

## Board of Directors (in Public)

### Item 3.1

**Subject:** 2022/23 Strategic Objectives  
**Date of meeting:** Tuesday 7<sup>th</sup> February 2023  
**Presented by:** Jonathan Develing, Director of Strategic Partnerships  
**Purpose of Report:** To note

BAF Ref	Impact on BAF
ALL	Update of the Strategic Objectives as at Q3 2022/23

### 1. Executive Summary

This paper provides an update on the revised strategic objectives as at Q3 2022/23.

### 2. Strategic Goals (High Level Ambitions)

The Trust Five Year Strategy, Patients, Partnership and Populations contains the following strategic goals as part of our five-year strategy.

- i) Delivering World Class Care
- ii) Advancing Quality and Innovation
- iii) Increasing Value
- iv) Developing People
- v) Leading Through Collaboration
- vi) Improving Our Population Health

### 3. Strategic Objectives

Each strategic goal has several objectives with an identified lead Director responsible for delivery as part of their personal objectives. Thus, providing a golden thread from the Trusts strategy into organisational and personal objectives.

Organisational objectives are reviewed on an annual basis by correlating circumstantial information and key influences for e.g.: Publication of the White paper, NHS Planning guidance, Development of Provider Collaboratives, etc.

Directors discuss and review objectives which are then considered within the appraisal process and personal objectives and leadership agreed.



The attached appendices describe the delivery of objectives at the time of this report.

#### **4. Strategic Objective Review**

The review of strategic objectives for 2023/24 has commenced. The appendices describe progress against existing objectives for 2022/23.

#### **5. Recommendation**

The Board of Directors is asked to note progress as at the time of report.



## Appendix One

	A	B	WHO
	Director Objective	Specific Deliverable Actions	
WCC1	Implementation of quality and safety strategy	Implementation of quality and safety strategy	Sue Pemberton
WCC2	Development of a new research strategy	Development of a new research strategy	Dr Raph Perry and Dr Jay Wright
WCC3	Development of a new Clinical Strategy	Development of a new Clinical Strategy	Dr Raph Perry
WCC4	Develop world class facilities	Cath Lab Refurbishment	Karen Edge
WCC5	Operational Excellence	Utilisation and hospital flow Review of GIRFT reports Review of Model Hospital Data	Jonathan Mathews

Q1	Q2	Q3
A progress report was presented to the quality committee in April 2022 which gave good assurance that delivery of the strategy is progressing well. A one year report will be presented to the Board of Directors in October 2022.	Good progress against the quality and safety strategy which will be reported to the Board of Directors November 2022	The annual update against progress with the quality and safety strategy was presented to the Board of Directors in November 2022 and full assurance given. Individuals who lead on key objectives within the strategy presented their progress to the Board in December as additional assurance.
Research Strategy presented for engagement purposes at Ops and Clinical Leaders 24th June.	Presented by Director of Research in draft form and further review in Q3	A revised draft has been prepared and is planned to include the innovation strategy - further revision required and should be complete by Q4
Engagement process on the development of the draft clinical strategy now closed. Further iteration being developed for Q2	No change during Q2 as awaiting initiation and early outcomes of Liverpool Clinical Review in order to align strategy.	The clinical strategy was updated and discussed at the Board strategy day in December 2022. The format will be updated into a publishable form. The divisions are identifying their initial key developments for 23/24
Phase 2 nearing completion - Phase 3 planning in place	Phase 2 handover due 30th November. Phase 3 programme agreed.	Phase 2 handover complete and phase 3 programme commenced.
Action plans for GIRFT continue to be reported through Operational Board.  Cardiology Collaborative with LUFT in place to support Cardiology improvements.  Flow work Governance and KPIs being revisited in Q2 to support current challenges.  Model Hospital Data continues to be reviewed by the Divisions supported by Q1.	The Trust has made great progress against GIRFT with a full update to the Board of Directors in September 2022. Cardiology Collaborative with LUFT in place and progressing to support Cardiology improvements.  Flow work Governance and KPIs was revisited in Q2 to support current challenges. Model Hospital Data continues to be reviewed by the Divisions supported by the Improvement Team, with action plans to be agreed.	The Trust has made great progress against GIRFT and continues to track delivery of actions and closure reports through Operational Board.  Cardiology Collaborative meetings with LUFT continue with a focus on 4 pathways. ACS pilot planned for Q4 to support C&M non elective pathways.  Flow work restarted and in progress - Flow dashboard and workstreams planned for Q4  Model Hospital Data has been brought together to look at opportunities and priorities. These are being reviewed by the Divisions with Executive Team oversight of the highlight reports and key actions planned in Q4.



	A	B	WHO
	Director Objective	Specific Deliverable Actions	
AQI 1	Develop the Trusts academic expertise.	Increase in the numbers of academic appointments made	Dr Perry and Dr Jay Wright
AQI 2	Develop a recognised learning and academic facility (The LHCH Institute)	Development of strategic outline business case for the LHCH Institute	Jon Develing / Katie Fitzsimmons
AQI 3	Implementation of the digital strategy	Establish Digital Excellence Committee Further develop the digital service	Kate Warriner
AQI 4	Develop a Strategy for Innovation	Develop a Strategy for Innovation	Jon Develing / Jenny Crooks

Q1	Q2	Q3
Mapping of educational offer in conjunction with academia and in house capacity being undertaken	In progress by Director of Research	New CRF funding is supporting senior consultant academic sessions, a data scientist a new band 7 nurse and a patient academic. There are five CRNs scholars, one fellow and an MRC fellow.
Series of workshops with Clinical and Operational Leads, Education Leads, Research and Innovation. HR and Finance, Estates.	An update on the approach to be taken is included within Q2 BOD papers. An outline scope has been developed which will now be used to determine physical capacity and detail on usage.	Further progress deferred to Q4
Implementation of iDigital Excellence strategy progresses well and at pace. A range of projects have gone live in the previous reporting period delivering benefits to staff and patients. Operational IT performance is good and cyber expectations have been met.	Implementation of Digital Excellence continues to deliver against expectations and to a high standard. Project implementations continue at pace and there are a suite of transformation programmes due to go live across the rest of the FY. Operational IT KPIs are consistently achieved and customer satisfaction feedback is <sup>high</sup>	Good progress in Q3 with a number of programme go lives and business cases supported. HIMSS 7 gap assessment undertaken with positive feedback from the lead assessor. Operational IT performance remains positive, site tech bar developments progressing for go live in Q4.
Innovation portal now live. Innovation workshop held with Ops Board and Clinical Leaders. Draft Plan to come back to Board in Q3	Comments received from NEDs on draft innovation strategy and further draft being prepared	Referred to the new Research Innovation Committee



	A	B	WHO	Q1	Q2	Q3
	Director Objective	Specific Deliverable Actions				
IV 1	Implementation of financial strategy	Develop Financial Strategy	Karen Edge	Financial Plan for 22/23 agreed internally and externally. Emerging system financial architecture will enable strategy development Q4 2022/23	Planning guidance likely to be delayed due to political changes. Q4 Strategy development target still valid.	Draft Financial Strategy developed and shared with Operational Board for feedback. Q4 sign-off still valid target date.
IV 2	Develop capacity for program and quality improvement	Develop capacity for program and quality improvement	Karan Wheatcroft	Through the work with stakeholders we have now identified the quality improvement work programmes aligned to both the quality and safety strategy and the Divisional needs. We have successfully recruited into a number of key posts which will enable these work programmes to be delivered. We are also aligning the benchmarking intelligence and expertise to help inform the quality improvement work for 2022/23.	Quality and Safety priorities have been agreed. Progress is being made against the improvement projects. Visibility of the work is a key focus and an overview of the priorities and delivery will be reported to Operational Board in November 2022. The benchmarking priorities are being reviewed alongside this and the team are exploring how this can support the QI work	Quality Improvement Team priorities presented to Operational Board in November 2022. Processes enhanced and tracker introduced with a key focus on progress and outcomes. The improvement team are also involved in the implementation of PSIRF with an opportunity to ensure greater involvement in learning and improvements.
IV 3	Utilise benchmarking and performance data to drive quality, productivity, efficiency and improvement	Utilisation and hospital flow Review of GIRFT reports Review of Model Hospital Data	Jonathan Mathews	Action plans for GIRFT continue to be reported through Operational Board.  Cardiology Collaborative with LUFT in place to support Cardiology improvements.  Flow work Governance and KPIs being revisited in Q2 to support current challenges.  Model Hospital Data continues to be reviewed by the Divisions supported by QI.	The Trust has made great progress against GIRFT with a full update to the Board of Directors in September 2022. Cardiology Collaborative with LUFT in place and progressing to support Cardiology improvements. Flow work Governance and KPIs was revisited in Q2 to support current challenges. Model Hospital Data continues to be reviewed by the Divisions supported by the Improvement Team, with action plans to be agreed.	The Trust has made great progress against GIRFT and continues to track delivery of actions and closure reports through Operational Board.  Cardiology Collaborative meetings with LUFT continue with a focus on 4 pathways. ACS pilot planned for Q4 to support C&M non elective pathways.  Flow work restarted and in progress - Flow dashboard and workstreams planned for Q4  Model Hospital Data has been brought together to look at opportunities and priorities. These are being reviewed by the Divisions with Executive Team oversight of the highlight reports and key actions planned in Q4.
IV 4	Implementation of green strategy	Progress toward the NHS Commitment for Net Zero Carbon emissions by 2030	Jon Develing	Trust has been nominated by the ICS to develop a benchmark model with the Carbon Neutral Group (consultancy)	Carbon Neutral Group report has been received as reported to BOD in November	Updated progress provided to BOD February 2023



	A	B	WHO
	Director Objective	Specific Deliverable Actions	
DP 1	Development of a recruitment and retention strategy	Development of a recruitment and retention strategy	Karen Nightingall
DP 2	Development of an education and OD Strategy	Development of an education and OD Strategy	Karen Nightingall
DP 3	Development of an equality, diversity, inclusion & belonging strategy	Development of an equality, diversity, inclusion & belonging strategy	Karen Nightingall

Q1	Q2	Q3
<p>The recruitment and retention strategy was approved by the Board in June 22. This is supported by a robust action plan for 22/23</p>	<p>A retentions summit was held in October and these will be a regular item whilst retention remain at above 10% (&gt;12%) An action plan to encompass training pathways; career progression; career forums; mentor/mentee programme and a review of on call is underway.</p>	<p>Retention remains challenging at above 12% despite a rigorous retention plan. Attraction remains strong with a good recruitment rate except for a few scarce disciplines.</p>
<p>There is a new OD team in place which has continued to lay foundations for the OD offer, including leadership training for new, experienced and aspiring managers/leaders. A training catalogue has been launched for the function and Sir Ken Dodd knowledge hub is now fully up and running (it will need to close for 5 weeks in Q2 for pipework replacement).</p>	<p>Improved access to training through the development of a Training and Learning Catalogue Development and delivery of a bespoke Influence and Impact Programme for Band 8a &gt; leaders Project plan to implement scope for growth and career conversations; a talent management and succession planning process and to help identify high potentials Delivery of social styles, behavioural insights and team awareness across the organisation to help support culture change Led the appraisal process for 2022 with a compliance rate of over 90%</p>	<p>The Trust was successful in its bid to the International Recruitment Development Transformation Fund. The objective is to support Trusts to scope and develop innovation projects that focus on ways to recognise prior experience and provide ethical opportunities to develop international nurse talent within the workforce. The has supported the trust to develop and bespoke leadership pipeline programme (Accelerate) and the first pilot of this programme has resulted in one of the international nurses to secure a Band 6 role within the Trust.</p>
<p>The EDIB strategy was approved by the Board in June 22. This is a new 3 year strategy and action plan. The LHCH Belong (inclusion group) which was launched in November 21 has continued to gain momentum and the team has signed up to its first Pride event in Liverpool on 30th July 22.</p>	<p>WRES and Des indicators and action plan submitted to Board November 21.</p>	<p>Plans are developed to celebrate National Apprenticeship Week and use as driver for us to continue to widen employment opportunities across our community and increase diversity. An EDS2 2022 action plan has been developed and is on track – areas include:</p> <p>Core 20 plus 5 Hypertension Case Findings Targeted lung project outcomes for health inequalities Cardiology Pathways</p>



	A	B	WHO
	Director Objective	Specific Deliverable Actions	
LC 1	Lead the Cardiac Disease programme, and deliver the NHS Long Term Plan and CVD Ambitions for Cheshire and Merseyside	Programs that support the Long Term Plan	Jon Develing / Katie Fitzsimmons
LC 2	Take a leadership role within the new ICS and provider collaboratives	Development of proposals for LHCH to host networks within a governance framework	Jon Develing / Katie Fitzsimmons
LC 3	Take leadership role in clinical Networks	Development proposals to support LHCH hosting networks as appropriate	Jon Develing / Katie Fitzsimmons
LC 4	Explore new relationships with Public Health, industry and academia.	Development of a value proposition	Jon Develing / Katie Fitzsimmons

Q1	Q2	Q3
The Trust leadership is at the fore of the Cardiac Program and CVD Prevention Group. Workplans are reported to the ICS via the Transformation Board/ All programs and budget expenditure are on track for delivery	Cardiac Board workplan is on track and reported to the ICB Transformational Board via highlight Reports. Draft CVD Prevention developed for November Cardiac Board	CVD Prevention Strategy consulted upon and completed. Robust CVD Workplan in place to support long term objectives across C&M. Document is currently with designers pre publication
Liverpool Cardiology Group established and an inaugural meeting held in June. The One Liverpool Cardiac Group (LSSCOG) will mature to become a system wide group looking at Long Term Conditions with LHCH leadership	Liverpool Cardiology Partnership Group is now well established and good progress being made on the 4 priority pathway areas including Acute Coronary Syndrome, Pacing, Heart Failure and Heart Vale and Endocarditis.	Liverpool Cardiology Partnership Group is now well established and good progress being made on the 4 priority pathway areas including Acute Coronary Syndrome, Pacing, Heart Failure and Heart Vale and Endocarditis.
Case for change of the current network model accountable to NHSE has been submitted via the Federation of Specialist Providers.	Case for change in network arrangements has been well received by the ICB - Jon Develing now following this up with the ICB Team.	Network paper proposals now agreed with ICB Clinical Lead and workshop to be arranged by the ICB in Q4
Program of engagement with suppliers / Boston / Medtronic / Siemens / Philips / General Electric / Pfizer / AZ / BSM / Heart Research UK / BHF	Partnership framework developed and agreed	Ongoing and new partnerships being explored with Liverpool Philharmonic and Knowsley Safari Park



A	B	WHO
Director Objective	Specific Deliverable Actions	
Develop an approach for health inequalities	Direct intervention of LHCH in those areas of highest health inequality	Jon Develing
Support improved primary and secondary prevention and detection of cardiac and respiratory disease. (Lead, Orchestrate Deliver approach)	Implementation of the ICS Prevention Pledge	Jon Develing / Katie Fitzsimmons
Develop ourselves as an anchor institution	Implementation of the ICS Anchor Institution Charter	Jon Develing / Katie Fitzsimmons

Q1	Q2	Q3
Approach to health inequalities has been developed for Board of Directors. BOD agenda July 2022.	The approach to Health Inequalities has been agreed (Patients, Population, Staff, Leadership) further work needed on both Trust data for those on our waiting list and big data in repeat of population access.	Core 20 plus 5 framework adopted and action in place. Live well, work well program in place. Collaborative action plan in place with LUFHT looking at the local community. Targeted healthy lung check and CVD Prevention service pilot and business case developed
The Trust has attained level One for its Prevention Pledge Leadership	Healthy Hearts project now delivered in Hayton (Job Centre) a priority area for unemployment	CVD Prevention Group refreshed with new Place leads. Strategic Funds made available to support Lipid optimisation and targeted lung cvd prevention service
The combination of our Green Plan / Social Value Award and Prevention Pledge supports our Anchor Institution application	Good progress each work stream is on target	Good progress each work stream is on target, assurances provided to ICB leads