

CYPMH and AAEDS transfer Critical Path

February 2026

Critical Path Headlines

- Focus is now on detailed operational planning
- A recent interdependency workshop between subgroups and with NELFT / KMMH representation maintained executive confidence in progress and the completion of a successful transfer
- Key elements including TUPE consultation, CQC documentation, digital system readiness, estates mapping, contracting activity, and onboarding processes—are all shown progress through the critical path
- Although activity has increased significantly over the past six weeks, the pre-transfer weeks and day 1–90 critical path highlights a substantial volume of operational activities and post–go-live stabilisation tasks that require continued focus
- The programme mobilisation plan and the associated subgroup action plans remain the primary places where the detailed activities are tracked and managed. These are reviewed at the Delivery Oversight Group and Steering Group

Date: 11/02/2026

Version:

V0.1

Updated by: CL/RH

PMO

	Sept	Oct	Nov	Dec	Jan	Feb	ICB Check point	Mar	ICB Check point
TRUST BOARDS	Due Diligence Received	● Self Cert progress	Good To Go Checkpoint ● Good to go readiness assessment ● Self Cert Board ● ICB Assurance Framework		Good To Go Checkpoint ● Board self certification ● Go live assurance	● Contracting and legal assurance ● Go live assurance	Key		Go-Live ● Go live assurance
ASSURANCE GROUP	● Critical path/risks/day one/readiness tracker		● Good to go readiness assessment		● Go live assurance ● Board self certification	● Contracting and legal assurance ● Go live assurance		● Go live assurance	
Comms & Engagement Vikki Buxton	● Comms & engagement plan agreed	● Regular staff engagement Commenced (webinar) ● FAQ document created		● Staff newsletter launched ● Partner engagement Plan agreed	● Lived experience engagement plan agreed ● Toolkit and Induction Materials developed	● Staffroom updated		● Go-Live communications ● Staff/Partner & LE Plans delivered	
Digital, Information Systems & BI Claire Hursell	● Discover report ● Digital deep dive complete	● Digital Roadmap	● Detailed plan ● Workstreams Established	● Detailed action plan ● Key operational data requirements agreed	● Testing access to Clinical systems/emails ● Pharmacy plan in place ● Data sharing agreement	● SLA Drafted ● Bi Reporting ● Define helpdesk procedures	● Access to Staffroom ● SLA signed -off ● Finalise BI rpt req	● HR systems Switch over ● Tele mes updated ● Access to clinical systems	
Finance, Contracting & Estates Nicola George	● Estates assets mapped ● Financial schedules reviewed	● Review support contracts ● ICB/PC contract reviewed		● Corporate post through vacancy control ● Finance report to Board ● Directorate budget agreed	● Site visits to confirm access and assets ● Contract negotiations finalised with suppliers	● Payroll structures built ● Legal DD report due ● Procurement plan		● Estates transferred ● ICB and provider collaborative contract signed	
HR People & Training Marne Cheesman	● Full staff establishment received ● Staff experience Scoping project		● Plan for staff vacancies ● Trust induction plan agreed		● Launch Staff TUPE consultation ● Medical Recruitment Commences ● Safeguarding interviews	● Pharmacy interviews complete ● NHSP system build complete	● ELI received ● Trust inductions	● Issue name badges ● Bank worker logins to NHSP sent	● ESR mass upload by IBM
Quality & Governance Julie Kirby	● CQC registration requirements and timelines understood	● Service models understood	● Reporting requirements known ● Statutory requirements incl. safeguarding understood		● CQC documentation sent	● Align governance ● Align PSIRF ● Align Complaints ● On-call alignment	● Policies aligned ● InPhase structure built ● Supervision reporting confirmed	● CQC Registration ● Risk register aligned	● Risks transferred

Initiation and Planning

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	Apr	May	Jun	Jul
<p>TRUST BOARDS</p> <p>Go-Live</p>	<ul style="list-style-type: none"> ● First 30 days review 	<ul style="list-style-type: none"> ● Service performance review, Inc. W/L 	<ul style="list-style-type: none"> ● First quarter review, Inc workforce retention ● Detailed plan for full Digital migration 	<div style="border: 1px solid black; padding: 5px;"> <p>Key</p> <ul style="list-style-type: none"> ● Milestone on target ● Milestone at risk ● Milestone late but in progress ● Milestone delayed ● Milestone complete </div>
<p>ASSURANCE GROUP</p>	<ul style="list-style-type: none"> ● First 30 days review 	<ul style="list-style-type: none"> ● Service performance review, Inc W/L 	<ul style="list-style-type: none"> ● First quarter review, Inc workforce retention ● Detailed plan for full Digital migration 	
<p>Comms & Engagement Vikki Buxton</p>	<ul style="list-style-type: none"> ● Residual service user comms updated ● Welcome comms to staff / service users ● Priority estates rebrand ● Identity training for staff ● Gather partner / service user feedback 	<ul style="list-style-type: none"> ● KMMH/NELFT websites refresh ● Comms material updated ● Service continuity update to SU and partners 	<ul style="list-style-type: none"> ● Listening exercise, staff, SU and partners ● Case studies showing success stories/improvements 	<ul style="list-style-type: none"> ● Progress update to partners ● Public facing narrative, benefits of transfer
<p>Digital, Information Systems & BI Claire Hursell</p>	<ul style="list-style-type: none"> ● IT incident management enabled ● BI reporting commenced ● Data migration validation ● Cyber security checks ● Planning for Phase 2 	<ul style="list-style-type: none"> ● SLA mobilisation review ● Review first thirty days issue log ● NELFT moving to central tenant ● Management of risk and dependencies log of full transfer 	<ul style="list-style-type: none"> ● System access and workflow review ● Readiness for full migration checkpoint ● Digital champions Review lessons learnt ● Detailed plan for full migration 	<ul style="list-style-type: none"> ● SLA monitoring ● Technical preparation for full migration
<p>Finance, Contracting & Estates Nicola George</p>	<ul style="list-style-type: none"> ● Add contract value to KMMH budgets ● Embed CYPMHS / AAEDS in KMMH reporting ● SBS/supplier payment system setup finalised ● Transfer medical asset records and update tags ● Payroll reconciliation ● Re-assess estates compliance & certification 	<ul style="list-style-type: none"> ● Develop plan to review interim procurement arrangements ● Plan for Paxton access moving to central KMMH network ● Plan for updating compliance information ● Security risk assessments complete ● Compliance testing surveys ● Plan to replace equipment >12 years 	<ul style="list-style-type: none"> ● Approve and implement procurement plan for services ● Investigate need for CIP initiatives ● Undertake compliance work as needed ● Review agency spend 	<ul style="list-style-type: none"> ● Financial forecast reviewed and validated ● Door systems moved to central KMMH network
<p>HR People & Training Marne Cheesman</p>	<ul style="list-style-type: none"> ● ESR transfer ● Employment contracts transferred ● eRosters set up for SPA, KMAH, Crisis, IHT ● Training records uploaded ● Gaps in training identified ● Core induction completed ● Remainder of eRosters finalised ● Plan for staff with ongoing HR/OH cases ● Review establishment vs. staff in post 	<ul style="list-style-type: none"> ● Staff added to KMMH L&D training sessions 	<ul style="list-style-type: none"> ● HR administration complete ● Appraisal processes fully integrated 	<ul style="list-style-type: none"> ● Directorate workforce strategy drafted ● Staff capacity review ● Non-core induction areas completed ● Deliver leadership development as needed for band 7 and above
<p>Quality & Governance Julie Kirby</p>	<ul style="list-style-type: none"> ● Plans confirmed to manage outstanding audits or statutory / regulatory (e.g. rapid reviews, CQC) issues ● Reporting / handover on projects ● Implement ND waiting list risk escalation ● CYP suicide prevention plan incorporated into adults 	<ul style="list-style-type: none"> ● Director on-call training ● Assurance and review of reporting to commissioners etc. 	<ul style="list-style-type: none"> ● Assurance that governance processes operating effectively ● Assurance that PSIRF processes operating effectively 	<ul style="list-style-type: none"> ● Identify shared learning opportunities between CYP and adults suicide prevention ● Review of performance against baseline ● Plan to align KMAH governance and reporting to KMMH Acute Directorate and identify opportunities for improvement