

Board of Directors (in Public) Item 4.2

Subject: 2019/20 Quarter Two Strategic Objectives Progress
Date of meeting: Tuesday 26th November 2019
Prepared by: Hayley Kendall, Chief Operating Officer
Presented by: Jonathan Develing, Director of Strategic Partnerships
Purpose of Report: To note

BAF Ref	Impact on BAF
1 - 5	The quarter two review against the strategic objectives has been undertaken alongside the quarterly 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 an update on delivery of the Trust's strategic objectives for 2019/20 quarter two. Any changes to 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 2019/20

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

i) Quality, Patient and Family Centred Care

- Improve safety culture and reduce harm.
- Embed organisational learning such that there is clear evidence of observable changes in practice.
- Retain CQC rating of 'outstanding'.
- Deliver the improvement plan in response to GIRFT reports.
- Develop a system leadership role in setting and raising standards and ensuring patient and family experience is embedded into new models of care.

ii) Research and Innovation

- Develop expand and evaluate robotics clinical and research programme.
- Raise the Trust's academic profile and increase the number of academic appointments.
- Deliver research and innovation strategy milestones including attraction of research grants.
- Deliver actions set out in the Good Corporate Citizenship Strategy.
- Develop Liverpool Centre for Cardiovascular Science with research partners.
- Develop core digital systems to support delivery of objectives set out in the data quality strategy.

iii) Finance Value and Productivity

- Retain Segmentation 1 under NHS Improvement's Single Oversight Framework.
- Embed the business partner model and complete implementation of the business intelligence and patient administration system transformation plans.
- Operate Use of Resources Framework in shadow form.
- Deliver targets as set out in the Private Patient Strategy.
- Expand international business activities and levels of income generation.
- Increase focus on productivity improvement through embedded benchmarking and performance metrics.
- Develop a marketing strategy to maximise opportunities for business development.

iv) Best NHS Employer

- Listen, involve and develop Team LHCH through the delivery of an effective staff engagement plan.
- Build capability for outstanding leadership at all levels.
- Equip our workforce for delivering new models of care.
- Implement objectives set out in the Retention Strategy.
- Embed continuous improvement through a programme of staff engagement.
- Promote diversity through an all-inclusive workforce.

v) Partnerships

- Facilitate, lead and deliver the development of a new LHCH Strategic Plan.
- Lead and deliver the CVD Programme progressing the single cardiology pathway and enhancing stakeholder engagement across the health and care partnership and beyond.
- Play a substantial role in bringing specialist trusts together.
- Develop a Single Respiratory Service.
- Improve the visibility and external promotion of surgical work.
- Embed Congenital Heart Disease Services.
- Expand the Cardio-oncology Service.

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 are asked to note the reported performance against its strategic objectives for 2019/20 as set out in Appendix One.

Strategic Objectives 2019/20 Quarter 2 Progress

Strategic Objective	Executive Lead	Deliverables	Delivered in Quarter One	Quarter Two Delivery
[1] Quality, Patient and Family Centred Care				
Improve safety culture and reduce harm	Director of Nursing / Director of Corporate Affairs	<ul style="list-style-type: none"> Continued focus on Safety Seven Improve incident reporting across the Trust and focus on areas with lower rates Continue to reduce harms and sustain improvements made Embed FTSU Summit; deliver Board Action Plan and establish an FTSU Charter Implement Improvement Framework and Plan 	<ul style="list-style-type: none"> Safety Surveillance meeting commenced by the DNS. This has allowed for operational overview of all harms each month and support targeted approach improvements covering all aspects of the safety seven. FTSU charter has been developed. FTSU summit process embedded. 	<ul style="list-style-type: none"> Safety Surveillance Q2 data shared at Operational Board on 1st November. Key messages included a breach of C Diff target and a rise in MSSA infections. In both areas there are no themes – however, there are a number of improvements that have been shared with the Divisions. A rise in complaints has been noted in comparison to the same time last year with Medicine seeing the main rise in numbers however through investigation 7 from 11 were not upheld and there was no learning identified.
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 Learning From Deaths (LFD) report to BoD Focus on evidence to support LFD in 2019/20 	<ul style="list-style-type: none"> Monthly Safety Surveillance Group established to centralise incidents, LFD and Divisional Learning. Report for July BoD in progress. 	<ul style="list-style-type: none"> Monthly organisation learning forums continue with sharing from all Divisions and Corporate Teams. Continuing work on single repository for divisional learning. Quarterly LFD report November.

		<p>– divisions and Operational Board</p> <ul style="list-style-type: none"> • Triumvirates to review and refine process for review of learning 		
Retain CQC rating of outstanding	Director of Nursing and Operations	<ul style="list-style-type: none"> • Focus on triangulation of learning and embedding in to practice • On-going programme of mock inspections • Continue sharing & learning 	<ul style="list-style-type: none"> • Monthly Sharing and Learning now covers all learnings from the Divisions and Corporate teams to enable rapid spread and sharing. • Programme of mock inspections now devised and will be reviewed by the Executive team on 3rd July to commence in September 2019. 	<ul style="list-style-type: none"> • The programme of mock inspections for 2019/20/21 is in place with the first inspection to be carried out in Critical Care in November 2019. This will include a unit inspection, staff engagement and a well led review.
Deliver the improvement plan in response to GIRFT Report	Medical Director	<ul style="list-style-type: none"> • GIRFT action plan delivered from national and local reports 	<ul style="list-style-type: none"> • Update being prepared for July BoD. • Action plan near completion. 	<ul style="list-style-type: none"> • Surgical GIRFT action plan update delivered. • Plans in place for cardiology GIRFT process later in the year. • New GIRFT processes considered if relevant.
Develop system leadership role in setting and raising standards and ensuring patient and family	Director of Strategic Partnerships	<ul style="list-style-type: none"> • Demonstrable progress against the Single Cardiorespiratory programme with the roll out the approach to other parts of Cheshire 	<ul style="list-style-type: none"> • Single services approach is still being embedded within Liverpool with good progress being made with the release of 	<ul style="list-style-type: none"> • CVD is now considered to be a priority for the Cheshire & Merseyside STP and is also evident in each of the 9 local place based plans. • In support crib sheets or aide memoir

experience is embedded into new models of care.		& Merseyside <ul style="list-style-type: none"> Develop LHCH models of care in all parts of Cheshire and Merseyside 	prescribing budgets from the CCG to LHCH for CVD and Respiratory care. This resource (circa £1.2m) is being managed by LHCH on the systems behalf and is being used to redesign services in line with Single Service Strategy.	have been developed that provides advice for local prevention and detection of CVD in the population.
[2] Research and Innovation				
Develop, expand and evaluate robotics clinical and research programme	Chief Operating Officer	<ul style="list-style-type: none"> To demonstrate delivery against business case objectives relating to: <ul style="list-style-type: none"> Research programme Outcomes Affordability and value for money 	<ul style="list-style-type: none"> Research programme although in its infancy has clear structure and timescales. Thoracic programme will be delivered before cardiac due to other UK site availability. Monthly review of robotic activity and costs in place through Divisional Performance forum. Paper being presented to Board in July 2019 relating to the wider economic benefits of the 	<ul style="list-style-type: none"> Monthly review of robotic activity and costs continue through divisional performance Monthly robotic efficiency meeting re-instated Divisional support and scheduling in place to enable improved weekly cardiac and thoracic robotic Board paper presented in July 2019 Robotic review with CCO November 2019. Financial review undertaken against original business case. Thoracic robotic presentation to the Cardiothoracic Society Q2.

			programme.	
Raise the Trust's academic profile and increase the number of academic appointments	Director of Research and Innovation	<ul style="list-style-type: none"> • Increase number of staff with academic appointments. Includes honorary, or University person working predominantly from our site. Applies to both research and educational appointments. Target 5 for 2019/20. 	<ul style="list-style-type: none"> • Continue to work with the University to promote academic appointments. Developing business cases for Lung Cancer Senior Clinical Lecturer and Aorto-Vascular Senior Clinical Lecturer in collaboration with UoL. 	<ul style="list-style-type: none"> • New applications going in this Quarter. Outcome pending. • Developed further links with University of Liverpool academic staff receiving honorary appointments at LHCH.
Deliver Research and innovation Strategy milestones including attraction of research grants	Director of Research and Innovation	<ul style="list-style-type: none"> • Achieve CRN recruitment. Target 900 for 2019/20 	<ul style="list-style-type: none"> • Recruitment on target as planned at this time of year. KPIs are reviewed at the R&I committee monthly. 	<ul style="list-style-type: none"> • Recruitment slightly under target; improvement plan being developed. • New studies opening to recruitment this quarter. • New ToR for R&I committee to focus on operational performance and national KPIs.
Deliver actions set out in good corporate citizenship strategy	Director of People and Culture	<ul style="list-style-type: none"> • Implementation of milestones in line with agreed plan. This has now been merged with the Sustainability Strategy JD took paper to Board 30/4 it's not a separate strategy. 	<ul style="list-style-type: none"> • Draft Apprenticeship Strategy out for consultation with stakeholders and increase of apprentices in Q1. • Continued support with rolling programme of cohorts of pre-employment/traineeship schemes supporting 	<ul style="list-style-type: none"> •

			work experience opportunities too hard to reach groups supporting more inclusive workforce.	
Develop Liverpool Center for Cardiovascular Science with research partners	Director of Research and Innovation	<ul style="list-style-type: none"> • Develop a research strategy for LCCS • Attract phase II clinical trials to LHCH 	<ul style="list-style-type: none"> • Working with Professor Gregg Lip to develop the LCCS strategy. • Director of R&I attending LCCS steering groups monthly and influencing strategy. 	<ul style="list-style-type: none"> • DoR&I is a member of LCCS steering group; workshop being arranged for December to inform strategy. • Prof Lip introducing new Clinical Trials Research Fellow to facilitate phase II trials at the Trust.
Develop core digital systems to support delivery of objectives set out in the Data Quality Strategy	Chief Finance Officer	<ul style="list-style-type: none"> • Develop digital strategy aligned to development of organisational strategy • Deliver 2019/20 digital systems work programme • Operationalise Data Quality Assurance Framework 	<ul style="list-style-type: none"> • Draft strategy shared with Digital Team and to be shared with Board of Directors in July 2019. • Digital Systems work programme progressing well and overseen by Digital Healthcare Committee. Key programmes in Q1 include EPR upgrade, Smartview & Theatre scheduling system. • Data Quality Framework (DQ) in place and DQ monitoring system developed. Work being managed by DQ Steering Group. 	<ul style="list-style-type: none"> • Draft Digital Strategy reported to the Board of Directors in September 2019. • Digital Systems work programme progressing as planned. Key programmes in Q2 include rollout of Windows 10 to all clinical environments, PAS Theatre module deployed, Data Warehouse project progressing with project board in place.

Replace the Trusts Cath Lab facilities with a modern, innovative facility which enhances patient experience.	Chief Finance Officer / Chief Operating Officer	<ul style="list-style-type: none"> Develop Business Case for consideration by the Board of Directors Explore commercial partnerships to support development Deliver milestones agreed set out within Business Case 	<ul style="list-style-type: none"> Outline Business Case being progressed for presentation to Board of Directors in July 2019. Project governance strengthened and signed off at Operational Board. 	<ul style="list-style-type: none"> Phase 1 decant lab build nearing completion and due to be operational in November 2019. Board of Directors approved OBC case for Phase 2 in July 2019 and full business case is in development for Board decision in December 2019/January 2020.
[3] Finance, Value and Productivity				
Retain Segmentation 1 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. Deliver Trust Control Total 	<ul style="list-style-type: none"> Financial position delivered in line with plan for Quarter 1 and forecasting to deliver Control Total by the end of the year. Trust remains in segment 1. 	<ul style="list-style-type: none"> Financial position delivered in line with plan for Quarter 2 and forecasting to deliver Control Total by the end of the year. Diagnostic performance has continued to be challenging in Q2. However, additional CT/MR capacity now operational which will support improvement in position. Trust remains in segment 1.
Embed business partner model and complete implementation of Business Intelligence and Patient Administration System transformation	Chief Finance Officer	<ul style="list-style-type: none"> Strengthen business partnership model in Informatics function Deliver milestones set out in PAS transformation plan Deliver Business Intelligence improvement work through data warehousing and 	<ul style="list-style-type: none"> Revised informatics structure consultation now concluded. Next phase of HR process being carried out which will include recruitment to vacant roles. Temporary staff in place provide strengthened BP role in interim. 	<ul style="list-style-type: none"> Appointments for all Informatics Business Partners have now been made and due to take up post in Q3/Q4.

plans		enhanced reporting.	<ul style="list-style-type: none"> Data Warehouse project progressing alongside EPR upgrade. Pipeline plan in place for development of reporting. Enhanced weekly Executive reporting, ward dashboards and early work on Performance Oversight Framework have been key areas of focus in Quarter 1. 	
Operate Use of Resources Framework in shadow form	Chief Finance Officer	<ul style="list-style-type: none"> Delivery of milestones as agreed within divisional benchmarking plans Develop process for mock inspections 	<ul style="list-style-type: none"> Divisional benchmarking work being led by divisional teams in support of 3-year CIP development. UoR updated being provided to BTSG in July 2019. 	<ul style="list-style-type: none"> Executive team decision to pause UoR mock inspections as national framework not yet available. Work on service and productivity improvement continues as set out in divisional benchmarking plans.
Deliver targets as set out in the Private Patient Strategy	Director of Strategic Partnerships	<ul style="list-style-type: none"> Deliver 2019/20 targets set out in private patient strategy 	<ul style="list-style-type: none"> PPU opening 17th June 2019 – phased commencement of services. Branding work complete. Website on-going. 	<ul style="list-style-type: none"> Rowan Suite fully open in September 2019. Branding work complete and new website launched. Marketing activities with local referrers being developed. Completion of updated contract discussions delayed by 3-4 months and requiring urgent resolution. Current activity forecast is to deliver

				404 inpatient/ day cases in 2019/20 against a plan of 424. Outpatients and Radiology on plan.
Expand international business activities and levels of income generation.	Director of Strategic Partnerships	<ul style="list-style-type: none"> Continued focus on securing contracts with international partners with at least 2 further contracts signed in 2019/20. 	<ul style="list-style-type: none"> First meeting with THH held and Y1 priorities agreed. Contract signed. Further paid work on IUIH IT spec review secured. IUIH Board to Board meeting on 02/07. Rutherford follow-up meeting on 5/4/19. 	<ul style="list-style-type: none"> Second meeting with THH held in September 19, and first formal visit to LHCH. First three projects specified (Cath Lab/ flow, OPD and Benchmarking). Progressing slowly. Next meeting Jan 2020. Acceptance received of formal proposal by Saudi German Hospital for programme of visiting surgeon and second clinical opinion service. Negotiating over price, expect contract to be signed in Nov/Dec. Awaiting further feedback on other live proposals/ prospects: Russian second opinion service/ teleconsultations, Dubai Cardiology Centre of excellence and the IUIH. Development of new prospects: following BoD update in September 19, focus will move to developing a programme of education offers and fellowships/ observerships. 3rd exhibition at ArabHealth in Jan 2020.
Increase focus on productivity improvement through embedded benchmarking	Chief Finance Officer	<ul style="list-style-type: none"> Delivery of milestones as agreed within divisional benchmarking plans Continued focus on productivity improvement 	<ul style="list-style-type: none"> Divisional benchmarking work being led by divisional teams in support of 3-year CIP development. 	<ul style="list-style-type: none"> Divisional benchmarking work being led by divisional teams in support of 3-year CIP development. However, this needs further focus in Q3 and Q4 to support a fully identified programme in

and performance metrics		within clinical divisions and corporate departments in the development of a 3 year rolling CIP programme.		<p>line with the planning timetable.</p> <ul style="list-style-type: none"> • Service Improvement Strategy approved by Operational Board. • External review undertaken into Outpatients, Radiology and Cath lab productivity and opportunities now being progressed.
Develop marketing strategy to maximise opportunities for business development	Director of Strategic Partnerships	<ul style="list-style-type: none"> • Develop and approve marketing strategy 	<ul style="list-style-type: none"> • Aligned to the development of the Strategic Plan in Quarter 3. • Draft media/video/community product to be taken to September Clinical Ops 2 Day strategic session for approval. 	<ul style="list-style-type: none"> • Aligned to the development of the Strategic Plan in Quarter 3. • Media content has been developed and shared at clinical leads event as planned. • Final cut to be taken to next Ops Board.
[4] Best NHS Employer				
Listen, involve and develop Team LHCH through delivery of an effective staff engagement plan	Director of People and Culture	<ul style="list-style-type: none"> • Continued delivery of Improvement Framework and Plan programme • Quarterly updates on delivery of 'Team LHCH' strategy • Improve engagement scores • Measures and report on staff experience • NED & Exec walkabouts 	<ul style="list-style-type: none"> • Staff engagement sessions planned for Quarter 2 with a focus on the outcomes of the staff survey. • Maintained consistent Staff F&F scores. • Series of facilitated OD interventions in teams identified in staff survey. 	<ul style="list-style-type: none"> •

Build capability for outstanding leadership at all levels	Director of People and Culture	<ul style="list-style-type: none"> • Delivery of milestones set out in the Education Strategy and Plan building on “Team LHCH” Strategy • Continued roll out succession planning / talent plan as part of the Leadership Strategy 	<ul style="list-style-type: none"> • Number of high performing staff promoted and recognised internally. • Secured further places on the Aspiring Directors leadership programme in line with our senior leadership pipeline. • Quarterly medical training development day. • Delivery of internal management development programme and HR skills training. • New cohort of Mary Seacole Leadership programme. 	•
Equip our workforce for delivering new models of care	Director of People and Culture	<ul style="list-style-type: none"> • Implementation of Workforce Plans ensuring educational and training needs are identified to deliver new ways of working and new workforce models 	<ul style="list-style-type: none"> • Initial first draft of Divisional WFPs being finalised by HRBPs to go to Operational Performance in Q2. • Introduction of Physician Associates. 	•
Implement objectives set out in the retention strategy	Director of People and Culture	<ul style="list-style-type: none"> • Delivery of milestones as set out in the strategy 	<ul style="list-style-type: none"> • Development of H&WB Strategy and draft action plan. • Review of preceptorship 	•

			<p>programme.</p> <ul style="list-style-type: none"> • Review of rotas across the Surgery Division following LiA suggestions from staff. • H&WB Open Day and Nurses Day. 	
Embed continuous service Improvement through programme of staff engagement	Director of People and Culture	<ul style="list-style-type: none"> • Further embed service improvement methodology as per Improvement Framework and Plan • Deliver 2019/20 Service Improvement programme milestones 	<ul style="list-style-type: none"> • Agreed schedule of QI priorities with the Divisions and tracking in place to monitor all projects. • Continuation of QI training. 	•
Promote diversity through an all-inclusive workforce	Director of People and Culture	<ul style="list-style-type: none"> • Develop plan which targets improvement in response to staff survey findings • Deliver against milestones in the revised Equality and Inclusion Strategy 2019-2021 and Equality Action Plan • Further develop programme of engagement with BAME workforce • Implement new Workforce Disability Equality Scheme - 	<ul style="list-style-type: none"> • Divisional Staff Survey Action Plans in place with agreed programme of interventions. • Secured BAME Champion to chair BAME Network to drive increased engagement with our BAME staff. • Personal invites to BAME Network. • Establishment of Carers Network to widen disability agenda. • Bullying and Harassment awareness 	•

		WDES	<p>sessions across the Divisions.</p> <ul style="list-style-type: none"> • FTSU Guardian visiting areas highlighted in the staff survey in conjunction with HR and OD team. • Introduction of learning applications to support staff with dyslexia. 	
[5] Partnerships				
Facilitate, Lead and deliver the development of a new LHCH Strategic Plan	Director of Strategic Partnerships	<ul style="list-style-type: none"> • Delivery of the Strategic Plan in line with the timetable agreed by the Board of Directors. 	<ul style="list-style-type: none"> • Extensive engagement with respective Divisions, Operational Leads, Service Leads, Ops and Clinical Leaders, Council of Governors and patient groups. • Strategic themes and priorities beginning to emerge. • Outline draft to be taken to September Clinical Ops 2 Day strategic session for approval. 	<ul style="list-style-type: none"> • Continued internal engagement cumulating with September Clinical and Ops event at which the strategy was presented. • Refinement of strategic objectives undertaken with Board of Directors and Council of Governors.
Lead and deliver the CVD programme and specifically: - Progress single	Director of Strategic Partnerships	<ul style="list-style-type: none"> • Delivery of the CVD programme supported by transformational funds including • Happy Hearts website • Stroke case for change • Development of A.F and 	<ul style="list-style-type: none"> • GP Champion to work with LHCH from June. Update from Innovation Agency on AF opportunities. • Well point kiosks to be in 6 places for 12 month 	<ul style="list-style-type: none"> • CVD Board Transformational funds subject to STP Checkpoint meeting as at Month 6. Assurances provided and the program is on track to deliver intent across the full range of programs. • CVD Board has considered its

<p>cardiology pathway</p> <p>- Enhance stakeholder engagement across the health and care partnership and beyond.</p>		<p>Lipid Teams</p> <ul style="list-style-type: none"> • Delivery of the Single Services Cardiorespiratory integrated service work plan 	<p>period across C&M.</p> <ul style="list-style-type: none"> • LHCH dedicated kiosk to be launched in July in reception as part of staff H&WB. • Lipid pathway developed and approved by CVD Board. Materials now being developed to support roll out. • AF pathway to be considered by a dedicated task and finish group as part of the CVD Strategy • Transformation Fund projects on CT Perfusion/AI Tool and MDT are in place. The Stroke Pre Consultation Business Case now with North Mersey Stroke Board - PMO support from the TU for consultation • ACS - Warrington pilot (in hours) successful. Approved to move this to 24 hours with NWAS agreement. On evaluation the intent is offer to Whiston, evaluate and then offer to system wide. Prior to system wide offer need to consider cath lab and 	<p>oversight role and has identified the following priorities.</p> <ul style="list-style-type: none"> • Acute Sustainability including Stroke, and Other secondary/ tertiary pathways. • Prevention including an oversight of BP/AF/Lipid work as described in Q1. • At scale collaborations including the procurement and roll out the cardiac imaging platform.
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			<p>bed requirements</p> <ul style="list-style-type: none"> • Endocarditis MDTs now in place and to be enhanced by Microbiologist - discussions taking place. 	
Play a substantial role in bringing specialist trusts together	Director of Strategic Partnerships	<ul style="list-style-type: none"> • Continue to explore all opportunities for collaboration. • Play active role in developing appropriate governance • Deliver tangible examples of working collaboratively 	<ul style="list-style-type: none"> • Clarifying the roll of specialist Trusts in their roll within the development integrated care partnerships. Exploring provider relations for specialist trust in developing an ICS of their own. 	<ul style="list-style-type: none"> • Chief Executives have met and reinforced intent to develop specialised provider collaboration. • Scope and areas of mutual benefit are being defined supported by an initial mapping of intent now complete
Develop a Single Respiratory Service	Director of Strategic Partnerships	<ul style="list-style-type: none"> • Delivery of the Single Services Cardiorespiratory integrated service work plan 	<ul style="list-style-type: none"> • Single services approach is still being embedded within Liverpool with good progress being made with the release of prescribing budgets from the CCG to LHCH for CVD and Respiratory care. This resource (circa £1.2m) is being managed by LHCH on the systems behalf and is being used to redesign services in line with Single Service Strategy 	<ul style="list-style-type: none"> • The development of a single integrated cardio respiratory team for Liverpool has been agreed. • These services, currently delivered by three providers, will seek to bring the respective teams together.
Improve the visibility and external	Chief Operating Officer	<ul style="list-style-type: none"> • Deliver on milestones set out in divisional engagement plan 	<ul style="list-style-type: none"> • The medicine and surgical division in collaboration with the 	<ul style="list-style-type: none"> • Engagement events have taken place with referring hospitals. • Extend these events further afield and

promotion of surgical work			<p>Trust strategic team have taken part in 2 engagement events, Whiston and WUTH.</p> <ul style="list-style-type: none"> • Elements of the Divisional website have been updated. • Agenda items for discussion with each Trust include – partnership opportunities, Trust operational issues and 5 year strategic plan. 	<p>outside the local boundaries Q3.</p> <ul style="list-style-type: none"> • Increased attendance at DGH MDTs. • Formal opportunities for additional work outside of local area being worked through for delivery in Q3/Q4.
Embed congenital heart disease services	Chief Operating Officer	<ul style="list-style-type: none"> • Further embed a high quality, responsive service in line with 2019/20 operational plan and in conjunction with our partners 	<ul style="list-style-type: none"> • Operational structures developed across the partnership. • Governance framework established for the service. MOU being developed via MIAA to formalise partnership accountability. • Service now established at all local sites (Manchester, Wrexham and Blackpool). • Strong performance culture embedded. • Trajectory to reduce the North West backlog of patients being developed during July 2019. 	<ul style="list-style-type: none"> • Liverpool Partnership Board established. • MOU developed and approved by Liverpool Partnership. • Services well established at satellite sites. • Backlog action plan in place to mitigate the previous backlog. • Strong operational group functioning across the service. • New clinical lead appointed.
Expand cardio-oncology	Chief Operating Officer	<ul style="list-style-type: none"> • Develop high quality, responsive service in line 	<ul style="list-style-type: none"> • Consultant Cardio-Oncology position 	<ul style="list-style-type: none"> • Consultant has started in post (Sept)] • CCO delay in clinic set up (to be

service		with 2019/20 operational plan and in partnership with Clatterbridge Centre for Oncology.	<p>recruited to.</p> <ul style="list-style-type: none"> • Agreement reached with CCO for service development. • Further planning of the service will take place through Quarter two. 	<p>planned in for May 2020)</p> <ul style="list-style-type: none"> • Consultant appointment used to support LHCH demand and activity.
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