

**REPORT TO THE TRUST BOARD: PUBLIC
14 NOVEMBER 2018**

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| Title | Strategic Activity Update |
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Purpose of the report

The aim of this report is to provide the Trust Board with an update on key areas of the Trust’s strategic decision-making, planning and management.

Summary of key issues

The report includes briefings on national policy initiatives. There will shortly be much activity in relation to strategy and planning, with the publication of the NHS 10 year plan, and the requirement for corresponding STP and individual commissioner/provider plans. It will be important in this period for the Trust to ensure that our strategy continues to align with and support local and national priorities, and that implementation remains on track.

The report also includes an update on the development of the Trust strategy. The recent visit from the IHI was a valuable opportunity for the Trust to reflect on progress and plan ahead. A key message from the visit is for us to commence specific work programmes on population health across the Trust, and this will be checked when IHI colleagues return in February.

Strategic priorities this paper supports

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| Improved experience of care | <input checked="" type="checkbox"/> | This paper covers the Trust’s strategic planning process and strategy development, and therefore supports all of the Trust’s strategic priorities. |
| Improved population health outcomes | <input checked="" type="checkbox"/> | |
| Improved staff experience | <input checked="" type="checkbox"/> | |
| Improved value | <input checked="" type="checkbox"/> | |

Committees/meetings where this item has been considered

| Date | Committee/Meeting |
|------|--|
| | This report is routinely submitted to the Executive Service Delivery Board |

Implications

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| Equality Analysis | The Trust strategy has specific goals to address health inequalities, and this will be a focus of both our population health and equalities workstreams. |
| Risk and Assurance | The developments in this report provide assurance that the Trust is effectively engaging with external partners, developing services to improve patient care and outcomes, and maintaining value for money. |
| Service User/Carer/ | The service developments in this report should have a direct beneficial impact on service users and carers. |

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| Staff | |
| Financial | The acquisition of additional income has positive financial benefits for the Trust. |
| Quality | Service developments are specifically designed to improve quality. |

Supporting documents and research material

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| N/A |
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Glossary

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| CCG | Clinical Commissioning Group |
| STP | Sustainability & Transformation Partnership |
| ELHCP | East London Health & Care Partnership |
| The Alliance JCC | North East London Commissioning Alliance Joint Commissioning Committee |
| BLMK | Bedfordshire, Luton & Milton Keynes |
| 5YFV | Five Year Forward View |
| CQC | Care Quality Commission |
| BHRUT | Barking, Havering and Redbridge University Hospitals NHS Trust |
| WELSDB | Waltham Forest and East London System Delivery Board |
| FYFVMH | Five Year Forward View Mental Health |
| IHI | Institute for Healthcare Improvement |

1.0 Background/Introduction

- 1.1 The Trust operates in an increasingly more complex and diverse health and social care economy which is continually changing and developing the landscape of health and social care commissioning and service provision.
- 1.2 This report includes horizon scanning, which involves the systematic examination of potential threats, opportunities and likely future developments in order to assess the Trust's readiness to respond to threats and opportunities and to ensure it remains both resilient and opportunistic.
- 1.3 The external drivers for change place increasing demands upon the Trust's capacity for strategic decision-making, planning and management. The pace and volume of change is increasing and it is therefore important that senior decision-makers within the Trust are kept abreast of strategic developments, both internally and externally. This report aims to fulfil this requirement.
- 1.4 The Trust is part of two Sustainability and Transformation Partnership (STP) footprints: North East London; and Bedfordshire, Luton & Milton Keynes (BLMK). The footprints are comprised of local NHS providers, Clinical Commissioning Groups (CCGs), Local Authorities, and local other health and care services who together have developed STPs for accelerating the implementation of the Five-Year Forward View (5YFV).

1.5 As part of its commitment to the STPs, the Trust is required to develop and submit a two-year operational plan, aligned to each of the STPs. This is referred to as the Operational Plan 2017-19.

2.0 Update on the National Context: Emerging Themes, Policies and Initiatives

CQC welcomes extension of local system reviews programme

2.1 CQC has written to local system leaders in six local authority areas where they will be undertaking new or follow-up reviews exploring how older people move between health and adult social care services.

2.2 Formerly requested by the Secretaries of State for Health and Social Care and for Housing, Communities and Local Government; this further tranche followed on from their national report – the culmination of our programme of 20 local authority area reviews which was published in July.

2.3 The report Beyond Barriers highlighted the positive outcomes found for older people when leaders in local health and care organisations worked well together and supported their teams in providing high quality person-centred care. The CQC also found much poor practice where a lack of co-ordination and co-operation between services had led to fragmented care which then badly affected older people's experiences.

How hospital trusts are embedding Quality Improvement to deliver high quality and sustainable patient care

2.4 A report published in September by the CQC explored how a number of high performing Trusts used a systematic approach to quality improvement (QI) to ensure better patient outcomes and performance. 'Quality improvement in hospital trusts' shares learning from acute, community and mental health trusts adopting and embedding QI across their organisation, and highlighted the experiences of staff and patients involved. The report was based on interviews with trust staff from all levels, local QI teams and patient groups as well as visits to six Trusts to see their QI in action. The CQC spoke to members of the hospital inspection team, reviewed inspection reports, and published trust board papers and local QI publications.

2.5 The Trust was used as a case study in the report, in relation to building capacity, involving patients, balancing improvement with assurance, and systems thinking.

Child mental health referrals up 26% in five years, says report

2.6 The number of referrals to child and adolescent mental health services in England has increased by 26% over the past five years, suggested by the research undertaken by the Education Policy Institute (EPI). The report also revealed one in four referrals was either rejected or deemed inappropriate for treatment. Out of 60 providers questioned, 54 gave a response. The Department of Health said it was investing an additional £1.4bn into mental health services for children.

What will the NHS 10-year plan look like?

2.7 NHS England has a challenge to formulate a 10-year plan which would include efficiency savings to re-invest back into patient care. The money announced by the prime minister, though, covered five years rather than 10 years. Real-terms funding increases of 3.4% were promised, which is considerably more than in recent years. Some health economists pointed out that this rate of budget increase for the service was no more than what was seen in most previous decades and, in effect, would only cover the growth in patient demand.

2.7 A total of 19 different work streams in different policy areas are currently under way. NHS England has put out a consultation document calling for ideas and thoughts on key themes, such as early life, workforce and innovation. The clinical priorities are listed as cancer, cardiovascular and respiratory, learning disability, and autism and mental health.

STPs to create new five year plans

2.8 Health economies have been asked to create five-year plans by autumn 2019, to set out how they will improve services and achieve financial sustainability. The letter from Chief Executives Simon Stevens and Ian Dalton, said “sustainability and transformation partnerships” and “integrated care systems” will be expected to develop and agree their plans during the first half of 2019-20 to enable and teams sufficient time to consider the outputs of the NHS long term plan in late autumn and the spending review 2019 capital settlement (in the spring); and to engage with patients, the public and local stakeholders before finalising the strategic plans.

2.9 The request by NHSI and NHSE is to inform them within a set of parameters which they will outline with input from the Trust on how we will run our local NHS system using the available resources. The Trust will need to develop plans with the proper engagement from all parts of our local systems and that they provide robust and credible solutions for the challenges the Trust will face in caring for our local populations over the next five years. The letter also stated that organisations and systems will first have to develop one-year operational plans for 2019-20 - a “transitional year” - and asked them to begin work this autumn on activity, capacity and efficiency planning.

2.10 The new five-year plans would replace those which were previously drawn up by STPs, which were based on the previous five year funding settlement to 2020-21. It was noted that the five-year commissioner allocations will be published in December and that the planning guidance will also be published in December.

2.11 There would also be a move away from the current system of control totals in the “medium term”, though not in 2019-10, and the CQUIN incentive payment scheme for providers would be “significantly reduced”. This will allow the phasing out the provider and commissioner sustainability funds; instead, these funds will be rolled into baseline

resources. It is intended that the process will begin in 2019-20, the transitional year. There will be a set one year, rebased, control totals.

Commissioning intentions 2019/20

The Trust has received commissioning intentions letters from local commissioners. They highlight the following main areas of development:

- 1) Focus on delivery of mental health 5 year forward view
- 2) Further development of CAMHS
- 3) A focus on prevention, particularly in BLMK
- 4) Further development of IAPT services
- 5) Development of primary care at scale
- 6) Perinatal an area of investment and development in both STPs

The Board will be updated on progress as the commissioning and contract negotiation process takes place. It is expected that contracts will be signed by February 2019.

3.0 Update on Sustainability and Transformation Partnerships (STPs)

3.1 East London Health & Care Partnership (North East London STP)

THE ELHCP CCGs have published the North East London Commissioning Alliance Commissioning Strategy, which details key commissioning priorities, including for the 2019/20 planning round.

The ELHCP CEO Group has recently undertaken a rapid review of the developing integrated care arrangements in each of the place based ELHCP partnerships, and will shortly finalise a report with recommendations to further strengthen them.

3.2 Waltham Forest and East London (WEL) Improvement Board

Inner north east London health and care partners have agreed to develop a new Improvement Board bringing together clinical and managerial leadership across Waltham Forest, Newham and Tower Hamlets to direct and have oversight of and planning for transformational change where there is value in taking a cross-borough approach into 2019/20. Dr. Navina Evans will chair the new single Board which will meet for the first time in early November.

3.3 Mental Health Workstream

The ELHCP mental health workstream has been invited by NHS England to submit expressions of interest to become Children & Young Peoples Mental Health trailblazer sites for City & Hackney and Tower Hamlets. The Trust is fully involved in developing the ELHCP response.

3.4 City & Hackney

City & Hackney Integrated Commissioning Board is undertaking a review of the system governance arrangements, with a report and recommendations due by early November. The Trust a key partner to the City & Hackney Transformation Board, and has participated in the review. The Trust is also involved in the development of the City & Hackney Neighbourhood model of care.

3.5 Newham

The Newham Wellbeing Board is currently finalising interim system governance arrangements for the remainder of 2018/19, whilst planning more substantive arrangements for 2019/20 and beyond.

3.6 Tower Hamlets

In line with the Trust strategy, the Trust is supporting Tower Hamlets Together with three triple-aims, population-health improvement projects, one in each of the partnership workstreams for children and young people, mostly healthy adults, and complex adults.

3.7 Bedford, Luton and Milton Keynes STP (BLMK)

There have been a number of changes in the BLMK STP team, including the departure of the STP Chief of Staff (Mark England), with cover provided by Emma Goddard. A new Director of System Transformation (Peter Howitt) and a Chief Information Officer (Mark Thomas) are now in post and will be supporting STP partners in particular to further develop ICS infrastructure and population health management capability.

BLMK ICS commissioners have issued commissioning intentions in common, and are developing proposals for how the ICS will support the forthcoming planning round.

3.8 Mental Health Workstream

The BLMK STP mental health workstream continues to work on recovery plans for key areas of Five Year Forward View for Mental Health which are at risk, including dementia diagnosis rate in Bedfordshire, children and young people's mental health access in Luton, and physical health checks for people with serious mental illness across the STP.

3.9 Bedfordshire

Central Bedfordshire Council and NHS Bedfordshire CCG have invited the Trust to be represented at the Central Bedfordshire Health & Wellbeing Board, along with other NHS providers. The HWBB has recently approved a new Health & Wellbeing Strategy which includes mental health as one of its three priorities.

In line with the STP priority, the Central Bedfordshire and Bedford Transformation Boards are developing a proactive care management offer for a small number of people with highly complex needs. The Trust is working with partners to take this forward, with the project due to go live on 1st November.

3.10 Luton

In line with the STP priority, the Luton Provider Alliance has developed a proactive care management offer for a small number of people with highly complex needs. The project has gone live in phase one on 1st October. The Trust is working with partners to develop phase two, to include a mental health support offer, for January 2019.

4.0 **Update on the Trust Strategy**

4.1 The executive team continue work to implement the strategy across the Trust.

4.2 The CEO and Director of Planning and Performance discuss the strategy at Trust induction, and staff do group work to consider how to implement the strategy in their roles and teams.



4.2 The October visit by the Institute of Healthcare Improvement (IHI) provided a valuable opportunity for the executive team to consider progress. Executive leads for each of the four strategic outcomes (population health, experience of care, staff experience and value for money) had sessions with Derek Feeley, IHI President and CEO. The IHI also had session with staff groups in relation to developing quality improvements projects to improve population health. Don Berwick also endorsed the Trust's approach to integrated care and population health during his session with staff.



4.4 This work was continued at a Directorate Management Team workshop held on 2 November at Hackney Town Hall, which was designed around the theme of population health. Each directorate was asked to plan a quality improvement project, review how we would measure progress, and consider the support required.



4.5 Discussion also continues as part of the Board development programme, with recent sessions on quality and performance management systems, and risk appetite. Derek Feeley will facilitate a Board discussion in February in order to further develop our work to implement the strategy.

- 4.6 Directorate Management Team workshops have been scheduled for 2019, and will focus on the other strategic outcomes.
- 4.7 Work is being done to plan an engagement exercise in the new year, in order to review progress with stakeholders and plan for 2019/20. This will build on the Big Conversation and existing engagement forums (i.e. member/governor events).
- 4.8 The workforce plan, which supports delivery of the strategy, has been further developed following discussions at the Remuneration and Appointments Committee in October, and is attached.
- 4.9 The draft equalities plans are being discussed as part of a separate agenda item.
- 5.0 Action being requested**
- 5.1 The Trust Board is asked to **RECEIVE** and **DISCUSS** the report.

Trust strategy

Workforce Plan

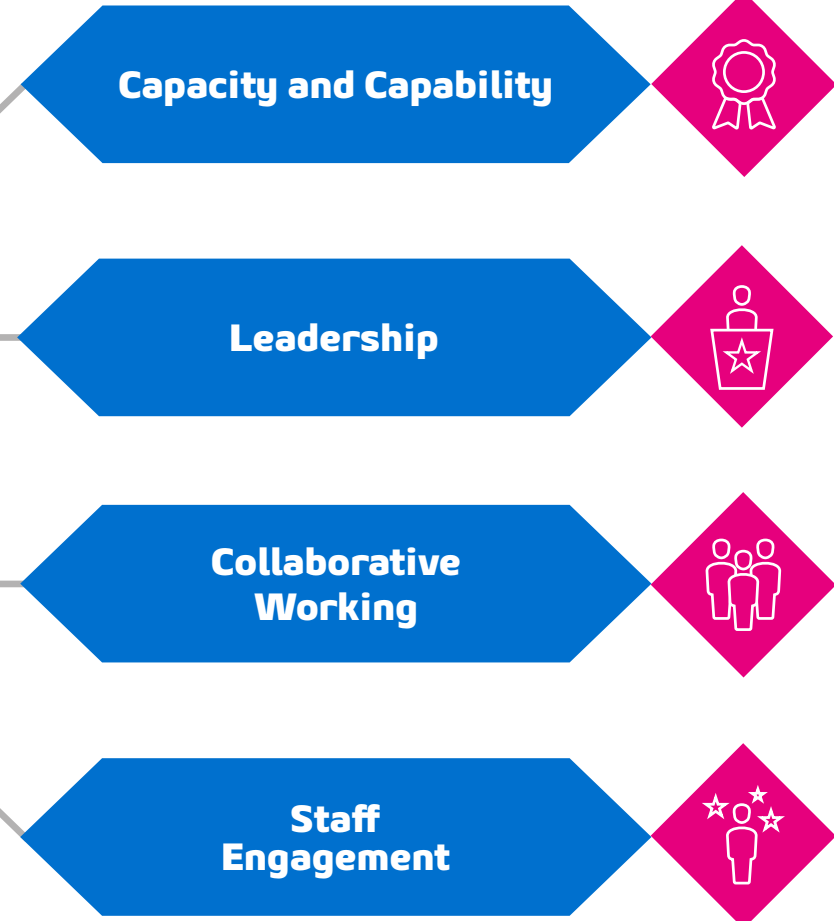
Priority Areas

Actions

Measures

By 2022 we will build on our success and lead on the delivery of integrated care.

Improving the experience of staff



- Improve workforce planning with internal and external partners
- Improve role design and skill mix and pathway design from apprentice to consultant with right skills and extended practice development
- Develop Education and curriculum to support integrated care
- Improve ELFT's employer branding
- Improve insight into workforce demographics including motivations and expectations
- Develop Integrated care competencies and assessment
- Improve deployment of temporary staffing career pathways

- Increased number of staff in training pipeline
- Increased number of apprentices with support to progress
- Clarity around the conversion of applications to conversation
- Representative workforce to reflect the community in terms of the 9 protected characteristics
- Appraisal rating of competent skills to support the delivery of integrated care
- Agency spend & bank fill rate
- Take up of development activities
- Collaborative working with STP partners

- Improve alignment of teams towards Vision and Purpose
- Improve Leadership development for line managers including systems leadership and relationship management
- Improve compassionate leadership
- Improve career progression for BAME and other staff
- Develop inclusion and equality and diversity programme

- Staff survey measure on vision and values
- More OD interventions undertaken to address leadership styles and behavioural issues
- Pulse survey ratings
- Management and development programmes
- Leadership behaviours ratings
- Representative workforce reflecting the community we serve significantly reduced gender pay gaps across different protected Characteristics

- Improve health and wellbeing support for all staff
- Reduce variation of staff experience in teams
- Equity of experience for staff
- Improve OD support for team working and MDT development

- Reduced and sustained Sickness absence levels
- Reduction of Days lost through stress
- Reduction of Days lost through violence at work
- Improved performance in Health and wellbeing indicators in staff survey, FFTs and CQUINs other OD interventions.
- Healthy team measures
- Reduced variation in staff engagement scores across different teams

- Improve support for staff during change and leadership capability to deal with change
- Improve staff engagement and reduce variation
- Improve equity of experience for staff
- Quality improvement – Enjoying work
- Using QI methodology more generally in bringing about improvement.

- Improved staff engagement scores
- Reduced variation in staff engagement scores across different groups
- Reduction in staff experiencing Bullying & Harassment
- A culture change in terms of leadership style
- An increase in staff Retention and a decrease in staff turnover
- Ability to contribute to improvements at work

Our values

HOW DO WE WANT TO BEHAVE?

We care

We respect

We are inclusive



Organisational treasures

OUR ASSETS THAT WE WANT TO BUILD ON

- Service user and carer involvement
- Committed and caring staff
- Quality improvement
- Clinically led
- Inclusion and diversity
- Mental health and recovery focus



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NHSELFT

WHERE WE OPERATE

ALTHOUGH OUR NAME IS EAST LONDON
NHS FOUNDATION TRUST WE ALSO
DELIVER OUR SERVICES IN A NUMBER
OF AREAS OUTSIDE EAST LONDON



AREAS WE COVER

| | |
|----------------|----------------------|
| BEDFORDSHIRE | BARKING AND DAGENHAM |
| CITY OF LONDON | HAVERING |
| HACKNEY | REDBRIDGE |
| LUTON | RICHMOND |
| NEWHAM | WALTHAM FOREST |
| TOWER HAMLETS | |



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Our Workforce Plan

