



The Trust's Strategy Ambitions & Work Programmes

Health Scrutiny Committee
Wednesday 14th December 2016

Tim Bennett
Deputy Chief Executive

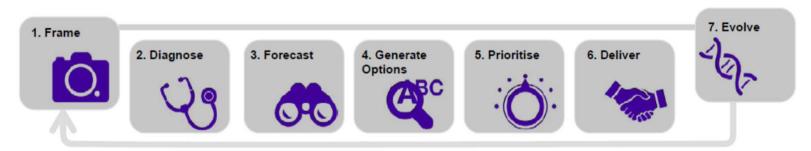




Our strategic review...

We began this process in June 2015, when the Board of Directors considered the Trust's clinical and financial sustainability

We asked leaders within the Trust and local health and social care economy to participate in all stages of our strategic review, sharing knowledge and experience at large-scale events and in smaller working groups



Agree on the important strategic decisions to be made, and the criteria and constraints for making them

Establish detailed Create a clear insight on the FT's1 starting position and what future(s) in determines performance

view of the potential which the FT might operate

Develop. explore and evaluate strategic ideas and options for change

Make choices about the set of strategic ideas for change and build them into one effective coherent strategy

Create and communicate the action plan and allocate resources to deliver the goals of the strategy

Monitor the impact of the strategy and recommit, refresh or recreate when needed





Our strategic vision...

"As a high performing Trust, operating as part of an accountable care system for the Fylde Coast, we will provide high quality, safe and effective care in a financially sustainable way, through our skilled and motivated workforce"





Our strategic ambitions...

REDUCING MORTALITY

114

IN 3 YEARS

CURRENT

IMH2

IMPROVING FINANCIAL SUSTAINABILITY

CURRENT RISK RATING

RISK RATING IN 3 YEARS 2

REDUCING LENGTH OF STAY

CURRENT 4.2

IN 5 YEARS $oldsymbol{3}$ day



IMPROVING PATIENT EXPERIENCE

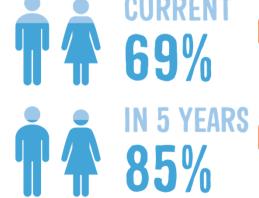
CURREN 95.8

ŤÅ

IN 3 YEARS

FRIENDS AND FAMILY TEST

IMPROVING STAFF SATISFACTION



REDUCING STAFF VACANCIES





STAFF FRIENDS AND FAMILY TEST





Our strategic work programmes...

C Efficiency

Reducing length of stay to deliver high quality care affordably

Q Quality

Consistency in care provision to deliver high quality care to all patients

Value

Getting most value from all of our resources

Appropriate

Transforming non-elective points of entry into the healthcare system

Partnerships

Working as part of the local health economy to develop new, integrated models of care

extstyle ext

Working as part of a Lancashire-wide redesign team to develop new models of care

Enabling

Putting in place enablers such as improved use of information technology, making good use of our estate and enhancing our communications





Our progress to date: Quality

REDUCING MORTALITY

CURRENT 114
IN 3 YEARS 100



SHMI	Jun 2016	Sep 2016	Dec 2016	Mar 2017
Actual	112.53	112.53		
Plan	111.35	110.32	109.29	108.25
Variance	-1.18	-2.21		

Although higher than planned, mortality (SHMI) is trending in the correct direction.

Key areas of focus to maintain trend and achieve plan:

- Collaborative working with CCGs on whole system pathway(s)
- Review of SHMI by condition

Key areas of risk:

Pathway compliance

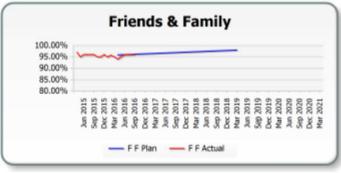
IMPROVING PATIENT EXPERIENCE





98%

FRIENDS AND FAMILY TEST



F&F	Jun 2016	Sep 2016	Dec 2016	Mar 2017
Actual	96.00%	96.00%		
Plan	95.98%	96.17%	96.35%	96.53%
Variance	0.02%	-0.17%		

Performance in the Friends & Family Test has shown improvement and is now broadly in alignment with plan. **Key areas of focus to maintain performance and achieve plan:**

- Improve inpatient only response rates to above 30%
- Consistent Maternity and A&E response above 20%
- Improve access mechanisms

Key areas of risk:

- Waiting Times within OPD
- Communication and information provided
- Discharge information, completion and waiting times



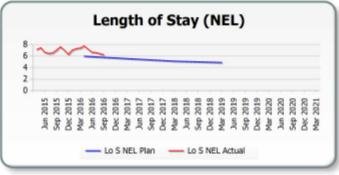


Our progress to date: Operations

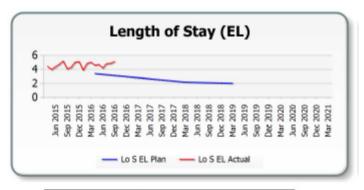
REDUCING LENGTH OF STAY

CURRENT 4.2





LOS NEL	Jun 2016	Sep 2016	Dec 2016	Mar 2017
Actual	6.65	6.21		
Plan	5.89	5.78	5.66	5.55
Variance	-0.76	-0.43		



LOS EL	Jun 2016	Sep 2016	Dec 2016	Mar 2017
Actual	4.18	5.10		
Plan	3.29	3.14	2.98	2.83
Variance	-0.89	-1.96		

Non-elective (NEL) LoS is longer than planned, although it is trending in the correct direction.

Key areas of focus to maintain trend and achieve plan:

- Various activities to support improved care, including ambulatory care model
- Focus on top ten conditions

Key areas of risk:

- Significant increase in delayed transfers of care (LCC) – number and duration
- Increased number of admissions with higher levels of acuity

Elective (EL) LoS is longer than planned, and has not shown significant improvement during 2016/17.

Key areas of focus to improve performance and achieve plan:

- Sub specialty LoS improvement measures to be agreed
- "Excellence test of change" to continue. Weekly monitoring against KPIs to support sustainable change
- Focus on top ten conditions by CCS code

Key areas of risk:

 Medical patients displacing surgical patients increasing the risk of delays in pathways





Our progress to date: Workforce

REDUCING STAFF VACANCIES





2.50%



Vacancy	Jun 2016	Sep 2016	Dec 2016	Mar 2017
Actual	4.95%	6.29%		
Plan	4.40%	4.30%	4.20%	4.10%
Variance	-0.55%	-1.99%		

The vacancy rate was broadly in alignment with plan, but is now trending upwards. It should be noted that the Trust has introduced a recruitment freeze as part of its financial recovery.

Key areas of focus to achieve plan:

 Focus on timely recruitment into clinical vacancies to ensure this is in line with the plan given the recruitment freeze for non-clinical posts

Key areas of risk:

- Medical and Dental
- Allied Health Professionals

IMPROVING STAFF SATISFACTION





STAFF FRIENDS AND FAMILY TEST



Staff Sat	Jun 2016	Sep 2016	Dec 2016	Mar 2017
Actual	58.00%	60.00%		
Plan	68.00%	69.00%	70.00%	72.20%
Variance	-10.00%	-9.00%		

Staff satisfaction rates are lower than planned, and has not shown any significant improvement during 2016/17. Key areas of focus to improve performance and achieve plan:

- Improving response rate to survey to ensure it is representative
- Increase communication on what we have done with what staff have said
- Implementation of Divisional Improvement Plans
 Key areas of risk:
- Implementation of ward moves
- Estates and Facilities





Our progress to date: Finance

IMPROVING FINANCIAL SUSTAINABILITY

CURRENT RISK RATING RISK RATING IN 3 YEARS





FSRR	Jun 2016	Sep 2016	Dec 2016	Mar 2017
Actual	2.00	2.00		
Plan	2.00	2.00	2.00	2.00
Variance	0.00	0.00		

The Financial Sustainability Risk Rating (FSRR) was not intended to change during 2016/17

It should be noted that this measure is being changed nationally by NHS Improvement and therefore future reporting against this strategic ambition will need to be amended to reflect this update.





Financial position

- The Trust ended the previous year with a significant deficit (+£14m);
- This was similar in size to the majority of NHS Trusts;
- At the start of 2016/17 NHS Improvement announced additional funding to help deliver sustainability and transformation.

	2016/17 (for reference)	2017/18	2018/19
STF Funding	£10.0m	£9.4m	£9.4m
Required control total	0	+£3.7m	+£8.6m





Blackpool Teaching Hospitals

- In order to achieve the control total targets we have to deliver high levels of efficiency
- During the strategy review we concluded that part of this should come from traditional transactional savings, part through schemes more transformational in nature and part through collaborative working with partner organisations
- In 2016/17 the savings are largely from traditional approaches but moving forward we will need to focus increasingly on transforming how we provide care and also how we work collaboratively with other health and care partners.





Questions

