



# The Trust's Strategy Ambitions & Work Programmes

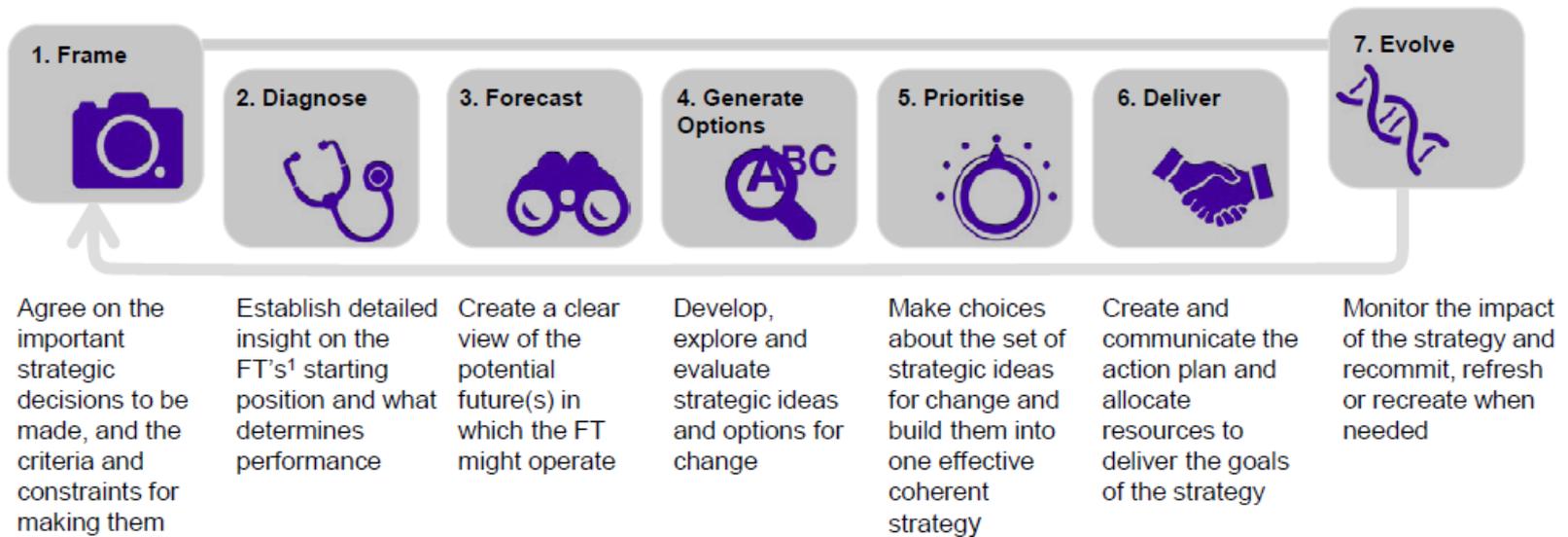
Health Scrutiny Committee  
Wednesday 27<sup>th</sup> September 2017

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



## 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”



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# Our strategic ambitions...

## REDUCING MORTALITY

CURRENT **114**  
IN 3 YEARS **100**  
SHMI

## IMPROVING FINANCIAL SUSTAINABILITY

CURRENT RISK RATING **2**  
RISK RATING IN 3 YEARS **3**



## REDUCING LENGTH OF STAY

CURRENT **4.2**  
IN 5 YEARS **3** DAYS



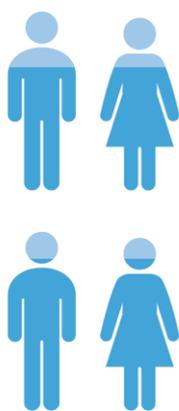
## IMPROVING PATIENT EXPERIENCE

CURRENT **95.8%**  
IN 3 YEARS **98%**  
FRIENDS AND FAMILY TEST



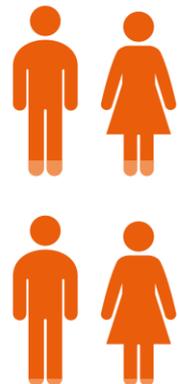
## IMPROVING STAFF SATISFACTION

CURRENT **69%**  
IN 5 YEARS **85%**  
STAFF FRIENDS AND FAMILY TEST



## REDUCING STAFF VACANCIES

CURRENT **4.50%**  
IN 5 YEARS **2.50%**





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# Our strategic work programmes...

-  **Efficiency**  
Reducing length of stay to deliver high quality care affordably
-  **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
-  **Collaboration**  
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



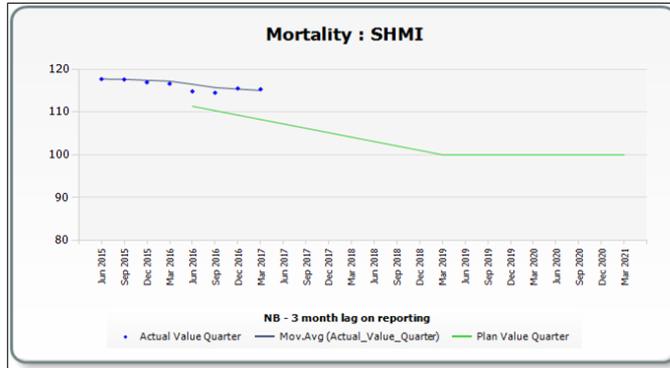
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# Our progress to date: Quality

## REDUCING MORTALITY

CURRENT **114**  
IN 3 YEARS **100**  
SHMI



SHMI	Jun 2016	Sep 2016	Dec 2016	Mar 2017
Actual	112.53	112.53	115.51	115.00
Plan	111.35	110.32	109.29	108.25
Variance	-1.18	-2.21	-6.22	-6.75

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

**Key areas of focus to maintain trend and achieve plan:**

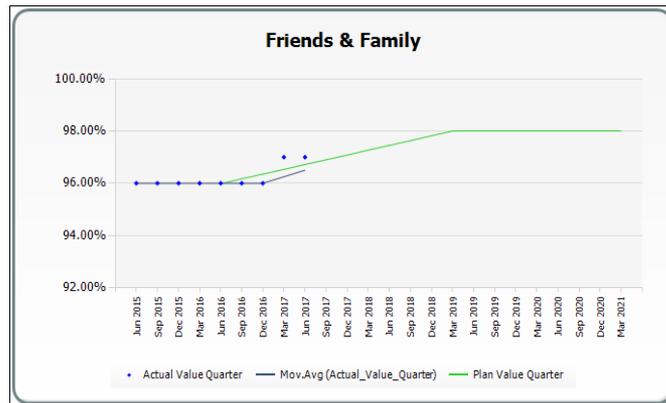
- Collaborative working with CCGs on whole system pathway(s)
- Review of SHMI by condition

**Key areas of risk:**

- Workforce and bed pressures

## IMPROVING PATIENT EXPERIENCE

CURRENT **95.8%**  
IN 3 YEARS **98%**  
FRIENDS AND FAMILY TEST



F&F	Jun 2016	Sep 2016	Dec 2016	Mar 2017
Actual	96.00%	96.00%	96.00%	97.00%
Plan	95.98%	96.17%	96.35%	96.53%
Variance	0.02%	-0.17%	-0.35%	0.47%

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 and A&E
- Communication and information provided
- Discharge information, completion and waiting times

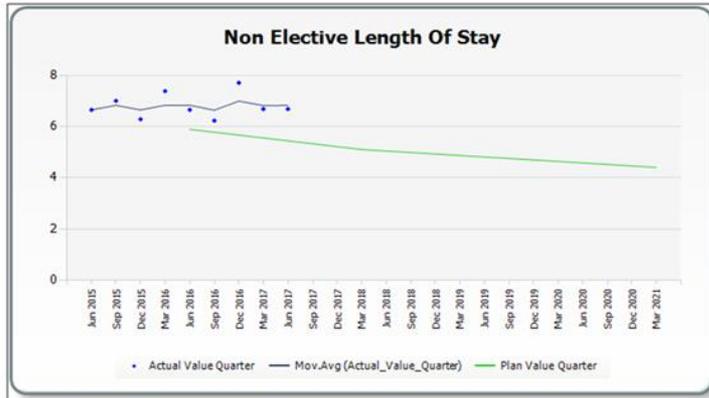


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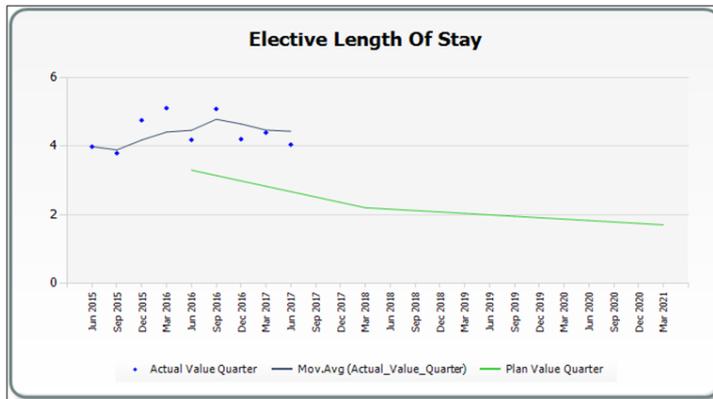
# Our progress to date: Operations

## REDUCING LENGTH OF STAY

CURRENT **4.2**  
IN 5 YEARS **3 DAYS**

LOS NEL	Jun 2016	Sep 2016	Dec 2016	Mar 2017
Actual	6.65	6.21	7.70	6.68
Plan	5.89	5.78	5.66	5.55
Variance	-0.76	-0.43	-2.04	-1.13



LOS NEL	Jun 2016	Sep 2016	Dec 2016	Mar 2017
Actual	4.18	5.10	4.55	4.69
Plan	3.29	3.14	2.98	2.83
Variance	-0.89	-1.96	-1.57	-1.86

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:**

- Better Care Now programme with 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, and resulting operational pressure

Elective (EL) LoS is longer than planned, but did improve during 2016/17.

**Key areas of focus to improve performance and achieve plan:**

- Better Care Now programme with activities to support improved care
- Focus on top ten conditions by CCS code

**Key areas of risk:**

- Medical patients displacing surgical patients increasing the risk of delays in pathways
- Workforce pressures



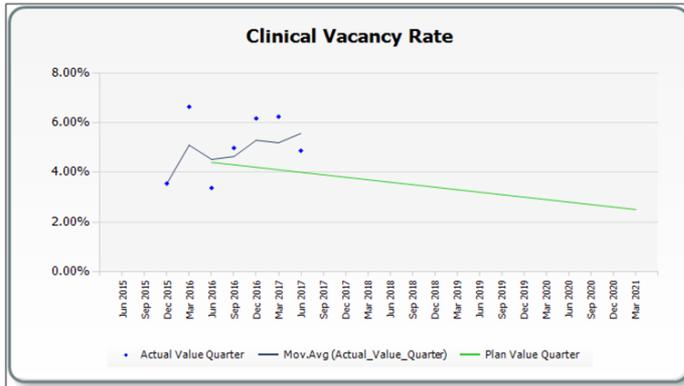
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# Our progress to date: Workforce

## REDUCING STAFF VACANCIES

**CURRENT**  
4.50%

**IN 5 YEARS**  
2.50%



Vacancy	Jun 2016	Sep 2016	Dec 2016	Mar 2017
<b>Actual</b>	3.37%	4.98%	6.17%	6.24%
<b>Plan</b>	4.40%	4.30%	4.20%	4.10%
<b>Variance</b>	1.03%	-0.68%	-1.97%	-2.14%

The clinical vacancy rate trended upwards throughout 2016/17.

### Key areas of focus to achieve plan:

- Focus on timely recruitment into clinical vacancies
- International recruitment into nursing vacancies
- Development of recruitment information pack and microsite for medical posts, which will be rolled out to other staff groups once developed

### Key areas of risk:

- Medical and Dental
- Nursing and Midwifery
- Allied Health Professionals

## IMPROVING STAFF SATISFACTION

**CURRENT**  
69%

**IN 5 YEARS**  
85%



Staff Sat	Jun 2016	Sep 2016	Dec 2016	Mar 2017
<b>Actual</b>	58.00%	60.00%	63.00%	58.00%
<b>Plan</b>	68.00%	69.00%	70.00%	72.20%
<b>Variance</b>	-10.00%	-9.00%	-7.00%	-14.20%

Staff satisfaction rates are lower than planned but have shown some recent improvements.

### 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
- Lack of engagement

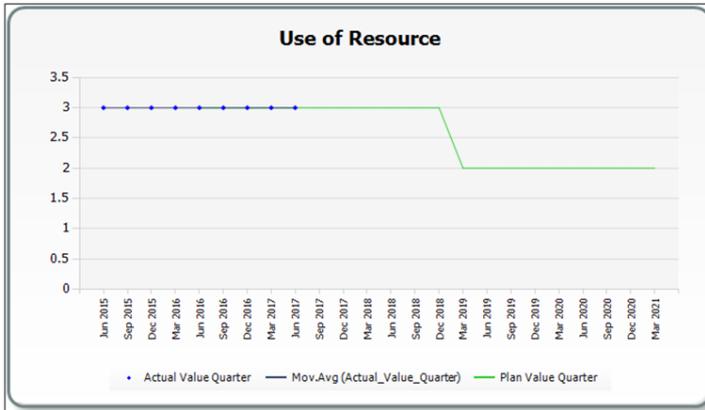


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# Our progress to date: Finance

## IMPROVING FINANCIAL SUSTAINABILITY

CURRENT RISK RATING **2**  
RISK RATING IN 3 YEARS **3**



FSRR	Jun 2016	Sep 2016	Dec 2016	Mar 2017
Actual	3	3	3	3
Plan	3	3	3	3
Variance	0	0	0	0

The Financial Sustainability Risk Rating (FSRR) was not intended to change during 2016/17 (note that this has been re-stated to reflect NHSI's revised definition).

### Key areas of focus to maintain trend and achieve plan:

- A turnaround process has been initiated by Finance Committee. A Turnaround Director has been appointed and range of additional measures in place
- A review of why the Trust has not delivered the efficiencies required is taking place

### Key areas of risk:

- Non-achievement of the cost improvement programme
- Non-achievement of the A&E performance standard (impact on STF Funding)

## Financial position

- The Trust ended 2016/17 with a surplus of £3.3m before exceptional items (which became a deficit of £4.7m after impairments);
- Significant one-off actions were taken to deliver this financial position;
- At the start of 2016/17 NHS Improvement announced additional funding to help deliver sustainability and transformation;
- An increase in the Trust's control total is required for 2017/18 and 2018/19.

	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

