

## TRUST BOARD

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Title:	<b>STRATEGY IMPLEMENTATION PROGRESS REPORT</b>
Action:	<b>FOR NOTING</b>
Meeting:	<b>March 2018</b>

### **Purpose:**

This paper provides the Board with an update on implementation of the Trust's 5 year strategy in the form of progress with objectives and year two implementation of core supporting strategies.

### **Recommendation:**

The Board is invited to note and discuss the contents of this paper.

	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:
Provide outstanding care	The report provides a status report on implementation of the Trust's objectives
Collaborate with other organisations	
Be an excellent employer	
Be a sustainable organisation	

### Trust risk register

All risks on the Trust-wide risk register have a potential to impact the delivery of the Integrated Business Plan.

### Legal and Regulatory requirements:

Not relevant to this paper.

### 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	This paper relates to the delivery against the Trust's 5 year business plan including how the Trust is performing against its Equality and Diversity objectives.							
Enhance our approach to involving and capturing the experience of hard to reach / seldom heard / varied community groups								
Using the national 'A Call to Action on Bullying and Aggression', internally take action to promote our Zero tolerance policy and address bullying and aggression when it occurs.								
Ensure that the Workforce Race Equality Standard is embedded and undertake proactive work around any areas of under-representation identified. In particular, we will seek innovative methods to have co-opted representation on the Trust Board from more diverse backgrounds.								
Are any of the following protected characteristics impacted by items covered in the paper								
Age	Disability	Gender Reassignment	Marriage and Civil Partnership	Pregnancy and Maternity	Race	Religion and Belief	Sex	Sexual Orientation
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

## 1. Introduction

1.1 In March 2016 the Trust Board approved an Integrated Business Plan 2016-21 and core supporting strategies:

- Quality and Clinical 2016-21.
- Workforce Organisational Development and Service Redesign 2016-21.
- Information Management and Technology 2016-21.
- Estates 2016-21.
- Communications 2016-21.

1.2 Implementation Plans for each strategy covering 2017/19 were appended to the Trust's Operational Plan 2017/19 which the Board approved in December 2016. This Paper provides the Board with an update on implementation.

## 2. Key points

2.1 Trust Objectives. The Integrated Business Plan 2016-21 sets out the Trust's objectives and measures; a progress snapshot is set out at Annex A.

2.2 Supporting Strategy Implementation.

2.2.1 Quality and Clinical Strategy 2016-21. A full update was received by the Quality Improvement and Safety Committee on 27 Feb 18. There were no areas of escalation. Key highlights are:

- Many actions delivered through transformation projects i.e. iCaSH, MSK, 0-19 services integration and use of technology.
- Workforce objectives delivered through Workforce and Organisational Development strategy i.e. Cultural Ambassadors, dual training roles.
- Implementation of Our Quality Way, improvements to complaints responses.
- A more focused piece of work relating to developing patient outcome measures for all services has been mapped to priority 2 in the revised strategy described below.
- The revised Quality and Clinical Strategy 2018 – 21 has identified 4 priority focus areas as agreed by the Board in Jan 18.

### Safety

- Undertaking an appropriate safety culture audit across our services and identifying relevant improvement actions.
- Developing a patient safety based escalation programme.
- Continue roll out of Human Factors training and support implementation.
- Safeguarding Improvement project.
- Further develop Leadership for Safety capacity.

### Evidence based and innovative practice

- Reduce unwarranted variation by standardising practice where appropriate.
- Measuring Effectiveness.
- Further develop our leadership network.
- Build on our strong research base by collaborating with research networks and others.

### People Participation

- People involvement.

- Community engagement
- Improvements to practice evidenced by feedback

### **Learning and Continuous Improvement**

- Using data for improvement.
- Learning from when things go well and not so well.
- External focus for learning.
- Embed Our Improvement Way methodology.

#### 2.2.2 **Workforce Organisational Development and Service Redesign Strategy 2016-21.**

All workforce objectives are on track for the remainder of the year and there are no escalation issues for Board attention. Specific updates for the Board are:

#### **Programme 1 A Highly engaged Workforce**

We have created and supported a culture whereby staff feel they belong to one organisation with a cohesive vision, whilst at the same time recognising the importance and identity of them being part of their particular services by

- Undertaking a listening in action programme across all services during 2015/16 leading to local and trust wide action plans. Actions from these have included, bespoke development for teams , celebrating success and valuing staff events such as Love Your Admin Week in September 2017
- Introduced the annual personal objective setting process in March 2016
- Undertaking annual staff survey in, 2016 2016 and 2017 and qtr. staff friends and family test surveys in those years, and taking action to address issues raised
- Held celebrating success activities throughout the year including shine the light awards and annual celebration events
- Maintained a positive and productive relationship [with trade union colleagues and representatives even during periods of change.
- Agreed a trust wide leadership plan during 2016, refined on 2017 and supported by a programme of both experiential and traditional development opportunities.
- Run successful and valued back to the floor visits across all services, leading to actions taken to address issues raised as well as an opportunity for senior leaders and corporate staff to gain a greater understanding of the work in service delivery.
- Invited staff to feedback on their experiences as an employee of the trust at regular staff stories at Trust Board meetings
- Acting on staff feedback from Induction regarding their recruitment experience leading to the introduction of central recruitment administration support [from October 2017] to match that already offered to Luton services.

#### **Programme 2: An appropriately trained workforce**

##### Workforce Supply

- We have successfully implemented a grow your own programme leading to the use of the new Apprenticeship Levy [from April 2017] for staff to access apprenticeships in both clinical and other subjects.
- Provided excellent student placements for a range of students
- Applied Recruitment and Retention premia where it was identified as addressing recruitment shortages, as well as wider usages of existing benefits to attract staff, such as relocation, flexible working, training and education opportunities.
- Working with other trusts in SPTs to collectively ensure we attract and retain staff in to local NHS system , including joint working on marketing vacancies
- Success in Luton at marketing Luton as a place to work jointly with other providers and Local authority [ place based recruitment ]

## Current Workforce

- All services having an annual service plan from 2016 onwards which includes plan on how to address workforce hot spots.
- Reductions in the use of agency workers, attracting agency workers onto substantive contracts and greater use of bank workers or fixed term contracts.
- Reducing the amounts of central decision making, for example in recruitment sign off
- Greater use of e learning leading to increased accessibility and higher rates of staff training, greater use of internal training expertise and restructuring in the training function to bring in clinical expertise in professional education leadership and more capacity to support leadership development requirements to support service redesign programmes.
- Review of the Trust leadership behaviours and the wider use of these and the trust values in values based recruitment.
- Review of the induction programme, wider use of venues across the trust and changes to the programme content based on staff feedback
- Wide ranging staff health and wellbeing support including regular newsletters, intranet page, communications articles , training in personal resilience, mental wellbeing awareness raising and awareness weeks .
- Meeting all identified CPD needs via a TNA and agreed budget, and study leave processes.

## Leadership and Service improvement

- An agreed leadership plan in place supported by training and development opportunities and access to Leadership Academy development opportunities
- Trust engagement at senior level in STP workforce work streams including system leadership development
- A CCS improvement way development programme to upskill front line and service managers to lead on service redesign and improvement programmes.
- A revised appraisals, career development and personal development planning conversation to uniform service level development and succession plans from September 2017, including a talent mapping discussion.
- Bi annual workforce review in all services , supporting service leads to recognise any workforce challenges to service delivery and agreed actions to address these either locally or with corporate support[ local and or trust wide]

## **Programme 3: A health and well workforce**

### Keeping people well

- Introduced a conversation on health and wellbeing in to 1;1 and appraisal conversations
- Improved the health and wellbeing advice for staff and the information available on the internet and access to national NHS wellbeing programmes
- Joint working with in house clinical psychologist on out mental wellbeing and resilience programme starting in October 2017
- Training of a small cohort of mental health first aiders to act as champions in the trust.
- Newsletter, frequency of which was increased due to the amount of information to include and the positive feedback from staff
- Improved healthy food offer on Trust sites
- Actions to address bullying and harassment including revised policy and staff leaflet, separate policy in handling aggression from the public, zero tolerance posters, availability of the staff side chair as a confidential advocate for staff who don't wish to raise via a formal process and bullying concern.

- Revised policy to give managers the information needed to support their staff if they have witnessed or been involved in an upsetting incident at work or are required to take part in a formal external [police or court] process for a work related reason.
- Wider use of family friendly working and other practices to ensure staff can take the time required to take care of non-work emergencies or responsibilities in supported environment.

#### Performance Management

- Training for new and established managers in how to manage difficult situation, conflict and under performance in a non-confrontational way, including coaching from the HR team.
- Improvements to the appraisal process to focus on quality and honest conversation which support staff to achieve their best, and to support those who are currently underperforming to reach their potential.

#### **Programme 4 Diversity and Inclusion for All staff**

- A Workforce Diversity and Inclusion sub group in place to support this agenda
- Introduction of a cultural ambassador programme to support the Trust's actions to address the issues raised in the 2015, 2016 and 2017 Workforce RACE Equality Standard.
- Face to face E and D training to all new staff at induction
- Introduction of unconscious bias training in 2016 at induction, in recruitment training and in in house leadership programmes as well as awareness rising at the board and leadership forum. E learning package written and will become a mandatory part of E and D training when accessible.
- Workforce Diversity and inclusion strategy in place to support the delivery of this programme

#### **Programme 5: An organisation culture of continuous improvement**

- Service Redesign Team have supported the delivery of the Trust's service developments and strategic redesign programmes in the following services:
  - Norfolk Children and Young People
  - Cambridgeshire Children and Young People
  - Luton Children and Young People
  - Luton Adults (At Home First)
  - Musco-skeletal (MSK)
  - iCaSH
  - Improving Organisational Capability
- Each clinical unit, as part of their annual plan, have agreed change and service improvement projects identified and appropriately resourced.
- Improvement approach "Our Improvement Way" has been developed which includes approach, tools and resources to support the development of improvement skills and capability within the Trust
- Our Improvement Way launched on the staff intranet as part of the Knowledge and Research Hub
- Enable staff to recognise, support and engage in the process of service improvement.
- Bespoke leadership and team development programmes designed and delivered to enable teams and leaders to effectively lead teams through change and service redesign programmes

2.2.3 Information Management and Technology Strategy 2016-21. Implementation plans remain on track with good progress summarised below. There are no escalations for the Board. A key focus for ICT Provision continues to be around Business Continuity assurance and

ensuring the workforce are 'cyber aware' following the Cyber-attack on the NHS last year. Good compliance for mandatory ICT security training continues. Highlights are:

- Early planning is underway to start to rationalise under-pinning contracts with suppliers ahead of the strategic re-procurement of ICT provision. The Trust continues to develop methods to improve supplier management with operational dialogue and more formal service review meetings.
  - The specification for the re-procurement is currently being developed to support the procurement process.
- The efficiencies gained from revising telephony tariffs and removing redundant activity from contracts supports the 2018/19 CIP scheme. Additional resource has been brought in to support this redesign work.
- Activity continues to support staff with utilising technology with a revised model based on the previously successful laptop clinic approach. New technology clinics are being scheduled to support staff not just with laptops but smartphones as well.
- Opportunities exist around collaboration to support the re-procurement of HSCN and engagement in local technology initiatives around Digital Delivery Groups.
- New infrastructure configuration continues to support the Informatics team to improve reporting capability with current database and application technologies.
- The strategic alignment of the clinical system architecture with SystmOne has been completed, and the clinical systems team now continue to work with services to support template standardisation and improved functionality.

2.2.4 Estates Strategy 2016-21. Progress with implementation of year 2 of the 2016/19 estates strategy up to Q3 2017/18 is given below.

#### **Programme 1 - Freehold retention (Cambs)**

- We will continue to work with the Department of Health & NHSI to formally secure long term freehold title where in the Trusts' and local health system's interests for us to do so.
  - Further information has been provided to DH 3/18.
- Development of Outline Business Case for the redevelopment of Princess of Wales Hospital, Ely; North Cambs Hospital, Wisbech
  - PoW: NHSI/PAU approved SOC in principle,
  - NCH: programme defined for development of SOC

#### **Programme 2 - Compliance / reporting**

- We will ensure that all areas of the estate meet required NHS Estate code standards of compliance
  - Robust compliance management in place
- We will ensure all estates supplier reporting (in support of the above) is comprehensive and timely
  - Progressing but not yet complete
- We will commission an independent audit of all processes to identify areas for improvement
  - PAM tool adopted

- Linkages with IPACs (Infection Prevention & Control) team to be leveraged to maximise value of supplier process improvements
  - Complete

### **Programme 3 - Fire**

- Central oversight of all Fire Risk Assessments (FRA) and associated actions in process of being formalised to provide greater assurance
  - Complete
- Estate ownership will be localised
  - FRAs available locally for Serco managed sites in Cambridgeshire. Similar approach being rolled out more generally by April 2018.

### **Programme 4 – Collaboration**

- We will further develop relations with partner trusts and other public sector bodies to identify collaborative solutions to property management and estate rationalisation. Key aims are maximisation of receipts from disposal, flexible use of space by mobile workers, improved space utilisation. We will take a proactive role within STP estates and OPE initiatives across all relevant geographies in order to identify and exploit opportunities to collaborate.
  - This work is on-going

### **Programme 5 - Luton**

- Adult admin services to be consolidated into a single building (The Poynt) with clinical services from Luton Treatment Centre
  - Complete
- Children's services (admin & clinical) to be consolidated, ideally into Redgrave Gardens Children's Centre with space utilisation optimised
  - Will consolidate in Redgrave Gardens and The Poynt by end April 2018
- All other Luton estate on a disposal programme
  - Futures House to be vacated by April 2018, others under review

### **Programme 6 – Norfolk**

- The programme in Norfolk has been completed other than modest improvements to the space at Lawson Road

### **Programme 7 - Peterborough**

- Rationalisation of our core Peterborough estate down to three properties (Rivergate, Midgate and Kings Chambers) now being progressed with Rivergate project now in train
  - Rivergate Ph 2 refurbishment due for completion May 2018
  - New requirement for MSK SPA will prevent consolidation so space will continue to be required in City Health Clinic

### **Programme 8 - Cambridgeshire**

- A condition assessment / appropriateness of estate will be undertaken to help inform strategic decisions regarding future estates provision
  - Informal assessment completed
  - 6 facet survey of freehold assets being procured



- Cambridge City & South children's services (admin & clinical) to be consolidated into Arthur Rank House with space utilisation optimised
  - March 2018 (delayed by car park planning process)
- Brookfields site transport statement and travel plans to be delivered in partnership with Greater Cambridge City deal team and Travel for Cambridge in support of planning application to underpin additional Brookfields parking
  - Due for completion December 2017 – aligned with planning consent

### **Programme 9 - Suffolk**

- Long term solution for School Immunisation team to be addressed.
  - Premises identified. Lease negotiations progressing; anticipated relocation Q2 2018/19

### **Programme 10 Resourcing**

- Rationalisation of 3<sup>rd</sup> party providers and improvement to the service the Trust receives
  - Luton and Beds FM delivery to be consolidated from July 2018
- Initial planning work for future estate support beyond the existing Serco contract
  - Commenced June 2017, on target

### **Programme 11 Sustainability**

- Sustainability Management Group to become BAU and Sustainability Action Plan delivered.
  - Sustainable Development Assessment Tool adopted.
  - Existing data being mapped across into new tool
  - Process for gathering remaining data under development.
  - Oversight to be provided by the Wider Executive ( as Sustainable Development Management Group)
- Trust Transport Strategy fully developed and used to inform decision-making
  - Scheduled for future committee discussion
- Up to date six facet surveys to be considered for all freehold sites.
  - Currently in procurement for delivery in 2018/19

### **Programme 12 Estates Management**

- We will create a central repository of all property information and their associated costs and use this data to inform decision making
  - Substantial data gathered.
  - New database being reviewed prior to commitment
- We will complete work to formalise and standardise how we charge for space used by external organisations.
  - In place for new agreements.
  - Seeking to retrofit to existing arrangements.
- We will embed local responsibility and leadership/accountability for estate matters across the geographies.
  - Work in progress for completion Mar 18.
- We will capture and learn from feedback from patients and staff
  - Process developed, on going

2.2.5 Communications Strategy 2016-21. Implementation of our Communication Strategy and 2 year Work Programme are on track for delivery and there are no escalation issues for Board attention. Specific updates for the Board are:

#### **Corporate Objective 1: Provide outstanding care**

- Our Quality Way and Improvement Way: a staff Guide including preparing for inspections was designed and disseminated to all staff, together with a range of screen savers and weekly cascade messages to promote understanding and engagement. Initial promotional material supported the successful launch of Our Quality Way.
- Service Redesign: communication plans and campaigns to support redesign programmes through multiple channels have been implemented including social and digital media, animations, infographics, newsletters, promotional materials in each service division.

#### **Luton and Bedfordshire**

- Production has begun to create 20 videos in five different languages to promote the Luton children's epilepsy service
- A robust communications and engagement plan is underway to ensure the smooth transfer of staff from Bedfordshire children's services in to the Trust
- Promotional collateral for the Luton Think Pink At Home First initiative has been created
- Promotional material has been produced for the Luton Stop the Pressure campaign to reduce the prevalence of pressure ulcers
- Screen savers for use within primary care to promote the availability of diabetic patient education programmes have been created for both professional and patient audiences
- We have participated in a film produced by Bedfordshire and Luton CCGs to promote children and adult rapid response services and their contribution to managing winter pressures
- We continue to engage in communication programmes for the Bedfordshire, Luton and Milton Keynes STP

#### **Norfolk and Cambridgeshire Children & Young People's Services**

- A suite of promotional materials was produced and disseminated to launch Norfolk Just One Number and plans are underway to celebrate its first anniversary
- Quarterly stakeholder infographics have been produced and disseminated to Norfolk partners
- Promotional materials have been developed to support the Norfolk 5-19 redesigned pathways, Norfolk ChatHealth, and the Teenage Parents Programme
- Internal and external communications have been developed and disseminated to support the phased move of Cambridgeshire services to the newly refurbished Peacock Centre on the Brookfields campus

- Animations to promote the Cambridgeshire 0-19 Healthy Child Programme, Cambridgeshire ChatHealth, School Nursing duty desk and health visiting duty desks have been produced and disseminated |
- Essential Guides to Breastfeeding have been finalised and printed for sharing with all new parents across Cambridgeshire, Norfolk and Luton (one document with local arrangements for each locality)

### **Ambulatory services**

- Design, development and launch of collateral to support the successful launch of iCaSH express testing
- A range of formal opening/anniversary ceremonies were organised for refurbished iCaSH hubs and DynamicHealth refurbished hubs
- Design, development and launch of a new DynamicHealth website has taken place
- Over 60 videos are currently being edited and voice overs created for DynamicHealth to support the service's redesign programme, along with a review of the wide range of service leaflets
- Discussions have commenced to create a new website for the Dental Healthcare service

### **Corporate Objective 2: Collaborate with other organisations**

- Full engagement with the Cambridgeshire & Peterborough and Luton STP communications networks, and leadership of communications for the Cambridgeshire & Peterborough Local Workforce Advisory Board (LWAB)
- A proactive stakeholder engagement programme and assigned account leads for prioritised stakeholders with monitoring via quarterly Wider Executive Team review process and twice yearly Board updates
- Communications collateral has been developed to support: the launch of the CCS/CPFT Emotional Health and Wellbeing Practitioners Team; and the launch of the joint CCS/CPFT speech and language therapy services; as well as staff updates relating to the CCS/CPFT joint venture
- Supporting a range of regional and national social media campaigns; both health specific and those led by partners such as police campaigns to reinforce safeguarding/domestic violence/drug use etc.

### **Corporate Objective 3: Be an excellent employer**

- An infographic promoting the Trust's vision, values, objectives and behaviours has been disseminated via cascade, the intranet, screen saver and posters
- A summary of the Trust's Operational Plan 2018/19 was created and disseminated to staff to support the development of service plans and team/individual objectives across the Trust

- Plans for the NHS 70<sup>th</sup> anniversary are underway, including aligning our annual staff excellence awards with the anniversary birthday on 5 July and submission of nominations to the NHS 70<sup>th</sup> Parliamentary Awards
- Promotion of the national staff survey and the annual flu vaccination campaign took place leading to increases in uptake in both initiatives
- Design, development and launch of a new staff intranet incorporating a knowledge and research hub which has received positive feedback
- Design, development and launch of Let's Collaborate; an online collaboration tool
- Successful staff excellence awards event, monthly shine a light awards, and support for national award submissions e.g. films/banners for PENNA awards
- Co-ordination and design of Live Life Well newsletters/promotions
- Promotion via social media of: various service initiatives/achievements, recruitment opportunities, Shine a Light award winners, national and local campaigns including Time to Change, Stay Well this Winter,
- Internal communications have been supported through weekly communication cascades, structured back to the floor visits, promotion of annual and local staff surveys and subsequent action plans.
- Screen savers have been produced to support the Trust's zero tolerance approach to bullying and harassment, our Quality Boards to support our commitment to openness and transparency and NHS 70<sup>th</sup> anniversary celebrations
- A high quality annual report was disseminated widely electronically, both internally and externally, alongside a shorter summary of annual achievements
- An external newsletter promoting achievements across the Trust was disseminated twice during 2017/18.

#### **Corporate Objective 4: Be a sustainable organisation**

- Successful communication plans for staff transferring in to the Trust as a result of procurement exercises e.g. Bedfordshire iCaSH, Bedfordshire adults and children's services
- Successful communication plans to support staff transferring out of the Trust as a result of strategic decisions taken by the Trust e.g. Cambridgeshire outpatient services and acute children's services on the Hinchingsbrooke site
- Pink reviews of bid content undertaken for all procurement bids submitted by the Trust

### **3. Conclusion**

- 3.1 Year one implementation of our core strategies is on track and no Board intervention is required.

### **4. Recommendation**

- 4.1 It is recommended that the Board notes and discusses the content of this Paper.

## **5. IMPACT ASSESSMENT**

5.1 None.

Annex:

A. Objectives and Measures 2017/18.