UHB 2019/20 Strategy Implementation Plan

Strategic objective	Deliverable	Delivery date	Owner	Main assurance group	Reference	Key measures of success
Strategic theme 1: Clinical Service Planning Across Sites						
Strategic theme 2: Standardise High Quality Care						
Strategic theme 3: Non-clinical Support Services						

	Strategic objective	Deliverable	Delivery date	Owner	Main assurance group	Reference	Key measures of success
1	**Increase alignment of corporate and clinical services across UHB**	Develop and implement a new operational divisional structure	Quarter 1-Quarter 2	COO	CEAG	1.1	**Corporate:** • Clearly identified operational and clinical leadership within each speciality • Aligned clinical and professional standards • Aligned cross-site service plan and processes for specialities • Harmonised corporate processes across trust • Optimal corporate support service structure to support new divisional structure **Staff:** • Staff engagement levels • Opportunities for flexible working across sites • Appropriate support, education and training to realise benefits of new divisional structure **Patient:** • Patient-reported outcomes • Friends and family test
		Implement single management structures for all specialities, including appointment of Clinical Service Leads	Quarters 1-4	EDSO	SOSG	1.2	
		Continue to align corporate support services and processes across the trust	Quarters 1-4	CFO EDSO	CEAG	1.3	
2	**Eliminate unwarranted variation in services for patients through aligning and standardising pathways and service delivery**	Implement realignment of surgical specialities, including gynaecology and T&O services	Quarters 1-4	COO	CEAG	2.1	**Corporate:** • GIRFT reviews • Performance standards (including DTOC, RTT) • Patient feedback/complaints/whistleblowing **Staff:** • Improved staff engagement levels • Opportunities for flexible working across sites **Patient:** • Patient feedback and complaints about services • Friends and family test • Readmission rates
		Agree and implement common radiology strategy for trust	Quarters 1-4	COO	SOSG	2.3	
		Deliver improvement programme for healthcare for older people, including: • Targeted improvements in inpatient settings (8 wards in 8 months) • Review and align workforce recruitment and retention approaches, focussed on development of existing staff, succession planning and leadership training • Align model of care for older people internally and across external partners	Quarters 1-4	ECN	HOPDG SOSG	2.4	

3	**Provide the highest quality of care to patients through a comprehensive quality improvement programme**	Deliver six Trust-wide quality improvement priorities: • Reducing the number of and severity of Trust-acquired pressure ulcers • Improving patient experience and satisfaction, with a focus on two key areas: nutrition and hydration and pain control in Emergency Departments (EDs) • Timely and complete observations, with a focus on timely administration of pain relief • Reducing missed doses of medication, with a focus on reducing missed non-antibiotics, consecutive missed doses and high risk medicines • Reducing the number of falls and associated harm; to align Datix across all sites and set challenging internal targets • Timely treatment for sepsis, with a focus on the identification, screening and treatment of sepsis in inpatients and EDs	Quarters 1-4	DQD	CQMG	3.1	**Corporate** • External audit of quality indicators • Compliments/compliments and patient survey responses • Reduction in missed doses **Staff** • Access to relevant quality indicators in easily accessible formats **Patient** • Reduction in Trust-acquired pressure ulcers • Timely and complete observations and pain management • Reduction in falls and associated harm • Timely treatment of sepsis
		Develop and roll-out quality indicators for different types of assessment area	Quarters 1-4	DQD	CQMG	3.2	
		Review and implement revised ward-level quality indicators via the Clinical Dashboard	Quarters 1-4	DQD	CQMG	3.3	
		Work with clinical staff to develop specialty and sub-specialty level quality indicators to facilitate benchmarking of performance	Quarters 1-4	DQD	CQMG	3.4	
4	**Meet regulatory requirements and operational performance standards, in line with agreed trajectories**	Implement recommendations from CQC inspection, and prepare for forthcoming further inspection	Quarters 1-4	ECN DCA	CQMG CQG DCAGG	4.1	**Corporate:** • NHSI Single Oversight Framework • Outcome of CQC inspection / rating • Trajectories for performance standards **Patient:** • Waiting times for diagnosis / treatment
		Align and standardise pathways across UHB, ahead of implementation of new 28 day Faster Diagnosis Standard for cancer in 2020	Quarters 1-4	COO	COOG	4.2	
		Monitor and evaluate performance against proposed new clinical standards (on access standards)	Quarters 3-4	DSPP	COOG	4.3	
		Strategic theme 4: Digital and Technological Transformation					
5	**Substantially improve digital healthcare offer to patients**	Expand roll out of virtual clinics enabled by: • Integration of video appointments within Clinical Portal • Delivery of myHealth mobile app • Upgrade video platform to deliver video appointments at scale	Enabling technologies: Quarter 1	EMD	DHG	5.1	**Corporate:** • Avoid up to a third of face-to-face outpatient attendances over the next five years (in line with the NHS long term plan) • In 2019/20, increase proportion of remote outpatient appointments by 5% • Successful piloting of 5G network between UHB sites and other organisations **Staff:** • Enhanced support for remote consultations • Increased opportunities to transform model of care through digital technologies and interfaces
		Improve access to myHealth system by: • Open offer to all patients via outpatient reception and kiosks at QEHB • Refresh of the system • Readiness preparation to spread to all sites	Quarters 1-4	EMD	DHG	5.2	

		Roll out of 5G capabilities as hub for West Midlands Combined Authority's citizen wellbeing testbed, including: • Implementation of early 5G deliverable • Support combined authority with market engagement to identify and frame use cases and to raise market awareness for 5G opportunities	Quarters 1-4	DSPP	TOG DHG	5.3	**Patient:** • Increased proportion of consultations/clinical advice at home, in primary care or in a care/residential setting • Friends and family test / reported patient satisfaction with new model of care
6	**Ensure all parts of UHB can access optimal clinical IT solutions**	Implement Oceano PAS at all sites	Quarter 2	EMD	DHG	6.1	**Corporate:** • Single, unified IT systems used across trust • Standardised system and ways of working across all sites • Improved data transparency and quality • Proliferation of clinical dashboards and performance management tools utilised as part of embedded practice in all operational and clinical teams
		Implement PICS in Critical Care at Heartlands and Good Hope	Quarter 2	EMD	DHG	6.2	**Staff:** • Technology that gives them access to timely clinical and non-clinical information and supports them to make the best clinical decisions.
		Implementation of PICS across Solihull Hospital	Quarter 4	EMD	DHG	6.3	• Standardised ways of working • Standardised training and induction model • Transferable skills across specialties and sites • Improved collaboration as same information is available across all sites
		Modernise wifi infrastructure at Solihull, Good Hope and Heartlands	Quarters 1-4 (Complete at Solihull in Quarter 3)	EMD	DHG	6.4	**Patients:** • Have access to the same clinical expertise wherever in the Trust wherever they present. • Ability to conform with Accessible Information Standard • Patients' choices and preferences can be stored and responded to appropriately
		Unified desktop information and accessibility across all Trust computers	Quarter 4	EMD	DHG	6.5	• Reduction in error; consistent booking and scheduling systems used across all sites

#	Objective	Action	Timescale	Lead	Group	Ref	Benefits
7	**Achieve the highest standards in cybersecurity**	Deploy of Darktrace's Enterprise Immune System		EMD	DHG IGG	7.1	**Corporate:** • Enhanced identification of and response to unauthorised access to network • Improved information governance compliance **Staff:** • Security of personal information is enhanced **Patients:** • Security of personal information is enhanced
		Implement of 802.1x protocol for securing network end-point and device combinations		EMD	DHG IGG	7.2	

Strategic theme 5: Make Best Use of All Resources

#	Objective	Action	Timescale	Lead	Group	Ref	Benefits
8	**Use our resources as efficiently as possible to meet our financial improvement trajectory**	Implement our agency reduction programme, focussing on: • Better control, management and planning of temporary staff, including implementation of Allocate • Adoption of new approach for managing agency medics	Agency reduction programme: Quarters 1-4 Agency medics programme: Quarter 1	COO CFO	FIG/DRM Executive CIP group COOG	8.1	**Corporate:** • CQC/NHSI use of resources assessment • Reduction in agency expenditure (£10m) • Increased proportion of bank staff (as a share of overall temporary staffing costs) • Performance standards (length of stay, readmissions, theatre utilisation) • Reduction in outliers, as identified by the model hospital **Staff:** • Resources and tools to identify efficiency opportunities
		Develop a framework for monitoring and measuring efficiency, including the development of dashboard to support identification of efficiency opportunities across the trust, combining HED and model hospital data	Quarters 1-4	CFO	FIG/DRM Executive CIP group	8.2	
		Implement improvements in coding and costing data to improve ability to identify saving and efficiency opportunities, including: • Production of PLICS costing packs	Quarters 1-4	CFO	FIG/DRM Executive CIP group	8.3	
		Embed a single procurement function and aligned strategy for the Birmingham Acute Trusts	Quarters 1-4	CFO	LSCB	8.4	
9	**Invest in our estates and capital infrastructure to provide high quality facilities for patients and minimise under-utilised clinical space**	Subject to agreement over Capital Funding, commence enabling works for ACAD development at Heartlands site, following agreement of guaranteed maximum price (GMP) and contract commencement	From Quarter 1	CFO EDHTCD	ACAD Board CEAG	9.1	**Corporate:** • Capital projects delivered to budget and time • Increased proportion of sites used for clinical work **Staff:** • Access to modern facilities • Opportunities to work in different settings **Patients:** • Access to modern facilities • Reduction in waiting times
		Progress development of Specialist Hospital Facility (SHF), specifically: • Commencement of enabling works from June 2019 • Negotiation and agreement of service operating model with HCA	From Quarter 1	EDHTCD	IC	9.2	
		Establish new community capacity for ophthalmology services and Chest Clinic	Quarter 4	EDHTCD	TOG	9.3	
		Carry out feasibility study for acute block at Heartlands site to identify A&E, ITU, imaging and inpatient ward requirements as part of the redevelopment	Quarter 2	EDHTCD	CEAG	9.4	

10	Transform the model of care to ensure patients are seen in the right settings and to move lower acuity care off acute/specialist sites	Deliver early intervention programme work, in partnership with Newton Europe including: • Agree and roll out new care models for bedded and non-bedded care for intermediate care across Birmingham • Align and deliver a consistent OPAL front door services across all sites	Quarters 1-4	DP	STP Board	10.1	**Corporate:** • Identification of available additional acute / community capacity • Performance standards, specifically DTOCs • Recognised as working in partnerships with primary care, social care and other NHS providers
		Develop and implement new adult community services strategy in Solihull including: • Identify and roll-out digital solutions to community workforce to support mobile working • Re-specify and implement new rapid response service to prevent avoidable admissions	Quarter 1-4	DP	HOPDG SOSG	10.2	**Staff:** • Mobile workforce • Access to digital technologies **Patients:** • Friends and family test
		Develop vision and strategy for diagnostics at UHB, identifying services and pathways to be delivered in community settings	Quarter 3	EDHTCD	TOG	10.3	• Patient feedback
	Strategic theme 6: Develop and support our workforce					
11	Optimise workforce supply to ensure sufficient staff and roles to meet patient demand	Implement a streamlined recruitment process	Quarters 1-4	EDSO	SWG	11.1	**Corporate:** • Faster recruitment, from WAF to job start • Increase in number of medical associates • Increase in number of nursing associates • Identification of metrics to monitor and evaluation workforce supply and retention • Uptake of IFP • Finalised agreements with international education providers
		Expand clinical apprenticeship programme, specifically the nursing associate and medical associate workforce	Quarters 1-4	ECN	SWG	11.2	
		Deliver the recommendations of the Junior Doctor workforce review	tbc	EDSO	SWG	11.3	
		Optimise the quality and effectiveness of workforce information through merging and cleansing the QE and HGS ESR systems	Quarters 1-4	EDSO	SWG	11.4	
		Support recruitment and retention of international workforce: • Continue to support our EEA workforce, in the changing context relating to Brexit, including support for settled status • Continue to deliver and develop the International Fellowship Programme (IFP), through expanding the number of overseas partners to support delivery. • Develop and roll-out specific Emergency Medicine Fellowship Programme Establish and operate residency and fellowship programme for residents at King Abduaziz University medical faculty	Quarters 1-4	EDSO	SWG MWG	11.5	**Staff:** • Timely start date and processes for recruitment • Workforce retention rate • Staff experience of recruitment processes

12	Expand range of employment opportunities and support for new starters	Review and redesign trust induction programme and support programme for new starters to improve alignment with trust values	Quarters 1-2	EDI	SWG	12.1	**Corporate:** • Perception of trust and local induction processes • Uptake of Learning Hub programmes
		Expand the range of employment opportunities and apprenticeships for local people, through the Learning Hub and other partnerships	Quarters 1-4	EDI	SWG	12.2	**Staff:** • Proportion of new starters allocated a 'buddy' • Proportion of staff working in extended roles
13	Foster positive staff engagement and inclusive culture	Deliver initiatives to support positive staff engagement, with a particular focus on: • Health and wellbeing (including financial wellbeing sessions and health and wellbeing clinic) • Promote diversity and inclusion across the organisation, through embedding new staff networks and awareness raising/training opportunities • Identify flexible working options for all staff • Align appraisal processes and improving uptake across sites • Recognise and value staff contribution through Building Healthier Lives awards and other local/national awards	Quarters 1-4	ECN	SWG	13.1	**Corporate:** • Stonewall's Workforce Equality Index • Workforce Race Equality Standard (WRES) • Sickness absence rates • Uptake of appraisals **Staff:** • Staff survey results
14	Develop our leaders at all levels of the Trust	Expand 'Defined by our people' leadership development programme	Quarters 1-2	EDSO	SWG	14.1	**Corporate** • Number of senior leaders participating in leadership development programme • Attendance rates at leadership lectures • Uptake of mentoring/coaching opportunities
		Improve awareness of leadership development resources, events and training, including coaching, mentoring and shadowing opportunities	Quarters 1-4	EDSO	SWG	14.2	**Staff** • Improved training opportunities • Increased opportunities for mentoring/coaching
		Strategic theme 7: Work with our partners					
16	Align clinical and corporate service planning across other providers within the BSOL STP to improve integration for patients	Embed the Birmingham Hospitals Alliance, through quarterly Board meetings	Quarters 1-4	DSPP	BHA Board	16.1	**Corporate:** • Performance standards (DTOCs, emergency care demand, mental health patients waiting for placement from acute trust) • Aligned decision making between commissioners and providers
		Progress service alignment for services within remit of the Birmingham Hospitals Alliance, including: • Orthopaedics • Maternity • Paediatrics • Gynaecology • Pathology	Quarters 1-4	DSPP	BHA Board SOSG	16.2	**Patients:** • Aligned pathways for patients, regardless of provider

17	Work with international partners to develop health care services and forward UHB's reputation	Work with Zhengzhou University, the Chinese Research Hospital Association and Beijing JTX Group to provide advice, support and expertise in: • Zhongyuan International Hospital, Xinxiang, Henan Province and nursing school • Develop International Centre for Chronic Disease Rehabilitation and Healthcare, Lingshui, Haian Province. • Develop Guiqian International General Hospital, Guiyang, Guizhou Province .	Quarters 1-4	EDSO	IC	17.1	**Corporate** • Commercial Contract signed and retainer fee received into IGHC • Plan and design phase of new buildings and clinical specialty development plan delivered to time • Zhongyuan International Hospital built and opened on time with agreement of the UHB/IGHC brand
			Strategic theme 8: Research and innovation				
18	Align the trust's research activities to its operational challenges	Develop a framework for embedding research and innovation across the organisation to best support operational challenges and transformation priorities, including: • Explore the use of innovation implementation science approaches to ensure research methodologies align to research and operational priorities • Continue work through the NIHR with the BRACE Rapid Evaluation Centre and CLAHRC to support applied research	Quarters 1-4	EDI	SRIG BHP Board	18.1	**Corporate** • Increase the number of patients recruited to clinical trials by 10%. • Additional research fellows • Grant income • Number of trials • Better linkages between research and innovation priorities and operational priorities
		Convert vacant junior specialist doctor posts into research fellows	Quarters 1-2	EDI EDSO	SRIG SWG	18.2	
19	Increase research and innovation activities associated with artificial intelligence	Develop the infrastructure to allow the trust to be a major contributor to AI research, including • Support to develop new AI applications in clinical environments e.g. in ophthalmology • Support for the safe adoption of off-the-shelf AI solutions in the trust e.g. in radiology • Contribute to the next generation of AI solutions, through partnership with Novo	Quarters 1-4	EDI	SRIG	19.1	**Corporate:** • UHB recognised as having leading AI capabilities • Trust seen as an early adopter **Staff:** • Opportunities to work in leading edge technologies **Patient:** • Participation in research studies
20	Standardise research and development processes across the trust	Introduce the model of universal patient consent for the use of data and tissue	Quarters 1-2	EDI	SRIG	20.1	**Corporate:** • Alignment of research and innovation priorities across the organisation
		Complete the alignment of R&D structure and processes across the whole trust.	Quarters 1-2	EDI	SRIG	20.2	
			Strategic theme 9: Emergency preparedness				
21	Align emergency preparedness and business continuity planning across our sites	Map business continuity plans to new divisional structure	Quarters 1-4	DCA	SEPSG	20.1	**Corporate:** • Resilient plan and processes • Compliance with statutory requirements and Core Standards
		Maintain and carry out annual review of all emergency plans	Quarters 1-4	DCA	SEPSG	20.2	
		Carry out appropriate training and education to meet statutory requirements under the Civil Contingencies Act and NHS England/NHS Improvement Core Standards	Quarters 1-4	DCA	SEPSG	20.3	**Staff** • Awareness and access to appropriate educational and training resources

			Key		
Owners:				**Assurance Groups:**	
COO	Chief Operating Officer			BHA	Birmingham Hospitals Alliance
CFO	Chief Financial Officer			BHP	Birmingham Health Partners
ECN	Executive Chief Nurse			CEAG	Chief Executive's Advisory Group
EDI	Executive Director of Innovation			COOG	Chief Operating Officer's Group
EDHTCD	Executive Director of Healthcare Transformation & Capital Developments			COG	Commercial Opportunities Group
EDSO	Executive Director of Strategic Operations			CQG	Care Quality Group
EMD	Executive Medical Director			DRM	Divisional Rectification Meeting (Heartlands, Good Hope, Solihull)
DQD	Director of Quality Development			CQMG	Clinical Quality Monitoring Group
DCA	Director of Corporate Affairs			DCAGG	Director of Corporate Affairs Governance Group
DComms	Director of Communications			DHG	Digital Healthcare Group
DP	Director of Partnerships			FIG	Financial Improvement Group (QEHB)
DSPP	Director of Strategy, Planning & Performance			HOPDG	Healthcare for Older People Delivery Group
				IC	Investment Committee
				LSCB	Logistics and Supply Chain Board
				SEPSG	Strategic Emergency Preparedness Steering Group
				SOSG	Strategic Operations Steering Group
				SRIG	Strategic Research & Innovation Group
				SWG	Strategic Workforce Group
				TOG	Transformation Oversight Group