



PRINCE2™ CASE STUDY

The National Health Service



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1. Introduction

1.1 PRINCE2™

PRINCE2™ is a project management method. It is a structured approach which is designed to be tailored for use on any type of project. More information about the method can be found in Section 6.

1.2 Purpose of the Case Study

This Case Study has been written in response to requests for examples of PRINCE2™ implementation from organisations considering using the method.

1.3 Case Study Format

The Case Study covers the use of PRINCE2™ in different types of NHS organisation on a variety of NHS projects - service development, organisational change, clinical governance, PFI new build and IT. As such, although the projects are specific to the NHS, the messages about the application of PRINCE2™ are appropriate to any service organisation and the Case Study may therefore be of value beyond the NHS.

The Case Study is structured around a series of interviews with NHS staff from different types of NHS organisation covering the business case for PRINCE2™, projects using PRINCE2™, implementation issues, lessons learned and benefits gained.

There is a Foreword on the use of PRINCE2™ in the NHS as observed by the compiler of the Case Study.

Section 5 contains observations on the interviews by OGC (UK Office of Government Commerce) who own PRINCE2™.

Section 7 describes the role of APM Group Ltd who commissioned the Case Study.

1.4 Acknowledgements

Thanks are due to the following organisations and individual for their contributions to the Case Study:

South West Yorkshire Mental Health NHS Trust
Karen Holland, QED Manager
Mary Duggan, Strategic Planning Manager

North and East Yorkshire and Northern Lincolnshire Strategic Health Authority
Brian Quinn, Chief Information Officer

Prudhoe and Northgate NHS Trust
George Slater, Project Manager, Neuro-disability Services Centre project
Molly Worts, Project Administrator

2. South West Yorkshire Mental Health Trust

2.1 Karen Holland – Head of QED

2.1.1 Background

Karen Holland is Head of QED (Quality, Evaluation and Development) at South West Yorkshire Mental Health Trust. Prior to local reorganisation of NHS services in April 2002, the services of the Trust came under the remit of Wakefield and Pontefract Community NHS Trust. The QED Department was started there in 1995 in support of clinical audit and research. It grew to incorporate Clinical Governance (ensuring clinical practice is effective, efficient and evidence-based) and service evaluation because it was recognised that similar skills and personnel were required and there would be benefits from skill sharing.

2.1.2 Business Case and introduction of the method

The work of the department is project based. The Head of QED in 1995 had heard of PRINCE2™ because it was being used in the Information Services Department. There was no major evaluation of the method - *'it was floating around and sounded OK'*. Initial training was undertaken in the form of a two-day practical PRINCE2™ course. No-one has any PRINCE2™ qualifications. So far no-one has felt the need although this is changing as the method is becoming more recognised across the NHS and a PRINCE2™ qualification is increasingly being asked for in job advertisements. Those people on the initial training felt PRINCE2™ could be useful and fitted in with the local approach so they started using it. Helpfully, there was a lot of enthusiasm for a structured approach from the Chief Executive and Directors at the time and the method spread beyond QED.

2.1.3 Implementation of the method across the organisation

Implementation of PRINCE2™ across the organisation has been achieved through a combination of annual two-day training courses and on-project support from QED.

As more people were trained in PRINCE2™, the range of understanding/buy-in would vary but there is a common understanding of 'how we run projects here' which makes managing projects easier.

Originally, the Head of QED reported to two Directors on a job share who were committed to using PRINCE2™. In practice this meant that they expected and appreciated a formal structure, they took their Project Board responsibilities seriously and they identified resources to fill project roles. The Department was therefore able to work more effectively with PRINCE2™ because the Directors were doing so. There continues to be an understanding in the organisation generally of the importance of project management as a way to take things forward.

Karen observes that, with changes at Director level over time, now may be a good time to review the use of PRINCE2™ with the intention of restating commitment to the method.

2. South West Yorkshire Mental Health Trust (continued)

One cultural effect has been that, when the local reorganisation happened in April 2002, staff who joined other organisations took the method with them and as a result a common cross-organisation understanding of project management is building up.

2.1.4 Support for Project Managers

People new to the organisation have been introduced to PRINCE2™ at a half-day session as part of a Leadership Development Programme. As part of the Programme itself, individuals have to complete a live project for which they get one-to-one support from QED and have to report back formally to their manager on the outcome of the project. The new organisation is reviewing the Leadership Development Programme and it is not yet clear what emphasis project management will have.

QED run a project 'advice surgery' on any subject related to project management. This in turn helps frame local standards. The organisation talks in terms of projects and over time QED has become known as a source of support. When a project is starting up, QED will give the project manager an outline Project Initiation Document (PID) and walk through how to adapt it for the project in hand with emphasis on '*what works here*'.

As the method cascades, people adjust it and 'sell it differently' so- it could end up with fundamental differences. However this is not a major concern and no-one 'polices' the method. The view is that QED are consistent in their approach to PRINCE2™ and if it ultimately achieves it's aim of successful projects (which it does) then it does not matter if it is not done precisely as trained.

When introducing someone to PRINCE2™, Karen's approach is to help them to 'fall into it' by:

- Asking them to express their objectives – '*if there are 20, clarify them in 3 statements*'
- Encouraging them to think in terms of deliverables (which can be the hardest part)
- Making them think of benefits to patients. For example, on Clinical Audits projects, the audit itself will not give benefit - *it just puts you in the position to change clinical practice*. So Karen encourages Clinical Audit project managers to think beyond the audit and challenges the intention to actually change clinical practice as a result of the audit findings. If there is no serious intent to change practice the usefulness of the project is called into question. This represents a big leap in understanding of evaluation projects and gets people to think clearly. '*Otherwise there is a danger that auditors will rush round irritating people, write a report, tick a box but nothing changes and there are no benefits to patients*'
- Stressing that creativity and structure are not mutually exclusive
- Suggesting that, where research protocols are required to obtain funding for projects, PRINCE2™ principles are included even if the terminology is changed

2. South West Yorkshire Mental Health Trust (continued)

- Ensuring that the basics - objectives, deliverables and plan - closely followed by Risk Management, Reporting and Checkpointing are thoroughly understood.
- Pointing out the scalability of PRINCE2™

2.1.5 Projects

Most of the projects undertaken by QED are small and do not have full-time project managers e.g:

- Trust Staff Opinion Survey
- Patient Surveys
- Clinical Audits relating to family health issues
- Evaluation of Elderly Services

There is danger that the project managers become '*bogged down*' if they try to follow formal project management standards. Instead, Karen encourages them to '*consider what they need from PRINCE2™, what will work for them and to make it their own*'. Karen observes that '*you could spend a week debating the use of PRINCE2™ but - tools are tools*'.

Projects undertaken by the Strategic Planning Department, e.g. service reorganisation projects and new build/refurbishment projects are usually large, complex and involve significant resources. They require more formality. Karen sees the use of PRINCE2™ as '*horses for courses*'.

QED has a register of 546 projects that they have managed or supported since the mid-nineties. They always take a PRINCE2™ structured approach, even if the people they are working with (often from outside the organisation) are not familiar with the method. In this case they might not use PRINCE2™ terminology but '*act as if*' they are using PRINCE2™ and introduce people to the concepts, such as Project Board and Project Initiation Document, as they go along. Sometimes people don't even realise they have been using the method. Karen's point is that '*they are not trying to change the world*' – just run projects well.

2.1.6 Benefits

Karen perceives the benefits of PRINCE2™ to be:

- it provides a good framework of project management which can be explained and people can use
- consistent use and buy-in at all levels means that there is a cultural shift – people understand using projects as a way of bringing about change
- it gives structure to work that has to be done anyway – *we weren't waiting around to be shown the light – we were running projects before – now we are more structured*

2. South West Yorkshire Mental Health Trust (continued)

- the PRINCE2™ principles can be used to effect change to improve patient care in a clinical environment in front of the patient without introducing new terminology which sounds like a foreign language
- it enables ‘flagging up’ of issues and risks where previously they might have been lost
- the philosophy of a ‘controlled project close’ in PRINCE2™ marks the ‘*stopping point*’ and gives the project manager the opportunity to make it clear to all that the project has delivered and is finished.
- if PRINCE2™ is in use and signed up to by the organisation, people come to have an understanding of project roles and responsibilities which makes for more efficient working
- using the term ‘Project Board’ and the associated roles and responsibilities is much more effective than using the term ‘Steering Group’ which can be many different things and is not always clarified.

2.1.7 Lessons Learned

Reviewing her experience of implementing PRINCE2™ in an organisation, Karen says:

‘if you don’t review your use of the method over time and have a process to remind people about the method, especially at higher levels, it will stop being used as an organisational approach and the benefits will be lost

There is danger in ‘how it is sold’. Sometimes people become obsessed with the method, thinking they must do everything it says in the manual (missing the point about tailoring) then realising they haven’t actually done any work on the project itself. It’s good to know that the full extent of the of the method is available when appropriate and the manual is there to fall back on but without sound advice on tailoring it can become a nightmare when all I wanted to do is a small audit project.

2. South West Yorkshire Mental Health Trust (continued)

2.2 Mary Duggan, Strategic Planning Manager

2.2.1 Background

Mary Duggan is a Strategic Planning Manager at the Trust. Her first exposure to PRINCE2™ was via the Leadership Development Programme described above. At the time she was a Clinical Manager in Elderly Services. She liked the structure of PRINCE2™ and it appealed to her but she admits to being a bit confused at first until she had used it on a project. The project she used as part of her Leadership Development Programme concerned developing a more integrated service for elderly care. She says she did *'a baby PID and a baby Plan'* and, looking back she can see how she could have done it better.

2.2.2 Implementation

Later, when she was asked to do a more complex project to develop better *access* to services for older people, she used PRINCE2™ again. At that point she realised that, while she could set up a project well and produce an effective PID, she was not as familiar with the ongoing control aspects of PRINCE2™. For example *'I had got it into my head that the Project Board had to meet once a month, rather than at end stage when there were decisions to be made, and monthly meetings were not a good use of people's time'*.

When she became a Strategic Planning Manager the nature of her work changed. She now provides planning support to service development and organisational change projects across the Trust. Within the first month of the job she attended the two-day PRINCE2™ training course. With a fuller understanding of the method she started to use it more and more: *'Some pieces of work you can just knock off but if it needs some thought I prepare a PRINCE2™ Project Brief and go back to whoever has requested the work and ask them if this is what they want. It demonstrates progress, gives confidence and gets people signed up. This is particularly important because much of my work cuts across different agencies e.g ourselves, Social Services, Primary Care Trusts and volunteer organisations.'*

Mary finds the PRINCE2™ concept of deliverables (alternatively called products in PRINCE2™) really useful in her planning job in that it stops people being *'airy fairy'* about their requirements and helps pin down what they really want. With a clear list of deliverables you have *'something at the end to show people'*. The concept of product based planning means that it is more obvious what has to be produced because you start with the ultimate deliverable and work backwards. This helps ensure that nothing is missed and there is a comprehensive view at the beginning of the project of what has to be delivered. One current project involves significant spend on a new building and Mary feels that is she didn't have this approach *'it would keep me awake at nights'*.

This sentiment applies to PRINCE2™ in general. Mary believes that if you know you have a robust process, you don't have to do everything at once. The project manager does not need to get involved in every last detail. It is enough to know who is responsible for each deliverable and it is possible to involve a lot of people in a structured way so all the work does not fall to the project manager. On the subject of getting people to work according to PRINCE2™, Mary thinks its *'horses for courses'*. She has encountered no real objections. Some

2. South West Yorkshire mental Health Trust (continued)

people don't want such a structured approach at first but that is probably due to a lack of understanding. It takes her about 45 minutes to brief someone she is working with on the main points and benefits of using PRINCE2™. One of her main messages is that there is a ready-made approach to project management available '*so you don't have to make it up and you use what you need*'. Not everyone needs to know they are working according to PRINCE2™. Consistent with the PRINCE2™ philosophy, Mary just uses clear and simple wording to describe the process.

Mary finds the PRINCE2™ templates on the OGC website (see Section 6) very useful. In particular she uses the Project Brief, the Project Initiation Document, Risk Log and Highlight Report. She hadn't used the Issue Log yet but is about to. When required she finds the Exception Report '*very comfortable to use*'. For example, when a construction project hit a major snag it could have totally jeopardised the project and potentially exceeded budget beyond its 10% tolerance. Mary said that, before using PRINCE2™, this situation would have her '*quaking in my boots*'. However, since there was a recognised procedure for putting an Exception Report to the Project Board she was able sort out the situation with the help of the Project Board with no blame.

In fact Mary finds working with Project Boards a positive experience and looks forward to the meetings. She finds that the Project Board is good at picking up what she has missed and it is reassuring that they have the ultimate responsibility for a project. For example, she manages projects which include delivering new or refurbished buildings and has little technical knowledge about construction but there are people on the Project Board who do.

As a Project Manager using PRINCE2™, Mary feels she doesn't need to know everything but just know who does, make it clear what they are responsible for, link things together and keep up the momentum. This is particularly important because the Trust is a non-project based organisation doing significant projects and there are no full-time Project Managers. People manage projects alongside their operational and clinical work so a structured approach to organising workload is key.

2.2.3 Drawbacks

Mary doesn't perceive drawbacks to PRINCE2™ because it can be modified to suit local circumstances. It might even be a tool which is not relevant. There are some pieces of work, e.g producing a Strategy Document for a service which have a well established process. On the other hand it can be useful on apparently very nebulous pieces of work. For example, a Research Nurse was charged with a piece of work to map demand for a service with a view to capacity planning. It felt like an enormous piece of work and she didn't know where to start. Writing a Project Brief and PID helped her scope the project and realise she didn't have '*to do it all*'

2. South West Yorkshire mental Health Trust (continued)

2.2.4 Lessons learned

Mary feels that the key PRINCE2™ lessons she has learned are:

- how to use a Project Board properly
- how to think about the team – *'you don't just want people along for the ride or just because they think they may need to be involved'*
- the more often you use PRINCE2™ the easier it is to use
- the more you *'think deliverables'* the easier it is to imagine the project result
- it gives confidence in dealing with something in which you are not experienced
- it is easy in this Trust because the organisation is signed up to using the method.

It could be different if there were not senior level acceptance and support. A good example of this is the Clinical Governance agenda. Clinical Governance is about ensuring clinical practice is effective, efficient and evidence based. Mary says *'if we had not had senior level support through Project Boards we wouldn't have been able to change anything.'*

3. North and East Yorkshire and Northern Lincolnshire Strategic Health Authority

3.1 Background and business case for the method

Brian Quinn is the Chief Information Officer at North and East Yorkshire and Northern Lincolnshire Strategic Health Authority. His first exposure to original PRINCE was in 1992 when as Assistant Director of Information at Yorkshire Regional Health Authority, he was responsible for the development of a policy for the Authority to use PRINCE as a standard. A project was set up to implement the policy. Brian acted as chair of the Project Board and a Project Manager was appointed to develop expertise in the method, act as an advisor/trainer and support the roll-out of the method across the region.

The initial trigger for using the method had come from the national Information Management Group (IMG) who were promoting the method and making some funds available. Brian thought that it looked like a good idea and the business case for the implementation project was that:

- PRINCE was emerging as a national standard
- part of the role of a regional health authority was to promote good practice
- at the time there were some high profile problem projects in the NHS.

Brian subsequently went on to be a user representative on the Project Board of a national PRINCE Project run by the IMG to develop training and support material for use across the NHS which built on the material which had been developed in Yorkshire.

In 1993 Brian became Head of Information Services at North Yorkshire Health Authority (NYHA). Since then his experience of PRINCE has been as a manager in enabling organisations which promote good practice. When PRINCE2™ was introduced in 1996 he recognised that it was now promoting the flexibility and tailorability he had always applied to the method.

3.2 Implementing the method

Within enabling organisations, projects tend to be small but Brian's policy is to get all his staff trained in PRINCE2™ and encourage them to use it not only to manage projects better but also to enable a structured approach to their working life and help manage their workload, for example:

- whatever the task, it's helpful to look at it 'as a project' with a beginning/middle/end, objectives and deliverables
- time management and splitting work into 'do-able chunks'
- being clear on 'why am I getting involved in this work and what's my role?'
- document management – Brian observes that *'it's amazing, if you don't have good document management how many documents can go round an organisation without any identification of author, date written or version'*

3. North and East Yorkshire and Northern Lincolnshire Strategic Health Authority (continued)

3.3 Projects using PRINCE2™

During his time at NYHA projects in which Brian has been involved which have used PRINCE2™ to bring them to a successful conclusion, include:

- PROJECT CONNECT – a project to link 110 GP Practices to NHSNET
- A new building project to move NYHA HQ out of York city centre – the project came to a premature close because an NHS reorganisation dissolved NYHA. Using PRINCE2™ enabled a timely, positive decision to be made because the Chief Executive was the chair of the Project Board and the project had ‘the right to get to him’ and the project was closed in a controlled way.
- Procurement and implementation of management information systems.

In 2002 Brian became Chief Information Officer at North and East Yorkshire and Northern Lincolnshire Strategic Health Authority. This is a brand new organisation with responsibility for working in partnership with 17 NHS organisations on performance management. As his team develops and works with people across the organisations, Brian will continue to train people in PRINCE2™ and encourage them to use it as part of their normal working life. One challenge he does anticipate is forming manageably sized Project Boards for projects affecting so many organisations.

3.4 Benefits and Lessons Learned

From Brian’s experience, key points to bear in mind when implementing PRINCE include:

- Beware the term ‘Steering Group’. Traditionally, there is a tendency to say ‘who needs to be in’ and the result is a group which is too big with no-one taking responsibility. In PRINCE2™, the term Steering Group is not used. The Project Board is clearly a small decision making body. People can feel ‘put out’ if they are not included on the Project Board and it’s sometimes difficult but it’s got to be done. The need is to find other ways of involving people on the project.
- The way PRINCE2™ allocates distinct business, user and technical responsibilities to Project Board members is very helpful. Without this, getting a business representative in a decision making role can easily be overlooked. The justification for a project can not be ‘someone asked us to do it’. The business representative needs to make the business case for the project and be actively involved in both the project and the business because the business environment is likely to be changing rapidly.
- When assembling a Project Board it’s important to talk to them about the project objectives and explain why it’s important that they are involved. Their appointment should be confirmed by the organisation’s strategic group so their commitment is

3. North and East Yorkshire and Northern Lincolnshire Strategic Health Authority (continued)

acknowledged. Their role will be summarised in the Project Initiation Document but it helps to discuss it with them individually emphasising 'no substitutes' - it's their personal input which is required. Make it clear that meetings are kept to a minimum and only held when there are strategic project decisions to be taken. It can be helpful to point out that PRINCE2™ is the standard NHS project management methodology.

- The PRINCE2™ concept of being clear what your deliverables are means you know when you have finished a project.

3.5 Tailoring PRINCE2™

PRINCE2™ is designed to be tailored to fit local circumstances and the extent to which it is used is decided for each project. The aspects of PRINCE2™ which Brian has used most extensively are:

- The Project Management Team Structure
- The Project Brief
- The Project Initiation Document
- The Highlight Report (regular, brief status report from PM to Project Board)
- Staging of a project
- Risk Management
- Configuration Management (keeping track of what the project is producing)

3.6 Drawbacks

Brian doesn't consider there are any drawbacks to using PRINCE2™ because this is taken care of by tailoring. He considers it to be very flexible and the important thing is to *'do what you think is right. The more visible the project the more you would need to use the pure form of PRINCE2™ but people shouldn't be put off by the thickness of the manual and feel they have to implement it to the letter.'*

4. PFI Project – Prudhoe and Northgate NHS Trust

4.1 Background

Prudhoe and Northgate NHS Trust are undertaking a PFI project for the reprovision of three neurobisability services which includes a new build. The project is currently at preparation of OJEC advertisement stage. George Slater is the Project Manager. His is a psychiatric nurse by profession and has had a variety of service management roles in the NHS. Molly Worts is the Project Administrator, although the role is developing more into Assistant Project Manager. Unusually for this role, she is an architect.

4.2 The business case for using PRINCE2™

Originally, George had been aware of PRINCE2™ because someone had given him a PRINCE2™ Manual which had always *'floated round my desk'* and he understood the concepts. When he was appointed to the role of Project Manager for this project in October 2001, the Director of Finance who appointed him was very keen for the project to be managed according to a structured project management method, especially since it had been well publicised that many capital schemes in the NHS had gone awry because of poor project management. At the time PRINCE2™ was being spoken about widely in the NHS (though, George observes, little used) and the case for using it was clear. It is in the public domain and was developed in the public sector. It was well established, accredited and had a good reputation. George sees PRINCE2™ as *'what you would be doing anyway in your head'* PRINCE2™ just helps to structure and document it and enables you to keep to the targets set.

George makes the point that the phrase 'making a business case for PRINCE2™' could be misconstrued in the NHS because the term 'Business Case' in the NHS usually means a detailed document which contains a complex investment appraisal of a capital scheme. In fact producing a Business Case can be a project in itself. Making the business case for the use of PRINCE2™, as described above, is a much simpler justification.

4.3 Implementing PRINCE2™

To learn more about PRINCE2™, George gathered information and attended a roadshow run by a PRINCE2™ accredited supplier. He thought it was *'pretty obvious it was exactly what we needed'*. He prepared a report for the Trust's management team proposing to use PRINCE2™ and built the intention of using it into the project's Business Case which was approved. Then in March 2002 he attended and PRINCE2™ Foundation and Practitioner Course and gained his qualifications.

When he came back from the course he started creating project documentation in PRINCE2™ format and identified a Project Board. The main consideration at that point was that the project was already well underway and there was some element of creating documentation in retrospect, although it was still a valuable exercise.

4. PFI Project – Prudhoe and Northgate NHS Trust (continued)

It became clear very early that a project support resource was required to undertake project administration and Molly was appointed. They considered both Project Support and Foundation/Practitioner training for Molly and decided on the latter since her role was developing into that of an Assistant Project Manager. She gained her qualifications in September 2002.

George and Molly are therefore taking the lead in using PRINCE2™. Everyone on the team has attended a one-day overview course to understand the principles being used. However, sometimes people may not be aware that they are using PRINCE2™, just that they are being asked to do things in a certain way. Other times it is very obvious. For example, the Project Initiation Document (PID) and Risk Log are considered to be crucial documents and are clearly presented as such.

The project team includes external advisors e.g architects, engineers, lawyers, finance specialists. They all have some sort of internal system in place but have been happy to work according to PRINCE2™.

4.4 Tailoring PRINCE2™

The project uses PRINCE2™ to a significant degree. The following are used:

- Project Initiation Document
- Business Case
- Communications Plan
- Project Plan
- Stage Plans
- Risk Log
- End Stage Reports
- Product Descriptions (a clear definition of deliverables)
- Work Packages (a clear definition of work being allocated)

All documentation is strictly version controlled and clearly identified as relating to the Neuro Disability Services Centre Project, George and Molly are keen to 'demystify' PRINCE2™. Some PRINCE2™ terms which may be viewed as jargon have been replaced by terms which are more meaningful locally. However, there was a conscious decision to retain the term 'product' and promote its use to help people concentrate on what they are there to deliver.

Also, the PRINCE2™ concept of quality as 'products being fit for purpose' is emphasised

The Risk Log and Issue Log are currently combined because it's harder to see the difference at this stage in the project. Once contracts and specifications are produced and become

subject to Change Control they may be separated. (In PRINCE2™ the Issue Log is the way start point for Change Control).

4. PFI Project – Prudhoe and Northgate NHS Trust (continued)

One of the main problems confronting George is, understandably, getting busy people with other priorities to do work on the project. He has therefore introduced a control document which combines the PRINCE2™ Product Descriptions and Work Packages.

4.5 Lessons Learned

George perceives that managing a project is about managing risk and that the management of the project is mainly through the Risk Log and keeping the Project Board aware of the risks.

Traditionally in the NHS, as in other organisations, the decision makers might expect to get together on a monthly basis (say) for an update. The danger with this is that the result is ‘meetings for meeting sake’ without a clear focus. Also on this project, due to the number of vested interests, the Project Board is quite large so arranging meetings is quite difficult and time consuming. PRINCE2™ only requires the Project Board to get together when there is a strategic decision to be made, which means that the Project Board might not get together very often. While this is a very efficient way of working, people used to the reassurance of the routine meeting can feel out of touch with the project and perhaps anxious when they are ultimately responsible. The PRINCE2™ Highlight Report is designed to keep the Project Board up to date in a time efficient way but George has found that on a complex, high risk project face-to-face updates with Project Board members are very useful. PRINCE2™ endorses this approach though this is sometimes overlooked. The important point is, that while updates can be given to individuals and advice received, *decisions* need to be taken by the Project Board collectively. Geographically, George is not in a position to ‘bump into people in the corridor’ so he makes a point of seeking people out.

4.6 Drawbacks

Molly feels that the project administration takes a lot of time and feels repetitious. For example, a meeting which may just last an hour generates a lot of follow-on work in terms of typing/distributing the action list and producing the associated Product Descriptions. This is being reviewed with a view to streamlining the process.

It is also a challenge to balance the important but routine project administration work against dealing with urgent issues as they arise. Since Molly is operating more as an assistant Project Manager (not a PRINCE2™ term) consideration is being given to taking on more administrative support. The difficulty here is deciding what can be passed on and done without detailed knowledge of the project when it can feel *‘quicker to do it yourself’*.

4.7 Benefits

Molly believes that one of the main benefits of PRINCE2™ is the concept of ‘products’ rather than a general discussion plus action points. She believes it makes it clear what you are there to deliver and that no-one forgets.

George believes the key benefit arises from risk management. Risks, he says, are obstacles to delivery, icebergs which could sink the project. *‘Getting a handle on risks and keeping the Project Board aware is key’*

5. OGC Observations

This is an interesting case study touching on a large number of points concerning the embedding of PRINCE2™ into project management practices. The confident approach to tailoring the method comes through strongly and has obviously enabled the teams to apply PRINCE2™ on a variety of types and sizes of projects.

One aspect worth highlighting is about premature project closure – in the case study an example is given of the world around the project changing such that the project no longer had a rationale. In many organisations, premature closure is seen as project failure. Perhaps because of this view, there are often too many projects continuing without justification, but operating on the basis of “we’ve started, so we’ll finish”. Premature closure when projects no longer have a strategic fit should be seen as the application of good leadership, direction and management practices.

In large, dispersed organisations (such as the NHS), the need for regular reminders to people about departmental practices and re-enforcing the messages should not be underestimated. People move on, new people are brought in. It is easy for standards to get diluted and mis-used without an ongoing communication process.

This case study will be of interest to many organisations, with obvious relevance to public sector organisations and particularly to other NHS Trusts and Health Authorities.

6. About PRINCE2™



PRINCE2™ is a Project Management method covering the organisation and management of projects. It is designed to be tailored for use on any type of project.

Although PRINCE was originally developed for the needs of IT projects, the latest version, PRINCE2™ which was released in October 1996, is a generic, best practice approach to meet the needs of the whole organisation.

It is widely used in both the public and private sector and is the de-facto standard for Project Management in the UK. PRINCE2™ is increasingly being used in several countries outside the UK, including USA, Australia, New Zealand, The Netherlands, France, Italy, Hong Kong, South Africa, Croatia and Poland.

PRINCE2™ is in the only public domain method and therefore free to use. It is unique in being an off-the-shelf, practical method, which is well supported by development, and training resources.

PRINCE2™ was designed and developed by a group of Project Management specialists under contract to OGC (see below) and over 150 public and private sector organisations were involved in reviewing the quality of the method as it was produced.

PRINCE2™ stands for Projects in Controlled Environments i.e. it shows how to set up a controlled environment in which to run a project well.

The UK Office of Government Commerce (OGC) owns PRINCE2™. More information on PRINCE2™ can be obtained by calling the OGC Service Desk on 0845 0004999 or by visiting their web site at www.ogc.gov.uk/PRINCE2. PRINCE2™ is a registered trademark of OGC.

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7. About APMG



In partnership with OGC, The APM Group Limited (APMG) provides PRINCE2™ training Accreditation and an Examination scheme. They maintain a list of Accredited Training Organisations and Registered PRINCE2™ Consultants.

Richard Pharro, MD of APMG, comments on the Case Study:

Who said the NHS were bureaucratic? Probably the biggest contribution to our series of case studies made by this one is the consistent approach in tailoring PRINCE2™ to particular needs and ensuring that people only use what they need for the project. Slavish adherence to all aspects of the PRINCE2™ method has been rejected by everyone involved in the delivery of a wide variety of projects. If the attitude of people using PRINCE2™ throughout the NHS is similar to those cited in the case study, then clearly it could rapidly become the way "we do things here". Surely a clear demonstration of the flexible and tailorable nature of the method. Having said that, adopting local terms may in time lead to confusion as "outsiders" may not know what the terms refer to!

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