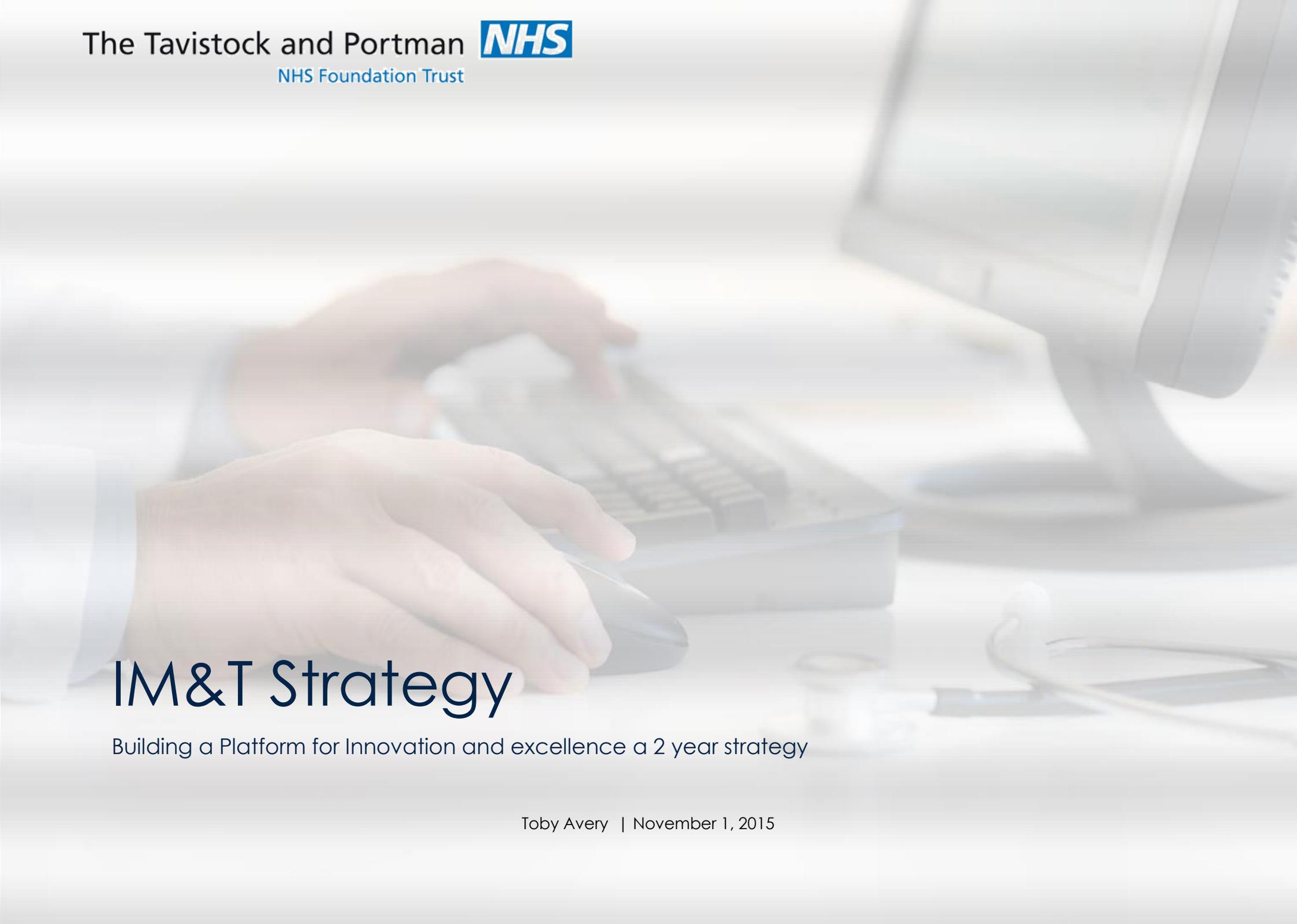
### Response Sent

1. Who is the Trust's current supplier for their Electronic Patient Record?  
[Advanced Healthcare](#)
2. What is the contract start and end date for the Electronic Patient Record?  
[The initial 5 year term expires on 1/5/2019 with an option to extend annually for up to a further five years.](#)
3. Who is the Trust's current supplier for your Patient Administration System?  
[Not applicable, EPR is our PAS system.](#)
4. What is the contract start and end date for the Patient Administration System?  
[n/a](#)

5. When are you due to start looking to re-procure your clinical systems?  
Under the procurement terms we can award further extension until May 2024
6. Who supplies the Trust's integration system?  
None at present
7. Please supply a copy of the Trusts latest Informatics Strategy  
This Strategy has been pasted into this document, and follows the answer to question 14.
8. How regularly does the Trust review their Informatics Strategy?  
As required by the Trust Board
9. Has the Trust developed a Digital Strategy?  
Part of wider IM&T Strategy in draft / approval stage
10. How often does the Trust assess their Clinical Systems?  
Routine basis to maintain patient clinical records
11. Who is the Trust's current Chief Clinical Information Officer?  
Myooran Canagaratnam
12. Which member of the board is responsible for IT?  
Director of Transformation & Technology
13. As part of planning for the replacement of PAS how much has your organisation assigned a specifically for data migration to offset the risks to revenue generation post go-live of the new system?  
  
N/A – See above response to questions 3 and 4
14. Please provide an organisation chart for your IM&T department?  
  
This is pasted below

# Information Management and Technology Directorate





# IM&T Strategy

Building a Platform for Innovation and excellence a 2 year strategy

## Foreword

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I am excited to introduce to you the Tavistock and Portman NHS Foundation Trust's 2 year IM&T Strategy. Over the last few years the Trust has made some significant steps forward in the systems it uses and recognition of the need for IT and Informatics services to be an enabler for more efficient working.

However there have also been a number of challenges around the quality of the services provided and a lack of investment in the underpinning infrastructure. Since joining the Trust in January 2015 I have been able to review the IM&T service recognising what works well and what is not so good. I have begun to make improvements to the way we do things but there is much more needed. The next step is to formalise our approach for the next few years and with the support of the board drive forward the changes needed to provide the technology platforms we need in order to make IT the enabler it should be and allow the innovation many of our clinicians, lecturers, patients, students and administrative staff long for.

My hope is that this strategy will enable just that.

Toby Avery

Director of IM&T

# Executive Summary

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## Overview of the IM&T Strategy

This document aims to outline the ambitions of the IM&T Department over the next 2 years to support the Trust's objectives.

The NHS landscape is currently undergoing a significant period of change with cost reduction taking place and the drive for a digital culture with the removal of paper from the NHS being seen as one of the ways we can achieve this reduction.

The Trust is experiencing this "crunch" and is having to respond accordingly with both cost reduction plans and ambitious growth targets combined with the need to relocate in the next 3 – 4 years making the next few years both uncertain and challenging.

At the same time the need to provide high quality and safe care for our patients along with an effective 21<sup>st</sup> Century teaching environment for our students has never been more apparent.

Therefore we have had to develop a strategy that is flexible enough to support and respond to rapid change while continuing to underpin and enable existing services.

To this end we have developed a 2 year ambition and an IM&T vision that focusses on building IM&T maturity, provides a service rather than a product and usability rather than technology.

The aim is that this creates a platform for significant innovation and improvement from year 3. This isn't to say we can't do anything innovative in the next 2 years but simply says that we must first build the foundations on which we can grow.

A relatively short, 2 year, strategy has been adopted to deliver some focused improvements required to enable future growth. The NHS/Trust landscape is changing rapidly as is technology and

having a longer strategy would probably not be productive or provide the focus needed at this stage.

## IM&T 2 Year Ambition

To build a platform for innovation and excellence

## IM&T Vision

To provide customer oriented usable IT and Informatics services that builds on reliable technology solutions and puts the need of the service users and staff at the centre of all we do.

## Where we are now

Over the last 2 years the Trust has implemented its Integrated Digital Care Record (IDCR) project this has delivered the CareNotes system as the Trusts electronic patient record. The implementation of IDCR is a significant milestone for the Trust as for the first time clinical data is recorded and maintained in an electronic system. This is a cultural change that many Trusts went through a number of years ago and has impacted not only the way clinicians work but also the importance of IT as a supporting service.

No longer is IT an ancillary function but it is integral to providing high quality and safe clinical services. This means that we need to consider IT from the ground up ensuring that there are no single points of failure or risks to the service that we are unaware of.

While the Trust has invested significantly into IDCR and supporting devices little has been invested in the the underlying infrastructure at the Tavistock Centre or other sites over recent years and simple organic growth has occurred. This has resulted in an infrastructure that while operating is not designed to provide the performance or resilience that one would expect in a high performing clinical environment. A number of performance issues and failures in 2015 are related to the current state of the infrastructure.

Aspects of IM&T best practice that are now standard across much of the NHS have not been embedded into working practice at the Trust, largely because they have not previously felt to be needed, this leaves us with some catching up to do. Much of this is not in areas that are immediately obvious to users of IM&T services and therefore is often not seen as a priority however it is the foundation of both technical and service management best practice that allows for a reliable and safe environment.

Several internal audits conducted in 2015 have highlighted a number of these areas of best practice as requiring improvement to ensure that appropriate levels of resilience and security are in place.

From a national perspective we have some very clear directives regarding making better use of technology and becoming a “paperless” or “paperlite” environment by 2020. While we have achieved this in terms of our clinical records for the most part we have not yet developed plans to address the inputs and outputs from our clinical systems. These need to be considered.

Another area that has historically lacked investment is the IM&T services for the Directorate of Education and Training. This has resulted in bespoke systems being used that have limited support available and are in some cases hosted on unsupported platforms.

IT security is patchy with some effective tools being in place but lack of management and monitoring to ensure they are functioning appropriately.

While the number of IM&T staff has increased in recent years so has the demand and complexity of the environment this means there is currently very little capacity to support new projects or Trust changes while also delivering day to day activity.

It is also worth considering the organizational culture that appears to struggle to adapt to new technology with take up of CareNotes not being as good as we had hoped.

In summary we have been and are continuing to put more cars (systems like CareNotes and services like TAP, FDAC etc...) on the road while failing to do more than repair the pot holes. The result is that the pot holes become larger and the impact of hitting one more damaging. We now need to rebuild the road with the appropriate capacity for the volume and type of traffic that will be using it.

## Summary of Strategy

We have developed 3 objectives to enable us to achieve our vision of delivering customer oriented usable IT and Informatics services that builds on reliable technology solutions and puts the need of the patient and clinician at the centre of all we do.

These objectives focus on building a platform from which we can innovate and deliver excellent services.

As noted in the previous section the Trust currently has some weaknesses in the underpinning infrastructure and services that are provided which need correcting if we are to provide reliable and safe IT. As a result the objectives that we have identified focus on building a platform from the ground up from which we can depend on.

However it is also understood that we cannot simply stop existing IT projects or slow down business growth therefore we must attempt to build a platform while continuing ongoing work this will be challenging to achieve with current resource and skills. We will therefore need to consider what can be achieved 'in house' and what we will either need to secure temporary resource for or outsource.

You will see in the timeline later in this document that much of the activity required to build the platform is within the first 12 months of the strategy period, this front loads the plan and the costs. However this is needed due to the urgent nature of much of the work. It is likely that other requirements/projects that we are currently unaware of will also emerge and have to be managed.

Throughout the implementation of this strategy we will bear in mind the Trust's plans to relocate in 3-4 years' time. This will impact on the level and type of investment in some of the infrastructure and will lead to an approach that is more cloud based than we have been

previously. This is an approach already being taken by other organisations and it will also make transition to the new building much more seamless.

To deliver this strategy over the next 2 years we will develop a clear IM&T Programme plan that will include both underpinning projects and initiatives that will deliver obvious benefits and changes for the way the Trust works.

To achieve this will require a step change in the way that IM&T works internally and the way the IM&T works with the rest of the Trust. We will need to implement new policies, processes and working styles to enable a collaborative delivery model that supports business as usual activity and the programme of change that we will be undertaking.

We, as an organization, will also need to consider how the culture can be changed to become more engaged with technology development. It is essential that the right support is given from the Board downwards if we are to make the most of the digital opportunities we are now presented with.

## Delivering the strategy

To support the delivery of the IM&T vision for the Trust we have identified 3 strategic objectives that will be delivered over the next 2 years, starting at the bottom and building up we will:

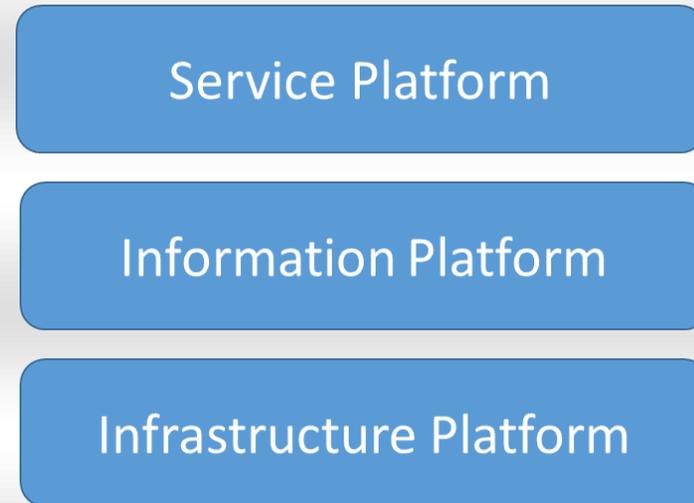
- **Build the Infrastructure Platform** that is usable, reliable and resilient
- **Build the Information Platform** that is simple, accurate and trusted
- **Build the Service Platform** that has the right approach and capabilities

These objectives are intended to build an environment and culture that is focused on meeting the needs of the Trust as a service rather than simply providing hardware and software.

Achieving these objectives is not simply something IM&T will do but rather it is a journey that IM&T will lead on; requiring the support of the wider organization to develop the right systems and services along with realizing the culture change we need to embed.

Once we have achieved these objectives we will be positioned to grow rapidly and respond better to change.

We will focus on the objectives from the ground up, in other words the most important thing for us to get right is the infrastructure that everything else sits on. Therefore this will be our main focus initially.

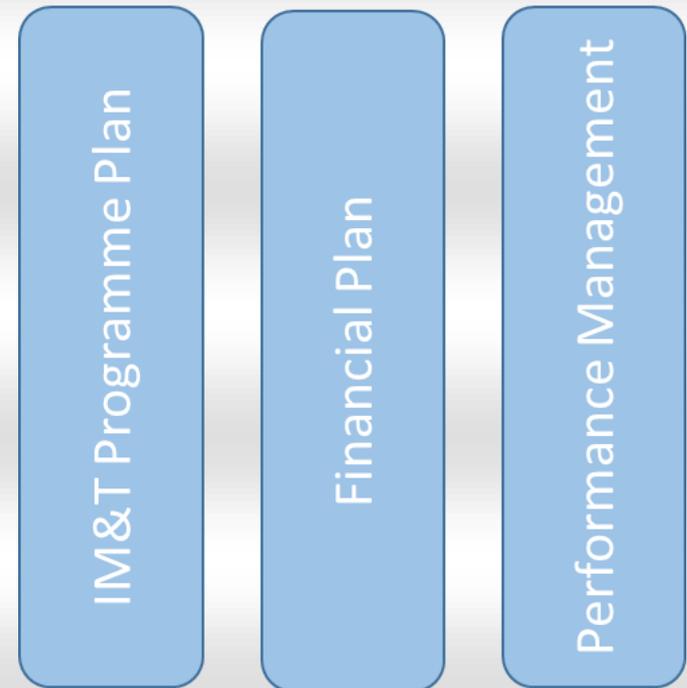


## Measuring/monitoring success

It is important that there are some yardsticks in place to measure our success in delivering this strategy. To that end we have identified the following monitoring mechanisms to support our objectives:

- An **IM&T Programme Plan** in place to manage activities and projects prioritised according to Trust goals
- A clear **Financial Plan** being in place and delivering to it
- **Performance Management** in place and monitored for both service provision and compliance activities

An IM&T Steering Committee (IM&T SC) will be established to monitor and manage delivery of these objectives. The IM&T SC will also review the strategy every 6 months to ensure it remains relevant and updated as required.



## Security and Information Governance

Security and Information Governance wrap around all IM&T practice whether this is the delivery of a new solution or day to day business these must be considered.

The threat of cyber-attack and the impact of data loss is growing. In 2015 the Trust has seen a growing volume of cyber-attacks and have had to implement further protective measures to safe guard our services.

As a result security will be at the heart of all we do going forward.

## Aligning IM&T to the Trust's priorities

A number of key drivers have been identified to support the Trust's 5 year ambitions we have linked our IM&T objectives to these drivers as shown on the table below.

The vision is to provide IM&T services that aligns with and supports the Trust's wider ambitions it is therefore critical that thinking is aligned and direction is clear.

Trust Priorities	IM&T Objectives			IM&T Success Measures		
	Build Infrastructure	Build Information	Build Service	Financial Plan	Prioritisation	Management
Efficiency gains	√	√	√	√	√	√
Transform Education	√	√	√		√	√
Reputation	√	√	√	√	√	√
Raise Profile			√			
Modernise Systems	√	√	√	√	√	√

# Strategic Context

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## The Trust

The Tavistock and Portman NHS Foundation Trust is a specialist mental health trust focused on psychological, social and developmental approaches to understanding and treating emotional disturbance and mental ill health, and to promoting mental health. It has a national and international reputation based on excellence in service delivery and clinical innovation, and high-quality clinical training and workforce development.

The Trust achieved authorisation as an NHS Foundation Trust in 2006. Prior to this it was the Tavistock and Portman NHS Trust, established in 1994, bringing together the Tavistock Clinic, founded in 1920, and the Portman Clinic, founded in 1933.

As an NHS Mental Health Trust we see ourselves as a public benefit organisation. Our vision is focused on the type of communities and society that we want to contribute to creating and to be a part of. We want to make a positive difference

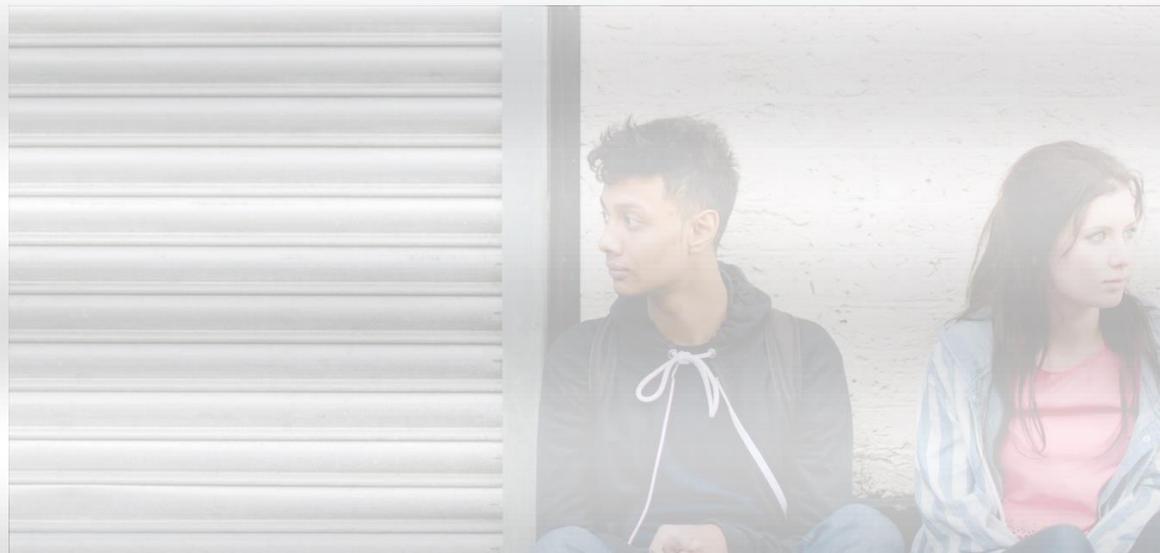
Beyond this, we are an organisation rooted in ideas and in their innovative translation into effective practice. We contribute to the pool of ideas through our own research and development, but are also committed to bringing together the best ideas of the time, old and new, from inside and out, together with the most

gifted and able professionals in our fields of endeavour. We aim to share our ideas and practice through as many routes as possible.

Working alongside others is a key component of our identity. We aim to work in the communities we serve, either as individuals or in teams, listening, learning, sharing, exchanging and working with others as partners.

As a Trust we aim constantly to be evolving in nature and form in relation to the environment in which we work, to ensure that our contribution remains relevant.

The Trust is unusual in the balance of its activities. All of these, however, are closely integrated and share the same underlying values and philosophy. At heart, the Trust is rooted in clinical practice with all activities deriving from the experience of working with patients. The Trust is proud of its history of innovation and excellence, and seeks to build on this in the future. The Trust's two largest areas of activity are patient services, and education and training services.



# The IM&T Strategy in detail

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This section outlines the 3 IM&T strategic objectives and success measures in a bit more detail to define what we need to deliver in the next 2 years.

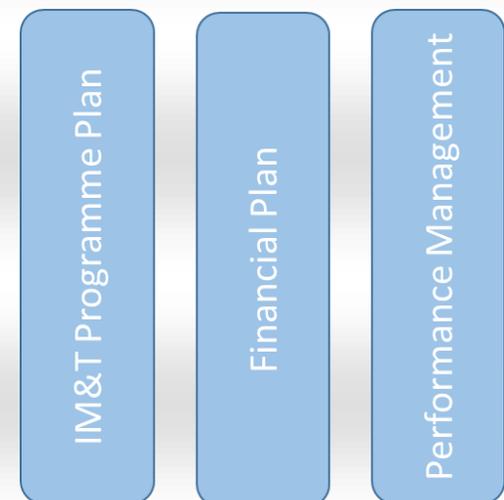
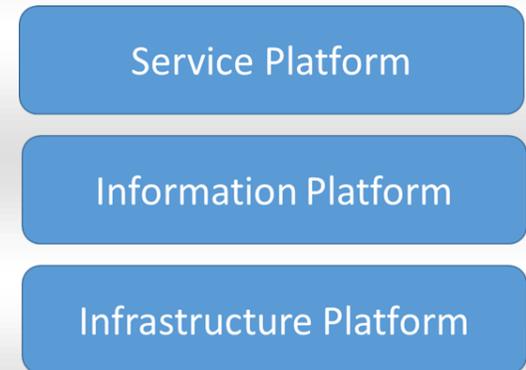
## Objectives

Starting at the bottom and building up we will:

- **Build the Infrastructure platform** that is usable, reliable and resilient
- **Build the Information platform** that is simple, integrated and accurate
- **Build the service platform** that has the right approach and knowledge

## Success Measures/Monitoring

- An **IM&T Programme Plan** in place to manage activities and projects prioritised according to Trust goals
- A clear **financial plan** being in place and delivering to it
- **Performance management** in place and monitored for both service provision and compliance activities



## Objectives

### Build the infrastructure Platform

*Build the Infrastructure platform that is usable, reliable and resilient*

IM&T will provide a more strategic joined up approach to investing in IT Infrastructure to ensure that the foundation is in place to support both business as usual activity and the Trust's ambitious growth targets.

#### Key priorities

- Build a safe, reliable and resilient infrastructure that supports all trust functions
- Secure systems and data using the latest technology and embedding good practice
- Make better use of contractual arrangements to protect systems and services
- Use the cloud wherever appropriate to increase resilience, deliver greater mobility, reduce the local footprint and prepare for the future
- Support Trust changes through a flexible approach to solutions and delivery

#### Key principles

- Take a cost effective approach to procurement
- "Milk" the assets wherever possible e.g. replace desktop PCs every 5 years rather than every 3 years
- Consider security implications always
- Make it usable, engage users wherever appropriate

Some of the specific projects that will be required to achieve this are listed below while a complete list can be seen in the IM&T Programme Plan.

- Refresh the Tavistock Centre Network
- Refresh the Tavistock Centre Firewalls
- Replace the Tavistock Centre Telecoms system
- Implement a robust support contract/contracts for network, security and telecoms
- Migrate to a new Email system that meets the DOH ISB1596 security standard
- Implement a future proof file storage solution to replace the aging 20<sup>th</sup> century solution currently in place
- "Make safe" the Tavistock Centre's infrastructure environments such as the Computer Rooms and Hub Rooms
- Support delivery of directorate projects such as
  - DET Student Information Management System
  - CYAF expansion
  - Estates changes such as GIDS new building in Leeds



## Build the Information Platform

*Build the Information platform that is simple, integrated and accurate*

IM&T will develop its Informatics service building upon the work already done to provide the information that Trust needs to meet statutory, contractual and operational requirements. This will be achieved through several key priorities over the next 2 years to work towards the government paper light targets:

- Optimise the use of CareNotes
  - Ensuring the system is capable of capturing data requirements
  - Improving data quality through education and training in collaboration with the Quality Team
  - Enable CareNotes Mobile functionality where appropriate
  - Work with teams to ensure they have the right devices, forms etc... available to enable the most efficient work practices
  - Ensure all clinical documentation is digital in line with national directives
- Build a simple self-service reporting platform that delivers reports to agreed specifications
- Build a Trust dashboard for monitoring reporting activity and performance
- Provide support to services to enable better performance management
- Preparation for integration of CareNotes with other systems including e-referrals in support of national directives such as the Personalised health and care 2020 framework

To achieve these targets we will need to work closely with the quality team, contracts team and service leads to ensure we are delivering the services required.

Recognising the Directorate of Education and Training (DET) has not had the same level of attention over recent years regarding its informatics function IM&T will work with DET to help develop their systems, services and structure to support the needs of the business going forward.

We will support for example:

- Developing the staffing and structure to provide support for DET systems
- “Shoring up” of existing DET systems
- Procurement and implementation of a new Student Information Management System
- Development of Trust website and Intranet



While our focus is often on the “front line” services we provide we mustn't forget about the central services that support the organization and our service users.

While Finance has a fairly stable outsourced system currently the payroll function will be changing supplier in 2016 and this may require new systems and ways of working. External drivers may also see the requirement for new solutions to support things like payment by results.

HR currently use the outsourced electronic staff record system; while this meets the need there is probably room for improvement and opportunity to expand the use of this system that may need to be investigated.

DET already provide online services through Moodle and other platforms for students but there is currently no equivalent for patients. The Secretary of State for Health stated in October 2015 that by 2018 all patients will be able to access and update their own health information. We need to understand what this means to us and how we should respond to it. There are many other opportunities arising for how we can better engage with our patients through technology and we need to decide our approach.

There are also likely to be other initiatives that need to be investigated and considered such as video conferencing, telemedicine and e-learning opportunities. These have the potential to change the way we provide services across the organization and create interesting new possibilities.

## Build the Service Platform

*Build the service platform that has the right approach and knowledge*

This objective is concerned with developing and delivering a mature and professional IM&T service with appropriate levels of best practice and customer service in place.

The IM&T Department has very little formal “best practice” in place at present and to deliver the first 2 objectives and maintain standards we will need to change the way we do things. This journey has begun already with the implementation of a dedicated Helpdesk function and associated processes but there is more to do if IM&T is to provide a truly customer centred service.

Building the service platform will require a change in thinking from both the IM&T team and the wider Trust. Demand on IM&T services is rising which means more efficient ways of operating need to be implemented as an instant response to complex issues is not always possible.

Implementing a best practice approach such as the IT Infrastructure Library (ITIL) approach to IT Service Management helps manage this tension. However it does require that customers recognise and adopt new ways of interfacing with IM&T, these cultural changes must have continuous board level support if they are to be embedded and deliver the benefits desired.

Key ITIL processes that need to be implemented over the next 2 years are:

- IT Incident management processes need to be embedded including new ways of accessing the Helpdesk such as self-service call logging

- Change management processes need to be implemented across all IT related changes to support a safe and controlled environment
- Configuration (asset) management will be implemented to support better control of the IT estate from both a support perspective and a financial asset management perspective
- Software Asset Management will be implemented to ensure legal compliance and financial efficiency with regards software licensing
- Service Level management will be implemented so that we can monitor performance of IM&T services against agreed targets

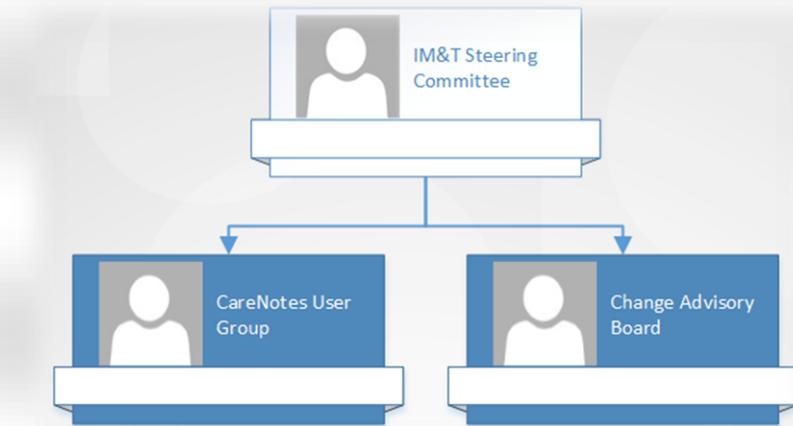
We must also ensure that staff are properly developed to deliver and support the increasingly complex systems we are required to use. Therefore we will aim to send staff on the appropriate technical and personal development courses to assist with service delivery.



## Measuring/Monitoring success

Now that IM&T is such an integral function it is important that the appropriate governance structure is in place to support the delivery of the strategy and monitor performance of the department.

To achieve this I am proposing a number of new groups led by the IM&T Steering Committee the structure is shown below.



The IM&T Steering Committee is envisioned to be a strategic group with high level representation from across the Trust that has the authority to make strategic decisions concerning the implementation of IM&T strategy and projects.

The IM&T SC will monitor performance against the IM&T Programme Plan and agreed IM&T service levels.

The group will also act as the IT Security Forum and provide oversight and guidance on security matters for the Trust.

While the terms of reference have not yet been agreed it is suggested that membership would include executive and non-executive directors and representation from all key Trust functions.

The Deputy Chief Executive has been proposed as the chairperson for this committee.

Two other groups will report into the IM&T SC these are:

1. The CareNotes User Group chaired by the Lead for the Development of Clinical Applications of IM&T (CCIO). This group will be monitoring uptake and improvement of CareNotes and associated systems and helping to ensure benefits are achieved.
2. The Change Advisory Board. This group will approve significant changes to the IM&T environment providing appropriate levels of control and safety. Examples may include new functionality being deployed in CareNotes or a server upgrade. Their job is not to decide whether the change is appropriate but rather whether all due consideration has been taken to ensure implementation is safe

IM&T will implement the following criteria from which we will measure/monitor success. Performance will be monitored by the IM&T SC on a bi-monthly basis.

## IM&T Programme Plan

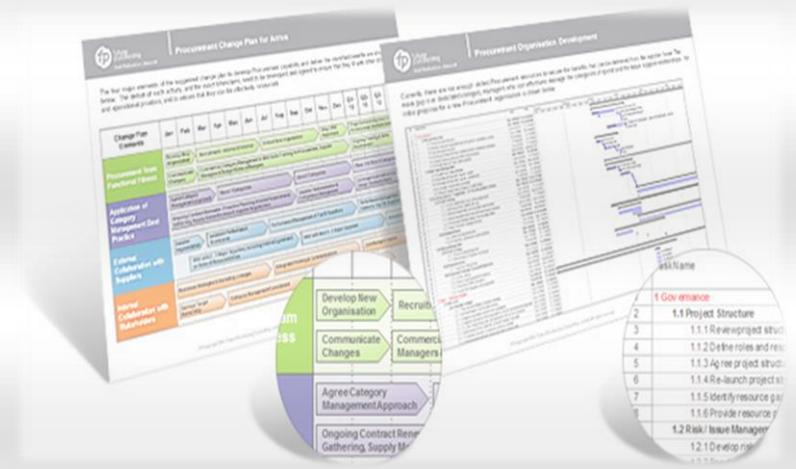
An IM&T Programme plan will be written and approved by the IM&T SC with activities and projects prioritised according to Trust goals. The IM&T SC will monitor the programme plan to track progress.

- A programme plan will be drafted to manage the IM&T projects
- All Trust IM&T projects **MUST** be included on the plan including ones being managed outside of IM&T
- A draft programme plan will be presented to the IM&T SC for approval and prioritisation
- The programme plan will be linked to the financial plan

## Financial Plan

A clear financial plan will be developed and approved by the IM&T SC for both revenue and capital IM&T spending.

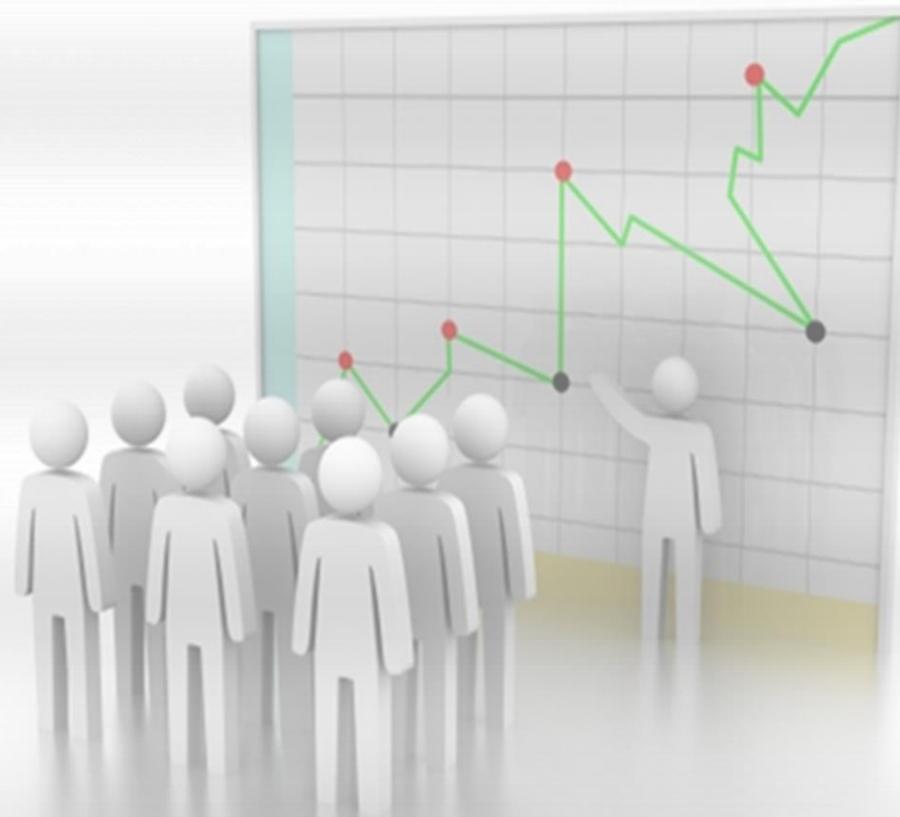
- To understand the level of investment required in IM&T to support the Trust requirements and priorities
- Improved management of financial assets will be put in place
- Improved management of contracts will be put in place
- Appropriate procurement routes will be utilised to ensure best value for money whilst ensuring a reliable service
- Improved monitoring and management of IM&T budgets will be put in place to ensure transparency of spend



## Performance Management

Business as usual performance management will be implemented in line with ITIL principles and monitored by the IM&T SC for both service provision and compliance activities.

- Service Levels will be proposed by IM&T and the Chief Clinical Information Officer and submitted to the IM&T SC for approval
- A customer satisfaction survey will be implemented
- Bi-monthly reports will be presented to the IM&T SC on performance against agreed targets
- Supplier Management will be implemented for agreed contracts



## Security

Although not a specific objective good IT security must be a practice embedded into all aspects of the IM&T Strategy and wrap around everything that we do.

The global risk of cyber-attack is growing on a daily basis with an estimated annual cost of £27 Billion in the UK alone. The NHS is not immune to these attacks with security experts indicating a patient record having a \$50 value on the "dark web".

The Trust has been subjected to a number of attacks in 2015 with the most significant resulting in the website being unavailable for several days. Current security systems are preventing around 100,000 pieces of SPAM and 4,000 viruses per month in the second half of 2015 however we know that a growing amount of SPAM and potentially viruses are getting through our first line of defense.



We therefore have to improve the technological solutions in place, provide better monitoring and ensure we have appropriate plans in place to respond to attack.

As well as the technological solutions it is essential that the human element is also addressed through greater awareness, training and best practice being implemented.

This added but essential requirement will increase the workload on an already ambitious plan and this will need to be monitored and responded to as appropriate.

Several actions have already been identified to improve our security stance:

- Upgrading existing security tools to ensure they are supported and as effective as possible.
- Add security responsibilities to all staff job descriptions.
- Implement regular awareness exercises.
- Implement best practice security principles for managing IT systems such as the principle of least privilege.
- Improved asset management.

Innovation and excellence has to be built on a platform that is robust, reliable and secure therefore it is essential for both the fulfillment of this strategy and the confidence of our patients that we invest appropriately in IT security.

## The End Result

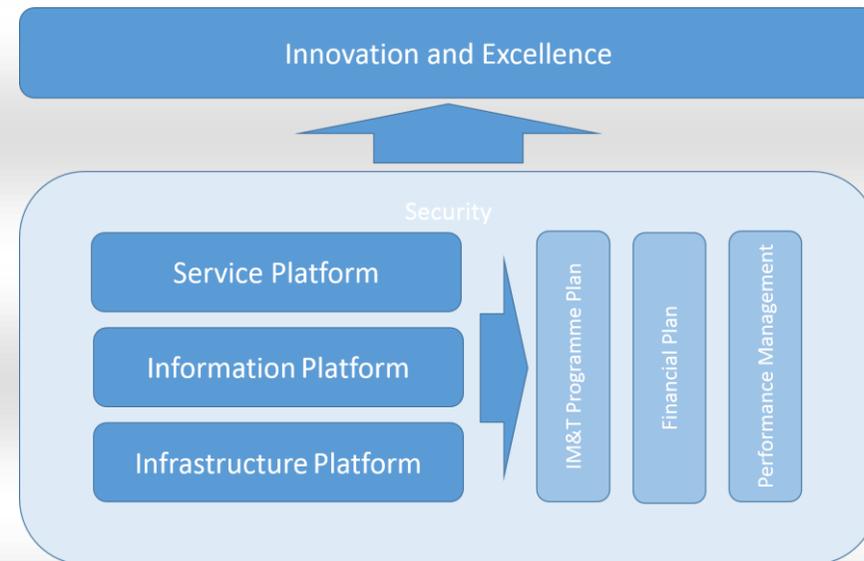
The idea of this strategy is to build a platform from which we can meet the needs of the Trust now and in the future. This requires getting all the right building blocks in place from a technical, procedural and people perspective.

There are a lot of things that we must do in order to provide a safe and reliable IT environment and there are other things we must do to meet the information needs of the Trust and national directives.

To achieve this goal is going to require significant commitment and investment over the next 2 years but by fulfilling this strategy we will have built the IM&T platform needed in the 21<sup>st</sup> Century.

Many of the changes will be invisible to staff as they are behind the scenes however they should result in the following benefits:

- Reduced downtime
- More reliable IT services
- Reduced risk
- More usable IT
- Improved customer service and expectation management
- Reporting that can be relied upon



## Implementation of the IM&T Strategy

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Implementing a strategy of this scale is not going to be straightforward and there are certain risks.

The support of the Trust Board is essential for success along with the recognition that we can't do it all at once.

We will need to use the Management Team and IM&T Steering Committee to help prioritise projects within the Programme Plan and agree funding.

Probably the biggest risk within the IM&T Department is limited capacity and expertise to deliver these projects as well as day to day activities. While it is possible to get agency staff in to deliver specific pieces of work this limits the in-house development of staff and their ability to support the system implemented. It is often not cost effective as 6 months at agency rates could easily cost more than 1 year of a permanent staff member.

Currently the IM&T Department is struggling to deliver on the existing workload and lacks senior technical expertise, project management expertise and change management capacity. Without addressing this it will be difficult to deliver this strategy.

To this end we will review the current IM&T structure against current and projected workload and recommend a pragmatic approach for ensuring the right capacity and expertise of staff.