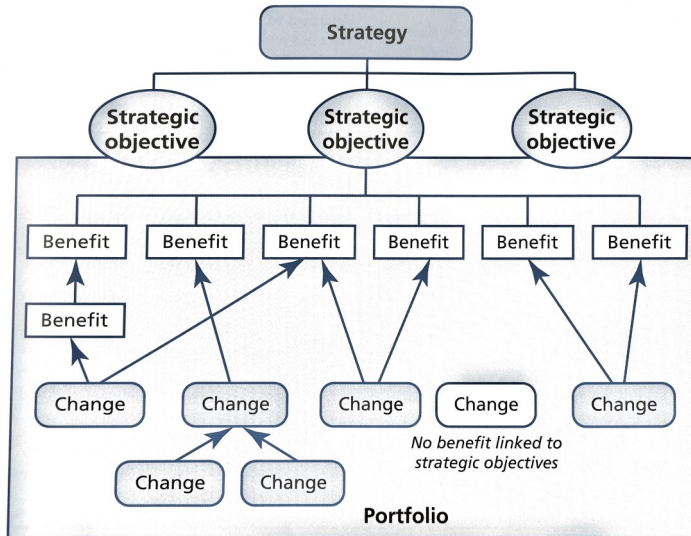


eHealth Portfolio Management is the selection, prioritisation and control of the eHealth projects and programmes in line with strategic objectives and capacity to deliver. The goal is to balance change initiatives and business-as-usual while optimising return on investment.

Example of alignment of change initiatives with strategic objectives



Provide a clear line of sight:

- What initiatives are included in the portfolio?
- Scheduling/timing of initiatives
- Resource and financial requirements
- Key Milestones
- Risks
- The benefits to be realised

Example Portfolio Dashboard

Portfolio indicators

Ⓡ ⇄	Benefits realization – 20/130 projects' benefits at risk (\$20m)	ⓐ ↑	Risk – 20/130 projects not managing risks effectively	ⓐ ↓	Time – 90/130 projects behind schedule
Ⓡ ↑	Budget – 20/130 projects over budget (\$10m at risk)	ⓐ ↓	Resource – 10/130 projects are short of critical resources	ⓐ ⇄	Embedding change – 30/130 projects are following the project mgmt standards

Project indicators

Consolidated and analysed

1 Management and control (i.e. how well the project is being managed, project health)

2 Actual performance/delivery (i.e. how well the project is delivering benefits)

Name	ID	Type	Priority	Project owner	Business unit owner	Stage gate	1 Management and control		2 Delivery		Notes	Finish date	R
							This mth	Last mth	This mth	Last mth			
Project 1	11	Efficiency	1	B Wilson	Div C	Deploy	Ⓡ ↓	ⓐ	ⓐ ↓	ⓐ	PM not allocated since last month's request	Feb-11	✓
Project 2	21	Compliance	3	F Petrou	Div B	PIR	ⓐ ↑	Ⓡ	ⓐ ↑	ⓐ	Critical systems issue addressed	Jun-09	✓
Project 3	35	Revenue	2	P Ternouth	Div A	Initiate	ⓐ ⇄	ⓐ	ⓐ ⇄	ⓐ	Reporting not improved since last month, review scheduled	Mar-10	✗

The project's alignment to agreed strategic drivers

Force ranking of project priority against strategic drivers, complexity (risk) and planned benefits

Key project ownership information

Summary of how well the project complies with embedded project management standards e.g. schedule, risk, quality etc.

Summary of the actual status of the project compared to its approved plans as at the reporting date.
For example:

- actual progress against planned schedule
- actual spend against planned budget (and use of contingency)
- benefits realization progress
- level of risk

Has reporting been submitted on time and to the required quality?

What initiatives should be included in the eHealth portfolio (e.g.....)?

- CHI Programme
- GP IT Re-provisioning
- Prisons GP IT
- HEPMA
- Patient Management Systems
- Collaboration and Productivity Services
- Community IT
- TEC
- Social Care

What would you like to see on the eHealth Portfolio Dashboard report?

- Aim of each initiative
- Key activity in previous period
- Key activities and milestones in next period
- Risks
- Issues
- Progress
- Budgets
- Benefits to be realised
- Timeline of all initiatives showing key milestones

/Primary Care Transformation Team / Primary Care Division / Directorate for
Population Health / Room 1R / St. Andrews House / Regent Road / Edinburgh / EH1 3DG /

AGENDA

PC LEADS MEETING

ROOMS 2 & 3, VICTORIA QUAY, EDINBURGH

WEDNESDAY 26 JULY 2017

13:30	Welcome and introductions/apologies [REDACTED]
13:35	Minutes and Action Points from previous meeting
13:40	Feedback from morning sessions (clinical/operational)
13:50	Scottish Government update paper/Leads Update Paper
14:00	Presentation: Community Eyecare Services Review Recommendations [REDACTED]
14:25	Presentation: HIS and Primary Care [REDACTED]
14:50	GP Recruitment and Retention Session [REDACTED]
15:50	AOB and Forward Look
16:00	Date of next meeting: Wednesday 27 September 2017, Atlantic Quay, Glasgow

From: [REDACTED]

Sent: 20 July 2017 11:46

To: [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

Cc: [REDACTED]
[REDACTED]

Subject: HCS NDP Questionnaire

Dear All

If you took the time to contribute to the HCS national questionnaire, many thanks. Please note attached the final analysis of responses received, our next national meeting will have an agenda item on the questionnaire to discuss any actions that we need to address.

Copy also available on the knowledge network.

Regards

[REDACTED]



2017 HCS NDP
Questionnaire R...

#hello my name is...

[REDACTED]

Chief Nursing Officer's Directorate | Scottish Government | 2 FR St Andrew's House |
Regent Road | Edinburgh | EH1 3DG [REDACTED]
[REDACTED]



From: [REDACTED]

Sent: 24 July 2017 15:38

To: [REDACTED]

Cc: [REDACTED]

Subject: RE: QFIT

Thanks [REDACTED]

This is very helpful

[REDACTED]

From: [REDACTED]

Sent: 24 July 2017 09:53

To: [REDACTED]

Cc: [REDACTED]

Subject: RE: QFIT

Hi [REDACTED]

We send our samples daily by post to Dundee.

Our MLAs organise the send away samples daily anyway and although this adds to our work we have added in the additional MLA time to our cost per test.

The issue of contaminated samples is ongoing and being monitored, I have discussed this with our staff and some contaminated samples have gone to Dundee but we have now decided that if the sample is contaminated it should be rejected by our lab and not sent to Dundee. This means that normally the GP will have this information within 24 hours and can ask the patient to repeat the test rather than waiting for Dundee to reject the sample which could delay this information getting back to the GP. It also gives us the ability to audit how many samples are contaminated and what sources they are coming from to try improve this in the future.

Hope this is helpful.

[REDACTED]

From: [REDACTED]

Sent: 20 July 2017 17:38

To: [REDACTED]

Subject: RE: QFIT

Thanks [REDACTED]

[REDACTED] had sent a really helpful response

Just wondered if you had any additional comments around the practicalities of sending these specimens on from borders lab
Do you have to send them up specially to tayside or do you already have a van going there /
Also how often do you send a batch / weekly / twice weekly / every day ?

As ever there is the vexed question of the contaminated samples . have there been some that you weren't able to send to tayside for that reason ? I know they don't process anything they have concerns around

Best wishes

From: [REDACTED]
Sent: 19 July 2017 22:30
To: [REDACTED]
Subject: RE: QFIT

Hi [REDACTED]

We are likely to be using the same analyser as Dundee, the MH-JACKarc.

From: [REDACTED]
Sent: 19 July 2017 09:42
To: [REDACTED]
Cc: [REDACTED]
Subject: RE: QFIT

Thanks for this detailed response jonathan

Just to complete picture what type of analyser is proposed for the borders ?

From: [REDACTED]
Sent: 18 July 2017 15:53
To: [REDACTED]
Cc: [REDACTED]
Subject: RE: QFIT

Didn't get the meeting dates

GPs have the kits in health centre and give them to the patient
The patient returns it to the health centre
Comes to BGH lab by routine courier
BGH lab send to Dundee (Debbie who is in charge of the BGH labs side of this can tell you more)
BGH lab get result and then send a paper result to GP

From sample handed in to GP to GP getting written result should be 7-10 days max
There were some teething problems but I think we are meeting that

There were some cases of contaminated containers getting discarded by Dundee without the referring GP being aware
We are looking into this (again [REDACTED] may know more)

We are trying to get SCI store access to find a way that the referring GP can view the Dundee lab result directly
Quicker and would allow them to check progress
Any suggestions about how this could be done welcome

I have personally been liaising with primary care
Email circulars, presentations, GP subcommittee meetings etc
Referencing Tayside data but using our own documentation
See attached
We haven't modified the collection instruction leaflet that comes with the kits

From: [REDACTED]
Sent: 18 July 2017 15:02
To: [REDACTED]
Cc: [REDACTED]
Subject: RE: QFIT

Thanks [REDACTED]
Will be great to have your input .
Did you receive the doodle poll from Nicola regarding possible august meeting dates
?

Certainly looks as if your GPs are getting used to using the test

Few queries pl –

Have there been any issues regarding the transportation etc
How do they get to the tayside lab ?

Also can the test be ordered / result read on borders electronic system ?? TRAK

Has it been yourself who has been liaising with GPs and have you used the tayside
documentation or developed your own /

Sorry about all the questions

Best wishes
[REDACTED]

From: [REDACTED]
Sent: 18 July 2017 14:37
To: [REDACTED]
Subject: RE: QFIT

Yes would be delighted to

Our GPs started using QFIT in January
Steady increase in uptake (see below)

Jan	Feb	Mar	Apr	May
-----	-----	-----	-----	-----

14

37

64

61

119

Lots of work explaining and reassuring GPs around the concept
I am already convinced of its value and expect us to see similar benefits to Tayside

Planning to audit the impact of QFIT for symptomatic patients towards the end of the year and will
be happy to share the results

[REDACTED]
[REDACTED]
[REDACTED]
Borders General Hospital
Melrose
TD6 9BS
[REDACTED]

From: [REDACTED]
Sent: 05 July 2017 16:21
To: [REDACTED]
Cc: [REDACTED]
Subject: RE: QFIT

Thanks [REDACTED]

[REDACTED] are you able to act as the link for the borders as regards potential national
qfit ?

If yes might you also be able to help provide some information on borders
experience with their pilot with tayside as mentioned in my initial email

Many thanks
[REDACTED]

From: [REDACTED]
Sent: 04 July 2017 16:37
To: [REDACTED]
Cc: [REDACTED]
Subject: RE: QFIT

Hi [REDACTED]
Hopefully this will help out communication.
John

From: [REDACTED]
Sent: 04 July 2017 15:28
To: [REDACTED]
Subject: QFIT

WARNING: This email originated from outside of NHS Borders. Do **NOT** click any links or open any attachments unless you are **COMPLETELY** sure they are safe. **Be aware that the sender's address could be forged.**

[REDACTED]

Following on from the qfit meeting in may you had indicated that you felt that [REDACTED] might be better placed to be the main link for borders .

Would you be able to let me have his correct email address as no response from the one I tried

Also would you have access to some details around the results of the boders qfit testing pilot that was mentioned . eg numbers of tests , no of positives , no of unable to be tested plus any comments on issues with the logistics of sending to Dundee please /

Thanks

[REDACTED]