



## **Putting Patients First** Our Strategy 2022 - 2027





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"Creating a great place to work and a great place to be cared for"

## Foreword

The Trust's existing Strategy was written in 2018 - before the publication of the NHS Long Term Plan, which set out an ambitious plan for the NHS making sure it was 'fit for the future'. As we are starting to see the impacts of the system reform agenda and having experienced the impact of a worldwide pandemic, it is appropriate that we take the opportunity to refresh our Trust Strategy.

As our healthcare landscape changes, further supported by the recent approval of the Health and Care Act 2022, we will place significant emphasis on collaboration and partnership - working to meet the needs of our local population.

Whilst we look forward to the future with confidence, we are also realistic about the challenges we face, not least retaining, developing and attracting colleagues who will work with us to deliver our priorities.

We particularly want to express our sincere thanks and appreciation to our colleagues who, despite the pressures of the last two years, have continued to work tirelessly to care for our patients.

## We are grateful for the contribution and influence of our colleagues into the development of this strategy. Through them we have heard a very strong commitment to having a strategy that is Patients First, Quality and Safety driven and Clinically Led. We look forward to working together with our colleagues, patients, community and partners to deliver on the promises this strategy holds.

There is a lot to do, and it won't always be easy, but if we work together, we can make a huge difference to the health and wellbeing of everyone living in the Morecambe Bay area.

Our success means healthier lives and safe, high-quality care for our patients; and happier colleagues - meaning we will all be proud to say...







Professor Mike Thomas Chair

Aaron Cummins Chief Executive

## Welcome

## Welcome to our new strategy, which we will be using to guide our priorities and decisions at UHMB over the next five years.

Our new strategic framework has been developed by our colleagues and is founded on our vision and values organised around 4 strategic priorities. It sets out our ambition, detailing ways in which we will improve the delivery and quality of care; support our colleagues to be the very best they can be; ensuring we make the best use of our resources to support delivery of sustainable services; recognising the opportunities to collaborate and work in partnership. These priorities will be underpinned by embedding a culture of improvement across the organisation.

## Taking this forward

We will now work to organise ourselves around our strategy, building it into all our teams and services, translating it into a clear clinical strategy and implementation plan, alongside embedding it into our business planning, investment decisions, governance and our team and personal objectives.

We look forward to working together to make our new shared vision a reality. Putting Patients First -Our Strategy 2022 - 2027



Over the next five years you will see:

- High quality services that are run well and deliver value for money
- Improved patient and colleague experience
- Improved access to services
- Investment in improving our buildings and IT
- New technology introduced to improve care and reduce travel
- Much closer working between different arts of the NHS
- Greater patient and public involvement

## **Our Partnerships**

## **Bay Health and Care Partners**

We build on a very strong foundation - our establishment of Bay Health and Care partners goes back to 2012 with the first Better Care Together Strategy being written in 2015. As we move to Place Based Partnerships we remain committed to the triple aim:

**Better Health** – we will improve population health and wellbeing and reduce health inequalities

**Better Care** – we will improve individual outcomes, quality and experience of care

**Delivered Sustainably** – we will create an environment for motivated, happy staff and achieve our control total.

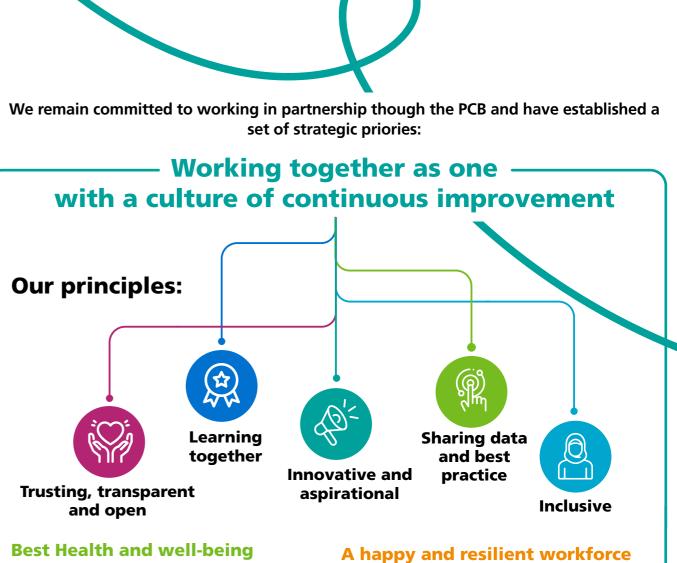


## **Lancashire and South Cumbria Health and Care** Partnership (ICS)

We are working closely with health, social care and voluntary sector partners across Lancashire and South Cumbria to empower and support the 1.8 million people in our communities to have the best start in life, so that they can live longer, healthier lives.

## Lancashire and South **Cumbria Provider** Collaborative

The LSC Provider Collaborative has been working together at a system level for a number of years originally set up in 2017 as a Provider Board, developing into a Provider Collaborative Board during 19/20. There are a number of programmes of work which would not have happened had we not embarked on this collaboration early and the system working and mutual aid demonstrated during the Covid 19 pandemic cemented many aspects of this ability to deliver system wide working.



#### Working together we will;

- Ensure equitable access to the same high-quality care
- Standards clinical pathways and reduce variation in outcomes
- Support colleagues' health and connect through them with others
- Add social value, eg by supporting local jobs and businesses and reducing our environmental impact

## **High-quality services**

#### Working together we will;

- · Deliver joint visions for clinical and corporate services
- Develop new networked services
- Standardise the way we work and our quality improvement approach
- Reduce elective care waits
- Improve emergency and urgent care performance
- All achieve a CQC rating of at least 'good' in three years

## Working together we will;

- Embed the national People Plan and NHS People Promise
- Shares skills and expertise
- Standardise policies, working practices and staff benefits
- Work seamlessly across sites wherever required / necessary
- Create appropriate new roles and career opportunities
- Make this a great place to work

## **Financial sustainability**

## Working together we will;

- Agree a financial strategy to enable our clinical vision
- Reduce duplication and waste to free-up resources for patient care
- Focus resources to improve population health
- Achieve financial balance

## **Our Challenges**

Whilst this sets out our ambition over the next five years, it is important we recognise the challenges we face as an organisation

## **Quality and Safety**

In August 2021 we were enrolled into Level 4 of the System Oversight Framework (SOF4) by NHS England and Improvement (NHSE/I; this was as result of regulatory notices and the outcomes of the Care Quality Commission (CQC) Inspections. Following a comprehensive inspection by the CQC across a range of services at the Trust in April and May 2021, the Trust received a combined rating for quality and the use of resources of 'Requires Improvement'. Whilst the CQC recognised some of the improvements we have made since their last inspection and our rating for care remains 'good' there is clearly a lot of work still to be done and we know our colleagues, patients and local populations deserve better.

The safety of our patients and staff is our absolute priority and we remain committed to realising our ambition to be a great place to be cared for.

## Finance

As an organisation we continue to face significant financial challenges.

As a Trust we are committed to continuously reviewing and improving the way we use our resources so that we can maximise the benefits for our patients. We are developing a financial strategy which will support the long term financial sustainability of our services and enable us to plan for the investment we need in our estate and infrastructure. This strategy will set out how the Trust working in partnership with the ICS will address the current financial gap to support the delivery of high quality and sustainable care for our local population.

## **Operational Delivery**

The Trust continues to experience significant challenges across its urgent care pathways which impacts negatively on patient experience and flow across the organisation. We have an urgent care recovery plan in place which is reliant on a partnership approach to delivery, with a focus on admission avoidance and early supported discharge. To date efforts to improve have fallen short of expectations but we know that there is opportunity to improve by working in a more integrated way; supporting patients more effectively as close to home as possible.

Prior to COVID-19 we recognised we had opportunity to improve the productivity and efficiency of our services across both urgent and elective care pathways. The pandemic has had a significant impact on access to services and as a result significant backlogs have developed. We are committed to our recovery and restoration programme and have already started to make improvements across our outpatient and elective pathways.

## Workforce

Our workforce is our strongest asset and we are proud of the care that our teams deliver. However we know that we need to do more to realise our ambition of being a great place to work.

The findings from the staff survey have been backed up by the results of the Moving Forward platform which was launched in November 21, where almost 2000 colleagues expressed their views on what needed to change to improve our culture.

Work to address bullying reduce bullying, harassment and abuse has been underway since the 2018 staff survey and the trend at UHMBT is an improving picture. We know we need to focus on:

- Leadership and Management Development
- HR, Resourcing and.
- Health and Well-being
- Strategy and Engagement
- Our Workplace

We are committed to addressing all of these issues and have embarked on a cultural transformation programme.





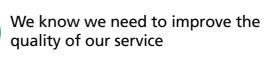
# Why we need a new Strategy

## Why we need a new Strategy



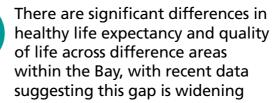
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We serve a growing and ageing population requiring us to better coordinate and join up care





Patients expectations are changing









Attracting, training, supporting and retaining the right workforce is one of our biggest challenges and a key challenge across the NHS



Delivery of clinical and financial sustainability

Advances in digital technology, innovation and AI are creating opportunities to radically transform how we deliver our services



System reform is giving us growing opportunities to collaborate beyond UHMB

## **Our Strategy**

## Patients First, Quality and Safety driven and Clinically Led

## **Our Purpose**

Our purpose is to deliver compassionate care and the best possible results for the people of Morecambe Bay.

#### Which means:

Our patients will receive consistently high standards of safe, personal, kind, community and hospital healthcare focusing on continuous quality improvement and adopting a 'patient-first' approach to all that we do.

We will support our colleagues to be their very best through education, development, health and wellbeing support together with access to modern facilities that support our ambitions.

## **Our Vision**

Creating a great place to be **99** cared for and a great place to work

## **Our Values**

What this means – aligned to our Behavioural Standards



## We are Compassionate

#### We will:

- Be kind and caring to each other; our patients and families and our partners
- Consider the feelings of others
- Work together to deliver safe care and a safe working environment
- Be proud of the role we do and how this contributes to patient care

## We are Respectful and Inclusive

#### We will:

- Show respect to and for everyone
- Act professionally at all times
- Communicate Effectively listen to others and seek clarity when needed
- Value each other and the contribution of everyone

## We are Ambitious

#### We will:

- Go beyond traditional boundaries; being positively receptive to change and improvement
- Work with colleagues and system partners to improve services for our patients, families and carers
- Support each other to listen, learn and develop
- Collaborate with and empower each other



## We are Open, Honest and Transparent

## We will:

- Seek out feedback and act on it
- Take personal responsibility and accountability for our own actions
- Not be afraid to be challenged
- Ensure consistency and fairness in our approach

## **Our Strategy**

Patients First - 2022-2027





# **Our Strategic Priorities**

"Creating a great place to work and a great place to be cared for." | Page 17

# **Strategic Priority** One

Deliver outstanding care and experience



## **Strategic Priority One**

## Our successful strategy will mean:

- We are recognised as a great place to be cared for.
- We will deliver safe, effective, accessible services that meet individual needs.
- We will work with people who use our services to improve through co-production peer support and personalised care.
- We will constantly listen, innovate and learn from others to ensure we deliver the best possible outcomes.
- We will work in partnership to deliver great local care with a focus on care being delivered in the right place – moving to a focus on population health and wellbeing

## Relevant enabling strategies / plans

- Clinical service
- Quality
- Patient Experience
- People
- Estates

## To support this we will

- Have a clear Clinical Strategy based on delivery of best practice and outcomes
- Re-fresh our Quality Strategy which will set the framework for driving further improvement to delivery of safe high quality care.
- Develop and embed our quality improvement approach to ensure continuous learning and improvement
- Ensure robust quality assurance processes are in place, helping us to learn when we get things wrong and embed evidence based practice.

- Increase the rate of harm free care year on year
- Increase patient and service user satisfaction year of year
- Reduction in hospital delivered care

# Strategic Priority Tvvo

Create the culture and conditions for our colleagues to be the very best they can be



## **Strategic Priority Two**

## Our successful strategy will mean:

We are universally recognised as a great place to work, characterised by:

- Levels of colleague engagement in line with the best nationally
- Employer of choice, with low vacancy levels and active, broad participation in apprenticeships, T-Levels and educational placements
- Sustained improvement across our cultural dashboard
- Diverse, inclusive workforce representative of our community at all levels

## Relevant enabling strategies / plans

People Plan

- Culture, Leadership and OD Plan
- Flourish health and Wellbeing
- Talent Management
- Colleague Experience

## To support this we will

- Deliver against our Culture, Leadership and OD plan
- Achieve all requirements set out within the national, regional and local People Plans
- Develop collaborative partnerships with colleagues and teams in the Provider Collaborative
- Transform our people and OD team and practices in line with the Future of HR and OD in the NHS

- Sustained improvement in cultural dashboard and core HR metrics (as measured in the IPR)
- Delivery of the People Promise requirements (and associated metrics)
- Delivering against disparity ratio targets for ethnicity, gender and disability

# **Strategic Priority** *Three*

Making the best use of our physical and financial resources



## **Strategic Priority Three**

## Our successful strategy will mean:

- We will deliver financial sustainability through quality and safety improvement
- We will take the learning from Covid-19 and mainstream transformed practices into business as usual
- We will utilise our estate and technology to maximise efficiency and improve care delivery and service user experience
- Effective deployment of our colleagues
- We will be an environmentally proactive organisation working with our communities to tackle the health impact of pollution and climate change

## Relevant enabling strategies / plans

- Financial strategy
- Clinical Service Strategy
- Digital
- Estates
- People
- Greener

## To support this we will

- Enhance our financial control environment
- Be a financially literate organisation with all staff who have budgetary responsibility receiving training to enable them to made the best decisions for their patient and teams
- Invest in innovation and technology
- Lead development of place based and system financial frameworks
- Integration to deliver models of care and integrated working
- Invest in and utilise digital technology to reduce waste, automate processes and eliminate bottlenecks

- Delivery against financial improvement trajectories year on year
- We will be financially sustainable achieving financial balance in line with delivery against our financial improvement trajectories
- Achieve carbon neutral trajectories

# **Strategic Priority** *Four*

## Working in Partnership

## **Strategic Priority Four**

## Our successful strategy will mean:

- We deliver our aim of being a great place to be cared for and a great place to work more quickly and sustainably
- We are recognised as an effective partner who also contributes to the success of others
- Our communities recognise UHMBT as an Anchor institution
- We have a stronger relationship with our colleagues across the Bay

## **Relevant enabling strategies / plans**

- Stakeholder engagement strategy and annual plan
- Anchor Institution delivery plan

## To support this we will

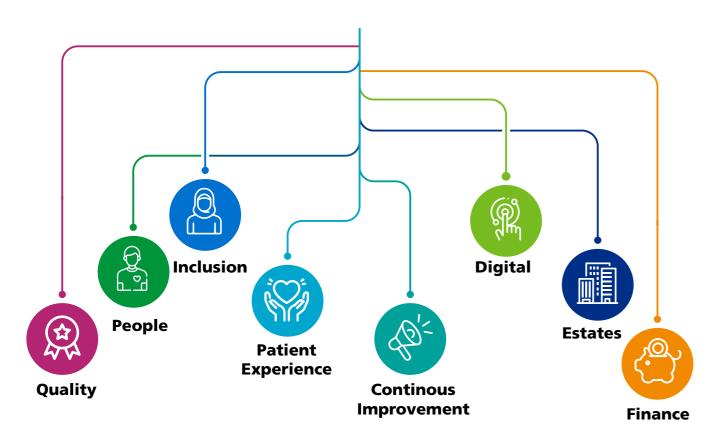
- Ensure we engage with our partners In developing our future plans and vice versa.
- Lever our clinical expertise to drive clinical quality and influence system working
- Include regular engagement and relationship building opportunities in our approach
- Prioritise partnership working as a key principle of how we work at UHMBT

- More formal and informal partnership arrangements in place
- More visible demonstration / reporting on our partnership work and the impact it has
- Feedback from our partners forming part of our assessment

## **Delivering our Strategy**

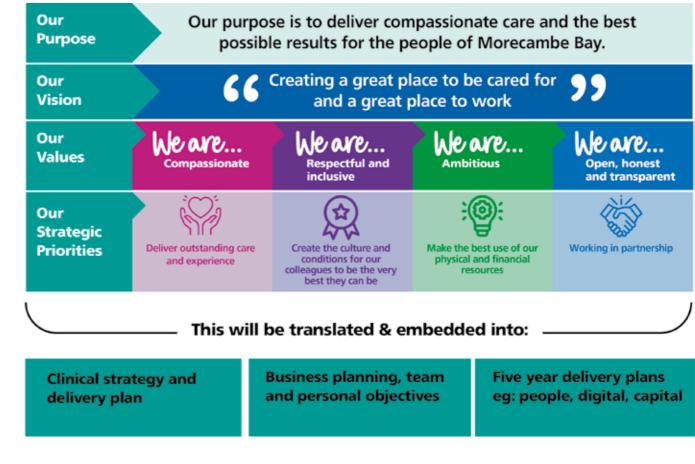
This strategy is ambitious and we recognise that there is much for us to do, but it is also measured and we will be realistic. We will deliver our strategy through our Enabling Strategies / Delivery Plans which will focus on delivery of our four strategic priorities.





## **Taking our Strategy forward**

We recognise that things are increasingly challenging and that we will need to consider innovative approaches to continue to deliver high quality and sustainable services.



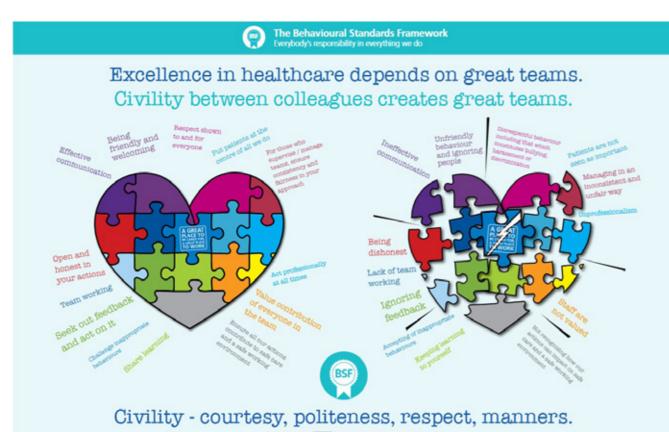
Working with our Care Group and Corporate teams we will translate the aims of this strategy into care group and service level pans. These plans will be monitored through our Performance Meetings and will underpin business and capital planning for the next five years

We want to create a culture in which the strategy becomes everyone's roadmap, guiding all that we do.

We will review our Strategy each year to ensure that it remains up to date and responds to any changes in the local or national context.

## **Appendices**

## **Behavioural Standards Framework**



<image>

## **Swot and Pestle Analysis**

## **Strengths**

- Patient care is our priority we receive good patient feedback across a number of our services. We have developed an excellent prehab programme which is being replicated across the ICS
- Our staff we have an excellent health and wellbeing programme and our staff retention levels are high.
- We are innovative we have adopted an approach to continuous improvement and have invested in QSIR training; we have implemented frailty hub and have made significant progress towards the digitisation of outpatients
- Working in partnership with local, regional and national organisations is increasingly core to what we do. We have a strong partnership approach across BHCP, PCB and the ICS.
- Research we have: increased capacity and capability for high quality research by creating, supporting and developing a cohort of clinicians and managers and contributed to world-class research infrastructure with our academic partner

## Weaknesses

## Fragile models of care

- Workforce gaps exist in a number of services; creating pressure both in terms of frontline patient care; support to our clinicians and causing an over-reliance on locum and agency spend
- Patient flow is inconsistent; we have too many patients who could be safely discharged staying with us longer than necessary. We need to maximise our opportunity as a provider on acute and community services.

## Clinical leadership and engagement

- Culture, leadership and engagement our colleagues tell us that despite our best efforts we don't always get this right;
- Staff ownership of and involvement in service change can be inconsistent. Impacting on morale; increasing risk to improvements and to patient experience
- Staff management is not as consistent as it should be; some staff are not treated as they deserve to be and some poor performance is not tackled

## **Financial sustainability**

- We have a long standing historical financial deficit
- Inefficiency we are not as productive as efficient as we could be over a number of our clinical services which leads to excessive waiting times and poor patient experience
- Variation we have too much clinical variation which undermines consistent performance and patient experience

## **Swot and Pestle Analysis**

## **Opportunities**

New models of service delivery:

- Workforce planning and transformation - will ensure the recruitment and retention - of the best staff by ensuring we create roles that people want to do that help solve our workforce gaps and ensure we keep investing and developing all our staff
- Efficiency, productivity and financial sustainability – delivery of the 5 year financial sustainability plan; improvement by innovative use of the resources we already have; maximising digital
- Integrated Care Provider by maximising collaboration and integration at a local and ICS level we will be able to improve services for our local populations
- Culture, leadership and engagement

   through our new operating model;
   commitment to being clinically led and
   our colleague engagement platform.
- **Population Health** crucial part of what we do by promoting healthy lifestyle and choices for patients and for staff.
- Emergency Preparedness utilising the learning from the COVID-19 pandemic

## Threats

- Growth in demand due to increased volume of frail elderly with more comorbidities could exceed capacity to provide services in a timely way
- Impact of Covid-19 resulting in backlog of patients; delays in treatment resulting in poorer outcomes; health inequalities; staff burnout
- Recruitment and retention in various staff groups due to national shortages and links to ageing workforce
- Adverse impacts of NHS Structural Change – lack of clarity resulting in uncertainty and fatigue
- Not being bold and implementing new models of care - to ensure sustainability of clinical services -
- Financial Issues out of our control
- Reputation due to number of external reports identifying concerns with clinical services at UHMB we have a poor reputation on our ability to respond to and improve services in a timely way.



- Changing landscape collaboration and integration across ICS
- Local politics: FGH, WGH
- Unknown long term impact of Brexit



- Longer term impact of period of austerity, inflation and exchange rates
- Brexit pressure on public sector cost
- Historic financial instability
- Changing funding arrangements
- Growing cost of health and social care
- Employment and pension costs
- National pay constraints for NHS Staff



- Increase ageing population and long term conditions
- Areas of high deprivation
- Patient choice more informed consumers
- Lower availability of workforce in caring professions
- Changing expectations of workforce
- Health tourism



- Clinical evolution and new technologies
- Near patient testing and remote monitoring
- Access to health records. Data sharing
- Digital and remote working
- Artificial intelligence
- Use of social media
- Cyber attacks



- New legislation to enable integrated care systems
- Pace of innovation and technology; litigious society
- Licence changes to drive ICS performance
- Code of Governance
- Fit and proper person's test
- Data protection



- Climate targets and standards
- Impact of weather derived health issues
- Global health (pandemics)
- Smoke free
- Corporate social responsibility
- Antibiotic resistance



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Please do not hesitate to contact us should you require this document in an alternative format.

The information in this report is correct to the best of our knowledge as of May 2022.

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University Hospitals of Morecambe Bay **NHS Foundation Trust** 

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Definitions / Glossary of Terms		
Abbreviation /Term	Definition	
N/A		

Supporting References		
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N/A		

### **Delivery Plan**

How will the operationalising of this document be monitored and assured?

The strategy has been disseminated across the Care Groups via the Trust Management Group.

University Hospitals of Morecambe Bay NHS Foundation Trust,

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