# PRELIMINARY FINDINGS FROM PROJECT HEALTH CHECK PROGRAM 2016

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# WHAT IS PROJECT HEALTH CHECK

An quick , simple independent check on the status of the project ( **focusing on the project team** ) at any time during implementation of a project

# Auditing ???   X

- **No NCR will be issued**

- **A process of continuos improvement, making things right and guiding towards project performance**

- **A proactive process to mitigate the risk of project failure**

- **A process of sharing good practices in project implementation**

- **It is also an opportunity to formally recognize good project managers**

# Project health check will help /guide you.......

- To prevent issues
- Resolve issues
- Improve performance
- Enchance Security
- Make your work and life easier

P   Plan
R   Raid
O   objectives
J   Justification
E   Executive
C   Control
T   Team
S   Scope

# HOW PHC IS DONE

- a comprehensive review to assist project team in conforming that their project is achieving what it is designed to do

- a short diagnose to establish project's status

- a short independent assessment of how well the project is performing in accordance to its objectives and standards

- identify the strength and weakness of the project through PHC questionnaires

Scope

Time

Quality

Cost

Resource

Risks

Procurement

Communication

**Health Check test
Your Project's vital signs**

Integration

Roles &
Responsibility

Training

Earth Management Plan

Safety &
Health

Handover

Documentation

6

# WHY PHC

- First step of intervention process

- Early warning detection and recovery actions

- To minimize the deviant of project from the course

- To do an assessment of project team's project control, monitoring and reporting

- Fault rectification

- Reducing risk of project failing

- Improve quality of project

# WHO DOES PHC

- An individual with strong competency in project management

- An individual who has gone through PHC Reviewer Module and have hands on experience

- Preferably Certified as a registered Project Manager or at least > Grade J48 **to lead** the PHC Team
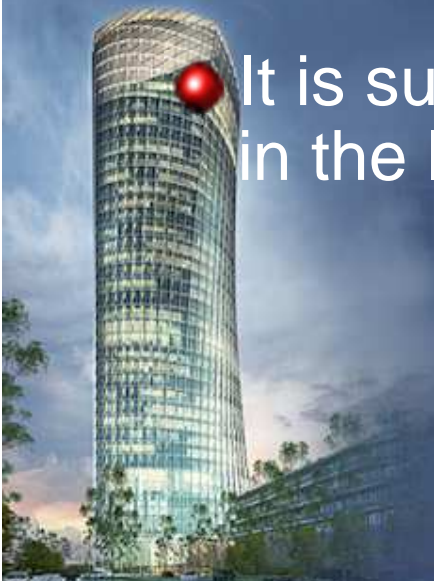
# WHEN TO DO PHC

- The process can be applied at any point in the project life cycle

- There would be advantages in undertaking a Health Check early in the life of a project

- It is suggested that a maximum of 4 Health Checks in the life a  2 -3 year project would be adequate

# PHC ACTIVITIES

- Identify project that needs PHC
- Arrange with SO or PD – date , time , place
- Arrange team of PHC Practitioners
- Prepare Agenda & logistic
- Invitation Letter/ Memo
- Use PHC Template (Latest Version_Jan 2016)
- Interview Session
- Produce Report
- Present to Project Team – strengths, areas needing improvement & actions to be taken
- Submit official report
- Follow up after 3 months by PO State

# OUTPUT OF PHC

## Diagnosis :

**HEALTHY**
- Project team has well developed processes and effective project management capabilities and resources in place

**OBSERVATION**
- Project team takes project management seriously but may need to review areas of weaknesses

**ILL**
- Project team are not applying well developed processes and effective project management capabilities & resources - immediate action to resuscitate (Green Team)

**CRITICAL**
- Serious deficiencies in application of project management best practices & project failure possible – Project team probably beyond recovery (Red Team comes into action)

# WHAT'S NEXT AFTER PHC

**Observation**

- Follow up after 3 months by State's PO
- Check areas needing improvement & action to be taken
- Ensure project team has taken necessary action
- Determine if the recommendations have brought improvement to project team's & project's performance as a whole
- Prepare report & circulate relevant parties
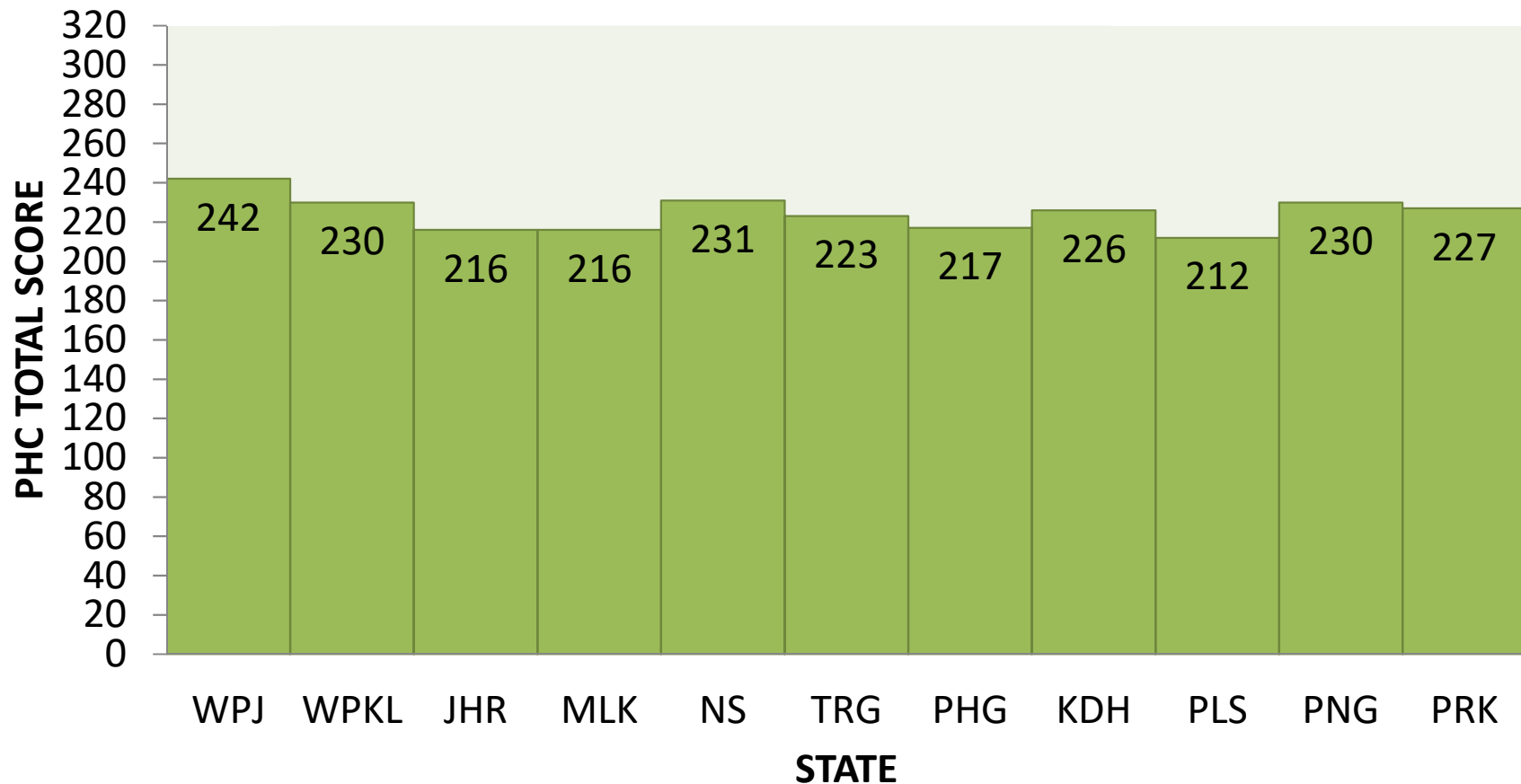- Follow up again (if needed)

# SUMMARY OF RESULTS

| Bil | Nama Projek | Daerah | Negeri | TOTAL SCORE | SKOP | MASA | KOS | KUALITI | SUMBER | KOMUNIKASI | RISIKO | PEROLEHAN | INTEGRASI | PELAN KESIHATAN DAN KESELAMATAN | PENGURUSAN ALAM SEKITAR | LATIHAN | DOKUMENTASI | R&R | H/OVER &COMMISIONING |
|-----|-------------|--------|--------|-------------|------|------|-----|---------|--------|------------|--------|-----------|-----------|--------------------------------|-------------------------|---------|-------------|-----|----------------------|
| 1 | KOLEJ KOMUNITI TASEK GELUGOR | | | 292 | 3.4 | 3.4 | 3.6 | 3.3 | 3.9 | 3.7 | 3.0 | 3.4 | 3.5 | 3.0 | 2.0 | 3.0 | 3.8 | 2.0 | 2.3 |
| 2 | Kuarters JKM Taiping | | | 276 | 3.7 | 3.4 | 3.1 | 3.0 | 3.8 | 2.9 | 3.3 | 3.0 | 3.3 | 3.0 | 3.0 | 2.4 | 2.3 | 2.0 | 3.0 |
| 3 | Kompleks Pekan Rabu, Kedah | | | 357 | 4.0 | 4.1 | 4.0 | 4.0 | 3.9 | 4.1 | 4.1 | 4.0 | 4.0 | 4.0 | 4.0 | 4.0 | 4.0 | 4.0 | 3.8 |
| 4 | Kompleks Balai Bomba Kangar | | | 278 | 4.0 | 2.8 | 3.1 | 3.7 | 3.6 | 2.7 | 3.0 | 2.2 | 3.8 | 3.0 | 3.0 | 3.0 | 4.0 | 3.0 | 1.0 |
| 5 | Jambatan Sediada Di FT005/197/00 Sg Sebatu Jasin | | | 267 | 4.0 | 2.2 | 3.0 | 3.1 | 3.3 | 3.1 | 2.0 | 2.8 | 3.5 | 3.0 | 3.0 | 2.8 | 4.0 | 4.0 | 2.3 |
| 6 | Universiti Malaysia Terengganu (UMT) | | | 298 | 3.4 | 3.2 | 3.4 | 3.7 | 3.9 | 2.9 | 2.3 | 3.0 | 4.3 | 3.0 | 3.0 | 3.8 | 4.8 | 3.0 | 2.5 |
| 7 | KK5 Sri Jaya Maran | | | 250 | 2.4 | 2.2 | 3.0 | 3.4 | 3.6 | 2.7 | 2.0 | 2.6 | 3.5 | 3.0 | 2.3 | 2.6 | 4.0 | 2.5 | 2.3 |
| 8 | Hospital Petrajaya Petrajaya, Kuching, Sarawak | | | 234 | 2.4 | 1.9 | 2.6 | 3.4 | 3.1 | 2.0 | 2.8 | 2.4 | 2.8 | 4.0 | 3.5 | 1.2 | 4.0 | 2.0 | 1.0 |
| 9 | (IPPA) Sungai Merab, Sepang | | | 295 | 2.6 | 2.4 | 3.3 | 2.9 | 3.9 | 3.6 | 4.0 | 3.8 | 4.0 | 4.0 | 3.8 | 2.2 | 3.8 | 3.5 | 2.8 |
| 10 | Menggantikan Jambatan Di Jalan Sega - Kuala Sawah (N100) Rantau, Daerah Seremban, Negeri Sembilan. | | | 247 | 3.4 | 2.7 | 2.4 | 2.1 | 2.9 | 3.1 | 3.0 | 3.0 | 2.3 | 2.6 | 2.0 | 2.0 | 3.8 | 3.5 | 2.5 |
| | | | | SKOR PURATA | 3.3 | 2.8 | 3.2 | 3.3 | 3.6 | 3.1 | 2.9 | 3.0 | 3.5 | 3.3 | 3.0 | 2.7 | 3.9 | 3.0 | 2.3 |

# TOTAL PHC SCORE (MAX = 445 MARKS)

Bar chart — PHC TOTAL SCORE by STATE:

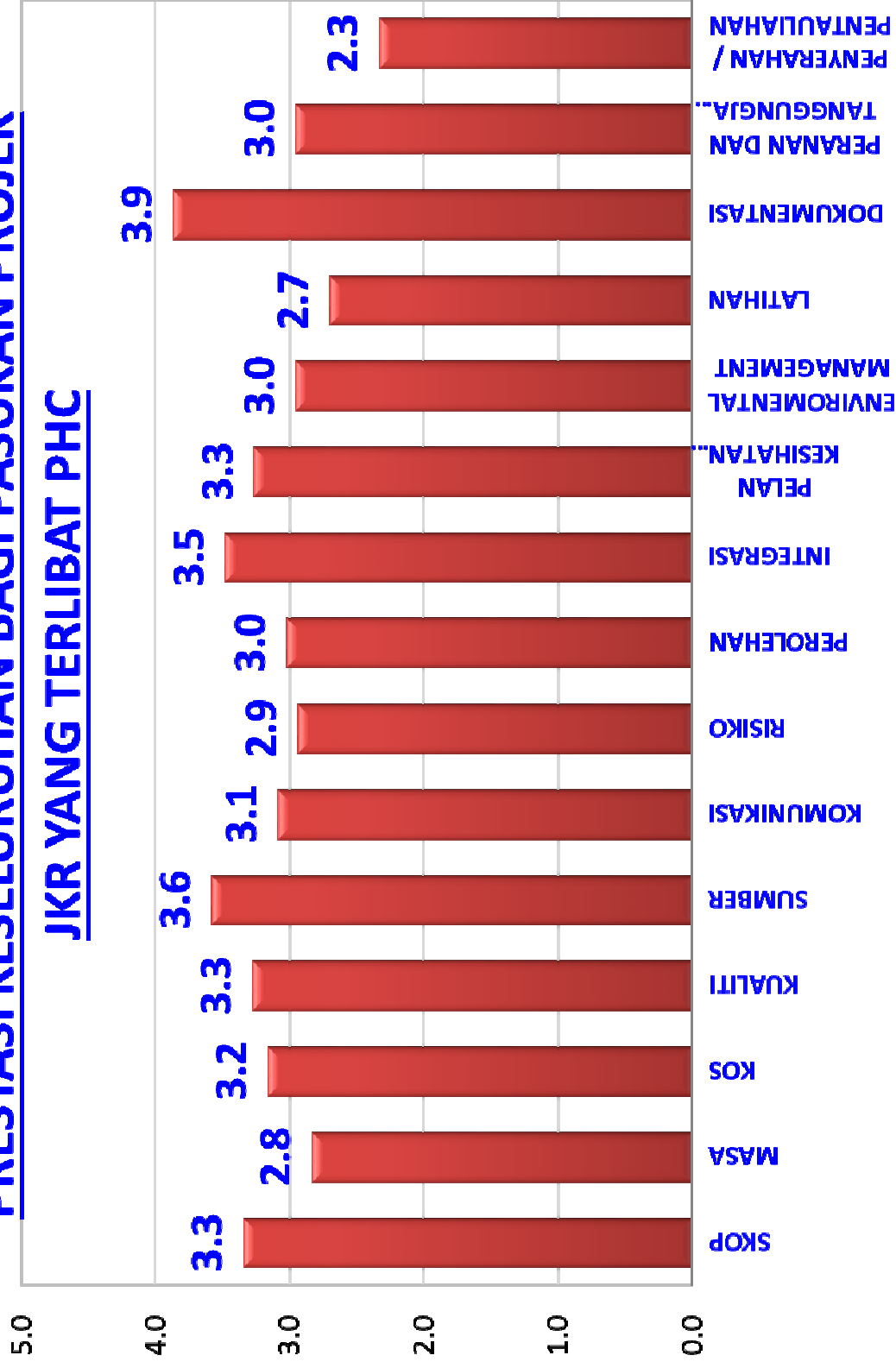| STATE | PHC TOTAL SCORE |
|-------|-----------------|
| WPJ | 242 |
| WPKL | 230 |
| JHR | 216 |
| MLK | 216 |
| NS | 231 |
| TRG | 223 |
| PHG | 217 |
| KDH | 226 |
| PLS | 212 |
| PNG | 230 |
| PRK | 227 |

ALL PROJECTS WHERE PHC WAS DONE FALL WITHIN THE **OBSERVATION CATEGORY** (SCORE 193 – 256)
-Suggests that JKR/the Project Team takes project management seriously but may need to review areas of weaknesses

# PRESTASI KESELURUHAN BAGI PASUKAN PROJEK JKR YANG TERLIBAT PHC

| Kategori | Nilai |
|---|---|
| SKOP | 3.3 |
| MASA | 2.8 |
| KOS | 3.2 |
| KUALITI | 3.3 |
| SUMBER | 3.6 |
| KOMUNIKASI | 3.1 |
| RISIKO | 2.9 |
| PEROLEHAN | 3.0 |
| INTEGRASI | 3.5 |
| PELAN KESIHATAN... | 3.3 |
| ENVIROMENTAL MANAGEMENT | 3.0 |
| LATIHAN | 2.7 |
| DOKUMENTASI | 3.9 |
| PERANAN DAN TANGGUNGJA... | 3.0 |
| PENYERAHAN / PENTAULIHAN | 2.3 |

# FINDINGS DURING PHC

## PHC Template

- Score obtained not representative of actual situation - additional information obtained through interview
- Difficulty in giving a score of "5" because it is to be done with innovation
- Difficulty in giving marks where there are two important criteria are lump into one question
- Display colour do not change automatically for the "poor" to "excellent" markings
- Range for classification of scores differ in the summary page & actual computations in the template (refer to diagram & table)
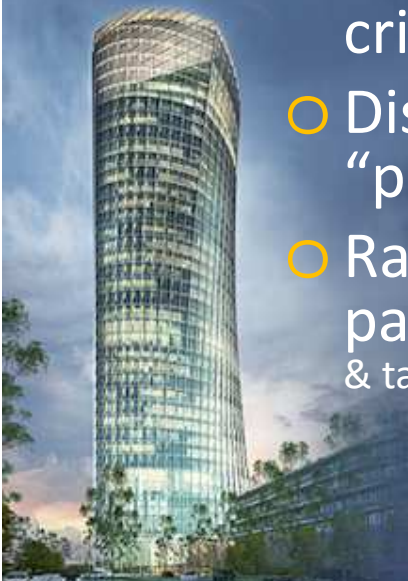
# FINDINGS DURING PHC

- Complete Project Team's attendance important

- Commitment from the Project Team

- Supportive response from State representatives on acceptance of changes towards improvement

- PHC Practitioners need to have hands-on experience

# CHALLENGES

**Selection of Project** > 10% Delay

- PHC is meant for any project regardless of its delayed status

- First Impression -  late -> problems & therefore protective

- Ways of overcoming  resistance
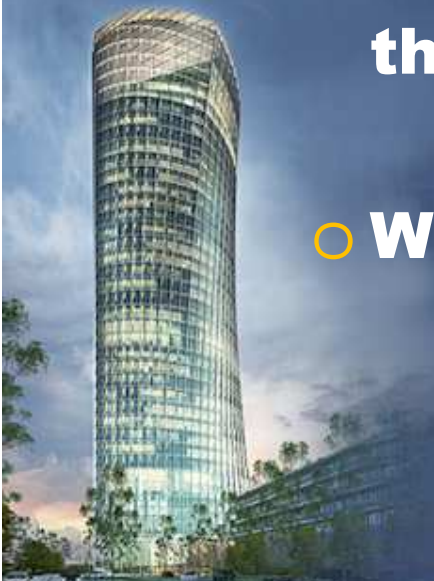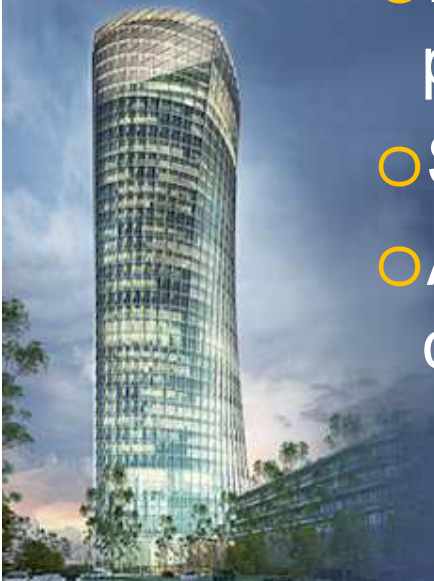
# CHALLENGES

**PHC Practitioners** (trained)

- o Not many trained personnel
- o Not willing to contribute
- o Too Busy
- o Not released by Head

# CHALLENGES

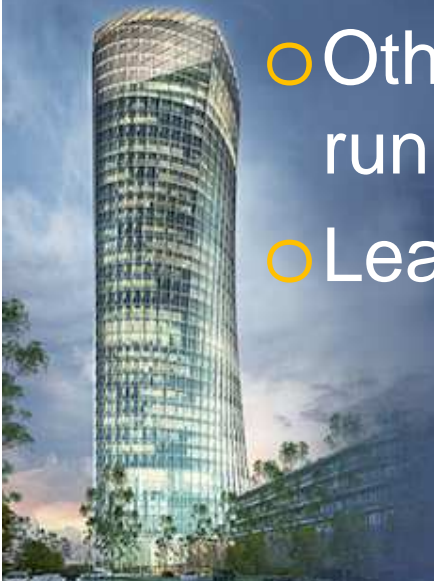**Low Understanding On Risk & Environment**

- The What & How Areas
  - Risk – for projects > RM50 million
  - Environmental management  - for critical projects
  - Safety & Health  - for projects > RM 20 million
  - Arahan KPKR 6/2015 – interpretation on convenience

# CHALLENGES

**Attitude & Commitment**

- Target group did not turn up
- Unwillingness to learn - prefer own ways
- Difficult to accept recommendation from younger generation or different discipline
- Other important workload or schedules that run concurrent to PHC
- Leaving the task to the support staffs

THANK YOU