

PUBLIC BOARD MEETING 26 SEPTEMBER 2018

Details of the Paper

Title	Thames Valley Cancer Alliance (TVCA) Memorandum of Understanding Agreement for Cancer Transformation Programme Delivery – Pathways Improvement
Responsible Director	Natalie Fox, Chief Operating Officer
Purpose of the paper	To outline funding that has been allocated to the Trust by TVCA for us to employ a band 8a Cancer Improvement Manager
Action / decision required (e.g., approve, support, endorse)	Approval and signature of the document

IMPLICATIONS AND ISSUES TO WHICH THE PAPER RELATES (PLEASE MARK IN BOLD)

<i>Patient Quality</i>	<i>Financial Performance</i>	Operational Performance	<i>Strategy</i>	<i>Workforce performance</i>	<i>New or elevated risk</i>
<i>Legal</i>	<i>Regulatory/ Compliance</i>	<i>Public Engagement /Reputation</i>	<i>Equality & Diversity</i>	<i>Partnership Working</i>	<i>Information Technology / Property Services</i>

ANNUAL OBJECTIVE

Which Strategic Objective/s does this paper link to? Consistently meet the NHS Constitution standards

Please summarise the potential benefit or value arising from this paper:

The appointment of this manager will support the Trust in achieving/sustaining the 62 day cancer target and working towards the 28 diagnosis/all clear target.

RISK

Are there any specific risks associated with this paper? If so, please summarise here.	<p><i>Non-Financial Risk:</i> If we do not accept the funding and do not employ a Cancer Improvement Manager, we would be at risk of not achieving national cancer targets as there would not be capacity to support the detailed pathway improvement work required for urology, lung, upper GI and lower GI. We would also be out of line with other local providers as this post is one of five being funded across TVCA to support pathway improvement.</p>
	<p><i>Financial Risk:</i> None as the funding is already allocated to us by TVCA There is a clause that 'If it becomes necessary to prematurely terminate the programme then any uncommitted funds will be returned to the Cancer Alliance PMO' – we do not consider this to be a significant risk as achievement of cancer targets is a critical objective for both the Trust and TVCA.</p>

LINK TO CARE QUALITY COMMISSION ESSENTIAL STANDARDS OF SAFETY AND QUALITY

Which CQC standard/s does this paper relate to?

Author of paper: Catherine Richards, General Manager Cancer & Haematology

Presenter of Paper: Natalie Fox, Chief Operating Officer

Other committees / groups where this paper / item has been considered: EMC

Date of Paper: 18th July 2018

PUBLIC TRUST BOARD MEETING 26 September 2018

Details of the Paper

Title	Corporate Objectives – Quarter 1 Progress
Responsible Director	David Williams, Director of Strategy and Business Development
Purpose of the paper	To provide an update on progress of the corporate objectives.
Action / decision required (e.g., approve, support, endorse)	Note

IMPLICATIONS AND ISSUES TO WHICH THE PAPER RELATES (PLEASE MARK IN BOLD)

<i>Patient Quality</i>	<i>Financial Performance</i>	<i>Operational Performance</i>	<i>Strategy</i>	<i>Workforce performance</i>	<i>New or elevated risk</i>
<i>Legal</i>	<i>Regulatory/ Compliance</i>	<i>Public Engagement /Reputation</i>	<i>Equality & Diversity</i>	<i>Partnership Working</i>	<i>Information Technology / Property Services</i>

ANNUAL OBJECTIVE

Which Strategic Objective/s does this paper link to?

This paper links to all of the strategic objectives (as corporate objectives align to them)

Please summarise the potential benefit or value arising from this paper:

Discuss progress of plans and identify areas of under-performance that require support and attention to mitigate impacts.

RISK

Are there any specific risks associated with this paper? If so, please summarise here.

Non-Financial Risk:

Financial Risk:

LINK TO CARE QUALITY COMMISSION ESSENTIAL STANDARDS OF SAFETY AND QUALITY

Which CQC standard/s does this paper relate to?

Well-led

(if you need advice on completing this box please contact the Director for Governance)

Author of paper: Daniel Leveson, Deputy Director of Strategy

Presenter of Paper: David Williams, Director of Strategy

**Other committees / groups where this paper / item has been considered:
Executive Management Committee**

Date of Paper: 26th September 2018

CORPORATE OBJECTIVES- QUARTER 1 PROGRESS

1. Introduction

The attached paper provides a summary of the progress of plans against each of the corporate objectives approved by the Trust Board in April 2018. The corporate objectives are designed to focus on delivering the Trust strategic priorities – quality, people, money as well as the clinical strategy themes. The RAG (Red, Amber, Green rating) is an assessment against milestones either delivered, at risk or slipped as well as a judgement from EMC on performance on each area. The following is a brief narrative summarising some of the key areas for attention.

2. Corporate Objectives: Strategic Priorities

2.1 Quality is rated green. The majority of milestones are either complete or on track to enhance our culture of safety, listen to our patient voice and develop as a learning organisation. Highlights include the matron-led peer reviews using Perfect Ward and the implementation of the Go Engage programme. Key areas at risk include patients waiting longer than 4 hours in A&E and there is a great deal of work underway with the urgent care system to address this.

2.2 People objectives are rated amber. The majority of milestones to have inspirational leaders developing strong teams, attracting and retaining high calibre and engaged people, pioneering new ways of working across sites, services and organisations are on track or complete. However performance in workforce recruitment, retention and agency spend have resulted this being rated at risk. The key areas for focus are plans to reduce vacancy rates, to reduce nurse turnover and to meet our slow down spending on agency staff.

2.3 Money is rated the majority of milestones (9/14) to deliver our system control total, improve our operational productivity and deliver our capital plan are either at risk or have slipped. The Trust is facing significant financial challenges and has a financial recovery plan at system and organisational level to deliver CIP, increase income from non-NHS sources and minimise the impact on the overall control total.

3. Corporate Objectives: Clinical Strategy

3.1 Integrate Care Pathways and New Models of Care is rated as amber. Half of the milestones to deliver urgent and emergency care transformation and deliver primary and community care transformation are either at risk or have slipped. 24/7 urgent primary care service was mobilised from April 2018.

3.2 Reducing Variation in Quality and Efficiency is rated amber. While the majority of the milestones to ensure we meet the NHS constitutional standards and to adopt best practice to reduce clinical variation there risks to delivering key performance targets such as Cancer, A&E and elective waiting times. The introduction of a new clinically-led GiRFT board is a positive step to engage clinical teams in addressing unwarranted variation.

3.3 Innovate and Improve is rated on green. The majority of milestones to develop an improvement and innovation culture and launch Buckinghamshire Lifesciences Innovation Centre are either complete or on track. In October at the BHT Way a series of workshops will be facilitated to discuss the Trust's approach to continuous quality improvement. The implementation of the innovation centre on Stoke Mandeville will be implemented from April 2019.

3.4 Health and Wellbeing is rated as green. The majority of milestones to support health and wellbeing of staff and ensure the best start in life for Buckinghamshire children are on track. Highlights include dedicated programmes to support staff suffering stress and musculoskeletal issues.

3.5 Enable Transformation is rated as green. The majority of milestones to implement digital transformation, deliver the Trust's estate strategy and demonstrate the trust is well-led are either complete or on track. There has been progress in implementing digital transformation and we are on track to implement e-observations and care

Agenda item: 8

Enclosure no: TB2018/095

Careflow in 2018/19. A significant business case for re-development of theatres and ICU on Stoke Mandeville was prepared and successfully submitted via Buckinghamshire, Oxfordshire and Berkshire West Sustainability and Transformation Partnership (STP), the outcome is expected in the Autumn. The Trust has completed the well-led self-assessment and preparations are under way for its inspection.

3.6 Sustainable Service Growth is rated at risk. While the majority of the milestones to repatriate patients into the Trust and increase non-NHS income are either on track or complete further work is required to provide assurance that the financial impact (in terms of contribution) is being delivered. The Commercial Development Committee is overseeing the workplan for this objective.

4. Next Steps

The Board is asked to note the highlight report and discuss learning from areas of successful implementation and discuss whether there are additional actions required to mitigate the impact of risks or delays in plans.

Daniel Leveson
Deputy Director of Strategy

On behalf of

David Williams
Director of Strategy and Business Development

September 2018

Buckinghamshire Healthcare NHS Trust

Corporate Objectives 2018/2019

Safe & compassionate care,

every time

Strategic Priorities

Quality

We will offer high quality, safe and compassionate care in patients' homes, the community or one of our hospitals:

Implement a culture of safety

Key Focus:

Implement a clinical accreditation scheme to improve quality of care, reduce variation and share best practice.

Listen to our patient voice

Key Focus:

Work in partnership with patients to improve their experience of discharge from our care, outpatients and A&E.

Develop as a learning organisation

Key Focus:

Learn and share best practice to improve safety of medications and recognition of sepsis and clinical deterioration.

Safe & compassionate care,

every time

People

We will be a great place to work where our people have the right skills and values to deliver excellence in care:

Inspirational leaders developing strong teams

Key Focus:

Our leaders and teams are enabled to innovate and develop their services.

Attracting and retaining high calibre and engaged people

Key Focus:

Transform our nursing workforce for the future.

Pioneering new ways of working across sites, services and organisations

Key Focus:

Use apprentices to provide skilled workers for the future.

Money

We will be financially sustainable, will make the best use of our buildings and be at the forefront of innovation and technology:

Deliver our system control total

Key Focus:

Manage within agreed budget and agency cap.

Improve our operational productivity

Key Focus:

Use model hospital data to identify and realise improved efficiency.

Deliver our capital plan to reduce backlog and invest in clinical estate

Key Focus:

Manage and mitigate risks in capital backlog.

Clinical Strategy



Integrate Care Pathways and Models of Care

Deliver urgent and emergency care transformation

Key Focus:
Transform services to reduce the demand of urgent and emergency care.

Deliver primary and community care transformation

Key Focus:
Implement integrated care teams and community hubs in Buckinghamshire communities.



Reduce Variation in Quality and Efficiency

Adopt best practice to reduce clinical variation to improve quality and efficiency of service

Key focus:
Implement top two 'Get it Right First Time' recommendations in each specialty.

Ensure we are meeting NHS Constitutional standards

Key Focus:
Meeting A&E, RTT and Cancer Access targets .



Innovate and Improve

Develop an improvement and innovation culture

Key Focus:
Implement a single improvement methodology that supports the adoption and spread of best practices.

Launch Buckinghamshire Life sciences Innovation Centre (BLIC)

Key Focus:
Establish innovation hub to support SMEs develop new products with patients and clinicians.



Sustainable Service Growth

Repatriate patients into the Trust from Buckinghamshire and surrounding areas

Key Focus:
Work with ICS to treat more Buckinghamshire patients and seek opportunities to expand services in new markets

Increase proportion of non-NHS income

Key Focus:
Increase non-NHS income.



Enable Transformation

Implement digital transformation to support clinical strategy

Key Focus:
Implement interoperability in ICS and e-observation system across wards

Deliver the Trust's Estate Strategy

Key Focus:
Deliver theatres electrical resilience, A&E phase 2 & Clinical Decision Unit.

Demonstrate the Trust is well-led

Key Focus:
Self review using the well-led framework and implement actions



Health And Wellbeing

Ensure the best start in life for children in Buckinghamshire

Key Focus:
Ensure children are safeguarded by working with agencies e.g. police, social care, education & other providers.

Support health and wellbeing for staff

Key Focus:
Programmes to combat stress and increase resilience, MSK care and targeted approaches to flu vaccine uptake.

Buckinghamshire Healthcare NHS Trust

Corporate Objectives 2018/2019

Quarter 1 PROGRESS REPORT

Executive Summary

Priority / Theme	RAG	SUMMARY OF PROGRESS / ACTIONS TO MITIGATE ANY SLIPPAGE
Quality	G	The majority of milestones are on track or complete. Highlights from the reporting period include successful implementation of peer reviews. Plans at risk are related to the implementation of a new IT system for gathering patient feedback & limited capacity in A&E.
People	A	The majority of milestones are on track or complete. Highlights include each leader graduating from the development programme has a transformation project and 15 teams are enrolled in the 'Go Engage' programme. Areas at risk are related to agency spend, recruitment and retention of nurses in particular.
Money	R	The majority of milestones (9/14) are either at risk or have slipped. Highlights include budget approval and monthly reporting in-place. Slipped milestones highlight the risk to the Trust's financial position.
Integrate Care Pathways and New Models of Care	A	Half of the milestones are at risk or are delayed. Highlights include the successful implementation & co-production of the 24/7 primary care access service and the 40% increase in CATs activity. Slipped milestones highlight the complexities of working with partners to develop the integrated care system.
Reducing Variation in Quality and Efficiency	A	The majority of milestones are on track or complete. Highlights include the establishment of the GiRFT Clinical Variation Board to oversee implementation of changes in services especially in surgical division. A number of the performance targets (e.g. A&E waiting time, RTT) are at risk or have slipped due to high demand and increased acuity.
Innovate and Improve	G	The majority of milestones are on track or complete. Highlights include the adoption of the QSIR Programme (Quality, Service Improvement & Redesign) to increase the Trust's improvement capacity. The Innovation Hub launched but the Centre (on SMH site) opening has been delayed until April 2019.
Health and Wellbeing	G	The majority of milestones are on track or complete. Highlights include specific programmes for staff suffering stress and MSK problems. Also safeguarding leads are in-place in divisions and the Bucks Children's Safeguarding Improvement Plan was approved.
Enable Transformation	G	The majority of milestones are on track or complete. Highlights include the completion of the well-led framework self-assessment. There are delays in the implementation of some of the digital transformation plans and the A&E phase 2 plans that require mitigation.
Sustainable Service Growth	A	The majority of milestones are on track or complete. Highlights include the expansion of outreach clinics for plastic surgery and general surgery. The clinical engagement programme with GPs has been delayed and is scheduled for November.

