

Board of Directors (in Public) Item 3.2*

Subject: 2019/20 Quarter Two Strategic Objectives
Date of meeting: Tuesday 24th November 2020
Prepared by: Jonathan Develing, Director of Strategic Partnerships
Presented by: Jonathan Develing, Director of Strategic Partnerships
Purpose of Report: To note

BAF Ref	Impact on BAF
ALL	The quarter two review against the strategic objectives has been undertaken alongside the review of the BAF. Any changes to risks and/or gaps in controls and assurance have been reflected in the BAF and this is considered separately on the agenda.

1. Executive Summary

This paper provides, for the first time, an update of the Trust's strategic objectives as described within the five year strategy, Patients, Partnerships and Populations. Observed risks and/or gaps in controls and assurance have been reflected in the Board Assurance Framework (BAF) and this is considered separately on the agenda.

2. Background

The Board of Directors is responsible for setting the overall strategic direction of the Trust and to monitor performance against its objectives. For 2019/20 the Board of Directors agreed that performance against strategic objectives should be monitored quarterly alongside its quarterly review of the BAF.

3. Performance against Strategic Objectives

The Board of Directors have agreed the following strategic objectives for 2019/20:

i) Delivering World Class Care

- Advance outcomes, safety and reduce harm.
- Achieve international accreditation standards including retaining our Outstanding CQC rating.
- Further develop our patient and family – centred model of care.
- Develop services based on world class research and innovation.
- Develop world class facilities.
- Develop service in line with our 5 year strategy.

ii) Advancing Quality and Innovation

- Embed organisational learning
- Develop the Trusts academic expertise.
- Develop Liverpool Centre for Cardiovascular Science with research partners
- Develop a recognised learning and academic facility
- Deliver our digital strategy
- Deliver the NHS Constitutional standards

iii) Increasing Value

- Deliver financial sustainability
- Develop our business intelligence and benefit realisation
- Maximise alternative income streams, private patient's services and international collaborations.
- Utilise benchmarking and performance data to drive quality, productivity, efficiency and improvement.
- Develop marketing strategy and expand business development
- Develop a plan for environmentally sustainable services and estate. Green Plan

iv) Developing People

- Deliver a new strategy for our current and future workforce.
- Make LHCH the best place to work for everyone
- Promote organisational and cultural leadership
- Promote new ways of working that develop skills in support of continuous improvement
- Support the health, physical and mental wellbeing of our team.
- Widen employment opportunities to support our community

v) Leading Through Collaboration

- Lead the Cardiovascular Disease programme, and deliver the NHS Long Term Plan and CVD Ambitions for Cheshire and Merseyside
- Become a proactive and collaborative partners of choice
- Work collaboratively to develop integrated cardiac, stroke and respiratory services.
- Offer mutual aid to partners to support whole system resilience (critical care/diagnostics/winter pressures).
- Explore new relationships with Public Health, industry and academia

vi) Improving Our Population Health

- Develop predictive and proactive interventions for those at greater risk.
- Support improved primary and secondary prevention and detection of cardiac and respiratory disease. (Lead, Orchestrate Deliver approach)
- Make Every Contact Count

- Develop the targeted healthy lung programme for Knowsley and Halton and a phased roll out as appropriate.
- As a foundation trust, support our membership to promote an awareness of heart and lung disease within their localities

Appendix one sets out the deliverables for each objective agreed by the Board together with the progress made in quarter two.

4. Recommendation

The Board of Directors is asked to note the reported performance against its five year strategic objectives 2020/25 with reference to progress at quarter two 2020/21 as set out in Appendix One.

Appendix 1 Strategic Objectives 2019/20 Quarter 3 Progress

Director of Nursing				Delivery of Personal Objectives				Quarterly Update			
	A	B		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
	Director Objective	Specific Deliverable Actions	WHO	Covid Restart 6 weeks - 6 months		Covid Recovery - 6 months - March 21		Covid Restart 6 weeks - 6 months		Covid Recovery - 6 months - March 21	
DON 1	Achieve international accreditation standards including retain CQC rating of outstanding.	Recovery and reset Ward & Department config and ways of working	SP	Set terms of reference for key work streams of Ward and Department configuration Infection, prevention and control Emergency Planning 24 hour model of care Education and development for nursing Therapy model of working Review plan fro CQC mock inspections post covid phase	Clarity of outcomes relating to: Ward and department configuration Infection prevention and control Provide plan for new internal assurance relating to CQC mock inspections and standards	Clarity of outcomes pertaining to: The 24 hour model of care Education and development for nursing Therapy model of working Embed new plan for CQC mock inspections and standards	Clarity of outcomes pertaining to the: 24 hour model of care Embed new plan for CQC mock inspections and standards		CQC relationship meetings have taken palce over the past 3 months which have included a review of surgery and elements of well led at trust level. The report from this is awaited. Reset and recovery objectives are progressing well with many complete and the outstanding objectives on plan to complete by the year end. Work is underway to review the Trusts approach to self assessment post covid in line with the CQC standards, with consideration of a new strategy that is expected from the CQC in 2021. In addition, the Trusts internal EECS is under review to ensure it is fit for purpose to meet this new strategy and the strategic ambitions of the Trust..		
DON 2	Further develop our patient and family centred model of care	Recovery and reset Quality	SP	Set terms of reference for work stream for: The patient and family experience vision The quality agenda	Review the current patient and family experience vision and agree priorities for 2020/21 Review the current quality strategy and agree priorities for 2020/21	Set out the priorities for quality and patient experience in new strategy for the board	Present updated quality strategy and patient experience priorities to the Board and provide a plan to embed		The Trusts patient and family experience objectives have had to be modified in light of covid and different ways of communicating with families/carers have been introduced. This has been challenging however this has been managed very effectively with the introduction of a patient and family liaison service and a system for telephoning patients within 7-10 post discharge. In the main, postive feedback has been received on the Trusts communciation strategy. Focused work has continued in ensuring that all stgates of a patient journey are reviewed and improved as required with a focus on pre care for patients with enhanced needs and on discharge with the introduction of		

Medical Director				Delivery of Personal Objectives				Quarterly Update			
	A	B		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
	Director Objective	Specific Deliverable Actions	WHO	Covid Restart 6 weeks - 6 months		Covid Recovery - 6 months - March 21		Covid Restart 6 weeks - 6 months		Covid Recovery - 6 months - March 21	
MD 1	Advance outcomes, safety and reduce harm.	Recovery and reset work stream Clinical	RAP/AM Ds	Post covid	<p>Proposal for seven day consultant cover/ward rounds</p> <p>OPD virtual/face to face job plan structure post covid</p> <p>Medical Model</p> <p>Review Cardiac complications</p> <p>Covid infection</p> <p>Review MDT arrangements</p> <p>Monitor mortality and impact of Covid 19</p> <p>Finalise six point infection prevention and control plan</p>	<p>Adjust Medical Model of care depending on ward configuration</p> <p>Ensure IPC audit facilities in place and staffing model correct</p> <p>Commence weekend consultant ward rounds in all specialities</p> <p>Plan consultant working from home for SPA/admin/home reporting</p> <p>Finalise OPD clinic arrangements and role out</p> <p>Attend Anywhere</p> <p>heighten awareness of cardiac complications Covid 19</p> <p>Ensure MDT s fit for purpose</p>	<p>Job planning Round - discuss and adjust for changes in working practices</p> <p>Evaluate impact of Covid 19 on mortality</p> <p>Plan audit of cardiac complications</p> <p>Obtain feedback on OPD changes</p> <p>MDT audits</p> <p>Review impact of IPC plan</p>		<p>Seven day consultant ward round agreed and in place for surgery and medicine</p> <p>No impact of OPD activity on job plans</p> <p>MDT arrangements agreed for all MDTs with a mix of virtual for the majority and face to face for small teams</p> <p>Covid complication literature reviewed by MD - unlikely to have a profound impact on activity at LHCH</p> <p>Six point plan updated</p>		
	Embed organisational learning	Continue to monitor and add learning form Covid	RAP/Triu mvirates	Post covid	<p>Review C&M critical care network learnings</p> <p>Ensure learning form deaths and other organisational learning processes are continuing normally</p>	<p>Review any regional or national learning from the covid 19 pandemic</p> <p>Implement any recommendations from CCN</p>	<p>Embed relevant recommendations form covid learning</p>		<p>ICNARC feedback received and acted on by CC clinical lead</p> <p>Learning presented at BoD from consultant intensivist</p> <p>Organisational learning database to be completed by Q3</p>		
MD3	Deliver the digital strategy	Recovery and reset work stream Digital	RAP/GH/ AC	Post covid	<p>Prioritise recommendations from recent external review</p> <p>Support new IPC audit and data gathering including business case for perfect ward or equivalent</p> <p>Ensure data warehouse project and informatics review recommendations on track</p>	<p>Prioritise recommendations from recent external review</p> <p>Support new IPC audit and data gathering including business case for perfect ward or equivalent</p> <p>Ensure data warehouse project and informatics review recommendations on track</p>	<p>Set priorities for 21/22</p> <p>Align digital strategy with regional plans</p>		<p>Perfect ward business case complete</p> <p>Datawarehouse project making good progress and supporting finalisation of community EPR</p> <p>External review prioritised by CIO</p>		

Director of Strategy				Delivery of Personal Objectives				Quarterly Update			
	A	B		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
	Director Objective	Specific Deliverable	WHO	Covid Restart 6 weeks - 6 months		Covid Recovery - 6 months - March 21		Covid Restart 6 weeks - 6 months		Covid Recovery - 6 months - March 21	
DOS P1	Develop world class facilities	Cath Lab Refurbishment	RW/HK	Development of programme and case	Mobilise capital programme through strong governance structure	Commence on site development works	Continue tight management of the programme				
DOS P2	Develop a recognised learning and academic facility (The LCH Institute)	Development of strategic outline business case for the LCH Institute	JD/RW/BT	Post Covid recovery period	Identification of scope and options	Engagement and socialisation	Strategic outline business case		Initial discussion have taken place aligned with the Highfield House project. Wider engagement is planned and will be prioritised alongside operational issues (COVID-19)		
DOS P3	Maximise alternative income streams including Private Patient services and International collaborations	Fully realise the potential from International collaborations	RW/JD	Post Covid recovery period	Post Covid recovery period	Recommence business activities and mobilisation of SGH contract	Commencement delivery of SGH contract				
DOS P4	Develop marketing strategy and expand business development	Marketing strategy	JD	Develop the scope for a marketing strategy	Outline resource implications	Develop a bespoke program articulating the value of the LCH brand	Production of a new marketing strategy		Program that identifies LCH value will take place at the 18th December Senior Leaders Strategy Day		
DOS P5	Develop a plan for environmentally sustainable services and estate. Green Plan	Implement the Green Plan	JD/E states Team	Post Covid recovery period	Delivery of an action plan	Implementation of action plan	Implementation of action plan		Updated Action Plan to be presented to November Board		
DOS P6	Take a leadership role in the Provider and Specialised Provider Alliances	Develop our Leadership offer National and Regionally	JD/RW	Outline of intent	Define the Trust role within Provider and Specialised Provider collaborative	Understand the Value of LCH Offer	Statement of LCH value proposition		Director of Partnerships to Chair Joint Working Group of the Alliance.		
DOS P7	Lead the Cardiovascular Disease programme, and deliver the NHS Long Term Plan and CVD Ambitions for Cheshire and Merseyside	Develop the CVD Board Work plan	JD/TK/RW/BT/JN	Communications with STP via CVD Board Briefings	Confirm CVD Board work plan post covid pandemic Describe how CVD Board will interface with new STP governance arrangements	Implementation of CVD Board work plan	Evaluation report on CVD Board sponsored projects		CVD Board Work plan confirmed		
		Develop and Deliver the CVD Prevention Group Work plan		Communications with Place and PCNS via the CVD Prevention briefings	Confirm CVD prevention work plan post covid Describe how CVD prevention will interface with new STP governance arrangements	Implementation of CVD prevention work plan	Evaluation report on CVD prevention sponsored projects		CVD Board Prevention Subgroup established and well engaged with all parts of the systems and respective networks		
DOS P8	Work collaboratively to develop and integrate cardiac, stroke and respiratory services	Review Program and Place	RW	Post Covid recovery period	Development of Physician Associate program for PCNs and Place	Sponsor proposal with HCP and wider system	Evaluation of PA program		Physician Associate funding has been confirmed for 2019/20. New proposals and networks now part of wider partnership across the STP		
		Review LSCOG with LCP	JD	Post Covid recovery period	Confirm relationship between LSCOG and the Long Term conditions program within LCP	Sponsor proposal for LSCOG within LCP	Evaluation of the LSCOG program		Single services approach to cardiology will continue and form part of the Long Term Conditions approach across Liverpool		

Director of R & I			Delivery of Personal Objectives					Quarterly Update			
	A	B		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
	Director Objective	Specific Deliverable Actions	WHO	Covid Restart 6 weeks - 6 months		Covid Recovery - 6 months - March 21		Covid Restart 6 weeks - 6 months		Covid Recovery - 6 months - March 21	
DOR 1	Develop services based on world class research and innovation.	Recovery and reset work stream Learning	MPC	establish working group for learning post covid to include research, audit, challenges and opportunities	develop framework of learning	implement framework and changes	embed changes as business as usual		development of EDEN portal in progress; it incorporates education and training tools and links to external resources. Portal is in SharePoint with support from AH team. Established links with Education department under Steven Collar.		
			MPC / VW / JW	develop action plan for new R&I strategy	action plan delivery for year 1	action plan delivery for year 1	action plan delivery for year 1		action plan in place. Established new departmental structure for Research; delivery of in-house studies i.e. ARCH trial; all governance processes through SPARK as part of LHP and LHCH plan; new LCCS research studies based in LHCH's research lab under Prof Lip direction; development of new lung cancer studies under Prof Ottensmeier leadership; working with radiology to develop new trials based on the use of AI for radiology reporting linked to the Healthy Lung project.		
			MPC / MH	horizon scanning of innovation post COVID	innovation delivery plan with Innovation Agency	implement delivery plan for innovation	assess innovations and horizon scanning		working on new innovation strategy for LHCH in collaboration with IA. Participation in Health Foundation call led by LHP and AH, for adoption of innovation in the LCR system.		
			MPC / VW / JW	develop plan for Research restart with clinical leads	phase 1 of project restart	assess and move to phase 2 if possible	assess and move to phase 3 if possible		research restarted at the Trust over the summer; prioritisation criteria developed aligned to NIHR guidelines, priority for UPH studies. New revised criteria approved by R&I committee in light of second COVID surge and LHP system-wide support required.		
DOR 2	Develop the Trust's academic expertise.	Recovery and reset work stream Learning	MPC / JW	set up KPIs for honorary apt	produce proposal for new honorary academics		review KPIs of academic posts		developing pipeline of potential candidates working with the clinical lead for R&I.		
DOR 3	Develop Liverpool Centre for Cardiovascular Science with research partners	Recovery and reset work stream Learning	MPC / GL		delivery of LCCS plan for LHCH		yearly assessment of LCCS deliverables at LHCH		LCCS research at LHCH in track; appointment of new clinical trials physician to deliver phase 2 trials under Prof Lip at LHCH.		

Director of People				Delivery of Personal Objectives				Quarterly Update			
	A	B		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
	Director Objective	Specific Deliverable Actions	WHO	Covid Restart 6 weeks - 6 months		Covid Recovery - 6 months - March 21		Covid Restart 6 weeks - 6 months		Covid Recovery - 6 months - March 21	
DOPC 1	Deliver a new strategy for our current and future workforce	Recovery and reset work stream Workforce		Develop & Agree TOR People Delivery Group re-established to enable delivery Undertake COVID Workforce Assurance review Revised divisional & corporate workforce plans post-COVID Commence engagement development of H&WB support pathways	Confirm outcomes of Workforce recovery work stream for: Implementation of revised workforce plans & models Implementation of revised H&WB support pathways & interventions, including launch of the Hub NHS Staff Survey 2019 Action plan & communication plan	Development & approval of Trust People Strategy, alongside alignment with NHS People Strategy Launch of new service offerings / Workforce Intelligence from HR & Education teams Promotion of actions from NHS Staff Survey 2019 & launch of 2020 Survey Review of H&WB Hub pathway & refresh of strategy Improving People Practices	Analysis of results of NHS Staff Survey 2020 and development of action plan Sustain delivery of Trust People Strategy Improving People Practices Succession planning & Talent Management planning		Divisional workforce plans developed for recovery. Corporate workforce plans developed and reviewed by Executive team. Further enhanced H&WB support in place, ongoing psychological support through merseycare and internal packaged being developed for roll out by Trust psychology service, MH first aiders being trained, hub launched. Staff survey 19 action plans developed and taken through divisional governance meetings. Focus groups have taken place with Divisions, HR and OD to collect feedback in relation to LHCH people plan response. A final report and plan for 20/21 will go to Board in January 21.		
DOPC 2	Make LHCH the best place to work for everyone.	Recovery and reset work stream Workforce		Commence revisions to Educational, Leadership & Development Strategy & supporting materials / development programmes	Development & approval of Trust Education, Leadership & Development Strategy & development programmes						
DOPC 3	Promote organisational and cultural leadership.	Recovery and reset work stream Workforce									
DOPC 4	Promote new ways of working that develop skills in support of continuous improvement	Recovery and reset work stream Workforce		Development of HR & Education Offers, following External Review							
DOPC 5	Support the health, physical and mental wellbeing of our team.	Recovery and reset work stream Workforce									
DOPC 6	Widen employment opportunities to support our community	Recovery and reset work stream Workforce		Post-COVID Recovery	Assessment of revised widening participation approach	Development, approval & implementation of widening participation strategy	Sustain & assess outcomes		Project Search - working with a 3rd sector voluntary agency to support a range of students, offering a work experience placement for those with learning disabilities. Also working with national leads for nursing, AHP and healthcare scientists to put plans in place to improve diversity and social mobility.		

Chief Finance Officer			Delivery of Personal Objectives					Quarterly Update			
	A	B		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
	Director Objective	Specific Deliverable Actions	WHO	Covid Restart 6 weeks - 6 months		Covid Recovery - 6 months - March 21		Covid Restart 6 weeks - 6 months		Covid Recovery - 6 months - March 21	
CFO 1	Deliver financial sustainability.	Recovery and reset work stream Finance	KE/F M	Revise budgets to B/E Mth 1-6 (COVID interim)	Monitor Perf	Assess changes in Finance regime/Ops Plans	Monitor Perf		Budgets revised for B/E regime and Trust received retrospective Top-Up funding + COVID costs		
			KE	Review/ Revise CIP for delivery (COVID)	Monitor & Mitigate gaps	Monitor & Mitigate gaps	Monitor & Mitigate gaps		CIP programme reviewed and reduced to recognise schemes not viable in COVID financial regime or within operational priorities. Non-recurrent schemes identified for slippage on recurrent schemes. Mth 6 perf 92%		
			KE	Review/ Revise Capriati Plan for delivery (COVID)	Monitor Perf	Monitor Perf	Monitor Perf		Capital programme reprioritised and resource allocated to schemes with contingency in place. Mth 6 perf 66% plan with forecast for full commitment		

Director of Corporate Affairs			Delivery of Personal Objectives					Quarterly Update			
	A	B		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
	Director Objective	Specific Deliverable Actions	WHO	Covid Restart 6 weeks - 6 months		Covid Recovery - 6 months - March 21		Covid Restart 6 weeks - 6 months		Covid Recovery - 6 months - March 21	
DCA 1	As a foundation trust, support our membership to promote an awareness of heart and lung disease within their localities	Recovery and reset work stream Governance	LL						Members Matters publication to all members; community events paused due to COVID but will recommence (on line) in Q3		
DCA 2	Meet the requirements of regulators	Recovery and reset work stream Governance	LL						Command and control structure in operation. Operational Board re-set; digital enabling of meetings complete. Review of risk / legal undertaken and recommendations considered.		

Chief Operating Officer				Delivery of Personal Objectives				Quarterly Update			
	A	B		Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
	Director Objective	Specific Deliverable Actions	WHO	Covid Restart 6 weeks - 6 months		Covid Recovery - 6 months - March 21		Covid Restart 6 weeks - 6 months		Covid Recovery - 6 months - March 21	
DON 1	Achieve international accreditation standards including retain CQC rating of outstanding.	Recovery and reset Ward & Department config and ways of working	SP	Set terms of reference for key work streams of Ward and Department configuration Infection, prevention and control Emergency Planning 24 hour model of care Education and development for nursing Therapy model of working Review plan for CQC mock inspections post covid phase	Clarity of outcomes relating to: Ward and department configuration Infection prevention and control Provide plan for new internal assurance relating to CQC mock inspections and standards	Clarity of outcomes pertaining to: The 24 hour model of care Education and development for nursing Therapy model of working Embed new plan for CQC mock inspections and standards	Clarity of outcomes pertaining to: 24 hour model of care Embed new plan for CQC mock inspections and standards		CQC relationship meetings have taken place over the past 3 months which have included a review of surgery and elements of well led at trust level. The report from this is awaited. Reset and recovery objectives are progressing well with many complete and the outstanding objectives on plan to complete by the year end. Work is underway to review the Trusts approach to self assessment post covid in line with the CQC standards, with consideration of a new strategy that is expected from the CQC in 2021. In addition, the Trusts internal EECS is under review to ensure it is fit for purpose to meet this new strategy and the strategic ambitions of the Trust.		
DON 2	Further develop our patient and family centred model of care	Recovery and reset Quality	SP	Set terms of reference for work stream for: The patient and family experience vision The quality agenda	Review the current patient and family experience vision and agree priorities for 2020/21 Review the current quality strategy and agree priorities for 2020/21	Set out the priorities for quality and patient experience in new strategy for the board	Present updated quality strategy and patient experience priorities to the Board and provide a plan to embed		The Trusts patient and family experience objectives have had to be modified in light of covid and different ways of communicating with families/care have been introduced. This has been challenging however this has been managed very effectively with the introduction of a patient and family liaison service and a system for telephoning patients within 7-10 post discharge. In the main, positive feedback has been received on the Trusts communication strategy. Focused work has continued in ensuring that all stages of a patient journey are reviewed and improved as required with a focus on pre care for patients with enhanced needs and on discharge with the introduction of		
COO 2	Deliver NHS Constitutional standards	Deliver the operational implications of the reset and recovery plan	DHOs	Assess impact and size of backlog	Mobilise phase two recovery	Assess performance and winter implications	Sustain non-COVID-19 activity		Phase 3 well underway with the restoration of elective services.		
		To lead the system wide discussions of the LHCH mutual aid offer	DHOs	Assess the requirement	Plans developed to deliver the offer	Explore other opportunities linked to Winter	Explore long term relationship opportunities		Significant and new mutual aid systems in place with Liverpool hospitals and winter offer for the system in place.		
COO 3	Utilise benchmarking and performance data to drive quality, productivity, efficiency and improvement	Delivery a Trust wide productivity matrix that identifies the top opportunities and delivers deep dive reviews and plans	MF / JON	Matrix completed and presented	Opportunities agreed, scoped and quantified.	Implementation of at least two of the large scale productivity programmes	Consolidation of the programme and a targeted list of programmes agreed with divisions		Benchmarking updated for all clinical areas and corporate. Slight delay due to other operational pressures but workshops underway to identify priority areas.		
COO 4	Offer mutual aid to partners to support systems resilience (critical care / diagnostics / winter pressures)	Development of the Trust Winter Plan	HK / DHOs	Link with Emergency Planning	Consider system wide winter offer and develop options	Present plan to Board and confirm with partners	Lessons learnt		Winter plan developed, approved internally and enacted across the system.		
		System wide COVID support	Assess LHCH role	Continue to provide surge capacity	Sustain access to urgent capacity	Sustain access to urgent capacity	Sustain access to urgent capacity		Urgent capacity maintained throughout the surge, cancer capacity provided to local Trust and received well.		
COO 5	Develop the Targeted Healthy Lung Program in Knoesley and Halton and a phased roll out as appropriate	Lead the development of the service model and agree position with commissioners ready for implementation	JM	Recommend commissioner discussions	Agree service model and financial arrangements	Develop mobilisation plan for service	Implement new service delivery		Significant delay from the commissioner side. LHCH ready to mobilise the model of care and develop the financial model.		