

TRUST BOARD

Title:	Strategic Change Board (13 November 2017 – key messages)
Action:	FOR DISCUSSION and NOTING
Meeting:	10 January 2018

Purpose:

In line with the Trust's delegation framework this paper updates the Board on key messages from the Strategic Change Board and any points of escalation.

This paper relates specifically to the Strategic Change Board meeting held on 13 November 2017.

Recommendation:

The Board is asked to note the update from the Strategic Change Board and discuss any issues arising.

	Name	Title
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Executive sponsor:	Anita Pisani	Deputy Chief Executive

Trust Objectives

Objective	How the report supports achievement of the Trust objectives:
To be recognised as a provider of safe and effective services that people want to use	The Strategic Change Board (SCB) supports the Trust Board by monitoring and governing the delivery of the Trust's portfolio of strategic change and service redesign programmes. In addition, the SCB drives the strategic change programmes forward and provides oversight of the effectiveness of changes that are implemented to ensure that the outcomes and benefits of these are realised, sustained and embedded within the organisation.

Trust risk register

The Strategic Change Board considers a specific risk report at its meeting focused for risks scored at 12 and above.

Legal and Regulatory requirements:

This Committee operates in line with corporate governance best practice, referring to guidance documents such as the UK Corporate Governance Code

Equality and Diversity implications:

Objective	How the report supports achievement of objectives:							
Achieve an improvement in the percentage of service users who report that they are able to access the Trust services that they require	Service Redesign programmes take into account service user experience and access. A number of the programmes involve reviewing pathways of care and any proposed significant changes would be subject to an equality impact assessment.							
Enhance our approach to involving and capturing the experience of hard to reach / seldom heard / varied community groups	Service user engagement/involvement is an integral part of the service redesign programmes.							
Support staff to reduce the incidents of staff from minority groups experiencing abuse / aggression violence or discrimination from service users, carers, colleagues or managers.	N/A							
Ensure that the Race Equality Standard is embedded and undertake proactive work around any areas of under-representation identified	N/A							
Are any of the following protected characteristics impacted by items covered in the paper: Not specifically								
Age <input type="checkbox"/>	Disability <input type="checkbox"/>	Gender Reassignment <input type="checkbox"/>	Marriage and Civil Partnership <input type="checkbox"/>	Pregnancy and Maternity <input type="checkbox"/>	Race <input type="checkbox"/>	Religion and Belief <input type="checkbox"/>	Sex <input type="checkbox"/>	Sexual Orientation <input type="checkbox"/>

Key Messages for the Board:

- The Board received an update on the **Business Development and Transition Programme**. Detailed discussions took place on all active bidding and transition activities. The Board was updated on the Trust's successful bid with East London Foundation NHS Trust for the future provision of Bedfordshire Community Health Services from April 2018.
- An update on the **Ambulatory Care Programme** was provided. This includes the iCaSH and MSK programmes of work. Katie Neate Service Redesign Lead and Mike Passfield Head of iCaSH services presented the iCaSH service model.
- An update was provided on all three **Children's and Young People's Programmes and project areas – Norfolk; Cambridgeshire and Luton**.
- An update on the **Luton Adults Programme** was received. The At Home First programme has now become business as usual and has formally closed as a service redesign programme. Lessons learned will be presented at a future Committee meeting.
- The Board received an overview of Our Improvement Way which is going to be used to embed a culture of continuous improvement across our services and a consistent methodology for service improvement.

There were no risks identified above 12 and no areas identified for formal escalation.