

Meeting:	Brighton and Sussex University Hospitals NHS Trust, Board of Directors
Date:	24th August 2015
Board Sponsor:	Amanda Fadero, Deputy Chief Executive
Paper Author:	Oliver Phillips, Service Strategy Director
Subject:	Trust Objectives 2015/16

Executive summary

The purpose of this paper is to provide a progress update on the Trust Objectives for 2015/16.

The Objectives, agreed as part of the Annual Plan for 2015/16, outlined operational priorities for the Trust over the current financial year.

Links to corporate objectives	- Implicitly linked to all objectives
Identified risks and risk management actions	- The high level risks to achievement of the Trust Objectives are described in the Board Assurance Framework (BAF)
Resource implications	- N/A for the purpose of this report
Report history	- This report was presented to the Executive Management Team in August 2015
Appendices	- BSUH Annual Plan 2015/16 – final version

Action required by the Board

The Board is invited to:

- **Note and discuss the progress against the Trust Objectives for 2015/16**

Report to the Board of Directors, 24th August 2015 Trust Objectives 2015/16

1. Introduction/purpose

1.1. The purpose of this paper is to provide a progress update on the Trust Objectives for 2015/16, which were reviewed and agreed by the Board of Directors as part of the 2015/16 Annual Plan on 27th April. The Objectives outlined operational priorities for the Trust over the current financial year.

1.2. To date the progress against the Objectives has been varied, which accurately reflects operational challenges in the unscheduled care and scheduled care and the resultant financial performance.

1.3. Despite the current trajectory for achievement, the Trust has made incremental progress against a number of operational priorities; and the Executive Team continue to undertake work on delivering the Objectives with particular focus on improvement areas highlighted by the recent Risk Summit, including urgent and emergency care performance; RTT, cancer standards and diagnostics access times delivery; and financial performance.

2. Summary

2.1. Detailed commentary for each of the operational priorities is provided in the subsequent sections with the overall Red-Amber-Green summary as follows:

Trust Objective	Priorities	Progress
Excellent Outcomes	Reduce avoidable harm to patients	Amber
	Ensure safe staffing levels	Amber
	Creating a learning and reporting culture	Amber
Great Experience	Meet the core standards of care including access targets	Red
	Improve patient engagement and our responsiveness to their feedback	Amber
	Improve staff experience of delivering care	Green
Empowered and Skilled Staff	Support Directorates to deliver, integrating performance management and improve business planning	Amber
	Recruit, develop and retain motivated and engaged staff <i>and</i>	Amber
	Develop and modernise the workforce to deliver the Trust's Clinical Strategy	Amber
Top Productivity	Agree the priority investment and developments	Amber
	Deliver the financial plan	Red
	Develop Service Line Reporting	Amber
	Deliver the long-term capital programme	Amber
Clinical Strategy	Deliver greater integration of services for the frail and elderly	Red
	Improve local hospital services	Amber
	Improve shared care with partner providers <i>and</i>	Green
	Expand tertiary provision	Green
	Enhance academic and research strength	Green

Oliver Phillips
Service Strategy Director
24th August 2015

Objective 1 – Excellent Outcomes

Priorities 2015/16	Progress	Commentary
Reduce avoidable harm to patients	Amber	<p>Overall rated as Amber because:</p> <ul style="list-style-type: none"> - CQC Action Plan – only 5 compliance actions rated green, with actions against scheduled and unscheduled care, and privacy and dignity as amber. Awaiting feedback from the July's CQC visit to consolidate recommendations in a refreshed plan - Rise in Infection Control cases since beginning of April – with remedial actions in place and focused on improving compliance and adherence to the existing IC policies and procedures <p>Positive progress with Safety, Quality and Patient Experience Strategy – presented to the Board of Directors in July, with next steps to develop a detailed implementation projects covering areas in the 'Towards a safer BSUH' programme.</p>
Ensure safe staffing levels	Amber	<p>Overall rated as Amber because:</p> <ul style="list-style-type: none"> - Although improving, there are still areas where percentage of unfilled staff remains high. This is being addressed through recruitment with good progress with international recruitment <p>Positive progress made with:</p> <ul style="list-style-type: none"> - Nursing and Midwifery Strategy which is currently under development and going through stakeholder engagement process across the Trust - E-rostering rolled-out to all inpatient areas, with implementation in outpatient areas underway
Creating a learning and reporting culture	Amber	<p>Overall rated as Amber because:</p> <ul style="list-style-type: none"> - Backlog of open SIs – although significantly reduced since beginning of the financial year (from over 2,000 to below 1,000) - Duty of Candour investigations – upward trends which reflects pressures with emergency care. <p>Safety and Quality remain a priority and all SIs, Reg. 28 incidents and DoC are investigated and reported through the Executive Safety and Quality Committee. Additional resources have also been identified to support the Safety and Quality team in investigations of incidents, and dissemination of learning.</p>

Objective 2 – Great Experience

Priorities 2015/16	Progress	Commentary
Meet the core standards of care including access targets	Red	<p>Overall rated as Red because:</p> <ul style="list-style-type: none"> - Poor performance in the achievement of constitutional access standards across urgent and emergency care, scheduled care, cancer standards and diagnostics waiting times - Some service areas remain in derogation with the commissioners, e.g. adult chemotherapy, radiotherapy, paediatric oncology. Work is continuing with NHS England to resolve derogation areas. <p>Following the Risk Summit a revised system-wide plan is being developed in order to address core pressure points in the Trust, and in the main delivery of core constitutional standards, to minimise the detrimental impact on safety and quality.</p> <p>Revised performance trajectories are under development (to be completed by the end of August 2015) and will be discussed and agreed with regulators at the follow-up Risk Summit.</p>
Improve patient engagement and our responsiveness to their feedback	Amber	<p>Overall rated as Amber because:</p> <ul style="list-style-type: none"> - Safety, Quality and Patient Experience Strategy approved by the Board of Directors in July integrating safety & quality initiatives with focus on patient experience and engagement; but detailed implementation plans for the Strategy yet to be developed
Improve staff experience of delivering care	Green	<p>Overall rated as Green because:</p> <ul style="list-style-type: none"> - Race Equality Workforce Strategy approved by the Board of Directors and currently being implemented as part of the wider People's Strategy - Nursing and Midwifery Strategy going through stakeholder engagement with plan to start the implementation from the end of Q2 onwards - Increasing FFT scores despite operational challenges in the Trust <p>Review of the most recent staff survey also identified areas of improvements which are being addressed through recently approved People and Well-being Strategy.</p>

Objective 3 – Empowered and Skilled Staff

Priorities 2015/16	Progress	Commentary
Support Directorates to deliver, integrating performance management and improve business planning	Amber	Overall rated as Amber because of delays in establishing a single business team supporting directorates in delivering realising business plans. Plans are now progressing in appointing the Head of Strategic Planning (recruited by end of August 2015) and in setting up a consolidated business planning process for 2015/16 (due to start early September). This process will underpin performance management going forward.
Recruit, develop and retain motivated and engaged staff and Develop and modernise the workforce to deliver the Trust's Clinical Strategy	Amber	<p>Overall rated as Amber in the main due to:</p> <ul style="list-style-type: none"> - Low (but improving) appraisal rates in the Trust with some service areas below 50% - Continued cultural and behavioural concerns highlighted by recent feedback from ECIST, NHS England and the TDA – as presented at the Risk Summit <p>Good progress made with:</p> <ul style="list-style-type: none"> - Values & Behaviours programme has been rolled out across all directorates, and is currently being rolled-out to a further 500 non-clinical and clinical leaders across the Trust - A revised People and Well-being Strategy which was approved by the Board of Directors in July. The Strategy addresses immediate workforce challenges highlighted by poor satisfaction scores, vacancy and sickness rates, staff retention, and low appraisal rates. The aim of the Strategy is to align business planning with workforce planning, and the service improvements identified in the 3Ts and the Clinical Strategy. - HR restructure with re-introduction of the Business Partner Model and modernisation of Medical HR <p>The Trust is engaging with the TDA to secure additional support to develop clinical leadership in areas such as difficult conversation, coaching and 1-1s for/with clinical directors.</p>

Objective 4 – Top Productivity

Priorities 2015/16	Progress	Commentary
Agree the priority investment and developments	Amber	Overall rated as Amber – although directorate business plans and service development areas have been identified and signed off, these will require re-prioritisation due to the continued failure in delivering core constitutional standards and poor financial position.
Deliver the financial plan	Red	<p>Overall rated as Red because of the current underlying financial position (Quarter 1 reported deficit of £10.9m).</p> <p>CIP delivery also behind plan (£2.8m delivered against £4.3m planned). A significant proportion of CIP plans still need to be worked-up with high risk of non-delivery.</p> <p>The recovery actions are targeting delivery of in-month plan from September, and then break-even position from December onwards. This should deliver planned FYE deficit of £19.2m.</p>
Develop Service Line Reporting	Amber	<p>SLR continues to be produced quarterly with updated provided to the Chief Financial Officer and Deputy Chief Financial Officer.</p> <p>Following recommendation from Monitor, a Steering Group is being established to oversee SLR implementation, and link between the SLR and directorate/specialty level performance management (currently under discussion between Deputy Chief Financial Officer and the Chief Operating Officer).</p>
Deliver the long-term capital programme	Amber	<p>Overall rated as Amber – although initial prioritisation of the capital programme was undertaken, this will require re-prioritisation in the context of continuing operational challenges, and lack of physical bedded capacity predominantly on the RSCH site.</p> <p>Good progress made with:</p> <ul style="list-style-type: none"> - Site Reconfiguration – transfer of neuro services to RSCH, and #NOF and urology to PRH - Significant progress with re-development of Hurstwood Park to house new services - Set-up of decant facilities for 1st stage of 3Ts development - Significant progress with radiotherapy at Preston Park (go-live date by end of 2015), and with radiotherapy in East Sussex (go-live date Q3 of 2015/16)

Objective 5 – Clinical Strategy

Priorities 2015/16	Progress	Commentary
Deliver greater integration of services for the frail and elderly	Red	<p>Overall rated as Red as evidenced by low discharge rates, rising MRD list and overall performance with the 4-hour standard.</p> <p>Following the Risk Summit, and the recent feedback from ECIST, a revised system-wide recovery plan is being developed including improvements in services for the frail and elderly. Among a wide range of developments those targeting the frail and the elderly will comprise of roll-out of the Discharge 2 Assess, reconfiguration of Level 5 with a new frail/RACOP pathway, review of Community Short Term Services (jointly with Sussex Community NHS Trust).</p>
Improve local hospital services	Amber	<p>Overall rated as Amber because of progress on:</p> <ul style="list-style-type: none"> - Delivery of the integrated laparoscopic theatre facility onto RSCH site – project established, with a subsequent business case to be presented to the Change Board in September - Future model for acute stroke services – discussions ongoing with the Sussex Collaborative and a public consultation on possible configurations commenced <p>Areas at risk cover 7-day services and the Trust is revisiting unfunded developments in order to deliver expected standards. A refreshed self-assessment will be conducted in September 2015 in line with the TDA requirements.</p>
<p>Improve shared care with partner providers</p> <p>and</p> <p>Expand tertiary provision</p>	Green	<p>Overall rated as Green because of:</p> <ul style="list-style-type: none"> - Delivery of integrated sexual health services in Brighton & Hove since April (together with Sussex Community NHS Trust) - Significant progress with East Sussex Healthcare NHS Trust around oncology provision and delivery of a linked radiotherapy unit from Eastbourne District General Hospital - In line with 5YFV - Appointment of a dedicated programme manager co-ordinating programme of works for tertiary burns care across Sussex together with Queen Victoria Hospital - In line with 5YFV - Establishment of a Strategic Forum for Commissioner (including both CCG's and NHS England), a Sussex-wide Acute Providers Forum (for Cardiac, Renal and Vascular), and a Sussex-wide Cancer Forum – all providing platform for discussion around strategic direction for the Trust and partners providing services for core Sussex populations <p>The principal risks remain around:</p> <ul style="list-style-type: none"> - Oncology services in West Sussex – currently mitigated through discussions with Western Sussex Hospitals NHS Foundation Trust and Royal Surrey County Hospital around the future model of oncology and radiotherapy - Repatriation arrangements for tertiary services – in the main vascular patients, but mitigated through Sussex-wide Acute Providers forum - Mobilisation of new MSK pathways in line with the new contract – this is being mitigated through a joint project group aimed at mobilising a community knee pathway from October/November 2015, and with learning applied to the remainder pathways

Priorities 2015/16	Progress	Commentary
Enhance academic and research strength	Green	<p>Overall rated as Green because of:</p> <ul style="list-style-type: none"> - Successfully submitted bid for Clinical Trial Unit to UK Clinical Research Network. Currently working to expand capacity within the Research and Development team to sustain the registration and expand research portfolio - Significant progress with Integrated Education Strategy Development and Development of Integrated Education Governance Structures in the Trust – with next stages targeting workforce modernisation, alignment with 3Ts programme and development of Framework for Learning - Visual Learning Environment Project (<i>iris</i>) on-track with plan to launch in Autumn