

Item 4.2a Appendix 1 Strategic Objectives 2018/19

Strategic Objective	Executive Lead	Deliverables	Delivered in Quarter 3	Key Milestones for Quarter 4
[1] Quality and Patient Experience				
Improve safety culture	Director of Nursing/ Director of Corporate Affairs	<ul style="list-style-type: none"> Develop vision and strategy for Freedom to Speak Up and implement new guidance including self-review tool Further embed Safety Seven Improve incident reporting Harms monitoring To review and develop mechanisms in place to develop, promote, learn from and monitor FTSU activity in the wider context of patient safety and staff experience LIA / improvement work – quarterly pulse check 	<p>Quarterly FTSU Summit established</p> <p>Awareness raising campaign delivered throughout ‘Speak Out Month’ (October 2018)</p> <p>Good progress with reducing harms overall. Falls are within target and are less than the same time last year. Pressure ulcers – five grade 2 with lapses of care identified, all learning’s shared with the relevant clinical teams.</p> <p>LIA improvement activities have supported this objective are an update is provided in section 4 below.</p> <p>Raw data of staff survey results for 2018 show improvement in staff raising concerns and</p>	Review progress of actions identified from Board self-evaluation of FTSU arrangements

			involved in improvements.	
Embed organisational learning such that there is clear evidence of observable changes in practice	Medical Director	<ul style="list-style-type: none"> • Maintain / embed Organisational Learning processes • Quarterly LFD report to BoD • Focus on evidence to support LFD in 2018/19 – divisions and OB • Triumvirates to review and refine process for review of learning 	Organisational learning now part of divisional governance and Operational Board. Trust wide sharing and learning fortnightly. Quarterly LFD report to BoD with increasing detail of deaths and learning	Single repository for all learning. Level of detail in LFD report to be discussed. Monitor quality of Organisational Learning.
Retain CQC outstanding	Director of Nursing	<ul style="list-style-type: none"> • Sharpen process for communicating MRG outcomes • On-going programme of mock inspections • Continue sharing & learning 	The well led mock inspection was completed in September/October and was outcomes discussed at the Board of Directors development session.	The Trust received an unannounced inspection from the CQC in January 2019. This was followed by the well led inspection in early March 2019. There were no immediate actions identified by the CQC for the Trust. The draft report is expected in March 2019 with the final report expected April 2019.

Deliver an improvement plan in response to GIRFT Report	Medical Director	<ul style="list-style-type: none"> GIRFT action plan delivered from national and local reports 	<p>GIRFT action plan for Cardiothoracic Surgery (CTS) established.</p> <p>A deep dive into stroke rate has been carried out and will be presented to BoD in March 2019.</p> <p>Met with NW Hub November 2018 and utilising support.</p> <p>Pilot site for cardiology GIRFT – met with BCS November 2018</p>	Progress report to BoD March 2019.
[2] Research and Innovation				
Implement robotics programme	Chief Operating Officer	<p>To demonstrate delivery against business case objectives relating to:</p> <ul style="list-style-type: none"> Research programme Length of Stay savings Outcomes Plan for development of hybrid procedures 	<p>Financial and operational review of year 1 has been presented to the BoD by the Surgical Division.</p> <p>Outcomes have been positive for all patients who have undergone robotic surgery. Thoracic surgery has also completed the clinical effectiveness audit to support successful clinical outcomes. Cardiac will be completed in Q1 19/20.</p> <p>Work to review productivity of robotic activity is underway.</p>	<p>Cardiac surgery research will commence in Q1 2019, in the form of a draft scientific protocol written by the cardiac robotics lead with support from Dr Mark Jackson and Prof Gregory Lip. Similarly Thoracic research will also commence later in 2019.</p> <p>Proctor training arranged for development of hybrid</p>

				<p>procedure in January 2019 for three cardiac surgeons was cancelled due to patient illness. This has resulted in a delay to starting the hybrid procedures. Further training has been organised for July 2019.</p>
<p>Deliver transition plan for Congenital Heart Disease</p>	<p>Chief Operating Officer</p>	<p>Implement safe transfer of services in line with NHS England timescales</p>	<p>Activity has commenced with the medical admissions as projected, although there has been more medical admissions at LHCH than anticipated.</p> <p>Surgery and interventions transfers are on track.</p> <p>Review of the 2018/09 CHD service is subject to a separate item on the March 2019 BoD agenda.</p>	<p>All age network to be in operation by April 2019. Funding and resources are being discussed. A vision and work programme for the “new” network has been submitted to NHSE for consideration. The development of a network wide database is a priority.</p>
<p>Deliver informatics review action plan and establish assurance</p>	<p>Chief Finance Officer</p>	<p>Develop digital strategy Deliver milestones in action plan including work in relation to data warehouse, reporting,</p>	<p>CIO now in post. Two team building and visioning workshops held offsite with full digital teams.</p>	<p>Internal audit of PAS improvement processes and DQ framework to be</p>

mechanism for data quality;		staffing, governance. Establish Data Quality Assurance Framework	PAS Bed Management system implemented successfully in December 2019. DQ strategy approved by Audit Committee in October 2018 and DQ steering group now in place to oversee improvement work. DQ errors database developed by in-house team to monitor and manage error detection and correction.	carried to in Q4. PAS Outpatient review to be complete by the end of Q4. Theatres scheduling system procurement and implementation to commence.
Raise the Trust's academic profile and increase the number of academic appointments	Director of Research and Innovation	No. staff with academic appointment. Includes honorary, or University person working predominantly from our site. Applies to both research and educational appointments. Target 5 for 2018/19.	Liverpool Centre for Cardiovascular Science (LCCS) launched September 2019. Composition of the Lip academic team now clarified. Six new members of staff operating out of LCCS.	On boarding of the Lip team comprising Professor of Cardiovascular Medicine, Reader in Cardiovascular Health and Research Fellow team in Q4. Plan for minimum of two further appointments at senior level Q4.
Deliver Research and innovation Strategy milestones including attraction of research grants	Director of Research and Innovation	Achieve CRN recruitment. Target 900 for 2018/19	Performance remains above plan but the headroom is reducing as a consequence of closure of some large studies recently.	Maintain position at or above plan.

Develop a strategy for good corporate citizenship	Chief Operating Officer/Director of Workforce	<ul style="list-style-type: none"> Plan to be considered by Board of Directors in Q2 2018/19 Implementation in line with agreed plan 	Plan approved by BoD in Q1 and actions have been progressed.	Implementation to continue.
[3] Finance and Value				
Retain Segmentation 1 for under NHS Improvement's Single Oversight Framework	Executive lead in line with Single Oversight Framework (SOF) theme.	<ul style="list-style-type: none"> SOF indicators monitored monthly. 	Segment 1 confirmed in QRM meeting with NHSI.	Continue to monitor monthly. NHS I assessment undertaken quarterly.
Develop business partner model and improve business intelligence	Chief Finance Officer	<ul style="list-style-type: none"> Define role and operating model across finance, digital and HR functions. Identify skills, capability and capacity gaps Develop and deliver training plan. Divisional reviews to ensure evidence of and reinforce BP model. Deliver BI strategy and divisional dashboards 	Finance business partners now all in post. BPs all attend all divisional reviews BI strategy and reporting improvements being addressed through Informatics action plan.	Informatics restructure underway and will conclude in Q4.
Operate Use of Resources	Chief Finance Officer	Shadow in place by Q2 in readiness for implementation Q3 &	Decision to delay shadow implementation until Q4 given	Mock UoR assessment in Q4

Framework in shadow form		Q4	timing of CQC inspection. Benchmarking Strategy approved by the Operational Board along with 9 priority areas for review.	Continue to embed Model Hospital. Model Hospital will now be on the agenda at all Divisional Review meetings.
Embed Accountability Framework	Chief Finance Officer	Simplify framework for 2018/19 and link to key deliverables	New reports now operational and presented to Operational Board in Q3.	Continue to embed framework with Divisional Teams.
Private patient strategy	Chief Finance Officer	Deliver 2018/19 targets set out in private patient strategy	PPU building work underway with completion planned for Q1 2019/20.	Implementation of project in line with project plan. Monitor income against budget each month. Development of marketing strategy.
Develop new international business models	Chief Finance Officer	Develop 10 new international business models for future exploration with at least one contract signed in 2018/19	Explored commercial opportunities with a number of international partners in China, Middle East, India and UK. Developed links with UK partners and government agencies.	Development of offer and marketing. Submission of 1 formal proposal per quarter. Follow-up existing proposals and contracts. Development of opportunities in each target market. Attendance at

				ArabHealth (Q4), and other trade missions/exhibitions as appropriate. Develop health tourism within PP development.
[4] Best NHS Employer				
Listen, involve and develop Team LHCH through delivery of an effective staff engagement plan	Director of Workforce	<ul style="list-style-type: none"> • Implementation of LIA • Quarterly updates on delivery of 'Team LHCH' strategy • Improve engagement scores / LIA pulse checks • Measures and report on staff experience • NED & Exec walkabouts 	<p>Dashboard reported to People Committee against Team LHCH objectives</p> <p>Retention Strategy and Action Plan approved</p> <p>Commenced Cohort 4 NHSI Nurse Retention Programme</p> <p>Draft E&I Strategy out to consultation</p> <p>Initial review of staff survey 2018 raw data analysis undertaken positive overall</p> <p>LIA improvement wall and project launched with Execs for Q4 and progress of Q1-3 projects</p>	<p>Full analysis of national staff survey results once received and the development of divisional action plans</p> <p>Final H&WB Staff Strategy by end of Q4</p> <p>Equality and Inclusion Strategy to Ops Board end of Q4</p> <p>Review schedule and reporting of walkabouts in Q4.</p> <p>Revise Improvement Framework by end of Q4</p>

			<p>Commenced consultation on staff H&WB Strategy</p> <p>Trust Improvement 'pass it on' celebration event held</p> <p>Trust attended LIA showcase event in Birmingham with a team of trust improvement champions</p> <p>Innovation Showcase day held QI weekly Newsletter</p>	
Build capability for outstanding leadership at all levels	Director of Workforce	<ul style="list-style-type: none"> • Learning and development plan to be developed in Q1 2018/19 • Succession planning / talent plan 	<p>Continuation of quarterly clinical leadership program session held in December 2018</p> <p>Roll out of talent grids in progress across the organisation</p> <p>Draft Education Strategy presented to MDT Education Group and People Committee</p> <p>Management development programme commenced for all new and emerging leaders</p>	<p>Implement new performance pay linked to appraisal by end of Q4</p> <p>Continue to roll out Talent Grids in Q4 following pilot</p> <p>Finalise Education Strategy in Q4</p> <p>Develop Apprentice Strategy by end of Q4</p> <p>Roll out Level 2 and 3</p>

			<p>Applications and support for aspiring board leaders completed to NHS Leadership Academy</p> <p>Bespoke BAME leadership programmes promoted</p>	nurse competency framework by Q4
[5] Partnerships				
Lead and deliver the CVD programme	Director of Strategic Partnerships	Next steps programme for each of the priority areas.	<p>There are plans in place for the next steps for Primary Pacing, ACS and Stroke. Pilot pathways for primary pacing and emergency ACS have been developed and we are currently discussing proposed start dates.</p>	<p>The ACS pilot started in November 2018; given the number of patients received to date (3), we are doing an audit to ensure no patients fitting the criteria have been missed. This is part of an A3 QI project as well as part of the CVD programme work stream.</p> <p>Model of Care for Pacing between Southport and Aintree has been developed and is being reviewed for demand and capacity implications. LHCH is also part of this capacity planning</p>

Implement single cardiology pathway	Director of Strategic Partnerships	Produce proposals and implementation plans for the 6 priority areas	The Liverpool Cardiology Single Service has now become 'The Liverpool Single Service Cardiorespiratory Operational Group' which means we will now be looking to drive forward with plans for five respiratory work streams as well as the eight priority areas for cardiology.	<p>Good progress is being made with the plans for the single cardiology digital platform with tender evaluations 27th February.</p> <p>There is also progress with the other work streams, some of which have been slightly delayed due to changes in the project management team.</p> <p>Director of Strategic Partnerships leading on a refresh of the Group with revised TOR and Governance.</p>
Improve the visibility and external promotion of surgical work	Director of Strategic Partnerships	Engagement plan to be developed by June 18	The surgical division have plans in place for a rolling programme of external site visits	Director of Strategic Partnerships will support site visits. Surgical order books to be an integral prioritised feature in developing strategy

Maintain active stakeholder engagement across the wider health and care partnership	Director of Strategic Partnerships	Continue to participate in established networks and meetings	The Trust is actively engaged with the work of the HCP (STP), local place development plans and also has an active plan to increase additional services i.e. LHCH @ model	LHCH is very well connected into HCP agenda and Director of Strategy is SRO for prevention. Recent transformation bids to the HCP for CVD/Stroke and the Prevention board have all been successful circa £1.3m
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